13c/d Policy for the care of sick children in the Pre-Prep (EYFS) and the administration of medicines

A copy of this policy is published in the following areas:

The school’s website
Parents’ Handbook
The Staff area of the computer network

Created: January 2015
Reviewed: September 2017
Date of next review: September 2018
Created by: EYFS Coordinator

A. Care of sick children

In order to control the spread of infection we need to exclude sick children with infectious illnesses from the school.

It is our policy that sick children, including children needing infant paracetamol or ibuprofen to control pain or fever, need to be at home in order to recover from sickness where they are more comfortable; this includes both infectious and non-infectious illness. School life can be demanding and the environment is not conducive to supporting children’s recovery.

It is the school’s policy where diarrhoea and vomiting have occurred that all pupils are sent home as soon as possible. Children and staff must not return to school until 48 hours after the last bout of diarrhoea or vomiting. Should a child or member of staff return before the 48-hour period, they will be asked to return home. According to NHS guidelines, any member of staff or pupil should not swim for two weeks after the last bout of diarrhoea or vomiting.

If a child becomes ill while at the school, staff will:

- Make every effort to make the child comfortable until the parent arrives.
- Contact parents in order to arrange for the child to be collected.

If there is any chance of a delay in the parent collecting their child from school, the School First Aider, who is a qualified nurse, may contact parents to ask for permission to administer medicine (infant paracetamol or ibuprofen) in the case of a high temperature.
If a child were prescribed antibiotics, then we would prefer that the child does not attend school for at least the first two days after the course is started. This will give the child a chance to start to recover.

In the case of a child having recently had a minor or major operation, or being in pain through illness, then the child will need to be at home recovering where one to one care may be given and the child will not have to cope with the demands of school life.

While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being.

B. The Administration of Medicine

The class teacher, in partnership with the class TA, is responsible for the correct administration of medication to children. This includes ensuring that a medical consent form has been completed, that medicines are stored correctly and that records are kept according to procedures.

- Medicines will be accepted for children with on-going non-infectious ailments or where a course of medicine is being completed e.g. antibiotics.
- Staff will administer medicines that have been prescribed by a doctor, dentist, nurse or pharmacist. The medicine must be in its original packaging, clearly named with instructions on the label. The child’s parent must fill out and sign the parents’ consent for administration of medicine’s form. These can be obtained from the First Aid point in the Pre-Prep staff room.
- Staff will store medicines in the staff room in the first aid cabinet or in the staff room refrigerator, both of which are kept locked.
- Any child needing medicine during the day will have their name written on the memory board in the staffroom with the time for the medicine. When the medicine has been given the member of staff will complete the necessary paperwork.
- Every time medicine is administered, staff will enter on a label, which will be stuck in their reading diary the amount administered the time and the date and then countersign it.
- It is very important that parents/carers notify staff if they have administered medicine that morning or if they suspect their child is unwell.
- For some conditions, medication may be kept in the setting. The school first aider, will check that medication held is in date and return any out-of-date medication back to the parent.
- Emergency medicine such as asthma inhalers will be stored in the child’s classroom in a named plastic wallet and then kept in a green basket in the teacher cupboards, this basket is taken to all specialist activities.
- Epi Pens will be stored in a yellow insulated wallet in a place that is easily accessible and known to all staff. Secondary epi-pens will be stored in the school office. The school and parents will discuss specific details and draw up a care plan.
- If the administration of prescribed medicines requires medical knowledge, individual training will be provided for the relevant members of staff by a health professional.
- In the EYFS no child may self-administer. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell their key person what they need. Staff will remain vigilant in knowing and responding to when a child needs medication.
All children’s health and welfare is of prime importance to us and we ask all parents to support us using these guidelines.

C. Children who have long-term medical conditions and who may require on ongoing medication

Any Parent with a child joining our setting with a long-term medical condition will be invited to meet with the EYFS Coordinator and the first aider.

- A risk assessment is carried out for each child with a long-term medical condition that requires ongoing medication. This is the responsibility of the EYFS Coordinator and the first aider.
- Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will also contribute to a risk assessment. They should understand the routines and activities and point out anything, which they think may be a risk factor for their child. If appropriate, they may also be shown around the setting.
- For some medical conditions, key staff will need to have training in a basic understanding of the condition as well as how the medication is to be administered correctly. Staff training needs forms part of the risk assessment.
- The risk assessment includes vigorous activities and any other school activities that may give cause for concern regarding an individual child’s health needs.
- A health care plan for the child is drawn up based upon information from the parent and where applicable, advice from the child’s doctor. A copy of this information is given to the EYFS Coordinator and the first aider.
- The health care plan should include the measures to be taken in an emergency.
- The health care plan is reviewed annually or more if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc. Any changes to the health care plan are discussed with parents.
- A list of children needing Epi-pens are displayed in the Staff Room

D. Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children must include the class teacher for the child with a risk assessment, or the class TA who will be fully informed about the child’s needs and/or medication.
- Medication for a child is taken in a sealed plastic wallet clearly labelled with the child’s name, name of the medication, inside the wallet is a copy of how the medication is to be administered, according to their Health Care Plan.
- On returning to the setting the class teacher signs the medication record book and informs the parents of treatment given.
- If a child on medication has to be taken to hospital, the child’s medication is taken in a sealed plastic wallet clearly labelled with the child’s name and the name of the medication.
- Inside the wallet is a copy of the medication consent form signed by the parent.