

Medical Conditions Policy

Including the administration of medicines and first aid.



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by Deb Thwaites

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Medical Conditions Policy Including the Administering of Medication and First Aid

This policy has been written in order to promote the good health of the children in our care, in line with the safeguarding and welfare requirements of the Statutory Framework for the Early Years Foundation Stage.

POLICY STATEMENT

Ronald Tree Nursery School is an inclusive school that welcomes children with medical conditions. We understand that children can suffer from long term, short term, chronic and acute illnesses and will provide for all pupils without exception or discrimination. This includes both physical and mental health conditions.

Ronald Tree Nursery School provides all children with any medical condition the same opportunities as others at school, enabling them to play a full and active role in school life, remain healthy and achieve their potential. We will help to ensure they can:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution

Ronald Tree Nursery School will make sure all staff understand their duty of care to children and young people in the event of an emergency. All staff feel confident in knowing what to do in an emergency. This school understands that certain medical conditions are serious and potentially life threatening, particularly if poorly managed or misunderstood. This school understands the importance of medication and care being taken as directed by healthcare professionals and parents.

All children with long term medical conditions will have an Individual Healthcare Plan (IHP) written as soon as possible after diagnosis and reviewed at least annually or more often if necessary. This school ensures all staff receive appropriate first aid training and have easy access to first aid equipment. The main first aid boxes are located in the Red Toilets, the Kitchen and in the Garden Room. Portable first aid kits are taken on any off site visits.

While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness.

The named member of school staff responsible for this medical conditions policy, including the administering of medicines and first aid and its implementation is Mrs Deb Thwaites, Head Teacher.

1. AIMS OF THIS POLICY

- 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 safely.
- To ensure First Aid is delivered and recorded appropriately

Children who are unwell should not come to the nursery or, if they become unwell during the day, they must be collected at the request of the school. This is especially important where they are suffering from an infection or virus which may be passed to others. Children should not return to school until at least 48 hours into a course of antibiotics to ensure there are no adverse effects as well as to give time for the medication to take effect. Similarly, with cases of sickness or diarrhea, children should be kept away from nursery for 48 hours from the last occurrence.

Ronald Tree Nursery is 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 nursery. This policy ensures that children with medical needs receive proper care and support in nursery.

These procedures are written in line with 'Supporting Pupils at School with Medical Conditions' (Updated in 2017) and the 'Statutory Framework for the Early Years Foundation Stage' (published 2021) The Head Teacher is responsible for ensuring all staff understand and follow these procedures.

2. PRESCRIPTION MEDICINES

Prescribed medications will only be administered:

- If the parent has completed the **Parental Agreement to Administer Medicine** form (Appendix 1) and the initial section of the **Record of Medicine Administered to An Individual Child** form (Appendix 2);
- From 48 hours after the initial dose; where the child has been unwell they should remain at home to allow the medication to take effect and ensure they do not suffer any side effects;
- If the medication is supplied in the original box/packaging clearly showing the child's name and required dosage;
- If the child is attending nursery for more than three hours a day (in the case of antibiotics); otherwise we expect parents to time antibiotics for before and after nursery sessions.
- If an oral syringe is supplied with a child's medication the syringe must be used to administer the medicine. A medicine spoon cannot be used unless the dosage is 2.5mls or 5mls which are the measures on the medicine spoon. If a syringe is not provided and the medication dosage is not 2.5mls or 5mls the nursery will not administer the medication.

Please note that prescribed medicines will not be administered for longer than three months after the date on the prescription label unless they are for a chronic illness such as asthma or we have received a letter from your child's doctor.

Medicines should only be brought to nursery when essential. Ideally the nursery will only administer medicines where it could be detrimental to the child's health if the medicine were not administered during the nursery day

All medicines should be given directly to nursery staff by a responsible adult and will be placed in a locked cupboard or fridge; Administration of Medication Forms are securely stored at all times

3. NON-PRESCRIPTION MEDICATION

Non-prescription medication will not normally be administered to children; the exception to this is Calpol, Piriton or Eczema cream and then only where the child is attending the nursery for more than three hours per day. It will only be administered:

- If the parent has completed the **Parental Agreement to Administer Medicine** form (Appendix 1) and the initial section of the **Record of Medicine Administered to An Individual Child** form (Appendix 2);
- From 48 hours after the initial dose; where your child has been unwell they should remain at home to allow the medication to take effect and ensure they do not suffer any side effects;
- If the medication is supplied in the original box/packaging clearly showing the dosage and with the medicine spoon or oral syringe in the case of Calpol or Piriton.

