



Whitecross Nursery School

Supporting Children with Medical Needs Policy

Reviewed by	Claire FitzPatrick
Date of last review	November 2022
Date of next review	November 2023
Ratified by the Governing Body	November 2022

This policy will be reviewed sooner if there is a change to legislation or guidance which may affect it. Any changes will be communicated to all stakeholders.

Rationale

The governing board of Whitecross Nursery School has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support allowing them to play a full and active role in school life, remain healthy, have full access to education (including school trips and physical education) and achieve their academic potential.

Whitecross Nursery School is committed to promoting the good health of children. We will take necessary steps to prevent the spread of infection and take appropriate action when a child is ill. In order to achieve this, we recognise the need for administering medicines to support children's medical needs whilst they are attending our setting, ensuring they have full access to our curriculum.

Implementation of the Policy

It is our responsibility to

- Have regard to the guidance set out in the 'Statutory Guidance for the Early Years Foundation Stage' DfE Sept 2014 and 'Supporting pupils at school with medical conditions' DfE Dec 2015
- Implement effective management systems to support individual children with medical needs
- Inform parents/carers of our practice with regard to administering medicines via the school prospectus and by having the policy available on our website
- Obtain prior written permission for each and every medicine from parents before any medication is given
- Keep records of all medicines administered to children and inform parents
- Have a named person who has overall responsibility for policy implementation. The named person is Mrs Claire FitzPatrick, Headteacher and school Lead on first aid, in her absence Ms Verity Noblet, lead Nursery Teacher and in their absence Miss Tina Burke teacher, Miss Laura Clayton teacher or Mrs Kirby Chapman Admin & Finance officer.

- Review this policy annually.

Our Practice

- Whitecross Nursery School will only administer medicines prescribed to a child by a doctor, dentist, nurse or pharmacist
- The first dose of any medicine must be administered by the parent/carer at home
- Please note DCC Education Authority guidelines state 'To help avoid unnecessary taking of medicines at school parents/guardians should:
 - Be aware that a three times daily dosage can usually be spaced evenly throughout the day and does not necessarily have to be taken at lunchtime, and
 - Ask the family doctor if it is possible to adjust the medication to avoid school time doses. (However we are aware that this is not always possible and staff will be happy to discuss this with you)
- We will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by a pharmacist or hospital and including instructions for administration dosage and storage
- Staff should never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.
- Parents/carers must complete a medication form providing **written consent** (see Parental Consent form-blank copies are kept in a document wallet in the entrance) and **detailed instructions** before a member of staff in the setting can administer any medicine
- If more than one medicine is required, parents/carers must complete a separate form for each medicine
- Medication consent forms will be stored for 21 years in the school office
- Medicines will be stored in the setting safely, strictly in accordance with product instructions and in the original container in which it has been dispensed. They will be stored either in the First Aid cupboard in main nursery, but if refrigeration is required, they will be stored in the fridge, in a container, in the kitchen
- Little cups are kept in the first aid cupboard for administering medicine
- If a child spits the medicine out, we are **not** to give another dose
- Staff to inform Mrs FitzPatrick of any medicines taken from parents. Mrs FitzPatrick will then ensure that the most appropriate member of staff who has completed the administering medicine training, will administer that medicine
- If medicine is required by a child during a session it will be written on a whiteboard and scored through and initialled by the staff member once administered
- Parents/carers will be asked to **sign the back of the medication form on collection of their child** (forms are kept in a folder in the office) to acknowledge that the medication has been administered at the setting with prior written consent and to acknowledge receipt of the medicine
- After administering medicine, the medication form must be signed **on each occasion** by that member of staff and by a staff witness. The parent/carer will also sign in acknowledgement, until the course of medication is completed

- If a child has a medical condition with long term medical needs; it is the parent's/carer's responsibility to inform the setting at the child's initial registration and, where appropriate provide details of any action or support required. Under these circumstances a health care plan will be developed by the Headteacher, involving parents and relevant health professionals (see form 2). All relevant staff will be made aware of the child's condition. Any necessary arrangements will be put in place so the child can start nursery at the same time as their peers. This may include 1-2-1 support for the child, including cover arrangements when that member of staff is absent
- During the nursery visit prior to the child starting nursery, we find out about any allergies/intolerances
 - Allergies are life threatening
 - Intolerances are not life threatening
- For children who require reliever inhalers or other medicine to treat ongoing medical needs; parents/carers will be asked to complete the medication form, providing information around the medication and when this should be administered. Parents/carers will be informed and required to sign the medication form, each time medication has been administered
- When administering an inhaler staff must first always wash hands before setting up the spacer device. 1 puff can be given every 30-60 seconds, up to 10 puffs. If an ambulance has been called and it is longer than 15 minutes, the process can be repeated
- An emergency inhaler is stored in the first aid cupboard
- For children who require adrenaline for a severe allergic reaction (anaphylaxis) by 'Epipen' or 'Jext' injections, staff will have termly reminders of how to administer injections and a copy of quick reference instructions will be kept on the first aid board and also in the bag with the 'Epipen' or 'Jext'. Communication from Derbyshire Healthcare NHS stated as follows: *"It was agreed at the Derbyshire Joint Area Prescribing Committee (JAPC) meeting of the 11th October 2011 that the preferred brand of self-administered adrenaline to be prescribed for treatment of anaphylaxis in children of Derbyshire by their GP is to be 'Jext'. This is a similar product to the Epipen and the dosages available are identical – 150 micrograms and 300 micrograms. The reason for this change is that the Jext preparation has a longer shelf-life and in a medicine that is usually destroyed unused, this would make a considerable saving to the health expenditure of Derbyshire. Although the two products look similar, they do have slightly different techniques for use. The Epipen requires the device to be held at a distance of approximately 10cm (4inches) away from the outer thigh and then jabbed into the outer thigh at an angle of 90 degrees (right angle). The Jext is placed against the outer thigh at an angle of 90 degrees and the black tip is pushed firmly into the outer thigh until a click is heard. Each device is then held firmly in the thigh for `10 seconds"*.
- Parents/carers are asked to bring a copy of the 'Allergy Action Plan' form completed by the child's Doctor. This form explains; what the child is allergic to, the signs of Anaphylaxis to look out for which may be experienced by the child, the action to take, emergency contact details, parental consent authorising staff to administer the medicines (described on the form) including a 'spare' epipen held by the school if a second dose is necessary.
- Two spare Epipens are kept in the First Aid Cupboard. These are to be used if a child requires a second dose or if a child presents with anaphylaxis for the first time and does not have an Epipen at school.

- An ambulance will be called as soon as anaphylaxis shock starts, we would check with the emergency services that it is okay to use another child's Epipen, (if this is necessary) in particular that the dose of that epipen is safe to use.
- If administration of prescription medicines requires technical or medical knowledge, then individual training will be sought and provided from a relevant qualified health professional for staff working with the child within the setting (see form 3)
- Review of children's allergies and treatments will take place in staff meetings every half term
- It is the parent's/carer's responsibility to keep the setting informed and updated of any changes to a child's long-term medication needs. The Headteacher will ensure all staff are made aware of any changes to children's ongoing medical needs
- If children are taken off-site e.g. on a visit or for a walk, risk assessments are carried out beforehand and arrangements for taking any necessary medicines will need to be considered. Staff supervising visits should be aware of any medical needs and relevant emergency procedures. Relevant paperwork, i.e. health care plan, parental consent form and emergency procedures should be taken (see Policy on Educational Outings)
- If staff are concerned about whether they can provide for a child's safety, or the safety of other children on a visit, they should seek parental views and medical advice.
- Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal.
- Sharps boxes should be used for the disposal of needles and can be obtained by parents on prescription from the child's GP. The box will be returned to the parents for disposal, which again they can arrange with their GP. There is a school sharps box stored in the school office.
- All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures
- Staff should have access to protective disposable gloves and take care when disposing of dressings or equipment
- Our Safeguarding Governor, Mrs Julie Jennens will monitor records of medicines administered and individual healthcare plans on a termly basis
- Risk Assessments are monitored by Governors on an annual basis
- When the child transfers to school, the health care plan and any other relevant records will be passed to the receiving school. The child's Headteacher or Keyworker will liaise in person with the relevant staff from the feeder school

Appendix 1

Procedures For Dealing With Children Who Are Ill Or Infectious

At Whitecross Nursery School every effort is made to keep abreast of new information relating to infectious, notifiable and communicable diseases and local health issues. Our policies and procedures are approved by Derby City Council and are consistent with the guidance set out in the *Practice Guidance for the Early Years Foundation Stage*.

