



Managing Medicines Policy

For

Brearley Nursery School

This policy was reviewed and ratified by the *Governing Body* on September 2023

The following persons are authorised to approve minor changes between reviews:

Chair of Governors Nishma Patel

Health and Safety Governor Nishma Patel

Brearley Nursery School

Mission Statement

“A safe place to hope, learn, play, enjoy and grow”.

At Brearley Nursery School we value all of our children and families. As a setting we follow Birmingham City Council's safeguarding procedure and we uphold the British values whilst celebrating the diversity in our communities. We promote mutual respect and we are an inclusive setting and our ethos and curriculum enables children to be independent learners, making choices and building strong relationships particularly with their peers. Thus enabling a safe learning environment. All of these create the firm foundations needed to encourage democracy, the rule of law, individual liberty, mutual respect and tolerance of those of different faith and beliefs. Staff members are trained on the 'Prevent Strategy' this is utilised in the delivery of the curriculum and within our professional practice.

Managing Medicines Policy

We would ask parents/carers to request their doctor to prescribe medication, whenever possible, which can be taken outside the school day.

General Principles

- Management and staff will treat all medical information as confidential.
- Parents/carers should be encouraged to ask the child's doctor to prescribe medication which can be administered outside the setting's hours whenever possible. For example, asthma preventer inhalers and antibiotics.
- There must be adequate arrangements, including clear procedures, for safe receipt, storage, administration and disposal of medication.
- If staff have any concerns related to administration of a medication, they **should not administer** it but check with the parents/carers or a healthcare professional.

Firstly, if a child becomes ill in school, then they will be isolated in the medical room and you will be asked to collect them as soon as possible. Parents need to have arrangements in place in case this was to happen and they are returning to work. Children's temperatures will be taken each morning on arrival, if their temperature is above 37.8 degrees they will be required to return home. If a child is showing symptoms of a cough, high temperature or a loss of taste or smell, staff will be asked to call parents to collect their child.

If a child is ill for any other reasons, eg. vomiting, parents will be advised by a member of staff as to when the child can return to school

Responsibilities

- All staff should be familiar with the Managing Medicines policy and procedures. All staff will receive support and training appropriate for the tasks they undertake, including the action to be taken in the event of an incident involving medication.

On Admission to the Setting

Parents/carers will be asked to complete an admissions form giving full details of any medical conditions, regular and emergency medication, emergency contact numbers, name of family doctor, details of hospital consultations, allergies, special dietary requirements and any other health information that may affect their child's care.

Parents/carers will be asked on admission to sign to consent to any emergency medical treatment (see appendix 0)

- Where appropriate an individual *Care Plan/Alert card should be developed in partnership with parents/carers and the appropriate health care professionals e.g. the child's Health Visitor, Specialist nurse, GP and or Nurse Educator. *(These are kept in the Early Years and Health File) or Appendix 1a
- Any resulting training needs should be identified and training requested from the Specialist Nurse or Nurse Educator

Staff may wear a face covering and apron and gloves while attending to a child, a digital thermometer, to be used to test for temperature and to be recorded. All gloves and equipment to be disposed into yellow bin. BSS to double bag bin with contents and place in the Orange medical bin.

Cases of outbreaks in school would be reported to PHE/ RIDDCOR for further advice. Follow the BCC flow chart

Administration of Prescribed Medication

- If medicine needs to be taken in measured doses, then two members of staff need to be present when giving medicine.
- No medication will be given without prior written consent from parents/carers
- If a child does need to receive medication during the setting's day, parents/carers must complete a Consent Form detailing all appropriate information (see appendix 1). A separate Consent Form must be completed by parents/carers for each medication. Verbal instructions are not acceptable.
- Parents/carers should be asked to come into the setting and personally hand over the medication to the child's room staff.
- The medication should be in the original container as dispensed. **The pharmacy label must be attached to the medication** clearly labelled with instructions for administration including:

- - Child's name
 - Name of medication
 - Strength of medication
 - How much to given (dose)
 - When to be given
 - Date dispensed and/or expiry date
 - Length of treatment or stop date where appropriate
 - Any other instruction
 - Expiry date whenever possible

- Where there is no expiry date the medication should have been dispensed within the last 6 months.

NB. The label 'to be taken as directed' does not provide sufficient information. Precise information must be supplied.

- Liquid medicines should be accompanied by a 5ml medicine spoon or an oral syringe.

- Medication should not be added to food or drinks. If a child cannot take medication in the form supplied e.g. tablet, written instructions must be provided by the parent/carer following advice from a Health Care Professional.

- Parent/carers are responsible for the replenishing the supplies of medication in person. They must ensure medication is in date.

Storage and Disposal of Medication

- Emergency medication i.e. reliever (blue) inhalers; EpiPens; emergency epilepsy medication, should be stored safely but must be readily accessible at all times i.e. not in a locked cupboard/room. All members of staff working in the setting should be aware of where emergency medication is stored.
- All medication with the exception of emergency medication i.e. reliever (blue) inhalers; EpiPens; emergency epilepsy medication and those requiring refrigeration should be kept in a locked cupboard as per pharmacy instructions.
- Medication requiring refrigeration should be stored in the fridge inside a plastic closed container, clearly labelled '**Medication**'. It should be stored separately from food and not be accessible to children.
- A regular check should be made of the medication every 6-8 weeks. Parents/carers should be asked to collect any medication when:-
 - It is no longer needed/course completed
 - It is out of date
 - It is no longer clearly labelled
 - When instructions are changed
- Any medication which has not been collected by parents/carers and is no longer required should be disposed of safely by returning it to a community pharmacy. If medication is disposed of in this way it should be documented.

- No medication should be disposed of into the sewage system or into the refuse. Current waste disposal regulations make this practise illegal.
- Sharp boxes should always be used for the disposal of needles or glass ampoules. Sharp boxes can be obtained by parents/carers on prescription from the child's GP or consultant. Collection and disposal of the boxes should be arranged with the Local Authority Environmental Services.
- Room staff should be responsible for working in partnership with the parents/carers to ensure that:
 - The information on medication is accurate and up to date
 - there is sufficient medication available
 - that medication has not reached its expiry date
 - that equipment (i.e. asthma spacer devise) are clean and in working order

Medical Emergencies/Medication

- Guidance on calling for an ambulance is displayed by each telephone.
- Emergency medication should be kept in a container/bag, labelled with the child's name and room. It should be kept in the setting and always accessible, never in a locked cupboard, but safe from the other children. A copy of the child's Care Plan/Alert Card should be kept with the medication and should include clear details of the action to be taken in an emergency.

- If children are involved in an off site activities emergency medication, should be carried by a member of staff who would be responsible for administering it should it be required.
- It is the responsibility of parents/carers to ensure medication is in date and there is sufficient amount in the setting.
- Where children have NG Tubes, parents are required to come into school to either re insert tube and feed children.
- Staff who agree to administer emergency medication must receive any appropriate training from a health care professional. This should be updated annually.
- Whenever an ambulance has been called a Medical Emergency Report Form (see appendix 3) should be completed after the event. This form should be sent to the Nurse Educators, Medical Needs in Early Years. Information will be treated confidentially and will help to ensure that the nurse Educators can offer appropriate advice and training.

Refusing Medication

- If a child refuses to take medication, staff should never force them to do so.
- The refusal should be noted and the parents/carers informed as soon as possible on the same day.
- In the event of a child refusing to take emergency medication settings should call for an ambulance. Parents/carers should be informed as soon as possible.
- Staff should not restrain a child to administer medication unless it is an emergency e.g. child may need to be held firmly whilst administering an EpiPen.

Offsite Activities/Extended Day Care

- If children are involved in off site activities any medication, including all emergency medication, should be carried by a member of staff who would be responsible for administering it should it be required.
- The consent and Record of Administration form should also be taken to ensure that normal administration procedures are followed.