4. RESPONDING TO CHILDREN WHO ARE ILL OR INFECTIOUS

Coronavirus Procedure

The most important symptoms of coronavirus (COVID-19) are recent onset of any of the following:

- a new continuous cough
- a high temperature
- a loss of, or change in, your normal sense of taste or smell (anosmia)

For most people coronavirus (COVID-19) will be a mild illness. However, if you have any of the symptoms above you should self-isolate at home.

Protocol for responding to a suspected case of coronavirus

- Anyone who begins to display coronavirus symptoms whilst at Nursery will be sent home immediately. This applies to children and staff.
- Parents should monitor their child's health and administer a test if they choose. If the test is positive, school will advise them to keep their child at home for 5 days and then test again. All other children within the same group are permitted to remain at Nursery.
- If no test is administered or there is a negative result, parents will be asked to keep their child at home until the symptoms have passed and their child is well enough to return.

Children who become ill whilst they are in the setting

- When a child becomes ill at nursery every effort will be made to contact the parents/guardians, who will be requested to collect their child as soon as possible (within 1 hour) or send a known adult to collect the child on their behalf.
- Parents/guardians must ensure that the nursery is able to contact them, or a person nominated by them, at all times. This is a statutory requirement.
- If a child has a temperature (feels hot to touch on their forehead, back or tummy, feels sweaty or clammy and has red cheeks) they are given fluids and kept cool.
- The child's temperature is taken using a digital thermometer.
- In extreme cases of emergency, the child should be taken to the nearest hospital and the parent/guardian informed.
- If a parent/guardian is called to collect their child because they become unwell whilst at the setting, the child should be kept at home on the following day. In some instances staff may ask parents/guardian to take their child to see a doctor before returning to the setting.

5. ROLES AND RESPONSIBILITIES OF SCHOOL STAFF

- Staff at Ronald Tree Nursery are expected to do what is reasonable and practical to support the inclusion of all pupils. 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 Nursery with access only for staff;
- Asthma reliever inhalers may be kept in nursery within easy access of staff but out of reach of children. Epi pens are kept in the medicine cabinet in the kitchen;
- Staff must complete the form kept in the Medication File each time medicine is administered;
- Certain medications require specialist training before use, eg Epi Pens. If a child requires such medication the Head teacher will arrange appropriate training as soon as possible. It may be necessary to absent the child until such training has been undertaken. Where specialist training is required, only appropriately trained staff may administer the medication;
- A designated staff member will be responsible for administering medication. This will usually be the child's key worker. 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 received written consent
 - Another member of staff acts as a witness to ensure the correct dosage is given
- When the medication has been administered, the designated person must:
 - Record all relevant details on the **Record of Medication to an Individual Child** form (Appendix 2)
 - 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 Head teacher and the child's parent or carer will be notified, and the incident recorded on the **Record of Medication to an Individual Child** and on the **Record of Medicine Administered to All Children** form.
- Due to the age of the children in nursery no child may self-administer. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell their key worker what they need. However, this does not replace staff vigilance in knowing and responding to when a child requires medication.

6. PARENTS' RESPONSIBILITY

- 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 parental agreement form kept in the office before a medicine can be administered by staff;
- Parents are responsible for ensuring that all medication kept in school is up to date and physical equipment is in working order;
- Parents are responsible for notifying the school if there is a change in circumstances e.g. if a child is deemed to be no longer asthmatic.
- A child's parent or carer must complete a new **Permission to Administer Medication** form if there are *any* changes to a child's medication (including dosage or frequency).

7. LONG-TERM AND COMPLEX NEEDS

Where a child has significant or complex health needs parents should give full details to the school as soon as possible and prior to entry to nursery or as the child first develops a medical need. Where appropriate, a health care plan may be put in place involving the parents and relevant health care professionals.

- A Risk Assessment is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the Head Teacher alongside the key worker. Other medical or social care personnel may need to be involved in the Risk Assessment.
- Parents will also contribute to a Risk assessment. They should be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.
- For some medical conditions key staff will need to have training in a basic understanding of the condition as well as how the medication is to be administered correctly. Training needs for staff form part of the Risk Assessment.
- The Risk Assessment includes vigorous activities and any other nursery activity that may give cause for concern regarding an individual child's health needs.
- The Risk Assessment includes arrangements for taking medicines on outings and the child's GP's advice is sought if necessary where there are concerns.
- A Health Care Plan for the child is drawn up outlining the key worker's role and what information must be shared with other staff who care for the child.
- The Health Care Plan should include the measures to be taken in an emergency.

