



St Marys Pre-School  
St Marys Cathedral Hall  
Regent Street  
Wrexham  
LL11 1RB

[stmaryspreschoolwrexham@hotmail.com](mailto:stmaryspreschoolwrexham@hotmail.com)

## **12 Medication policy and procedure (including treatment of asthma and any ongoing medical conditions)**

**St Marys Pre-School does not accept children who are unwell at the time of arrival at the provision.**

**This policy relates to:**

- Children who become unwell while attending St Marys Pre-School and the health care policy
- The medication management for children in specific circumstances and links to the contract for parents, admissions policy and equality and inclusion policy.

**It is the policy of St Marys Pre-School to support any child who becomes unwell during their time in our care; and to welcome children who require prescribed medication to be administered to maintain their wellbeing while attending this provision, in line with the equality and inclusion policy.**

**We do this by operating the following procedure:**

- In the event of a child becoming unwell, their needs are assessed and met as far as practicable, and the health and safety policy is implemented
- Parents will be contacted and asked to pick their child up as soon as possible. During this time the child will be cared for in a quiet, calm area with their key person
- Medication such as Calpol will be administered only if verbal consent is agreed at the time of the need (this can be by telephone) and written consent is kept within the parent's contract and registration forms – records are completed and signed by parents at the end of the same day
- Parents complete the contract and registration form at admission and provide information about any changes to their child's health needs as soon as is practicable
- Medication is administered only if it is prescribed by the child's doctor, is provided in the original container and label, with instructions and possible side effects included
- Parents must give the first dose of any medication to their child in case of any adverse reaction
- Parents' written permission is obtained before any medication is administered
- St Marys Pre-School checks that any medication given conforms to the provision's insurance policy requirements
- All adults in St Marys Pre-School know who is responsible for administering medication at any time

- In circumstances where technical or medical knowledge is required for specific medication to be administered to a child St Marys Pre-School may arrange for a nominated person to be trained by a qualified health professional, prior to the admission of the child, and update the training as needed (in agreement with parents)
- Medicines are stored at the correct temperature, temperatures checked, and records kept
- Medicines are returned to parents after the prescribed period of treatment
- All medication is inaccessible to children at all times and kept in a locked cabinet/fridge (immediate access is enabled as necessary)
- Medication that is found to be out-of-date is not administered
- Written information about when the medication was last administered is obtained from the parent
- Medication is administered to a child only by a delegated and trained adult
- The time and dosage of medicine given (including the amount taken by the child – full or partial dose) is recorded and witnessed by another designated adult/member of staff in the provision
- The parent is required to sign the record of administration of medication on the same day when they collect the child or if this is a long term medication the parent is only required to sign once a month so long as nothing changes i.e. dosage.
- Records relating to medication administered are kept in line with St Marys Pre-School's confidentiality policy and retained in line with regulatory and insurance company requirements
- If a contagious infection is identified in the setting, parents will be informed to enable them to spot the early signs of this illness. All equipment and resources that may have come into contact with a contagious child will be cleaned and sterilised thoroughly to reduce the spread of infection
- Children are not subjected to the usual 'busyness' of a normal day, which requires socialising with other children and being part of a group setting, when they have first become ill and require a course of antibiotics. Our policy, therefore, is to exclude children on antibiotics for the first 24 hours of the course and with at least two doses administered
- The setting has the right to refuse admission to a child who is unwell. This decision will be taken by the manager on duty and is non-negotiable
- Information about head lice is readily available and all parents are asked to regularly check their children's hair
- Staff wear/use personal protective equipment in line with guidance in the All Wales Guidance for Infection Prevention and Control for Childcare Settings (0 – 5 years).

### **Asthma policy and procedure**

**It is the policy of St Marys Pre-School to promote an effective partnership between all concerned to promote the safety, welfare and best interests of any child with asthma in our care.**

### **We do this by:**

- Encouraging and supporting children with asthma to participate fully in activities
- Ensuring children have immediate access to their reliever inhalers
- Providing guidance for staff on what to do if a child has an asthma attack and ensuring the child's welfare in the event of an emergency. This includes:
  - Access to appropriate asthma training for staff as needed
  - Key workers/staff recognising when a child's asthma symptoms worsen
- Ensuring that parents of children who develop asthma after they have started at St Marys Pre-School are informed about this policy and given a copy.