Simple Analgesics (e.g. Paracetamol)

We will not administer any medication for pain relief or fever. Children will be asked to stay at home until well enough to return to school.

Antibiotics

We will not administer antibiotics. Children will be asked to stay at home for 48 hours after antibiotics have been prescribed and the first few doses have been administered. This is to ensure that the child does not have an adverse reaction to the medication and is well enough to attend school.

Application of creams & Lotions

- Creams and lotions can be applied in the setting. Parents/carers must complete a form giving consent and complete a care plan giving full details of the child's condition and details of application of the cream/lotion.
- The cream/lotion should have been applied previously to the child.
- If parents/carers request cream to be applied they are responsible for providing the cream, Labelled for the individual child.
- Where a child has eczema the setting should discuss the individual requirements with parents/carers and health professional if necessary.

- Steroid creams for eczema are usually prescribed for twice daily application; these should be applied at home.
- Parents/carers are responsible for checking that ALL creams and lotions they supply are in date.

Sun Cream

- It is recommended that a sun screen with a high Sun Protection Factor (SPF) is used. The minimum should be SPF 15, is broad spectrum and has a four to five star rating.
- Where parents/carers provide sun cream/lotion this should be labelled with the child's name and should have been applied previously to the child. Written parental consent will be required. (see appendix 4).

Record Keeping

- Parents/carers must complete a Consent Form (see Appendix 1) each time there is a request for medication to be administered. Information must include:-
 - Child's name
 - Name, strength and the quantity of medication provided
 - Clear, precise dosage instructions
 - Emergency contact names and telephone numbers
 - Parent/carer signature

If staff take responsibility for the administration of a medication then a Record of Medication Form (see appendix 2)

should be kept that includes:-

- Child's name
 - Name, strength and the of medication
 - Dose given
 - The date and time of administration
 - Names of staff administering medication
 - The quantity of medication received or returned
-
- Reasons for any non-administration of regular medication should be recorded and the parents/carers informed as soon as possible.
 - Wasted doses' (i.e. medication dropped on the floor should also be recorded.

Insurance

If members of staff agree to administer medicines they are covered under the cities public liabilities insurance.

Children with long term / Special medical needs

Should we be asked to admit a child to the setting with special medical needs we will in partnership with the parents/carers, the child's health visitor and any other professionals discuss individual needs.

Information will be sought from Health professionals for any child with a long-term medical condition.

Where appropriate an individual Care Plan/Alert Card will be

developed in partnership with parents/carers and the appropriate health professionals e.g. the child's health visitor, Specialist Nurse, G.P. and/or Nurse Educator.

If the administration of prescription medicines requires technical/medical knowledge then individual training will be provided for staff from a qualified health professional. Training will be specific to the individual child.

Staff will be asked if they are willing to undergo training and administer medication, no member of staff will be required to administer medication.

Appendix 0

Brearley Nursery School

During the time your child attends nursery school, there will be many opportunities to take part in educational visits. These may include visits to the local shops Forest School or further afield to Sutton Park. You will be informed of these and often asked to accompany us. Your child will be insured if a staff car, public or hired transport is used. However, we would ask you to sign the form below. The purpose of this is to enable staff to take your child without obtaining permission every time.

In addition if at any time, either in nursery or on a visit, medical treatment is necessary and we were unable to contact you we would act upon your behalf to ensure prompt medical treatment is carried out.

Please be assured we would make every effort to contact you first! However,

IT IS YOUR RESPONSIBILITY TO ENSURE WE HAVE AN EMERGENCY TELEPHONE NUMBER UPON WHICH WE CAN CONTACT YOU.

We also need your permission to change and/or shower your child should it be necessary.

There may also be occasions when children take part in sessions involving face painting for which we need your permission.

We also need your permission for your child to take part in peer massage sessions on occasion.

During the course of the year we will take many photos of your child at nursery.

Many of these will form part of our documentation of learning.

