

# **FIRST STEPS NURSERY**

## **Administration of Medicines Policy**

At First Steps Nursery we recognise that parents have the prime responsibility for their child's health and that it is their responsibility to provide nursery with information about their child's medical condition. Parents should obtain details from their child's General Practitioner (GP) or paediatrician, if needed. A doctor or nurse or a health visitor and specialist voluntary bodies may also be able to provide additional background information about specific conditions.

Since September 2002 child care providers and LEAs have been under a duty:

- not to treat less favourably disabled child or students, without justification, than child and students who are not disabled
- to make reasonable adjustments to ensure that disabled child and students are not put at a substantial disadvantage in comparison to those who are not disabled

At First Steps Nursery we are committed to these principles.

### **Aims**

It is the aim of this policy to provide

- procedures for managing prescription medicines which need to be taken during the nursery day
- a clear statement on the roles and responsibility of staff managing administration of medicines, and for administering or supervising the administration of medicines
- a clear statement on parental responsibilities in respect of their child's medical needs
- the need for prior written agreement from parents for any medicines to be given to a child
- the circumstances in which children may take any non-prescription medicines
- the nursery or setting policy on assisting children with long-term or complex medical needs
- policy on children carrying and taking their medicines themselves
- staff training in dealing with medical needs
- record keeping
- safe storage of medicines
- access to the nursery's emergency procedures
- risk assessment and management procedures

**At First Steps Nursery we recognise that there is no legal duty that requires nursery or staff to administer medicines.**

However, where staff are willing, they should follow the following guidelines:-

- Parents should provide full information about their child's medical needs, including details on medicines their child needs.
- Medicines should only be bought to nursery when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the nursery 'day'.
- First Steps Nursery will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. However as part of our 'loco parentis' role we may also administer mild analgesics such as children's paracetamol. Parents will have previously agreed to this within their contract with the nursery.
- Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.

- Please be aware that when a child has been prescribed antibiotic's they should not be in nursery at the start of their course, this is due to children needing 1:1 care that we are unable to provide due to staff ratios. If antibiotics are prescribed by a doctor they are telling the parent their child is unwell and therefore shouldn't be in nursery. We will take into consideration what the antibiotic has been prescribed for and how unwell the child is and whether the child may have something that is contagious such as impetigo.
- We endeavour to follow the Health Protection Agency guidelines.
- If medicine is prescribed once or twice a day this should only be administered at home. If medicine is prescribed three times a day, nursery should administer it once. If medicine is prescribed four times a day, nursery should administer it twice. We must also always take into consideration how long the child is at nursery and what the instructions are for the particular medicine e.g. does it need to be taken with food.
- The nursery is very busy and noisy compared to home and is not a suitable environment for ill children. Therefore even where the guidelines recommend no exclusion, should a child be fractious and unwell it may be necessary for the child to stay at home. We recommend a period of at least 24 hours after commencement of antibiotics depending on how the child is and why they have been prescribed the anti biotic.

### **Incoming Medicine Form**

It is imperative that if a child has been administered medication before they have arrived in nursery that staff have been given the details of the type of medication, dosage and the reason why to ensure there is no overdose of medication or to provide details in the event of a child becoming unwell and needing emergency medical treatment. These details must be documented on an individual child's incoming medicine form.

**First Steps Nursery will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.**

- No child should be given medicines without their parent's written consent.
- Any member of staff giving medicines to a child should check:
  - the child's name
  - prescribed dose
  - expiry date
  - written instructions provided by the prescriber on the label or container
- If in doubt about any procedure staff should not administer the medicines but check with the parents or a health professional before taking further action. If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent, if appropriate, or with a health professional.
- First Steps Nursery also arranges for staff to complete and sign a record each time they give medicine to a child. Good records help demonstrate that staff have exercised a duty of care. All medicine forms are then stored within the child's personal file.

### **Helpful advice for parents about prescribed medicine**

It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside nursery hours. Parents could be encouraged to ask the prescriber about this. It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after nursery hours and at bedtime.

