

SICK CHILD POLICY INCLUDING ADMINISTRATION OF MEDICATION	
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## SICK CHILD POLICY INCLUDING ADMINISTRATION OF MEDICATION

Windmill Hill City Farm has a responsibility to ensure that each child is provided with a healthy and safe environment. This policy is to promote the good health of the children in our care and support staff, parents, carers, and volunteers in the event of a child being unwell, in line with the Early Years Foundation Stage Statutory Framework.

### General Sickness

#### Parent/Carers responsibilities

- To ensure we have up to date contact details for parent/carers and emergency contacts who we may contact if your child is unwell while in our care.
- If a child is unwell, please do not bring them to our setting. We have a duty of care to all children and families and a responsibility to minimise and reduce the risk of illness and infection.
- If a child has an unidentified rash, please seek medical advice before bringing your child to our setting. We need to ensure the rash is not contagious to others and your child is well enough to attend.
- If a child has a cold/cough virus and is showing no other symptoms of being unwell they may continue attending all services, providing they are well enough and do not have a raised temperature (or have had in the last 24hours), continued cough, are unable to eat or are generally not themselves as this indicates that they are not well enough to be in.
- If a child has sickness and/or diarrhoea, they must be kept away from the setting for a **minimum of 48 hours after the last episode** of sickness and/ or diarrhoea.
- If a child has a high temperature, whether accompanied by other symptoms or not, they must be kept away from the setting for a **minimum of 24 hours plus 4 hours if pain or fever relief has been administered** e.g., if pain or fever relief was administered at 8.00am then they can return to the setting at or after 12 noon the following day.
- If a child has been diagnosed with conjunctivitis, which is very contagious, we request that you keep them away from the setting for the first twenty-four hours whilst the condition is being treated. After the first day's application we are happy to accept the child providing they are well within themselves. We will continue to apply the ointment at the required times providing a short-term medication form has been completed.
- If a child has been prescribed a new medication or antibiotic, generally they may not be well enough to attend our setting. **After twenty fours** of administering the child with the new medication or antibiotic, and providing they are well enough within themselves, they may return to the setting, and we will continue to administer the medication providing a short or long-term medication form has been completed.

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- If a child is on an antibiotic for an on-going medical condition, they may attend the setting providing the child is in overall good health.
- When a child returns to the setting following an absence due to being unwell, staff will liaise with you to ensure that the child is well enough to attend. Please ensure all relevant information is shared.
- We request that any parents or carers with an infectious illness, refrain from coming into the setting, we will work with you and support you at drop off and pick up times, providing your child is well enough to attend and any exclusion periods do not apply to them.

### Setting responsibilities

- If a child becomes unwell while in our care, they will be cared for sensitively i.e., we will ensure they are comfortable, offer reassurance and will monitor and keep under observation.
- If a child becomes unwell while in our care and we do not consider them as being well enough to attend, we will contact you and give precise details of your child's condition. We would discuss the best course of action and request you come and collect your child. We would expect you to collect your child within the hour of us contacting you.
- If a child becomes unwell while in our care and we cannot contact you or any of the named emergency contacts provided, we may make the decision to seek medical advice and attention for your child.
- If a child becomes seriously ill while in our care, we will seek medical advice and attention and contact you as soon as possible.
- If a child develops an increased temperature whilst at our setting, we will follow our Emergency Administration of non-prescribed fever relief procedure (page 4).
- As a setting we work with and follow the guidance on infection control in schools and other childcare settings from the UK Health Security Agency. [Health protection in children and young people settings, including education - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/health-protection-in-children-and-young-people-settings-including-education)
- In the case of an outbreak of a notifiable disease we will contact our local Health Protection Team and seek and follow their advice accordingly. [Find your local health protection team in England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/find-your-local-health-protection-team-in-england)
- If a child has a serious illness which may cause risk to others or results in hospitalization, we have a duty to report this to RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013) and in some case Ofsted.

### Medical needs and Administration of Medication

We believe that children with medical needs have the same rights of admission to the setting as other children. We will work with parents, the child and relevant health care professionals to enable this to happen whilst ensuring the safety of staff and children and recognising that there may be circumstances in which

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this is unable to occur e.g., with complex medical procedures.

If a child attends without their medication, we can refuse to accept your child until the required medication has been provided as staff want to ensure that they minimise the deterioration of your child's health/well-being, particularly when the medication is life-preserving, such as an asthma inhaler.

### Long-term medical needs

Some children may have long-term medical needs, which may require medication on a long-term basis to keep them well, for example children with asthma, epilepsy, or cystic fibrosis.

To support a child with long-term medical needs we will:

- Arrange a meeting between the child's key person and the parent and/or carer to discuss the medical condition and support needed.
- All information regarding the child's long-term health needs will be recorded on a Health Care Plan form, agreed, and signed by the parents/carers and the staff member.
- A long-term medication form will be completed by the parent and/or carer.
- The Health Care Plan and long-term medication form will be shared with all staff members working with the child.
- We will ensure any necessary training required to manage the child's medical need is completed prior to them starting, such as tube feeding, administering of insulin for diabetes.

### Prescription Medicines for long term medical needs

We will administer prescribed medication for long term medical needs provided:

- the child is well enough to attend the setting.
- They have been on the medication consistently for a minimum of 24 hours.
- All prescription medicines are supplied with:
  - Original container as dispensed by the pharmacist.
  - The prescriber's label with instructions of administration attached.
  - The patient information leaflet enclosed (where provided).
- A long-term medication form has been completed with clear directions for administering and consent provided.
- A health care plan has been shared, if in place and applicable.

Please note: We are not able to accept or administer medication that has been taken out of its original container or make changes to dosages or times on parental instruction.

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Some common prescription medications include inhalers, Chlorphenamine, ranitidine:

Medication	Used for
Inhalers	Asthma, wheeziness, breathlessness, and chronic obstructive pulmonary disease
Chlorphenamine	Hay fever, allergies including insect bites and stings, skin allergies, nettle rash and hives and food allergies
Adrenaline auto-injector	Emergency treatment of severe allergic reactions ( <i>anaphylaxis</i> ) to insect bites, insect stings, food, medication, as well as other allergens
Ranitidine	Reducing the amount of acid in the stomach and to treat and prevent ulcers

### Prescription Medicines for short term medical needs

Many children may need to take medicines for a short period of time, for example finishing a course of antibiotics or applying a lotion.

We will administer prescribed medication for short term medical needs provided:

- the child is well enough to attend the setting.
- They have been on the medication consistently for a minimum of 24 hours.
- All prescription medicines are supplied with:
  - Original container as dispensed by the pharmacist.
  - The prescriber's label with instructions of administration attached.
  - The patient information leaflet is enclosed (where provided).
- A short-term medical form has been completed with clear directions for administering and consent provided.

Please note: We are not able to accept or administer medication that has been taken out of its original container or make changes to dosages or times on parental instruction.

### Non-prescribed medication

We will administer children with non-prescribed creams and lotions for skin conditions, such as mild eczema or nappy rash. We understand different creams work more effectively on different skin and will work with the parent/carers in treating the condition as best identified.

We will administer non-prescribed creams and lotions provided:

- the child is well enough to attend the setting.
- The lotion and cream have been consistently applied for a minimum of 24 hours.

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- All creams and lotions are supplied with:
  - Original container.
  - The patient information leaflet is enclosed (where provided).
- A short or long-term medical form has been completed with clear directions for administering and consent provided.

Please note: We can only administer creams and lotions for the purpose of and as directed (i.e., dosage and frequency relevant to the age of the child) on the packaging and we are not able to accept or administer medication that has been taken out of its original container or those containing aspirin.

In the instance the skin condition appears aggravated or infected we will inform the parent/carers and advise getting medical advice.

### Emergency administration of non-prescribed fever relief (i.e., liquid paracetamol)

We will keep an emergency supply of liquid paracetamol that is appropriate for the age of the children in our setting and will request written consent to administer fever relief in an emergency from the parent/carer on our admissions form for the purpose of managing a high temperature only.

We will follow the NHS advice and recommendations of what constitutes a high temperature in a child, this is currently 38c.

[High temperature \(fever\) in children - NHS \(www.nhs.uk\)](http://www.nhs.uk)

If a child appears to and/or has a confirmed high temperature, we will:

- Monitor the child's temperature and record in the room diary 3 temperature levels over 10 minutes, this is to ensure that we have a temperature reading as accurate as possible for the child.
- We will ensure the child is comfortable in a quiet space, pat them down with a cold flannel, strip off unnecessary clothing and offer them some water to drink.
- Contact and inform you that your child has a high temperature and needs to be collected. If we are not able to contact you, we will contact the emergency contacts you have provided.
- If a child has been in our care for four hours and under, we will need your consent and confirmation that liquid paracetamol has not been administered within a four-hour window.
- If it is more than four hours, we will seek consent to administer another dose of non-prescribed fever relief as stated on the manufacturer's dosage instructions. If we cannot make contact with you, the child has been in our care for four hours or longer and you have given consent to administer non-prescribed fever relief on your admissions form, we will go ahead and administer a dose of liquid paracetamol.

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- Follow the manufacturers guidance around how to administer and the dosage relevant to the child's age and log the date, time and dosage given to the child.
- We will continue taking temperature readings every 10 minutes and monitoring this and their general wellness.
- On collection of the child the parent/carer must sign the administration of paracetamol log form and confirm they have been informed of the date, time and dosage was given.
- If we unable to contact you or any of the emergency contacts, and we do not have consent to administer liquid paracetamol and it has been less than four hours. We will continue to monitor and ensure the child is comfortable. If the temperature continues as it is or rises, we may ring 111 or the emergency services depending on the overall well-being of the child.

### Training

Staff may need training before administering certain types of medication e.g., inhalers, adrenaline auto-injector, buccal midazolam.

- Training could be in the form of relevant books, videos and/or accessing external training, either online or in person.
- External training from a qualified health professional must be accessed for staff before undertaking any complex or intrusive procedures or ones which require technical or medical knowledge.
- Any staff member who has attended any training regarding administration of medication or a specialised health subject will retain a record of any training accessed.

### Administering medication

When administering medication, all staff will administer medication to the child in a sensitive and caring manner and follow the procedure below:

- Medication will be collected and expiry date, condition, shelf life and prescription label (if applicable) will be checked.
- Medication form will be checked.
- Medication dose will be measured out (if applicable)
- Medication will be administered to child.
- All relevant sections of the medication form will be completed.
- Person administering medication will be witnessed at all points from start to finish by a staff member, who will counter sign the medication form.
- Medication form will be checked and signed by parent/carer at pick up time.
- If a child refuses to take their medication, staff will explain why the medication is important for them and what could happen if they do not take it. If the child still refuses, then staff will inform the

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parent's/carers or seek medical advice if necessary. This will be recorded on the administration of medication form with the date and time the child declined the medication.

*There is no legal duty for staff to administer medication but generally this will be part of their contract of employment. No staff will administer medication without the consent of the parent/carer or if they do not feel competent to do so.*

### Recording

In the case of a short- or long-term healthcare need a health care plan form must be completed. The forms will include name of child, medication and expiry date, dosage, date, time, name of staff member/s administering/supervising, name of witness as appropriate and the signature of the parent/carer at the end of the session/day. The senior team or nominated staff member/s will take responsibility for administering and recording.

We are not permitted to administer any medication where consent forms have not been completed; this may result in your child being unable to attend the setting.

For the administration of non-prescribed fever relief an administration of non-prescribed fever relief form will be used.

For short-term medical needs an administration of medication form will be used.

For long-term medical needs an administration of medication form and a Health Care Plan will be used.

A COSHH risk assessment form will be completed for all medication and either a physical or electronic a copy of the patient information leaflet will be taken.

All records relating to the medical needs of any child and the administration of medication will be stored confidentially within the setting. Information will be shared with staff as necessary.

### Storage of medications

- All medication must be stored in a suitable, safe, and accessible place according to manufacturer's instructions e.g., out of direct sunlight, in a refrigerator etc.
- Medication will be stored out of reach of the children and generally in the office unless it is life threatening medication which will in this instance be kept in a clearly labelled box with the child's name allowing it to be easily accessible.
- All medication must be stored in their original packaging with the patient information leaflet otherwise it will not be administered.
- Old medication will be given back to the parent/carer or taken to the pharmacy for safe disposal.

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### Outings

Any required medication will accompany the child on any trips or outings, along with the relevant medication form and/or healthcare plan to ensure medication can be administered as it would normally be in the setting.

### Mistakes

If a mistake occurs when administering medication, this needs to be reported to a Senior member of staff immediately. We will inform parents/carers and seek medical advice as appropriate.

If a staff member forgets to give a child their medication at the allocated time as recorded on the form, they will call the parent/carer to check when that dosage should next be given. They will also notify a Senior staff member of this incident so that they are aware of this and are able to support the situation if required.

Mistakes will be recorded on the medication form and an Incident Form as appropriate. A Senior staff member will investigate how it happened and how we can prevent it from happening again.

The Registered Person for the setting also needs to be informed i.e., Chief Executive/Board of Trustees. Ofsted or RIDDOR may also need to be contacted.

### Queries or concerns

If a staff member is concerned about a medication or a dose level, then the staff member will not administer the medication. Concerns or queries will be passed onto a senior staff member and then discussed with the parent/carers or seek medical advice as appropriate. Mistakes can be made on labels for example, and it is our responsibility to check in advance rather than administer a medication incorrectly. All queries and concerns will be noted.

### Fees

If your child does not attend their usual session due to sickness, fees will be charged as usual as your child's booked session cannot be filled by anyone else.

In exceptional circumstances negotiation can take place to reduce fees due to lengthy illness by the main parent/carer or child. This can only be authorised by the Chief Executive/Board of Trustees.

### Law

We recognise that we **do not** have a legal responsibility to administer medication. We recognise that we **do** have a responsibility under the Equalities Act 2010 to be inclusive and not treat a child less favourably because of their medical needs.

### Responsibilities of Management/Senior staff

- To ensure a safe and clear policy and procedure is in place.
- Where necessary to liaise with the Farm insurers and follow any recommendations as advised and



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ensure that if staff follow procedures that they will be covered if there is a complaint.

- To arrange, with the Senior team, who should administer medicines within the setting. The responsible individuals must be confident and competent in doing so and ensure that they fully understand their responsibilities.
- To provide appropriate training for staff where necessary.
- To assess the risks to the health and safety of staff and others and to put measures in place to manage any identified risks.
- To support all individuals in fulfilling their responsibilities.
- To make the final decision about whether a child can access the setting as we do not want to fail any child with regards to their well-being.
- To ensure that no students or volunteers administer any medication.
- To ensure all parents and staff are aware of the policy and procedure and support them in the understanding of it.
- To support all staff members if any questions or queries arise.

### Staff responsibilities

- To understand and work with the documented procedure.
- To work in partnership with parents and carers.
- To liaise openly with parents, staff, and Farm management with regards to any child's well-being.
- To ensure staff themselves put policy into practice and follow documented procedures.
- To be aware of any side effects of the medication being administered.
- To feedback any concerns to parent/carers and the Manager/Deputy Manager.

### Parents/carers responsibilities

- To provide factual and accurate information about their child's medical condition and work in partnership with the setting to reach an agreement on the settings role in supporting their child's need.
- To discuss with the prescriber whether dose times can be altered so it is outside the hours of the service/nursery provision.
- To provide medication, which is in date and in its original, labelled container/box with the prescription label and including the patient information sheet.
- To complete all necessary health care forms as appropriate.
- To obtain details from GP or prescribing specialist as requested.
- To inform staff in writing of any changes to medication.

**This policy works in conjunction with the CFS Health & Safety Policy and Partnership with Parents and Carers Policy.**