



Bognor Regis
Nursery School



Chichester
Nursery School



Boundstone
Nursery School



WEST SUSSEX NURSERY SCHOOLS FEDERATION

Administration of Medicines Policy

Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on 'governing bodies of maintained Schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their Nursery with medical conditions'. The governing body of the West Sussex Nursery Schools Federation will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting pupils at Nursery with medical conditions' December 2015'.

Medicines will be administered to enable the inclusion of pupils with medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

Signed

Chair of Governors

Date

Organisation

The governing body will develop policies and procedures to ensure the medical needs of pupils at the West Sussex Nursery School Federation are managed appropriately. They will be supported with the implementation of these arrangements by the Head teacher and Nursery staff.

The Lead for Managing Medicines at the Nursery are as follows:

Bognor Regis Nursery School is Janine Clark or in their absence Vivienne Wallace
Chichester Nursery School is Kelly Humphrey or in their absence Kirsty Scott
Boundstone Nursery School is Leonie McBride or in their absence Jane West

In their duties staff will be guided by their training, this policy and related procedures.

Implementation, Monitoring and Review

All staff, governors, parents/carers and members of Bognor Regis, Boundstone and Chichester Nursery School communities will be made aware of and have access to this policy. This policy will be reviewed every three years, or sooner if updates become available and its implementation reviewed by Governors.

Insurance

Staff who follow the procedures outlined in this policy and who undertake tasks detailed as 'cover available' in the RMP Medical Malpractice Treatment Table will be insured under the WSCC Public Liability insurance policy. The Treatment Table is available to view on West Sussex Services for Schools under Other Documents in the Insurance, Resources section.

In addition to this policy the Council also maintains a Medical Malpractice policy to incorporate insurance cover for the more invasive and complicated procedures that staff are now expected to undertake and that are not covered under a standard Public Liability policy.

There is a brief section on Medical Malpractice in the Insurance Guide 23/24, (on WSSfE, Insurance, Resources, Core Policy Information) which outlines the policy, but any further specific questions will need to be directed to Sharon Andrews for clarification.

Admissions

When the Nursery Schools are notified of the admission of any they will seek parental consent to administer short term-ad-hoc non-prescriptions medication using '**Template B: Parent/guardian consent to administer short-term non-prescribed 'ad-hoc' medicines.**' An assessment of the pupil's medical needs will be completed this might include the development of an Individual Health Care Plans (IHP) or Education Health Care Plans (EHC) and require additional staff training. The Nursery will endeavour to put arrangements in place to support that pupil as quickly as possible. However the Nursery may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place.

Pupils with Medical Needs

The Nursery Schools will follow Government guidance and develop an IHP or EHC for pupils who:

- Have long term, complex or fluctuating conditions – these will be detailed using **Template 1 (Appendix 1)**
- Require medication in emergency situations – these will be detailed using **Template 2** for mild asthmatics and **Templates 3, 4, 5 and 6** for anaphylaxis (**Appendix 1**).

Parents/guardians should provide the Nursery School with sufficient information about their child's medical condition and treatment, or special care needed at Nursery. Arrangements can then be made, between the parents/guardians, Head of School and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in Nursery. Healthcare plans will be reviewed by the Nursery School annually or earlier if there is a change in a pupil's medical condition.

Prescribed and Non-Prescribed Medication

On no account should a child come to Nursery with medicine if he/she is unwell. If a child is no longer unwell but is finishing a course of medicine parents may call into the Nursery and administer medicine to their child, or they may request that a member of Nursery staff administers the medicine. If a pupil refuses their medication, they should not be forced, the Nursery will contact the parent/guardian and if necessary, the emergency services. Pupils should not bring any medication to Nursery for self-administration.

The Nursery will keep a small stock of paracetamol (Calpol) and antihistamine (Piriton) for administration with parental consent (template B or gained at the time of administration) for symptoms that arise during the Nursery day.

All other medication must be supplied by the parent/guardian in the original pharmacist's container clearly labelled with the child's name and include details of possible side effects e.g. manufacturer's instructions and/or patient information leaflet (PIL). Medicines must be delivered to the child's Keyworker (or lead Breakfast member of staff/staff member covering the Keyworker) with the appropriate consent form **Template C and/or C1 (Appendix 2)**. The Nursery will inform the

parent/guardian of the time and dose of any medication administered at the end of each day by (sharing the Administering Medication form).

Parents must not put Calpol or any other types of medication in children's bags.

Confidentiality

As required by the General Data Protection Act 2018, Nursery staff should treat medical information confidentially. Staff will consult with the parent/guardian, as to who else should have access to records and other information about the pupil's medical needs and this should be recorded on the IHP or EHC. It is expected that staff with contact to a pupil with medical needs will as a minimum be informed of the pupil's condition and know how to respond in a medical emergency.

Consent to Administer Medication

Parental/guardian consent to administer medication will be required as follows:

- **Short term ad-hoc non-prescribed medication** - The Nursery will request parent/guardian consent to administer ad-hoc non-prescription by either using Template B (Appendix 2) when the pupil joins the Nursery OR by contacting the parent/guardian to gain consent at the time of administration. The Nursery Schools ask parents/guardians to inform the Nursery if there are changes to consent gained when the pupils joined the Nursery. If the Nursery is not informed of any changes by the parent/guardian, it will be assumed that consent remains current.
- **Prescribed and non-prescribed medication taken regularly** - each request to administer medication must be accompanied by '**Parental Consent to Administer Medication form (Appendix 2 Template C and/or C1)**' or if applicable on the IHP

Prescription Medicines

Medicine should only be brought to Nursery when it is essential to administer it during the Nursery day. In the vast majority of cases, doses of medicine can be arranged around the Nursery day thus avoiding the need for medicine in Nursery. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from Nursery and then at bedtime. Administration will be recorded using **Template D or E** and the parent/guardian informed. Parents/guardians are expected to remove any remaining medicine from Nursery once the prescribed course has been completed.

Non-Prescription Medicines

Under exceptional circumstances where it is deemed that their administration is necessary for a child's health the Nursery will administer non-prescription medicines. where it is deemed necessary for a child's health, other forms of non-prescribed medication may be administered, an example of this could be treatment for conjunctivitis. GPs now expect parents to obtain this type of medication from the Pharmacy and are no longer willing to prescribe due to the costs involved.

Please note Ibuprofen and other brands of pain killing medication can only be administered if supported by a doctor's letter.

The Nursery will not administer alternative treatments i.e. homeopathic or herbal potions, pills or tinctures or nutrition supplements unless prescribed or recommended by a doctor and detailed on an IHP or EHC as part of a wider treatment protocol. As recommended by the Government in 'Supporting Pupils at Nursery with Medical Conditions December 2015' the Nursery will also not administer aspirin unless prescribed. The storage and administration for non-prescription medication will be treated as prescription medicines.

If the relevant symptoms develop during the Nursery day as detailed under the paragraph below 'short term ad-hoc non-prescribed medication' the Nursery will administer the following non-prescription medications:

- paracetamol (Calpol) (to pupils of all ages)
- antihistamine (Piriton)

All other non-prescription medications will only be administered by staff, providing:

- The parent/guardian confirms daily the time the medication was last administered and this is recorded on **Template C1 (Appendix 2)**.
- medication is licensed as suitable for the pupil's age.
- medication is suitable for the pupil i.e. if a child is asthmatic the medication is suitable for that condition.
- administration is required more than 3 to 4 times per day.
- medication is supplied by the parent or guardian in the original packaging with the manufacturer's instructions and/or (PIL).
- and accompanied by parental/guardian consent **Template C and C1 (Appendix 2)** and confirmation the medication has been administered previously without adverse effect.

The Nursery will NOT administer non-prescription medication:

- as a preventative, i.e. in case the pupil develops symptoms during the Nursery day.
- if the pupil is taking other prescribed or non-prescribed medication, i.e. only one non-prescription medication will be administered at a time.
- Any requirement for a non-prescription medication to be administered during Nursery hours for longer than 48 hours must be accompanied by a doctor's note. In the absence of a doctor's note and if following the administration of a non-prescription medication symptoms have not begun to lessen in the first 48 hours the Nursery will advise the parent to contact their doctor. If symptoms have begun to alleviate, the medication can continue to be administered at home out of Nursery hours.
- Under exceptional circumstances where the continued administration of a non-prescribed medication is required to keep the pupil in Nursery and this requirement has not been documented by a medical professional the Nursery will continue to administer medication at their own discretion.
- A request to administer the same or a different non-prescription medication that is for the same/initial condition will not be repeated for 2 weeks after the initial episode; and not for more than 2 episodes per term - it will be assumed that the prolonged expression of symptoms requires medical intervention, and parents/guardians will be advised to contact their doctor.
- Skin creams and lotions will only be administered in accordance with the Nursery's Intimate Care Policy and procedures.
- Medication that is sucked i.e. coughs sweets or lozenges, will not be administered by the Nursery.
- If parents/guardians have forgotten to administer non-prescription medication that is required before Nursery – requests to administer will be at the discretion of the Nursery and considered on an individual basis.

Short term ad-hoc non-prescribed medication

ONLY the following will be administered following the necessary procedures:

As part of a child's personal care, parents can provide creams in order to prevent or treat nappy rash or to moisturise eczema. These must be handed over to the child's Keyworker, be in their original containers and be labelled with the child's name. In no circumstances must they be left in a child's bag. Sometimes these creams are prescribed by the doctor to avoid parents having to pay for them over the counter. However, they will be treated in the same way as bought creams and the Consent and Administration of Medicines form does not have to be completed.

A small stock of standard paracetamol (Calpol), and antihistamine (Piriton) will be kept by the Nursery for administration if symptoms develop during the Nursery day.

- For mild allergic reaction – antihistamine (Piriton) (see Anaphylaxis) NB parental consent should be gained for those pupils known to require antihistamine as part of their IHCP. Written consent to administer in the event of an allergic reaction will be gained for all pupils at the time of registering at Nursery and so will be given in the event of an allergic reaction, if consent has been given. This will be recorded in writing. In an emergency medication can be administered with the consent of the emergency services.

Only one dose of any of the above medications suitable to the weight and age of the pupil will be administered during the Nursery day which can be administered as required with parental consent gained using **template B**.

Pain relief protocol for the administration of paracetamol (Calpol)

As a general rule, children requiring pain relief during the day are not well enough to be in Nursery.

However, very occasionally infants and young children can spike a high temperature. In order to be able to respond quickly the Nursery will have a supply of Calpol to use in these circumstances. In this situation a parent will be contacted by phone at the time, in order to obtain verbal permission. We would then expect the parent to collect their child as soon as possible and take them home.

We will not administer Calpol to a child who is clearly unwell, in order for them to stay in Nursery for the session/day.

If it is determined that Calpol is needed within the first four hours of a child entering Nursery:

- The Nursery will contact the parent/guardian and confirm that a dose of Calpol was NOT administered before Nursery, parents/guardians and these conversations will be recorded. If Calpol has not been administered in the past 4 hours, the Nursery will, with parental consent administer 1 dose, in accordance with the age of the child.
- If the Nursery cannot contact the parent/guardian and therefore cannot confirm if Calpol was administered before Nursery, then the Nursery will refuse to administer Calpol.

If Calpol has been administered before Nursery:

- The Nursery will not administer Calpol until 4 hours have elapsed since the last dose no more than 4 doses can be administered in 24 hours.

Nursery will always attempt to contact the parent/guardian before giving Calpol, even if 4 hours have elapsed, unless advised by medical professionals in an emergency.

The Nursery will inform the parent/guardian if pain relief has been administered this will include the dose and time of administration.

Asthma

The Nursery recognises that pupils with asthma need access to relief medication at all times. The Nursery will manage asthma in Nursery as outlined in the Asthma Toolkit. Pupils with asthma will be required to have an emergency inhaler and a spacer (if prescribed) in Nursery. The Nursery may ask the pupils parent or guardian to provide a second inhaler. Parents are responsible for this medication being in date and the Nursery will communicate with the parents if new medication is required and a record of these communications will be kept. The Nursery inhaler will only be used in an emergency and will always be used with a spacer as outlined in the Asthma Toolkit. The Nursery complies with the School Nursing Service recommendation that staff administering asthma inhalers are trained in their administration and that training is renewed as part of staff's paediatric first aid training cycle. The Nursery will develop IHP's for those pupils with severe asthma and complete the Individual Protocol for pupils with mild asthma.

Anaphylaxis

Every effort will be made by the Nursery to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the Nursery population. The Nursery complies with the School Nursing Service recommendation that staff who will be administering auto-injectors are trained and that training is renewed as part of staff's paediatric first aid training cycle. This would be reviewed sooner if a child with known anaphylaxis joins the Nursery

In accordance with the Medicines and Healthcare Products Regulatory Agency (MHRA) advice the Nursery will ask parent/guardian(s) to provide 2 auto-injectors for Nursery use. Parents are responsible for this medication being in date and the Nursery will communicate with the parents if new medication is required and a record of these communications will be kept.

Mild Allergic Reaction

Non-prescription antihistamine will with parental consent be administered for symptoms of mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes), the pupil must be monitored for signs of further allergic reaction. If antihistamine is not part of an initial treatment plan, anaphylaxis medication will be administered following the guidance for short term ad-hoc non-prescribed medication.

Some antihistamine medication can cause drowsiness and therefore the Nursery will consider if it is necessary for pupils to avoid any contact hazardous equipment/activities after administration of the medication

Hay fever

Parent(s)/guardian(s) will be expected to administer a dose of antihistamine to their child before Nursery for the treatment of hayfever. The Nursery will only administer antihistamine for symptoms of allergic reaction and not as a precautionary measure.

Severe Allergic Reaction

Where a GP/Consultant has recommended or prescribed antihistamine as an initial treatment for symptoms of allergic reaction this will be detailed on the pupils IHP. The Nursery will administer 1 standard dose of antihistamine (appropriate to age and weight of the pupil) and it is very important that symptoms are monitored for signs of further allergic reaction. During this time pupils must **NEVER** be left alone and should be observed at all times.

If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms, then if the pupil has been prescribed an adrenaline auto injector it will be administered without delay an ambulance called and the parents informed.

Medical Emergencies

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a pupil who has an IHP or EHC, the emergency procedures detailed in the plan are followed, and a copy of the IHP or EHC is given to the ambulance crew. If applicable the pupil's emergency medication will be administered by trained Nursery staff, if the pupils' medication isn't available staff will administer the Nursery's emergency medication with prior parental consent.

In accordance with amendments made to the Human Medicines Regulations 2012 from October 2014 a sufficient number of salbutamol inhaler(s) spacer(s) will be held by the Nursery to cover emergency use. Parents are expected to provide 2 in date auto-injectors for administration to their child, if the Nursery does not hold 2 in date auto-injectors for each pupil then a suitable number of auto-injectors will be purchased for use by the Nursery in an emergency.

Parental consent to administer the 'Nursery inhaler and/or auto-injector' will be gained when the pupil joins the Nursery using **Template 2** for asthmatics and **Templates 3, 4, 5 and 6** for anaphylaxis (Appendix 1). The Nursery will hold a register of the pupils diagnosed with asthma and/or anaphylaxis,

and if parental consent has been given to administer the Nursery medication. The Nursery will be responsible for ensuring the Nursery medication remains in date.

Instructions for calling an ambulance are displayed prominently by telephones in the Nursery. (Appendix 2 Template G)

Controlled Drugs

The Nursery does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves whilst in Nursery. Controlled drugs will be stored securely in a non-portable locked medicines cabinet in a locked room and only named staff will have access. Controlled drugs for emergency use e.g. midazolam will not be locked away and will be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug stock held in Nursery. (Appendix 2 Templates D and E)

Storage and Access to Medicines

Due to the age of Nursery children all medicines will be kept securely (where access by pupils is restricted). Medicines are always stored in the original pharmacist's container. All staff will be fully briefed on the procedures for obtaining their medication.

Emergency medicines such as inhalers, adrenaline auto injectors and midazolam must not be locked away. Emergency medication will be kept in a clearly identified container in an easily accessible medicines cupboard in the part of Nursery where the pupil. Parents will be asked to supply a second adrenaline auto injector and/or asthma inhaler for each child and they will be kept in the medical area, in the part of Nursery that the child attends. Staff must ensure that emergency medication is readily available at all times i.e. when a child is playing outside, educational visits and in the event of an unforeseen emergency like a fire.

Medicines that require refrigeration are kept in the following locations in each Nursery to which pupil access is restricted and will be clearly labelled in an airtight container:

Bognor Regis Nursery School – Tasty Space fridge or Orchard Room Fridge

Boundstone Nursery School – Staff Room Fridge

Chichester Nursery School – Up to 3s' Fridge. There are specific arrangements in place for the storage of controlled drugs see page 7.

Waste Medication

Where possible staff should take care to prepare medication correctly. If too much medication is drawn into a syringe the remainder (amount above the required dose) should be returned to the bottle before administration. If only a half tablet is administered the remainder should be returned to the bottle or packaging for future administration.

If a course of medication has been completed or medication is date expired, it will be returned to the parent/guardian for disposal.

Spillages

A spill must be dealt with as quickly as possible, and staff are obliged to take responsibility/follow the guidelines. Spillages will be cleared up following the Nursery School's procedures and considering the control of infection. Any spilled medication will be deemed unsuitable for administration and if necessary, parents will be asked to provide additional medication.

The Nursery Schools have additional procedures in place for the management of bodily fluids which are detailed in the Nursery guide to co-hygienic practice

If a Nursery holds any cytotoxic drugs, their management will be separately risk assessed and follow Health and Safety Executive (HSE) guidance.

Record Keeping – Administration of Medicines

For legal reasons records of all medicines administered are kept at the Nursery until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. The pupil's parent/ guardian will also be informed if their child has been unwell during the Nursery day and medication has been administered. For record sheets see **Appendix 2 Template D and E**.

Recording Errors and Incidents

If for whatever reason, there is a mistake made in the administration of medication and the pupil is:

- Given the wrong medication.
- Given the wrong dose.
- Given medication at the wrong time (insufficient intervals between doses)
- Given medication that is out of date.
- Or the wrong pupil is given medication.

Incidents must be reported to the Nursery's Senior Leadership Team who will immediately inform the pupil's parent/guardian. Details of the incident will be recorded locally as part of the Nursery's local arrangements. Local records must include details of what happened, the date, who is responsible and any effect the mistake has caused. A member of the Senior Leadership Team will investigate the incident and change procedures to prevent reoccurrence if necessary. NB: Incidents that arise from medical conditions that are being well managed by the Nursery do not need to be reported or recorded locally.

Staff Training

The Nursery will ensure that staff that will have to administer any medication (Prescribed/non-prescribed) will have completed Managing Medicines in Schools training before they can administer medication to pupils. WSCC provides both e-learning and face to face training courses.

- The Lead and/or designated member of staff who will be overseeing administration of medication should complete a face-to-face course, this can be either a classroom session or Teams webinar.
- Other staff who will be administering medication may also attend face to face training but need to complete as a minimum, the e-learning managing medicines **and** achieve a score of 100% on the managing medicines competency test. Staff should familiarise themselves with the Nursery's medicines policy and other documentation.
- The Nursery Schools will ensure that the staff who administer medicine for specific chronic conditions are trained to administer those specific medicines, for example, Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines can be arranged via the relevant health professionals.
- Nursery staff involved in administering auto injectors or asthma inhalers in an emergency will be trained as part of their paediatric first aid training cycle, or additional training will be organised if a child is enrolled at Nursery with epilepsy.
- All medicines administered, including asthma inhalers will be witnessed by a second member of staff, who has been trained in Managing Medicines. Staff members witnessing the administering of any medication to a child will countersign the Administration of Medication form

A record of all training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

Transport to and from Nursery (For Boundstone Special Support Centre only)

If a medical emergency occurs whilst a pupil is being transported to Nursery the emergency services will be called and the parents informed. With parental consent and following Data Protection Law the pupil's IHP or EHC will be given to those external companies and/or staff providing transportation to and from Nursery, (Taxi, Minibus etc.) in order that the care plan can be passed to the ambulance crew in the event of an emergency.

Educational Visits (Off - site one day)

Staff will administer prescription medicines to pupils when required during educational visits. Parents should ensure they complete a consent form (**Appendix 2 Template C**) and supply a sufficient amount of medication in its pharmacist's container. Non-prescription medicines as detailed in this policy can be administered by staff, pupils must not carry non-prescription medication for self-administration.

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

Risk assessing medicines management on all off-site visits

Pupils with medical needs shall be included in visits as far as this is reasonably practicable. Nursery staff will discuss any issues with parents and/or health professionals so that extra measures (if appropriate) can be put in place. A copy of the pupils IHP or EHP will be taken on the visit and detail arrangements relating to the management of their medication(s) during the visit should be included in the plan.

If a pupil requires prescribed or non-prescribed medication during visit and an IHP or EHP has not been developed and the management of their medication differs from procedures followed whilst in Nursery, the Nursery will conduct a risk assessment and record their findings.

Complaints

Issuing arising from the medical treatment of a pupil whilst in Nursery should in the first instance be directed to the Head of School who will consult with the Executive Headteacher. If the issue cannot easily be resolved at this point the Executive Headteacher will inform the governing body who will seek resolution.

Date: Autumn 2024

To be Reviewed: Autumn 2027