

**North Islington  
Nursery School &  
Children's Centre**



## **Managing Medicines**

**Signed on behalf of Governing Body: Sally Franklin**

**Date: 11/09/19**

**Review Date: 11/09/22**

## Aims

- To support regular attendance of all pupils;
- To ensure staff understand their roles and responsibilities in administering medicines;
- To ensure parents understand their responsibilities in respect of their children's medical needs;
- To ensure medicines are stored and administered/recorded safely.

North Islington Nursery School are committed to ensuring that children return to nursery as soon as possible after an illness, (subject to the health and safety of the school community) and that children with chronic health needs are supported at the nursery. This policy sets out clearly a sound basis for ensuring that children with medical needs receive proper care and support in nursery.

Where children are unwell to the extent that they should not be in nursery, and where they are still suffering from an infection which may be passed to others children should remain at home to be cared for and looked after. If a child is unwell then they will prefer to be at home with their parent/carer rather than at nursery with their peers.

## Prescription Medicines

- Medicines will only be accepted for administration in nursery once the parent has given consent on the 'Medication Form' (Appendix 1);
- Staff will only administer medication that has been prescribed by a doctor (some exclusions apply, please see exclusion section below);
- Ideally medication should be given prior to the child arriving at nursery;
- Medicines should only be brought to nursery when essential (where it would be detrimental to the child's health if the medicine were not administered during the day);
- All medicines should be given directly to nursery staff by a responsible adult and will be placed in the dedicated first aid cupboard/fridge for that particular room;
- Medicines will only be accepted in the original container as dispensed by a pharmacist and with the prescriber's instructions for administration;
- The medicine should be clearly marked with the child's name;
- The appropriate dosage spoon should be included with all medicine sent to school;
- Any medicine administered will be recorded by the designated staff member;
- Administrations of medical forms are securely stored at all times.

## Exclusions

**Exclusions from administering medicines** - as a matter of course staff will not administer suppressant medicines which are Ibuprofen, Paracetamol, Cough Mixture and Calpol. The exception to this rule is if a child's temperature cannot be controlled by other methods (see sick child policy) and becomes dangerously high. In these circumstances staff will try to contact the parent/carer to seek verbal permission to give Calpol to their child. A Medication Form will be filled in by the staff member stating the time the medicine was given and will be signed by the parent/carer upon their arrival.

**Exclusions from school** - We follow guidance from the Primary Care Trust and the Health Protection Agency on all illnesses, which highlights where exclusion from school is necessary (folders located in the main office).

If a child has vomiting and or diarrhoea then exclusion is necessary for **48 hours** from the last episode of vomiting or diarrhoea. Some infections may require a longer exclusion. Please see office staff for clarification.

It is our policy to exclude children on antibiotics for the first **48 hours** of the course (unless this is part of an on-going care plan to treat an individual medical condition e.g. asthma and the child is not unwell).

The nursery has the right to refuse admission to a child who is unwell. The decision will be taken by the manager on duty and is non-negotiable.

Notices will be put up to inform parents if there are any confirmed cases of contagious diseases such as chickenpox, measles etc, however the name of any infected child will not be made public. Information about these diseases can be obtained from the school office.

### **Exclusion Periods**

For the most common childhood illness and infections, the following exclusion periods from nursery must be adhered to:

- prescribed antibiotics - 48 hours after first dose of antibiotics has been given;
- temperature – if the temperature is over 38c;
- vomiting and diarrhoea - 48 hours after the last bout of vomiting or diarrhoea;
- conjunctivitis – until medication has been prescribed and treatment has begun;
- chickenpox – until all of the blisters have formed scabs, 5-7 days after onset of rash;
- measles – between four and seven days from onset of rash;
- mumps – until all swelling has gone, approximately 10 days;
- pertussis (whooping cough) - 21 days from onset of paroxysmal cough; 48 hours from commencing antibiotics;
- rubella (German measles) - four days from appearance of rash;
- shingles - seven days from appearance of rash;
- thread worm - until treated;
- tonsillitis - minimum 48 hours after antibiotics or until the child appears to be well again;
- impetigo - until skin has completely healed;
- pediculosis (lice) - until appropriate treatment has been given;
- ring worm of scalp - until cured;
- ringworm of body – until medication has been administered;
- hand, foot and mouth - until the blisters have disappeared.

We must be informed if a child has a contagious disease/illness in order to prevent the illness spreading, however such information will be treated sensitively and in a confidential manner.

### **Supporting Pupils At School With Medical Conditions**

Where a child has significant or complex health needs parents should give full details on entry to nursery and complete our 'Keeping Health, Keeping Safe' form (Appendix 2). If a child develops a medical need whilst at our setting then the parent/carer should complete the form at that point. This form will have the child's photo on it along with a detailed plan about the child's illness and medication requirements. A copy of this form will be kept in the office medical file along with a copy in the classroom medical file for staff to access and refer to as required. It is the parent/carer's responsibility to ensure the information the school holds is up to date at all times, we will however set a general review date. Staff are still required to complete the medication form when the medicine is administered.

Where appropriate an individual health care plan will be put in place involving the parent/carer and relevant health care professionals. Individual health care plans are in place to help ensure we effectively support pupils with medical needs. Our SENCO, Becky Powell is responsible for putting these plans in place.

Pupils at North Islington with medical conditions will be fully supported so that they have full access to education, including school trips and physical education. Some children with medical conditions may be disabled. Where this is the case then North Islington will comply with duties set under the Equality Act 2010.

## **Roles and Responsibilities of School Staff**

- North Islington will ensure that staff receive full support and training where necessary, in line with the contractual duty on Headteachers' to ensure that their staff receive the training. The Headteacher or manager in charge of the setting will agree when and how such training takes place, in their capacity as a line manager. The Headteacher will make sure that all staff and parents are aware of the policy and procedures for dealing with medical needs;
- Staffs' conditions of employment do not include giving or supervising a pupil taking medicines. A signed agreement to do so must be voluntary;
- Staff are expected to do what is reasonable and practical to support the inclusion of all children. This will include administering medicines, however as they have no legal or contractual duty, staff may be asked, but cannot be directed to do so;
- All medicines are stored securely in the correct location with access only for staff;
- Items such as asthma inhalers and epi-pens are kept within easy access for staff but again out of reach of children;
- Staff must complete the Medication Form (located in the main office) when administering medicines;
- Certain medication requires specialist training before use, e.g. epi-pens and feeding equipment. If a child requires such medication the SENCO will organise appropriate training as soon as possible. Where specialist training is required, only appropriately trained staff may administer the medication;
- A designated staff member will be responsible for administering medication. The designated person must ensure that the medication is properly labelled and safely stored during the session. Before any medication can be given, the designated person must ensure that:
  - the nursery has written consent;
  - another member of staff is available to act as a witness that the correct dosage is given.
- When the medication has been administered, the designated person must:
  - record all relevant details on the Medication Form;
  - ensure that the child's parent or carer signs the form to acknowledge that they have been informed the medication has been given.
- If a child refuses to take their medication, staff will not attempt to force them to do so. The Headteacher and the child's parent or carer will be notified and the incident recorded on the Medication Form.
- If a child bumps their head the parent/carer will be called to inform them of the accident. Quite often the child is ok but staff must always call and inform the parent/carer. Parent/carers will be given a letter when collecting their child which details what to look out for over the next 24hrs following a head injury.

## **Parents' Responsibilities**

- In most cases parents will administer medicines to their children themselves out of nursery hours, but where this is not possible parents of children in need of medication must ensure that the nursery is accurately advised about the medication, its usage and administration. Parents must complete the 'Keeping Healthy, Keeping Safe' or 'Medication Form' kept in the office before a medicine can be administered by staff;
- Parents/carers are responsible for ensuring that medication kept in school is up to date and physical equipment is working;
- Parents/carers are responsible for notifying the school if circumstances change e.g. if a child is deemed to be no longer asthmatic;
- A child's parent/carer must complete a new permission form if there are any changes to a child's medication (including dosage or frequency).
- Parents/carers are responsible for notifying the school if their child has a contagious disease/illness in order to prevent the illness spreading, however such information will be treated sensitively and in a confidential manner.

## **Medicine Administered for an Unexpected Temperature**

To prevent the delay of treating a child with an unexpectedly high temperature, the school may need to give a child Calpol. The parent/carer will be called to seek permission verbally and confirm medical details over the phone. When the parent/carer arrives to collect their child they will be asked to sign the form (Appendix 3). The dosage given will be in line with the recommended dosage for the child's age group on the medicine's packaging. Calpol is kept on the top shelf of eth admin cupboard in the main office.