- We follow the guidance set out by the Health Protection Agency (HPA) in regard to infection control within a childcare setting.
- Children should be kept at home when they are acutely unwell.
- If a child becomes unwell whilst at Whitecross Nursery School, a member of staff will contact the child's parent/carer to collect their child. If necessary, emergency contact numbers will be used in the event of being unable to contact the child's parents/carers.
- In the event of an emergency, an ambulance will be called on 999 and parents/carers contacted as soon as possible. A member of staff will accompany the child to hospital if necessary.
- In order to prevent the spread of infection in accordance with the HPA, any child who has suffered from vomiting or diarrhoea will be excluded from School for 48 hours from the last episode.
- We make every effort to care for a child who is ill or infectious in a sympathetic, caring and sensitive manner.
- Where an infectious disease is suspected, where possible an adult wearing PPE (mask, disposable apron and disposable gloves) will give 1:1 care away from other children until the child's parents/carers arrive.
- We respect the parent's/carer's right to confidentiality.
- We expect parents/carers to inform the school if their child is suffering from any illness or disease that may put others at risk and adhere to the HPA guidance on necessary exclusion periods. A member of staff will be able to advise parents/carers on any necessary treatments or exclusion periods set out in the HPA guidance.
- We have a responsibility to inform all parents/carers about any infectious or notifiable diseases that may occur within the setting.
- As a childcare provider we have a responsibility to inform our local authority and Ofsted of any notifiable diseases.
- If a child suffers regularly from frequent or acute pain staff will encourage parents/carers to refer the matter to the child's GP.

Complaints

If a parent/carer wishes to make a complaint concerning the support provided for children with medical conditions, they should refer to our Complaints Policy.

Links, References and Regulations

Reference to the Statutory Framework for the Early Years Foundation Stage:

Section 3 – The Safeguarding and Welfare Requirements

P25 "Health – Medicines"

3.44 "The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection, and take appropriate action if children are ill.

3.45 “Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child’s needs for medicines, and for keeping this information up-to-date. Training must be provided for staff where the administration of medicine requires medical or technical knowledge. Medicines must not usually be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist (medicines containing aspirin should only be given if prescribed by a doctor).

3.46 “Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child’s parent and or carer. Providers must keep a written record each time a medicine is administered to a child, and inform the child’s parents and/or carers on the same day, or as soon as reasonably practicable”.

