



# Medication and exclusion periods

\*Mandatory Policy\*

At **Little Pearls Nursery** we promote the good health of children attending nursery and take necessary steps to prevent the spread of illness and disease. We will always consider the wellbeing of the child and suggest that, in some cases, if the child needs medication they may not feel well enough to cope with a nursery day. We reserve the right to refuse a child if we believe they are too unwell to cope with a nursery day or pose a risk to the other children of spreading infection/ disease. If a child requires medicine, we will obtain written information about the child's needs for this and will ensure this information is kept up to date. Where the administration of a child's medicine needs specialist training, the medicine will not be given until staff have received relevant training and feel capable and confident in doing so.

We follow strict guidelines when dealing with medication of any kind in the nursery and these are set out below.

## Medication prescribed by a doctor, dentist, nurse or pharmacist

*(Medicines containing aspirin will only be given if prescribed by a doctor)*

- Prescription medicine will only be given to the person named on the bottle for the dosage stated
- When medicines are brought into the setting, they must be in their original containers with advice leaflets included
- The parent/ carer for any child requiring prescription medication should hand over the medication to the most appropriate member of staff who will then note the details of the administration on the appropriate form and another member of staff will check these details as well
- Medication should never be stored in a child's bag due to the risk of children being able to access it- **It is the parent's responsibility on arrival to hand it over to the most appropriate practitioner**
- The parent/ carer must give prior written permission for the administration of each and every medication.
- The nursery will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a note from a doctor or dentist
- The parent/carers must be asked when the child has last been given the medication before coming to nursery, and the staff member must record this information on the medication form. Similarly, when the child is picked up, the parent or guardian must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times
- At the time of administering the medicine, a senior member of staff will ask the child to take the medicine or offer it in a manner acceptable to the child at the prescribed time and in the prescribed form. (It is important to note that staff working with children are not legally obliged to administer medication)
- There will always be a second practitioner who witnesses medication being administered and they will also sign the form to confirm they have been a witness
- If the child refuses to take the appropriate medication, then a note will be made on the form
- Where medication is "essential" or may have side effects, a discussion with the parent will take place to establish the appropriate response.

### **Non-prescription medication (*these will not usually be administered*)**

- The nursery will not administer any non-prescription medication containing aspirin
- The nursery will only administer non-prescription medication in some cases depending on the medication and/or the condition of the child. In some instances, this may be appropriate e.g. Calpol for teething (prescribed by the doctor and a completed child long term care plan), antihistamine for an allergic reaction (For any children who have agreed on the permission's through Family)
- Staff are not legally obliged to give a child medicine and will only give medicine if they feel it is necessary.
- If the nursery feels the child would benefit from medical attention rather than non-prescription medication, we reserve the right to refuse nursery care until the child is seen by a medical practitioner
- If a child needs liquid paracetamol or similar medication during their time at nursery, such medication will be treated as prescription medication with the onus being on the parent to provide the medicine and state why the child needs it. If the child needs liquid paracetamol or similar medication we may question whether the child is well enough to cope with the day.
- On registration, parents will be asked if the nursery has permission to give/ arrange emergency treatment including administering paracetamol-based medication to prevent febrile convulsions in the event of a high temperature. If the parent gives permission this may only be administered in an emergency if the nursery CANNOT get a hold the parent. We will always endeavour to get written or at least verbal permission from the parent even in an emergency. The child's best interests will be at the heart of any decision which needs to be made. If in doubt the nursery staff will ring 999 immediately.
- An emergency nursery supply of fever relief (e.g Calpol) will be stored on site. This will be checked at regular intervals by a designated trained first aider to make sure that it complies with any instructions for storage and is still in date
- An emergency nursery supply of antihistamine (e.g Piriton) will be stored on site. This will be checked at regular intervals by a designated trained first aider.
- Giving non-prescription medication will be the last resort and the nursery staff will use other methods first to try and alleviate the symptoms, e.g. for a raise in temperature the nursery will offer water to stay hydrated, and ensure the children are not wrapped up with layers.
- Parents/ carers do not need to complete medicine forms for anything which cannot be overdosed e.g. Sudocrem. Parents/ carers do need to complete forms for any medicines or creams where there is a total amount that can be given each day.
- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, the manager will decide if the child is fit to be left at the nursery. If the child is staying, the parent must be asked if any kind of medication has already been given, at what time and in what dosage and this must be stated on the medication form
- As with any kind of medication, staff will ensure that the parent is informed of any non-prescription medicines given to the child whilst at the nursery, together with the times and dosage given
- If there is any doubt around the usage of any medication it will not be administered at nursery.

### **Injections, pessaries, suppositories**

As the administration of injections, pessaries and suppositories represents intrusive nursing, we will not administer these without appropriate medical training for every member of staff caring for this child. This training is specific for every child and not generic. The nursery will

do all it can to make any reasonable adjustments including working with parents and other professionals to arrange for appropriate health officials to train staff in administering the medication.

### **Staff medication**

All nursery staff have a responsibility to work with children only where they are fit to do so. Staff must not work with children where they are infectious or too unwell to meet children's needs. This includes circumstances where any medication taken affects their ability to care for children, for example, where it makes a person drowsy. If any staff member believes that their condition, including any condition caused by taking medication, is affecting their ability they must inform their line manager and seek medical advice. The nursery manager may decide if a staff member is fit to work, including circumstances where other staff members notice changes in behaviour suggesting a person may be under the influence of medication. This decision will take into account any medical advice obtained by the individual or from an occupational health assessment.

Where staff may occasionally or regularly need medication, any such medication must be kept in the person's locker in the staffroom where staff may need easy access to the medication such as an asthma inhaler. In all cases it must be stored out of reach of the children. It must not be kept in the first aid box and should be labelled with the name of the member of staff.

### **Storage**

All medication for children must have the child's name clearly written on the original container and kept in our medication box in the staff room, in the medication box on the wall in each room, or in the or in the fridge in the kitchen; safely out of the reach of children in both locations.

Emergency medication, such as inhalers and EpiPens, will also be stored in the medication boxes on the box in each room within easy reach of staff in case of an immediate need.

Except for staff where staff emergency medication will be located in the staff room.

Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children.

All medications must be in their original containers, labels must be legible and not tampered with or they will not be given. All prescription medications should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with expiry dates, before staff agree to administer medication.

### **Exclusion Periods**

<b>Illness</b>	<b>Minimum Exclusion Period</b>
High temperature of 38C	24 hours

Vomiting	48 hours after symptoms have ceased
Diarrhoea	48 hours after symptoms have ceased
Conjunctivitis	If child is otherwise clinically well
Chickenpox	5 days from onset of rash
Impetigo	Until lesions are crusted over or healed
Measles	5 days from onset of rash
Scabies	24 hours after treatment
Head lice	No exclusion period
Slapped cheek (fifth disease)	Until child is clinically well, rash is not a sign of infectivity
Coronavirus	10 days as long as no high temperature persists
Hand, foot and mouth (coxsackie virus)	Until clinically well
Ear infections	No exclusion necessary

Please note, these exclusion periods are not only to protect from cross-infection. Children who are unwell are likely to develop secondary infections if their immune system has not had sufficient time to recover. Children's ability to cope with group situations is greatly reduced when they are poorly, therefore our exclusion periods are aimed at ensuring the children are strong enough, emotionally and physically, to cope with the nursery day.

These exclusions also apply to all staff.