

EYFS Administration of Medicine and Sick Child Policy

Approving body: SLT Owner: Head of Pre-Prep Author: Head of Pre-Prep

Executive Summary

This policy outlines the principles and procedures for storage and administration of medicine in the EYFS setting at Sherborne Prep. It also details the policy and procedure for sick children in the EYFS setting including for sickness, diarrhoea and headlice.

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Administration of Medication

This policy is to be read in conjunction with Sherborne Prep Medication Policy.

At Sherborne Pre-Prep we follow the guidelines below regarding medication:

- Medication may be administered. It must be in-date and prescribed for the current condition.
- Children taking prescribed medication must be well enough to attend the setting.

As a setting we adhere to the Early Years Foundation Stage, Safeguarding and Welfare Requirements 2021.

Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, or other registered non-medical prescriber (medicines containing aspirin should only be given if prescribed by a doctor).

Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that medicine has been obtained from an adult with parental responsibility. See Sherborne Prep Medication Policy for further detail regarding our documentation requirements and how we reduce the risk of double dosing.

Storage of Medication

Children's prescribed drugs are stored in their original packaging, in accordance with product and prescriber's instructions and are clearly labelled and are inaccessible to the children. All medication will be securely stored and out of reach of children in a locked cupboard in a room not normally available to pupils. If medicine must be refrigerated, it will be kept in a locked container, within the fridge, where temperature records are maintained daily to demonstrate temperature is between 2 – 8 degrees.

If the administration of prescribed medication requires medical or technical knowledge, tailored training is provided for at least two relevant members of staff by a health professional prior to the child attending the setting.

Consent and Record Keeping

Parents/carers give prior written consent for the administration of medication as per Sherborne Prep Medication Policy.



We use CPOMS to record any administration of medicine and record the time, date, dosage and the name of the staff member administering the medication.

We will ask parents to review their child's registration form and health requirements annually to check details held by the school are correct.

Staff Medication

If a practitioner at this setting is taking medication which they believe may affect their ability to care for children, they should inform the Head of Pre-Prep and only work directly with children after seeking medical advice and a thorough risk assessment being carried out. This should be in place before the practitioner is able to work directly with children.

All staff medication whether prescribed or not, will be securely stored and out of the reach of children in our staff room.

Sick Child Policy

All parents are shown this policy so that they are aware of our policy on the exclusion of ill or infectious children. Children who are unwell, have a temperature, or sickness and diarrhoea, or who have an infectious disease should not be in school and if symptoms begin while at school, the child should be collected as soon as possible. This is in line with the Health Protection Agency's Guidance on Infection Control in Schools and other Childcare Settings.

Sherborne Pre-Prep adopts a 48-hour rule for sickness and diarrhoea. This means that children cannot return to the setting until 48 hours after their last bout of sickness and/or diarrhoea. Staff suffering from sickness and diarrhoea do not handle food and are sent home as soon as staffing ratios allow.

Young children's nappies will be individually monitored. If a child is displaying obvious sickness and diarrhoea, they will be sent home. However, loose nappies will be monitored and after two loose nappies, parents will be notified and asked to take the child home. For older children, with obvious sickness and diarrhoea, the parents/carers will be contacted and asked to collect them immediately.

Procedure

In the event of your child/children becoming ill whilst at the setting, the staff will follow the outlined procedure below:

- Teacher/Nursery assistant to be informed.
- Description of the symptoms/problem to be relayed to the appropriate staff.
- Teacher/Nursery assistant/Matron to assess the child/ren and decide on appropriate action required.
- If the child is thought to have an infectious disease or is deemed too unwell to attend the setting, the Teacher/Nursery assistant/Matron will contact the child's parents/carers to ask them to collect the child.
- If the child's parent/carers are unavailable, emergency contact numbers will then be used.
- While the child is deemed well enough to attend the setting, or is awaiting collection by his/her parents, the child will be offered fluids and supported in a quiet or rest area, usually with the school matron.

Children with headlice are not excluded but must be treated to remedy the condition. Parents are notified if there is a case of headlice in the setting.



Notification

The UK Health and Security Agency (UKHSA), South West Health Protection Team (Tel 0300 3038162) is notified of any infectious diseases that a qualified medical person considers notifiable (Infectious Disease Notification Act 1889).

Appendix 1: Summary of Changes

• This is the first issue of this policy in the updated policy format.