



Medication and Illness Procedures

At Minis your child's health and welfare is paramount. To enable us to promote good health and reduce the risk of cross infection we always follow the policy below and UK Health Security Agency and NHS guidelines.

Should your child become unwell while at nursery for any reason we will inform you and if necessary, ask parents to collect their child.

Please remember that we always have your child's best interest in mind and will only ask parents to collect them when deemed necessary. It is therefore paramount that we receive your cooperation by ensuring your child is collected as soon as possible. While we appreciate it can sometimes be difficult to return from work it is vital that children that are unwell or pose a risk to other children and staff through cross contamination are collected without delay.

If a child requires medication, we will obtain information about the child's individual needs and will ensure this information is kept up to date.

Administering Prescribed Medication

If a child requires prescribed medication during the nursery day, staff who hold a current first aid certificate will administer the medication in line with the prescription guidelines and with prior parental consent. **Only medication that has been prescribed can be accepted for administration by the staff at Minis.** Minis will not accept prescription medication prescribed by a family member of the child (for example if the parent is a GP).

Children can develop an allergic reaction to medication at any time even if they have had medication previously. Short term medication (such as antibiotics) will only be administered after the **first and second dose** has been administered at home and the child is deemed well enough to return to the nursery. If staff feel that the child is still unwell when they return to nursery, we may request that your child is collected and kept at home until they are completely recovered.

*(*48 hours for impetigo, whooping cough and Pertussis, 24 hours for Scarlet Fever)*

All medication must be clearly marked with the dispensing chemist's label stating the child's name and date of birth, dosage, date the medicine was dispensed and expiry date of the medication. The medication needs to be in English, so team know what they are giving the child. **Medication that has been prescribed for another person or is out of date will not be administered.**

- All medication will be kept by staff in a secure place such as the First aid cupboard or in the fridge as required and out of reach of children.
- Parents must sign a consent form before any medication can be administered, stating the name of the medication, dosage to be given and the frequency of the dose.
- During the course of the medication forms will be kept in the rooms.
- When medication is administered the team will sign the form which will be witnessed by another team member.



- Parents will then be requested to sign the form when collecting their child.
- Once the course of medication is complete the form will be filed in the child's file in the office.

Administering unprescribed medicines

We recognise that on occasions children will have mild ailments that require the administration of unprescribed medication, such as teething pain, mild eczema, or nasal congestions.

These medications can be administered with parental written consent, in the same way that a parent consents to prescribed medication.

Team must ensure that the medication is suitable for the child, checking the label to check any age restrictions, and required dosage. Team must only administer medication in line with the manufacturer's guidance, and not in line with parent's wishes if these differ.

Parents may be able to get prescription medication directly from the pharmacy, in such cases the parents must request that the pharmacy provides the medication with a prescription label.

In the case of unprescribed antibiotic medication, such as eye drops, the child must have the first two doses at home before the nursery can administer.

Long-Term Medication

During induction parents are asked if their child suffers from any medical conditions. This is recorded on the Registration Form and on Connect.

When children have longer term medical needs, it is important that sufficient information about the condition is made available to staff. It is essential that staff are aware of any possible side effects that medication may have on a child to enable us to meet the needs of each individual child. Such long-term medication includes asthma inhalers and EpiPen's. Some long-term medication may require daily administration and others during emergencies only.

If a child has long term medication a health care plan for the child will be completed with the parent outlining the key person'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 will be reviewed every six 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 will receive a copy of the health care plan. The nursery manager and parents must sign the care plan.

As with short term medication, a record will be kept of any administration of medication, which will be signed by the team member giving the medication, the witness, and the parent.



Refusing medication

Staff will make all reasonable attempts to administer medication however if a child refuses to take their medication, staff will inform parents on the same day. If the child becomes unwell, then parents will be informed and will need to make alternative arrangements to administer the medication or take the child home as appropriate.

Temperatures of children and administration of infant paracetamol (Calpol)

Calpol and other such medications can occasionally mask some symptoms of other serious conditions. As such Children who have been given Infant Paracetamol or Ibuprofen for a temperature at home, should not attend nursery for at least 24 hours after medication has been given and 24 hours from when the temperature has subsided.