‘Supporting pupils at school with medical conditions’ Dec 2015

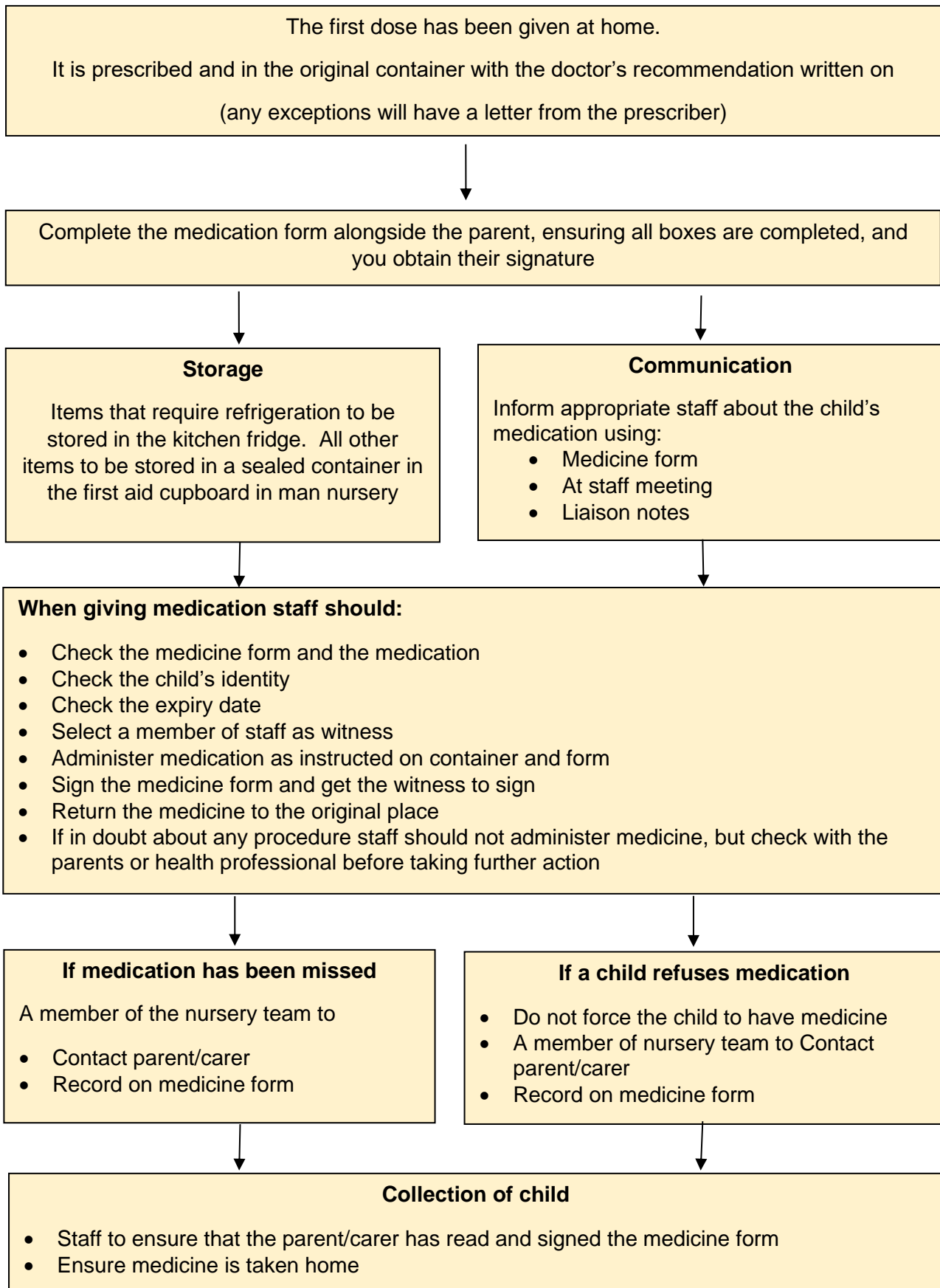
‘Administration of Medicines in Schools’ Guidelines and Code of Practice recommended by Derby Local Authority

Derby City Council ‘Complaints Policy’

SEND Code of Practice 2014

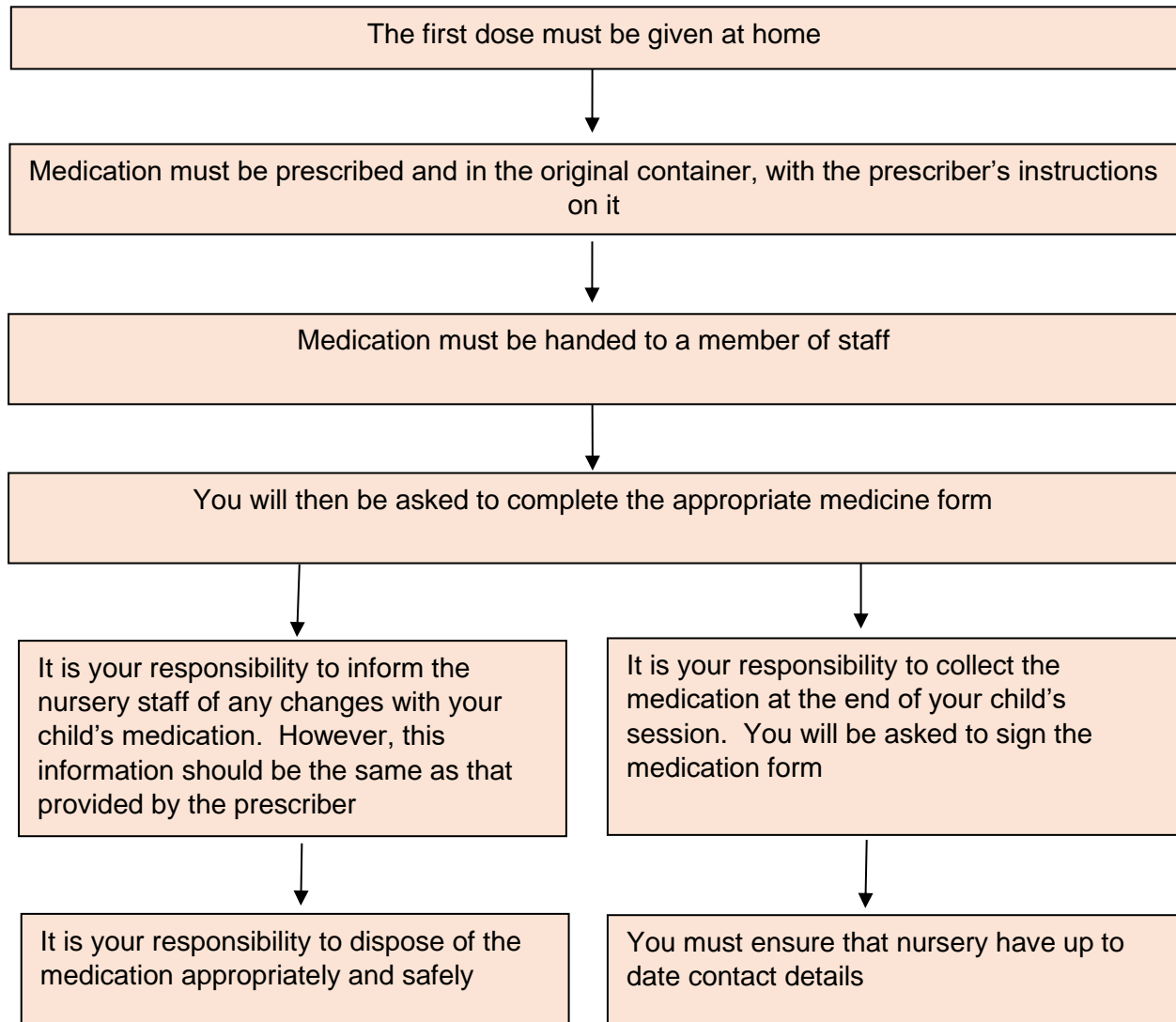
Whitecross Nursery School Staff

If a child requires medication at nursery you will ensure:



Whitecross Nursery School Parent's & Carer's

If a child requires medication at nursery you will ensure:



In a medical emergency you will be contacted immediately

Please note DCC Education Authority guidelines state 'To help avoid unnecessary taking of medicines at school parents/guardians should:

- i. Be aware that a three times daily dosage can usually be spaced evenly throughout the day and does not necessarily have to be taken at lunchtime, and
- ii. Ask the family doctor if it is possible to adjust the medication to avoid school time doses. (However, we are aware that this is not always possible and staff will be happy to discuss this with you).

Whitecross Nursery School

Health Care Plan

Name of School / Setting:

Child's Name:

Group:

Date of Birth:

Child's Address:

Medical Diagnosis or Condition:

Date:

Review Date:

Family Contact Information

Name of contact one:

Phone Number, mobile:

Phone number other:

Name of contact one:

Phone Number, mobile:

Phone number other:

Clinic / Hospital Contact

Name:

Phone Number:

G.P.

Name:

Phone Number:

Practice:

Describe medical needs and give details of child's symptoms

Daily care requirements (*e.g. before outdoor play, at lunchtime, etc.*)

Describe what constitutes an emergency for the child, and the action to take if this occurs.

Follow up care.

Who is responsible in an emergency (*state if different for off-site activities*).

Form copied to.

FORM 3

Staff Training Record – Administration of Medicines

Name of School / Setting:

Name:

Type of Training Received:

Date Training Completed:

Training Provided by:

Profession and Title:

I confirm that (*name of member of staff*) has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated (*please state how often*)

Trainers Signature:

Date:

I confirm that I have received the training detailed above.

Staff Signature:

Date:

Suggested Review Date: