

CHIDDINGSTONE NURSERY SCHOOL CIO

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First Aid Policy and Administering Medicines Policy

Written by	Jill McCoy
Ratified on behalf of Management Committee	July 2020
Date for Review	July 2021
Signed – Chair of Management Committee	
Signed – Nursery Leader	

This policy will be reviewed and ratified at least annually and/or following any updates to national and local guidance and procedures.

This policy has been impact assessed by Jill McCoy in order to ensure that it does not have an adverse effect on race, gender or disability equality.

Policy Statement

In our Nursery all staff members are paediatric first aid trained and are able to take action to apply first aid treatment in the event of an accident involving a child or adult. At least one member of staff with current first aid training is on the premises or on an outing at any one time. The first aid qualification is the relevant paediatric first aid qualification and renewed every three years. The trained staff names are on the notice boards in the Nursery.

It is not our policy to care for sick children who should be at home until they are well enough to return to the Nursery. We will agree to administer medication as part of maintaining a child's health and well-being or when they are recovering from an illness.

In many cases, it is possible for the child's GP's to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given in the Nursery. If a child has not had a medication before, it is advised that the parent keeps the child at home for the first 48 hours to ensure no adverse effect as well as to give time for the medication to take effect.

The Nursery Leader is responsible for ensuring all staff understand and follow these procedures.

The key person is responsible for the correct administration of medication to children for whom they are the key person. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. In the absence of the key person, the Nursery Leader or Deputy is responsible for the overseeing of administering medication.

Procedures

The First Aid Kit

Our first aid kit complies with the Health and Safety (First Aid) Regulations 1981 and contains the following items only:

- Triangular bandages (ideally at least one should be sterile) - x 1.
- Sterile dressings:
 - Small (formerly Medium No 8 10cmx10cm pads) - x 3.minimum.
 - Medium (formerly Large No 9 5cmx5cm) - HSE 1 - x 3minimum.
 - Large (formerly Extra Large No 3 8:3cmx8:3cm) - HSE 2 - x 3.
- Composite pack containing 20 assorted (individually-wrapped) plasters 1.
- Sterile eye pads (with bandage or attachment) e g No 16 dressing 2.
- Container or 2 safety pins 1.
- Guidance card as recommended by HSE 1.

In addition to the first aid equipment, each box should be supplied with:

- 2 pairs of disposable plastic (PVC or vinyl) gloves.
- 1 plastic disposable apron.

- a children's forehead 'strip' thermometer.

Other First Aid Procedures

- Our first aid box is regularly checked by a designated member of staff, Mrs Megan Downing, and re-stocked as necessary with appropriate contents.
- We record accidents that occur out of the Nursery environment in a book specifically for this purpose.
- A record of accidents and first aid treatment is kept in the appropriate book in the Nursery office and parents are informed of any accidents or injuries sustained by the child whilst in the care of the Nursery and of any first aid treatment that has been administered on the same day or when reasonably possible. A separate form is available for staff.
- Ofsted must be notified of any serious accidents, illness or injury, or death of a child whilst in the care and action taken in respect of it. Notification must be made as soon as reasonably practicable, but in the event within 14 days of the incident occurring.
- Parents sign a consent form at registration allowing staff to apply hypo allergenic plasters.
- The first aid box is easily accessible to adults and is kept out of the reach of children and is stored in a cupboard in the Nursery office and the cupboard has first aid sign on door.
- A small first aid pack is taken in the outing bag on excursions in grounds or further and first aid box taken on outings.
- First aid points are part of the Nursery information and risk assessment prior to outings and visits.
- At the time of admission to the Nursery, parents' written permission for emergency medical advice or treatment is sought. Parents sign and date their written approval.
- We regularly consult with parents to ensure that our records of their children are up-to-date. Parents sign the up-dated record to signify that it is correct. These are stored in individual's portfolio in the red lockable cupboard.
- Training is sought in the case of a child who suffers from a severe allergic reaction, such as the use of an EpiPen in the case of an emergency.
- Parents sign a consent form on admission allowing children in an emergency to be taken to the nearest Accident and Emergency unit to be examined, treated or admitted as necessary.
- Parents provide information about the child's needs for medicines, allergies and special health requirements on the admission form.

- The Nursery promotes the health for children attending, healthy practices and provides information responding to children who are ill and infectious, taking the necessary steps to prevent the spread of infection and take appropriate action if children or staff are ill.
- The Nursery keeps on file information of common infections and signs and symptoms to be aware of.
- Children that may have a bump to the head have an information leaflet on concussion and the signs and symptoms to take home to advice parents. These children will wear a wrist band informing every one of the injury. Parent/carers are informed of their child's bump to the head by phone, should they choose to bring their child home to monitor personally. The nursery has a bump to the head monitoring check list to observe the child after the bump to the head.
- A community defibrillator is situated in the post box in the village to be used in the case of an emergency. The access code is C1. Follow instructions on the defibrillator and then call 999 or 111.

Procedures for administration of medication

- Children taking prescribed medication must be well enough to attend the Nursery.
- Only prescribed medication is administered. It must be in-date and prescribed for the current condition by a doctor, dentist, nurse or pharmacist.
- Children's prescribed medicines are stored in their original containers, stored at the correct temperature, are clearly labelled and are inaccessible to the children,
- Parents give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:
 - i. full name of child and date of birth;
 - ii. name of medication and strength;
 - iii. who prescribed it;
 - iv. dosage to be given in the setting;
 - v. how the medication should be stored and expiry date;
 - vi. any possible side effects that may be expected should be noted; and
 - vii. signature, printed name of parent and date.
- The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record book to acknowledge the administration of a medicine. The medication record book records:
 - i. name of child;

- ii. name and strength of medication;
 - iii. the date and time of dose;
 - iv. dose given and method; and is
 - v. signed by key person/manager; and is verified by parent signature at the end of the day.
 - vi. Parents signature.
- The Nursery is not permitted to administer any over the counter medication to children.
 - No child under the age of 16 years will be given medicines containing aspirin unless it has been provided by that child's doctor.
 - Parent/Carers are informed of administration of medicines each time provided to their child at the Nursery on the same day or as soon as reasonably practicable.

Storage of medicines

- All medication is stored safely in an out of reach cupboard or refrigerated in the Nursery office. The cupboard and refrigerator is not used solely for storing medicines, a separate marked plastic box is provided for safe storage.
- The child's key person, Nursery leader or deputy is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the Nursery. Key person checks that any medication held to administer on an as and when required basis, or on a regular basis, is in date and returns any out-of-date medication back to the parent.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant members of staff by a health professional.
- If rectal diazepam is given another member of staff must be present and co-signs the record book.
- No child may self-administer. Where children are capable of understanding when they need medication, for example with asthma, they are encouraged to tell their key person what they need. However, this does not replace staff vigilance in recognising and responding when a child requires medication.
- Medication that may be in staff personal belongings will be stored in the heating cupboard or in locked cupboard in the office.
- Children's medicines will be kept in the staff cupboard or fridge as required and staff of the day will be informed.

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

- A risk assessment is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the Nursery Leader alongside

the key person. 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 be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.
- 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. The training requirements of staff is part of the risk assessment.
- The risk assessment includes vigorous activities and any other Nursery activity that may give cause for concern regarding an individual child's health needs.
- The risk assessment includes arrangements for taking medicines on outings and the child's GP's advice is sought where there are concerns.
- A health care plan for the child is drawn up with the parent; outlining the key person's role and what information must be shared with other staff who care for the child.
- The health care plan should include the measures to be taken in an emergency.
- The health care plan is reviewed every six months or more if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents read a copy of the health care plan and each contributor, including the parent, signs it.

Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children may include the key person for the child with a risk assessment, or in their absence another member of staff who is fully informed about the child's needs and/or medication.
- Medication for a child is taken in a sealed plastic box clearly labelled with the child's name, name of the medication. Inside the box is a copy of the consent form and a card to record when it has been given, with the details as given above.
- On returning to the setting the card is stapled to the medicine record book and the parent signs it.

- If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box clearly labelled with the child's name, name of the medication. Inside the box is a copy of the consent form signed by the parent.
- This procedure is read alongside the outings procedure.
- The accident book, medication administration and accident at home record book are all situated in the locked filing cupboard in the office.
- All accidents are reviewed termly to ensure children's well-being and safeguarding issues are monitored.
- These records are stored in a locked cabinet from the child's date of birth and 25 years.

Covid 19 Addendum

- If anyone in a childcare care setting becomes unwell with a new, continuous cough or a high temperature, or has a loss of, or change in, their normal sense of taste or smell, they must be sent home and advised to follow the [guidance for households with possible coronavirus infection](#).
- If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, with appropriate adult supervision. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, move them to an area which is at least 2 metres away from other people. Use listening area if they need to lie down and staff use office.
- If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.
- PPE should be worn by staff caring for the child while they await collection if direct personal care is needed and a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs).
- If a member of staff has helped someone with symptoms they do not need to go home unless they develop symptoms themselves. They should wash their hands thoroughly for 20 seconds after any contact with someone who is unwell. Cleaning the affected area with normal household disinfectant after someone with symptoms has left will reduce the risk of passing the infection on to other people.
- Line managers will maintain regular contact with staff members during this time.

- If advised that a member of staff or public has developed Covid-19 and were recently on our premises (including where a member of staff has visited other work place premises such as domestic premises), the management team of the workplace will contact the Public Health Authority to discuss the case, identify people who have been in contact with them and will take advice on any actions or precautions that should be taken. <https://www.publichealth.hscni.net/>
- Infected children and/or staff at home self- isolation for 7 days and family members self- isolate for 14 days. Staff and their families entitled to Covid 19 testing to ensure safety of staff returning to work. Follow government guidance on self - isolation.

Legal Framework

- Health and Safety (First Aid) Regulations (1981)
- The Human Medicines Regulations (2012) Amended 2016

Further Guidance

- First Aid at Work: Your questions answered (HSE 2019)
www.hse.gov.uk/pubns/indg214.pdf
- Basic Advice on First Aid at Work (HSE 2017)
www.hse.gov.uk/pubns/indg347.pdf
- Guidance on First Aid for Schools (DfEE)
www.teachernet.gov.uk/_doc/4421/GFAS.pdf
- Managing Medicines in Schools and Early Years Settings (DfES 2005)
<http://publications.teachernet.gov.uk/eOrderingDownload/1448-2005PDF-EN-02.pdf>

Chiddingstone Nursery School



Parental Agreement for setting to administer medicine.

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of setting	Chiddingstone Nursery School
Name of child	
Date of birth	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

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

Signature(s) _____

Date _____

Individual Care Plan	
<p>Child's Name:</p> <p>D.O.B.</p> <p>Address:</p> <p>Key person:</p>	<div style="border: 1px solid black; width: 100%; height: 100%;"></div>
<p>Professionals supporting the child: (GP, consultant, clinic)</p> <p>Name: Contact No:</p>	
<p>Name / Type of medication Expiry date:</p> <p>Dosage and method of administration:</p> <p>Where will this be stored?</p> <p>Who will administer the medication? (child under supervision / key person)</p> <p>Side effects of medication:</p>	
<p>Medical diagnosis or condition (briefly outline nature of condition)</p> <p>Symptoms: (what to look out for)</p>	
<p>Strategies required to meet the child's additional need. (Daily care requirements, special precautions).</p>	
<p>What constitutes an emergency for your child and the action to take if this occurs?</p>	
<p>In the event of intervention by the emergency services who will accompany / support the child until</p>	

the parent/carer arrives.

Who to contact in an emergency situation:

Names:

Relationship:

Emergency contact No.

Mobile:

In conjunction with the setting policy and procedure regarding the administering of medication reflecting the statutory requirements within the EYFS 2014, we, the undersigned consent to this agreement:

PARENT

KEY PERSON

Signature:

Signature:

Print name:

Print name:

Monitored and reviewed with the parent.

Comments.

Next review date.