Minis does not routinely check children's temperatures, however if a child presents as unwell, or feels hot to touch we will check their temperature.

In the case of a raised temperature, team will complete a temperature log form and check the child's temperature every 10 to 15 minutes.

We will always try in the first instance to naturally reduce a raised temperature by removing layers of clothing and keeping your child well hydrated.

If your child develops a temperature of **38C or above** whilst at Minis, you will be called to be advised of your child's temperature and asked if you would like for us to administer Calpol or continue to monitor for one hour.

If Calpol is administered, you will be asked to collect your child straight away and your child should not attend nursery for at least 24 hours after medication has been given and 24 hours from when the temperature has subsided.

If you have asked for us to continue monitoring your child's temperature without administering Calpol, and your child's temperature remains the same within the hour, increases, or drops but again starts to climb back up - you will be called to be notified and asked to come and collect your child straight away - your child should then not attend nursery for 24 hours from when the temperature has subsided.

If your child's temperature becomes **39C** or higher, you would be called immediately and be asked to collect your child and we would request permission to give your child Calpol if it had not already been administered within four hours (*We may also seek medical advice from 111 if your child is under six months old, there is persistent vomiting, your child appears to be floppy or drowsy or if we feel that it is a symptom associated with a more serious illness*).

If the child's temperature rises to 40C or above, we will consider calling 999 if we feel the child is at risk of febrile convulsions and follow the advice given.

Diarrhoea and Vomiting



Should your child have diarrhoea whilst at nursery, you will be contacted after first bout of diarrhoea as a courtesy call and requested to collect the child after the 3rd.

If your child vomits and there is no reasonable explanation, such as reflux after a meal, you will be contacted to collect your child immediately. The child must not return to nursery for 48 hours after the last episode of diarrhoea and/or vomiting, is back to full health and their stools have returned to normal without the aid of medication. This will enable us to reduce the spread of infection throughout the nursery.

If an outbreak of sickness and/or diarrhoea occurs in a room affecting multiple children/practitioners, children will be asked to go home after just one bout of diarrhoea. If a child has returned to nursery before the sickness/diarrhoea has ceased parents will be asked to return to collect their child.

We recognise that some children may have loose stools as a result of teething and in these circumstances, we may not expect parents to collect their child (at the discretion of the staff and managers) unless the child is distressed, displays any other symptoms or we have an outbreak of sickness and diarrhoea at the nursery. We may administer teething powders/gels to sooth the teething for the child with prior written permission.

Procedures for children with allergies

During induction parents are asked if their child suffers from any known allergies. This is recorded on the Registration Form and on Connect. A letter from the child's GP is required to confirm the allergy and management plan.

If a child has an allergy, a Medical Protocol form is completed to detail the following:

- The allergen (i.e., the substance, material or living creature the child is allergic to, such as nuts)
- The nature of the allergic reactions e.g., anaphylactic shock reaction, rash, reddening of skin, swelling, breathing problems etc.
- What to do in case of allergic reactions, any medication used and how it is to be used (e.g., EpiPen).
- Control measures - such as how the child can be prevented from contact with the allergen.
- Review date.

This form is kept in the child's file and a copy kept in the rooms first aid cupboard, in the kitchen as well as detailed on the child's placemat and on the allergy display in the room. Medication is stored in the office in the first aid cupboard in a box clearly labelled with the child's name. A child with severe allergies will sit next to an adult at mealtime to prevent cross contamination of food.

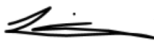


Training on the administration of childhood medicine is sought for the staff from local medical professionals to ensure staff know how to administer special medication in the event of an allergic reaction. No nuts or nut products are used within the nursery.

Further guidance

Statutory Guidance to the Early Years Foundation stage

Minis Accident and first Aid Policy

This policy was updated:	Signed on behalf of the nursery:	Date for Review:
Aug 2023	 Julie Coackley	2024