We receive many visitors who also take photographs of the school and these are sometimes used in educational publications.

Occasionally we video children in nursery, but these remain in the nursery.

Appendix 1

EARLY YEARS MEDICATION CONSENT FORM

Date: _____

Child's Name: _____

D.O.B. _____

Room/Group: _____

Name and strength of medication: _____

How much to give (i.e.dose to be given): _____

When to be given: _____

Route of administration: e.g. by mouth) _____

Any other instructions: _____

MEDICATION MUST BE IN ITS ORIGINAL CONTAINER AS DISPENSED BY THE PHARMACY

Name and contact telephone number of parents/carers:

Name of child's G.P.:

G.P.'s telephone number:

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

Signature of parent or carer: _____

Print name: _____

Date: _____

N.B: If more than one medication is to be given a separate form should be completed for each.



**Care Plan
for the treatment of.....**



Child's Name.....

Date of Birth.....



Daily Treatment at home



Symptoms of a mild attack/reaction



Treatment at school



Symptoms of a severe attack/reaction



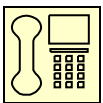
Treatment at school



Hospital Consultant: Name:.....



Further information for management of symptoms at school



Contact Numbers: Parent:
 Doctor:
 Health Visitor:

The following members of staff have been trained to administer treatment and are willing to do so:

Name:..... Date trained.....

Name: Date trained

Signed(Parents).....

Signed (Headteacher)

This information is for all staff

It will alert staff of any treatment needed urgently.

Appendix 2

EARLY YEARS RECORD OF ADMINISTRATION OF MEDICATION

Name of child: _____

Date of Birth: _____

Room/Group: _____

Name & Strength of Medication:

Dose & Frequency of Medication:

Date:		
Quantity Received:		
Quantity Returned:		
Staff Signature:		
Print Name:		

Date										
Time Given										
Dose Given										
Name of Staff Members										
Name of Parent/Carer										
Parent/Carer Signature										

Appendix 3

FORM FOR REPORTING A MEDICAL EMERGENCY IN EARLY YEARS SETTINGS

There are an increasing number of children in our settings who have a variety of medical conditions. The medical needs in Early Years Service, aims to provide training and support for Early Years staff on managing these conditions and any medical emergency which may result.

The form overleaf is a way for you to record any medical emergency which may occur in your setting.

The purpose of the form is to enable the Nurse Educators to ensure that you are given the appropriate training and support to manage such incidents.

The Medical Emergency Report form should be completed when:

1. A child has a medical emergency whilst in the setting and has been given prescribed emergency medication, for example: Epipen, Glucogel, Rectal Diazepam or Buccal Midazolam.

or

2. A child has been sent to hospital via ambulance.

The completed form which should be sent directly to the Nurse Educators will be treated with the utmost confidentiality.

This is not to replace your official accident /reporting form, it should be used in addition to your current reporting system.

Please send this form to:

Nurse Educator Team

Medical Needs in Early Years Service

Children & Families Division

Carnegie Centre

Huters Road

Hockley

B19 1DR

Chris G Hale/Chris Rumney
Medical Needs in Schools & Early Years Service
Children and Families Division

Appendix 3

South Birmingham Community Health
Revised December 2008
Date for review December 2010

MEDICAL EMERGENCY REPORT

Setting: _____

Child's Name: _____

Date of Birth: _____

DETAILS OF INCIDENT

Date: _____ Time: _____

What happened e.g. allergic reaction (minor or severe), seizure,
Hypoglycaemic attack (low blood glucose level), faint or collapse:

Details of treatment given:

Additional information and comments:

Ambulance sent for: YES/NO

Appendix 4

Brearley Nursery School

Request for application of Sunscreen

Parents are requested to bring Sunscreen into school and hand to staff in the room in a named container.

I would like a member of staff to apply sunscreen on my behalf. I accept that they are acting on my instructions.

Child's name:

Room:

Parent/Carer Signature:.....

Brearley Nursery School
Request for application of Sunscreen

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