The Medicines Standard of the National Service Framework (NSF) for Children recommends that a range of options are explored including:

- Prescribers consider the use of medicines which need to be administered only once or twice a day (where appropriate) for children and young people so that they can be taken outside nursery hours
- Prescribers consider providing two prescriptions, where appropriate and practicable, for a child's medicine: one for home and one for use in the nursery or setting, avoiding the need for repackaging or relabelling of medicines by parents

## Physical Activities

Most children with medical conditions can participate in physical activities and extra-curricular sport. There should be sufficient flexibility for all children to follow in ways appropriate to their own abilities. For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a child's ability to participate in PE should be recorded in their individual health care plan. All adults should be aware of issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers. Staff supervising sporting activities should consider whether risk assessments are necessary for some children, be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

## Short -Term Medical Needs

Many children will need to take medicines during the day at some time during their time at First Steps Nursery. This will usually be for a short period only, perhaps to finish a course of antibiotics or to apply a lotion. To allow children to do this will minimise the time that they need to be absent. However such medicines should only be taken to nursery where it would be detrimental to a child's health if it were not administered during the nursery day.

## Long-Term Medical Needs

It is important to have sufficient information about the medical condition of any child with long-term medical needs. If a child's medical needs are inadequately supported this may have a significant impact on a child's experiences and the way they function in or out of nursery or a setting. The impact may be direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state. Some medicines may also affect learning leading to poor concentration or difficulties in remembering. The impact could also be indirect; perhaps disrupting access to education through unwanted effects of treatments or through the psychological effects that serious or chronic illness or disability may have on a child and their family.

The Special Educational Needs (SEN) Code of Practice advises that a medical diagnosis or a disability does not necessarily imply SEN. It is the child's educational needs rather than a medical diagnosis that **must** be considered

First Steps Nursery needs to know about any particular needs before a child is admitted, or when a child first develops a medical need. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. First Steps Nursery will often develop a written health care plan for such children, involving the parents and relevant health professionals.

This can include:

- details of a child's condition
- special requirement e.g. dietary needs, pre-activity precautions

- and any side effects of the medicines
- what constitutes an emergency
- what action to take in an emergency
- what not to do in the event of an emergency
- who to contact in an emergency
- the role the staff can play

Please note, if your child as a prolonged medical need they should be issued with a personal health care plan from the relevant health professionals.

## **Refusing Medicines**

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and follow agreed procedures. The procedures may be set out in an individual child's health care plan. Parents should be informed of the refusal on the same day. If a refusal to take medicines results in an emergency, First Steps Nursery's emergency procedures will be followed.

## **Safety Management**

All medicines may be harmful to anyone for whom they are not appropriate. Where a nursery or setting agrees to administer any medicines the employer **must** ensure that the risks to the health of others are properly controlled. This duty is set out in the Control of Substances Hazardous to Health Regulations (COSHH).

## **Controlled Drugs**

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children, e.g. methylphenidate.

Only staff who are first aid trained may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions.

A child who has been prescribed a controlled drug may legally have it in their possession. It is permissible for nurseries and settings to look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed.

First Steps Nursery will keep controlled drugs in a locked non-portable container and only named staff should have access. A record will be kept for audit and safety purposes.

A controlled drug, as with all medicines, should be returned to the parent when no longer required to arrange for safe disposal (by returning the unwanted supply to the local pharmacy). If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label). Misuse of a controlled drug, such as passing it to another child for use, is an offence.

## **Storing Medicines**

Large volumes of medicines should not be stored. Staff should only store, supervise and administer medicine that has been prescribed for an individual child. Medicines should be stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which dispensed. Staff should ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of

administration. Where a child needs two or more prescribed medicines, each should be in a separate container. Non-healthcare staff should never transfer medicines from their original containers.

The manager is responsible for making sure that medicines are stored safely. All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and should not be locked away. These should be stored in individual containers with the child's photograph on top with a copy of their health care plan inside. Other non-emergency medicines should generally be kept in a secure place not accessible to children.

A few medicines need to be refrigerated. They can be kept in a refrigerator containing food but should be in an airtight container and clearly labelled. There should be restricted access to a refrigerator holding medicines.

Local pharmacists can give advice about storing medicines.