When deciding whether or not to administer Calpol, staff will use the following criteria:

1. Child is feeling unwell
2. Child is in pain
3. Child's temperature is above 37.5 °C.

If the answer to two or more of the above is yes, then the child can be given a single dose of Calpol provided this has been pre-authorized by the parent. If a child's temperature goes over 38 °C however, Calpol can be administered on this fact alone.

We will continue to monitor the child's temperature and wellbeing until the parent/carer arrives to collect them.

## **Safe Storage of Medicines**

All medicines will be kept out of the reach of children either in a high cupboard or in a fridge if necessary. Emergency medication such as inhalers and epi-pens will be within easy reach of staff in case of immediate need, but will remain out of children's reach.

### **Sunshine baby room**

Medicines including Epi pens and asthma pumps will be kept on the shelf labelled First Aid located in the small kitchen area in baby room. Sunshine Medical folder which stores any 'Keeping Healthy, Keeping Safe' plans will be stored on the shelf in the same cupboard. Other general first aid equipment is kept on the top shelf in the toilet.

### **Sunshine toddler room**

All medicines and First aid equipment is stored in Rainbow room kitchen area in the cupboard marked with the First aid sign. 'Keeping Healthy, Keeping Safe' plans will be stored on the shelf in the same cupboard.

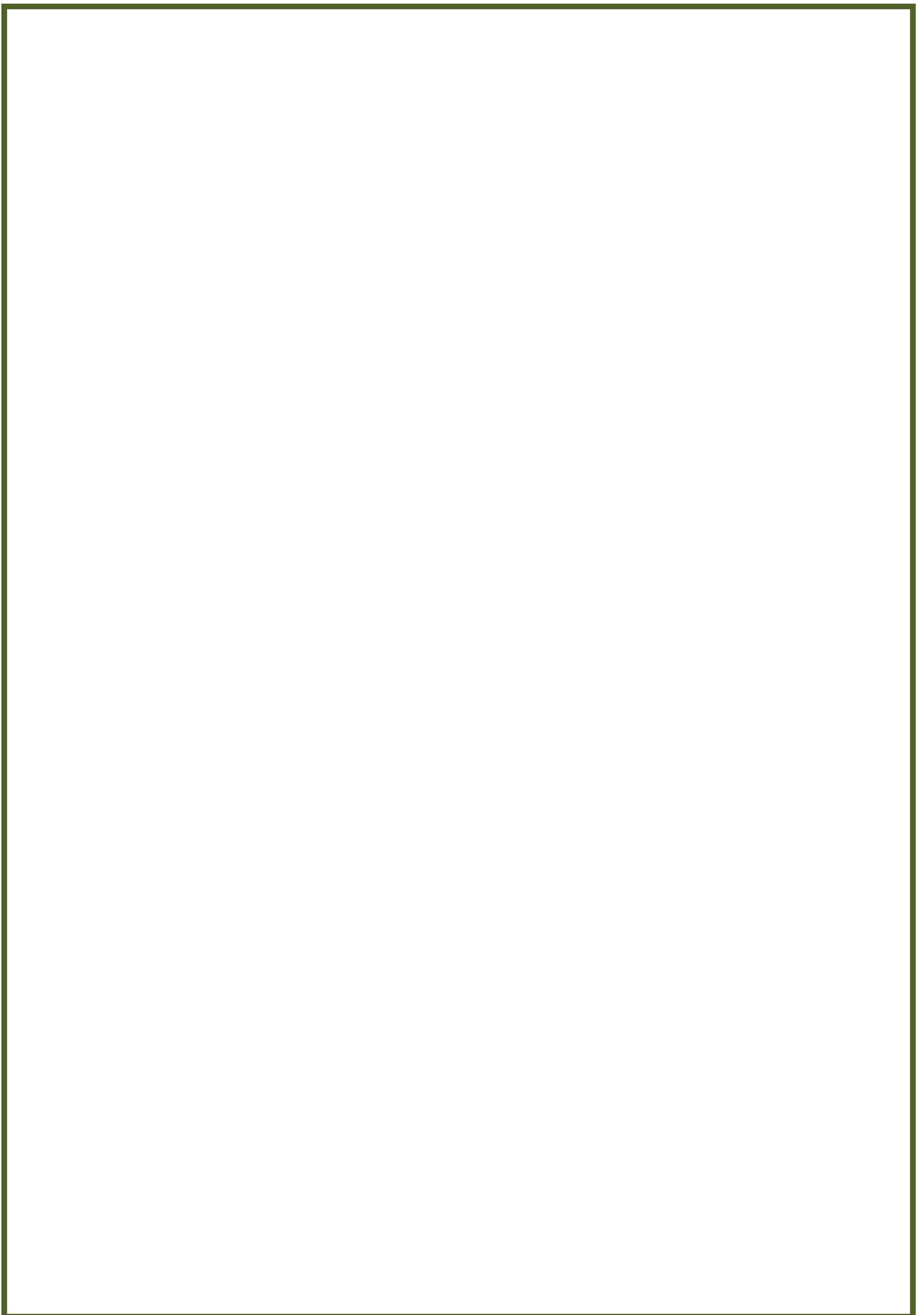
### **Ocean Room**

Medicines will be kept in the First Aid cupboard on Blue side classroom or where necessary in the fridge. Ocean Medical folder which stores any 'Keeping Healthy, Keeping Safe' plans will be stored in the First Aid cupboard.

## **Managing Medicines on Outings**

We feel that all children should have the same opportunities to participate in school visits & outings. Therefore in the case of children who have medical needs we will:

- Consider when planning visits what reasonable adjustments we can make to enable these children to participate fully and safely;
- Do an additional risk assessment for these children;
- Put support in place by allocating a member of staff to be responsible for any medicines or medical equipment the child may need;
- For all children with complex needs a copy of their Keeping Healthy, Keeping Safe plan should be taken on visits in the event of the information being needed in an emergency.





**Keeping Healthy, Keeping Safe**

Name of child:

Child's Key Person:

**Special Requirements/Medical Needs:**

**Name of medication if applicable:**

Have medical notes from G.P/hospital been seen? Yes/No  
If not, please explain why

**Plan:**

**Where will medicine be kept?**

**Expiry date of medication:**

Adults willing to administer medicine:

Parent/carer signature: \_\_\_\_\_ Date: \_\_\_\_\_

To be reviewed: \_\_\_\_\_

**Parent/carer's are responsible for informing staff of any changes to the agreed information**

Dear Parent/carer of \_\_\_\_\_

Your child \_\_\_\_\_ D.O.B \_\_\_\_\_ was given

medicine name \_\_\_\_\_ at (time) \_\_\_\_\_

on (date) \_\_\_\_\_.

Reason for administering  
\_\_\_\_\_

Permission was requested by (staff member) \_\_\_\_\_ when he/she spoke

To (person with parental  
responsibility) \_\_\_\_\_.

Has the child been given paracetamol/ibuprofen (circle one or both) in the last 24hrs **Y/N** (circle one). If  
yes what

was given (name of medicine) \_\_\_\_\_  
and when

(time/s) \_\_\_\_\_  
\_\_\_\_\_.

Staff members signature: \_\_\_\_\_

Parent/carers signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date \_\_\_\_\_

Dear Parent/Carer of \_\_\_\_\_

Your child received a bump on his/her head today.

Description of accident and treatment given:

There is no evidence that he/she received a serious injury but as a precaution we would like to make you aware of the important signs/symptoms to look out for, for the next 24 hours as some may not develop for several hours after a head bump has happened.

Below, find a list of signs that may indicate a more serious injury. Please consult your family doctor and/or take your child to hospital (A&E) should your child develop any of the following:

- Vomiting – this may begin immediately or many hours after the injury
- Unusual drowsiness
- Slurred speech
- Change in mental status – confusion, irritability, crying, unusual behaviour
- Vision disturbance – blurred, double or loss of vision
- Difficulty walking, clumsiness, or incoordination
- Seizure or convulsion
- New or worsening neck pain
- New or worsening headache
- Bleeding or fluid from ears or nose

If you do seek medical advice, please could you inform the nursery of what the outcome was, so we can keep it with our records?

Yours faithfully

Sally Franklin  
Headteacher