



MEDICATION/CREAMS/ OINTMENTS AND SICKNESS POLICY

We promote the good health of children attending the nursery and take necessary steps to prevent the spread of infection.

Medication that is left on a long-term basis in the nursery will be checked half termly to ensure that it is in date, staff should also check that it is in date when they administer medication to a child. Parents are responsible for medication that is out of 'date and are required to dispose of it safely.

Forms-

All medication will be recorded on the medication tab on the Family App on arrival and must be acknowledged by the parent on their own device. This then notifies the nursery that the child has a medication form active and opens another form for staff to fill out once the medication has been administered.

- Dosage/date/time is to be recorded on the child's medicine consent.
- When medication has been given parents should acknowledge this, so they are aware of times and dose given.

'Prescribe' and 'prescription'

The statutory framework states that 'medicines must not usually be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist.'

When we use the word 'prescribe' we mean medicine that is recommended.

When we use the word 'prescription' we mean written instructions from a doctor or dentist.

Pharmacists can recommend (prescribe) over the counter medicines such as teething gel, eye drops etc. when a child is teething, or painkillers, when children have a temperature. This will be administered in line with recommended does for the child's age.

- Medicines that contain aspirin will only be given if prescribed by a doctor.



- With the exception of 'calpol' (or other branded paracetamol) which may be administered in the event of child's temperature reaching dangerous levels or if they are in pain.

If the child does need Calpol then the nursery will call the parent/carer to get consent to give paracetamol, if the nursery cannot get through to parent/carer then the appropriate dosage will be given. (See child's permissions on Family App) or the emergency person will be tired.

- If the child is in pain with i.e., an earache, we will administer one dose of Calpol to help with the pain, but the parents must be on their way to collect. We will not administer Calpol on the following day.
- We will administer over the counter eye drops for only the amount of time is recommended on the box/leaflet.

Only one dose of Calpol will be given, if temperatures reach dangerous levels after the first dose given then the nursery will contact the parent.

to collect their child. Other methods will be used to reduce temperature.

Such as, removing clothing, fanning, and fluids.

The child will be monitored till the parent/carer arrives.

If a second dose is required, then it is at management's discretion to give another dose.

Parent/Carer's must be on their way for collection. We understand that children will be fine for a while and then take a rapid turn for the worse and go downhill quickly. We also keep a bottle of either 'calprofen' or "ibuprofen" on site, as we understand that paracetamol doesn't work on all children but will **only be given with parent's phone consent.**

- **Playtime will not administer any form of cough medicine.**
- Medicine (both prescription and nonprescription) will only be administered to a child where particular medicine has been obtained from child's parent/carer.



- Medicine must be stored in **original bottle**, this includes and clearly labeled with the pharmacy label that has the child's name, dose and date. These should be stored in the office out of children's reach or in the office fridge if required. Measures are always taken to make the office restricted to children.
- We will administer medicines in line with the instructions i.e dose, frequency. We cannot guarantee to give medication at the exact time. Children for example may be sleeping, eating their lunch or the staff may be helping other children, however it will be given in a timely manner.
- Medicine to be administered by a member of staff and this must be overseen by manager/ deputy /proprietor or third in charge.

*Dependant on staff to children's ratios, what is happening within the nursery and what the medication is, is at management discretion to decide if it is ok for two practitioners to oversee this medication been given. At least one of the practitioners must be qualified and both practitioners are to sign the long-term medication form once it's been given.

- For any non-prescription cream for skin conditions (e.g., sudocream, Vaseline any form of nappy cream, diprobase, E45 etc) that cannot be over dosed, any DBS cleared staff member can administer. **We will not usually record the administration of these creams on the child's medication form unless requested by the parent, whether they have been prescribed by a doctor or bought over the counter. But staff will record on the app if a child has had to have (sudocream/nappy cream) on.**
- Medical creams such as Hydrocotizone cream will be regarded as medication and a long tem medication form will be signed by parent/carer. (Parent/Carer will sign the form once and staff will sign it each time it is applied to the child).
- If the administration of a prescription medicine requires specific knowledge, then individual training will be provided by a qualified health professional i.e. for the use of Epi pens.



- If a child is on long-term medication a separate plan of needs should be drawn up. i.e., 'Inhalers'.
- If a child refuses to take their medication, we will encourage but not force them to take it. This will be recorded, and parents will be informed on collection. Medicine will never be concealed in food or drink or yohurts.

Arrangements should be made for taking any necessary medicines on trips. Staff supervising trips should be aware of any medical needs and relevant emergency procedures. Medicine forms will be taken on outings and filled out as done at nursery.

An appropriate, secure storage bag will be taken for the medicines and will be held by a member of staff. An Outing planning form will be used to record the care / arrangements needed to be taken for these children, which will then inform the staff attending the trip.

Parents are to dispose of any empty bottles of medication, so everyone is sure that the medication has finished.

Antibiotics

If a child requires antibiotics and have never been administered to the child before at the nursery, it is our policy therefore to exclude children on antibiotics for the first 24 hours of the course.

The child must have had the prescribed medicine before, with no adverse effects. This is to prevent the risk of an allergic reaction to new medicines.

If the child's medication requires specialist medical knowledge to administer, then individual training will be provided for the team members working with the child, from a qualified health professional prior to the administration of the medication by team members.

It is not the duty of Playtime Day Nursery to call Gp's or 111 for parents. Playtime will do everything possible to make the child comfortable till the parent collects.

Illness

Children must not be brought into nursery if they have any kind of infection or illness e.g. diarrhea, sickness, chicken pox etc (see



exclusion procedure). If a child is unwell, they will prefer to be at home with a parent/carer rather than at nursery with their peers.

If a child becomes unwell at nursery the parents will be contacted and requested to collect their child while we are waiting for the parents to collect the child will be made as comfortable as possible and monitored by a member of staff. If the sickness is severe an ambulance will be called, and the parents contacted.

In most cases when we send a child home from nursery, we feel it would be beneficial if you contacted your GP to see if a consultation is required. In the case of your child coming up in a rash we may contact you to collect your child and get them seen by doctor to ensure the rash is not infectious.

Emergency contact information must be kept for every child and should be updated regularly.

Your child's return to nursery will be dependent on their symptoms and diagnosis. (Please see exclusion procedure below)

EXCLUSION PROCEDURE FOR ILLNESS/COMMUNICABLE DISEASE

Antibiotics Prescribed home reaction)	First 24 hours of course at (In case of allergic
Vomiting / Diarrhoea	until D / V has not been present for 48 hours
"Flu" Influenza (Inc 'Swine' flu) Conjunctivitis	Until Recovered NONE
Chickenpox over	until all vesicles have crusted
Measles rash	4 days from appearance of
Mumps	5 days from onset of swelling



Impetigo	Until skin/lesions has healed or after 48 hours after commencing antibiotics.
Headlice	NONE
German measles rash	4 days from appearance of
Gastro-enteritis	Until advised by Doctor
Hand Foot & Mouth	NONE
Scarlet Fever antibiotic	24 hours after commencing
Ringworm required	Exclusion not required/treatment is
Whooping cough	48 hours from commencing antibiotics or 21 days from illness if no antibiotics
Threadworm child	None/treatment required for
Scabies given	Until first treatment has been

General enquiries and headquarters

Public information access office
 Public Health England
 Wellington House
 133-155 Waterloo Road
 London
 SE1 8UG
 United Kingdom

Email enquiries@phe.gov.uk



Health advice for members of the public 111 (NHS 111 service, free from any phone)

Urgent enquiries should be made by phone. We are unable to provide clinical advice to members of the public. Please contact your GP or NHS 111 or visit www.nhs.uk.

Allergic reactions We are aware that children have allergies which may cause an allergic reaction. We will follow the following procedure to ensure allergic reactions are minimized and staff know how to support the child having a allergic reaction:-

Staff will be made aware of the signs and symptoms of a possible allergic reaction in case of an unknown first reaction in a child. These may include a rash or hives, nausea, stomach pains, diarrhea, itchy skin, runny eyes, shortness of breath chest pain, swelling of the mouth or tongue, swelling to the airways, wheezing and anaphylaxis.

If a child has a reaction to food, bee sting, plants etc first aid should be administered quickly as needed. Parents will be informed and it will be recorded on an incident sheet. The nursery will keep an antihistamine for children medicine on site for any allergic reactions, parent/carer will be called to get consent to administer. If no contact has been made the nursery will not give it.

Any child known to have an allergy will have an allergy management plan so please refer to this for treatment.

If the allergic reaction is severe a member of staff will call an ambulance and parents/carers contacted.

Outbreak control procedure

Definition of an outbreak: - An outbreak has been defined as two or more related cases of infectious disease. Occasional important public health implications may be considered an outbreak e.g. cases of polio or diphtheria.

The objectives of the procedure are to ensure:-

- 1) Prompt action.



- 2) Determine the cause of the outbreak.
- 3) Prevent further spread.
- 4) Prevent recurrence.
- 5) All necessary agencies are promptly informed of possible outbreak

Rules and responsibilities in the event of an outbreak:-

- 1) The manager or deputy should inform the Health Protection team if an outbreak is suspected.
- 2) Provide the Health Protection team of numbers of children absent with suspected outbreak.
- 3) Inform Health Protection team of daily absences until outbreak is over.
- 4) Liaise with Ofsted, Early year's advisory services, staff, parents and any other agencies as necessary during the outbreak.
- 5) Arrange as necessary further cleaning schedules to cover the outbreak.
- 6) Review extra requirements such as adequate staffing levels and ensure adequate facilities are available to launder soiled linen and dispose of extra waste.
- 7)

Practitioners will be expected to:-

- 8) Inform the manager or deputy if she /he notice an increase in specific communicable diseases in relation to the nursery so they can report this to the Health Protection Team.
- 9) Staff should be familiar with the nurseries infection control policies. During an outbreak staff should use practices in relation to the type of infection causing the outbreak.
- 10) Liaise with the manager and deputy so that information and advice can be provided to parents. A member of the Health protection team will assess the extent of the outbreak and ensure that steps are taken to control it and ascertain the source. They will also liaise with the nursery manager and deputy as appropriate. If a major outbreak is confirmed the outbreak procedure will be implemented.



Staff Medication Policy

Playtime Day Nursery asks if all staff can inform them of any medication that they are taking. Practitioners will be asked to fill out a staff medication form which will be kept in their personal file in the office. All medication must be stored in the medication basket which is in the cupboard in the office.

- Staff are to ensure that their medication is clearly labelled with their name on it.
- Staff must ensure that they inform the manager/deputy that they are taking this medication and why they are taking it, in case of any emergency that may occur with them. (This includes paracetamals, cough, mixture, allergy tablets and eye-drops)
- If the manger/deputy feel at any point that the medication that staff is taking may be affecting the way they are working, they will be sent home and will be asked to get a letter from their doctor to clarify that they are fit to work with children on this medication. They will not be able to return to work until this information is presented to the manger/deputy.