### **Access to Medicines**

Staff need to have access to children's medicines immediately when required. First Steps Nursery may make special access arrangements for emergency medicines that it keeps, as required. However, it is also important that medicines are only accessible to those for whom they are prescribed.

### **Disposal of Medicines**

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each term. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained by parents on prescription from the child's GP or paediatrician. Collection and disposal of the boxes should be arranged with the Local Authority's environmental services. A sharps disposal box will be kept alongside the main first aid kit in the Reception area.

### **Hygiene and Infection Control**

All staff are familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

### **Emergency Procedures**

As part of general risk management processes First Steps Nursery has arrangements in place for dealing with emergency situations. Other children should know what to do in the event of an emergency, such as telling a member of staff. All staff should know how to call the emergency services.

All staff should also know who is responsible for carrying out emergency procedures in the event of need. The management/office staff are usually responsible for calling emergency services at First Steps Nursery. A member of staff should always accompany a child taken to hospital by

ambulance, and should stay until the parent arrives. Health professionals are responsible for any decisions on medical treatment when parents are not available.

Staff should never take children to hospital in their own car; it is safer to call an ambulance. The national standards require early years settings to ensure that contingency arrangements are in place to cover such emergencies Individual health care plans should include instructions as to how to manage a child in an emergency, and identify who has the responsibility in an emergency.

This policy has been impact assessed in order to ensure that it does not have an adverse affect on race, gender or disability equality.

### **Child with temperature**

If a child develops a slight temperature (between 37.5 – 38) whilst in nursery we will strip the child down to basic clothing and give them plenty to drink. The child's temperature will be checked again within 10/15 minutes.

If the temperature is higher (38.1 – 39.4) we will strip the child down and we will contact parents to ask for permission to give children's paracetamol. The child's temperature will be continued to be monitored to ensure it is coming down every 10/15 minutes. If the temperature does not come down or rises further we will contact parents and ask for permission to administer children's Ibuprofen. At this point we will ask parents/carers to collect as we feel that if a child needs both paracetamol and ibuprofen to maintain a normal temperature they are not well enough to be in nursery.

If a child's temperature is extremely high (39.5 or above) they will be moved to the library where staff can provide temporary 1:1 care, they will be stripped down and a fan will be placed in the room to maintain a cool room temperature. Parents will be rang and asked for permission to administer children's paracetamol and children's ibuprofen and collect their child straight away. The temperature will be continued to be checked every 10/15 minutes. If the temperature continues to rise and goes above 40 we will phone for an ambulance.

Please be aware we can only administer children's paracetamol and children's ibuprofen if parents have signed the blanket cover on the registration forms (the form on the back of the registration form which gives nursery permission to administer the medicines)

Please note this is a rough guide and staff will take the most appropriate action in a child's individual circumstances. First and foremost the child's welfare is our utmost priority.

### **Child not well**

We understand that children get coughs and colds whilst in nursery and that is no reason to stop them coming to nursery. However, if your child requires 1:1 care then we ask that you do not bring your child in to nursery or that if the child becomes unwell whilst at nursery and they require that 1:1 care that you collect them straight away. Unfortunately it is impossible to provide 1:1 care for a sustained period of time and we cannot replace the care that you, as parents, can give at home to a sick child.

### **Child with prescribed medication from a doctor**

We can administer medicine that has been prescribed from a doctor/pharmacist/nurse for children. All medication must be in the box and have a prescription label with the child's name on. Please see the main policy for administration of antibiotics.

If a healthcare professional prescribes both paracetamol and ibuprofen for your child please be aware that we cannot administer both whilst in nursery as it is our professional opinion that if a child requires both paracetamol and ibuprofen then they are not well enough to be in nursery. We can only administer prescribed medication for the reason it was prescribed for at that time. We cannot use it at a later date such as 2 months later for the same or a different illness. Please make sure that you get a new prescribed medication from either your doctor/pharmacist/nurse.

**Child with infectious illness such as sickness and diarrhoea/chicken pox etc**

If a child shows signs and symptoms of an infectious illness parents/carers will be contacted immediately and asked to collect their child. This is following procedures from the Health Protection Agency.