- The Health Care Plan is reviewed every twelve months or more if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents receive a copy of the Health Care Plan and each contributor, including the parent, signs it.

8. SAFE STORAGE OF MEDICINES

- All medication should be in their original container or they cannot be given.
- All medication for children must have the child's name clearly written on the original container and kept in the locked medicine cabinet, which is out of reach of all children and in an area inaccessible to children.
- All prescription medications should have the pharmacist details and notes attached to show the dosage needed and the date the prescription was issued. This will be checked, along with expiry dates, before staff agree to administer medication.
- Emergency medication, such as inhalers and epi-pens, may be kept within easy reach of staff in case of an immediate need, but will remain out of children's reach and under adult supervision.
- Any antibiotics requiring refrigeration will be kept on a designated shelf in the kitchen fridge (in an area inaccessible to children).

9. MANAGING MEDICINES ON NURSERY TRIPS

Parents or carers accompany their children on nursery trips and remain responsible for any medicines their child may require.

10. ADMINISTERING FIRST AID

Notices displaying the names of staff trained in Paediatric First Aid and those trained in First Aid at Work are displayed around the school. The school takes into account number of children and staff to identify how many staff should be trained in Paediatric First Aid. There will always be at least half of the work force trained in Paediatric First Aid, and if budget allows, all staff will be trained. Any newly qualified staff must have either a full Paediatric First Aid or an Emergency PFA certificate within 3 months to be included in ratios in line with the Early Years Foundation Stage (DFE 2021).

Any member of nursery staff can administer first aid to a child in line with the following procedures:

- Administer first aid as appropriate
- Call for help if appropriate
- Call emergency services if required
- Ensure everyone is safe and the injured party cared for and accompanied
- Call the parents if appropriate immediately after the incident
- Record the incident / accident
- Ensure that everyone relevant knows
- Take any further action as required

If an ambulance is called, parents will be contacted immediately. If the child needs to be taken to hospital and parents have not arrived, a member of staff will accompany the child in the ambulance. Staff members should call emergency services as soon as it becomes clear the injury is beyond the nursery's capability and the health of the child is compromised; if in any doubt, refer immediately to the head teacher or nursery teacher.

There is a defibrillator suitable for use on adults or children located in reception. All staff who have undertaken Paediatric First Aid or First Aid at Work have received training on the use of defibrillators. Defibrillators will only be used in extreme emergency and/or under medical direction/advice from the emergency services.

Any accident involving a child or member of staff that results in hospital treatment must be recorded and reported to the local authority by completing a RIDDOR report online.

Recording accidents and informing parents

We inform parents of accidents using an accident form, although the member of staff will explain what has happened to parents as well. The parents sign the form and it is kept at nursery. Parents should be aware that children do not always tell a member of staff if they have had a minor accident, bump, or graze and in these cases we are not able to treat the injury or record it.

Please note that where a child arrives at nursery with an obvious injury a form will be completed and the parents asked to sign.

11. STAFF MEMBERS WITH MEDICAL CONDITIONS

There is no statutory requirement to provide individual risk assessments for staff members who have medical conditions.

Staff members conditions are assessed on a case by case basis. This is because medical conditions can vary a lot from person by person and because they're likely to have a good idea of how to keep themselves and others safe, given their day-to-day understanding of the job.

However, in such a case, a conversation will be had with the staff member to better understand their condition and ask if any support could be provided. This will be done considerately, striking a balance between a duty of care and to employees without being overly intrusive.

Appendix 1: Parental Agreement to Administer Medicine

Ronald Tree Nursery School will not give your child medicine unless you complete and sign this form.

Medication to be given until (date)	
Name of school/setting	Ronald Tree Nursery School
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	Not permitted
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	The School Office

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Appendix 2: Record of Medicine Administered to an Individual Child

Name of school/setting	Ronald Tree Nursery School
Name of child	
Key worker Group	
Quantity received	
Name and strength of medicine	
Expiry date	
Dose and frequency of medicine	

Signature of parent _____

Date: _____

Record of medicine administered to an individual child

Date							
Time given							
Dose given							
Name of member of staff							
Staff initials							
Name of member of staff							
Staff initials							

Date							
Time given							
Dose given							
Name of member of staff							
Staff initials							
Name of member of staff							
Staff initials							