### **When a child with asthma attends the setting we discuss their needs with their parents.**

#### **This includes:**

- Discussing the level or degree of the child's condition
- Establishing how we can recognise when symptoms get worse – any triggers that the child is known to be sensitive to
- Ensuring the child has immediate access to their reliever inhaler as prescribed, keeping it in an easily accessible place and making sure all relevant people - especially the child - know where to find it
- Ensuring that written records are kept clearly detailing information of what medicine is to be taken, when and how often
- Informing parents that:
  - The inhaler must be prescribed for the child, labelled clearly with their full name
  - It must not have passed its expiry date
  - A record is kept each time a child uses their inhaler
  - Medication left in the setting must be checked regularly and parents informed if and when replacements are needed
- Asking parents to bring a spare inhaler to be kept at our provision in case of an emergency.
- Keeping and using emergency contact details for next of kin but in the case of an emergency dial 999 (in line with our registration form)
- Making sure the person collecting the child is informed if the child has had to take their medicines and to sign the form (in line with our medication policy)
- Making sure that inhalers are always taken on our trips (in line with our outings policy)
- Parents are also referred to our admissions and equality and inclusion policies and procedures.

### **Children with longer term/ongoing medical conditions**

**It is the policy of St Marys Pre-School to promote an effective partnership between all concerned to promote the safety, welfare and best interests of any child with an ongoing medical condition in our care.**

#### **We do this by operating the following procedure:**

- Discussing each child's individual needs with their parents and agreeing how we can best support their child while in our care
- Encouraging and supporting all children to participate fully in activities
- Ensuring children have immediate access to any self-administered medication as is appropriate to their age and stage of development and making sure all relevant people - especially the child - know where to find it

- Providing guidance, and where needed, training for staff which best supports the child while in the setting and ensures the child's welfare in the event of an emergency
  - Any training to administer specific medication will be delivered by the appropriate health professional
- Ensuring that written records are kept clearly detailing information of what medicine is to be taken, when and how often
- Informing parents that:
  - Any on-going medication prescribed for their child is labelled clearly with their full name
  - It must not have passed its expiry date
  - A record is kept each time it is used
  - Any on-going medication left in the setting must be checked regularly and parents informed if and when replacements are needed
- Keeping and using emergency contact details for next of kin but in the case of an emergency dial 999 (in line with our registration form)
- Making sure the person collecting the child is informed if the child has had to take their medicines and to sign the form (in line with our medication policy)
- Making sure that any ongoing medication is taken on our trips if relevant (in line with our outings policy)
- Parents are also referred to our admissions and equality and inclusion policies and procedures.

**Exclusion Periods:** If a child or member of staff becomes ill outside of operational hours, they should notify the setting as soon as possible. The minimum exclusion periods outlined below will then come into operation.

**Illness exclusion required - this list is not exhaustive please contact health professionals if in any doubt:**

Illness	Exclusion Period
Antibiotics prescribed	24 hours of the course with at least 2 doses administered for medication that has not previously been prescribed
Chicken Pox	5 days from when the rash first appeared
Conjunctivitis	After medication
Diarrhoea/Sickness	48 hours clear
Diphtheria	2-5 days
Gastro-enteritis, food poisoning	48 hours or until advised by the doctor
Salmonella and Dysentery	48 hours or until advised by the doctor
Glandular Fever	Until certified well
Hand, Foot and Mouth disease	During acute phase and while rash and ulcers are present
Hepatitis A	5 days from onset of jaundice and when recovered
Hepatitis B	Until clinically well

Impetigo	Until the skin has healed
Infective hepatitis	7 days from the onset
Measles	7 days from when the rash first appeared
Meningitis	Until certified well
Mumps	5 days minimum or until the swelling has subsided
Pediculosis (lice)	Until treatment has been given
Pertussis (Whooping cough)	5 days from antibiotics or 21 days from onset of illness if no antibiotic treatment
Plantar warts	Should be treated and covered
Poliomyelitis	Until certified well
Ringworm of scalp	Until cured
Ringworm of the body	Until treatment has been given
Rubella (German Measles)	5 days from onset of rash
Scabies	Until treatment has been given
Scarlet fever and streptococcal	5 days from the start of the treatment
Tuberculosis	Until declared free from infection by a doctor
Typhoid fever	Until declared free from infection by a doctor
Warts (including Verrucae)	Exclusion not necessary, should keep feet covered
Norovirus	48 hours clear
E. coli	Excluded minimum of 48 hours – under 5s until evidence of microbiological clearance

This **medication, asthma and on-going medication** policy and procedure was passed for use in St Marys Pre-School

On:

By: Position:

Date of planned review: