

Safeguarding and Welfare Requirement: Medical emergency procedure

The aim of an emergency plan is to help staff respond effectively to an emergency. At all times the administration of medication must be compliant with the Welfare Requirements of the Early Years Foundation Stage and follow procedures based on advice given in Managing Medicines in Early Years Nursery.

3.3 Specific medical emergencies procedures

Some children may have specific conditions, which may necessitate emergency treatment, for example:

- Children with severe allergies
- Children with epilepsy
- Children with diabetes

An individual care plan must be available for each child.

Staff should check expiry dates on all emergency drugs on a monthly basis and this should also be recorded.

Staff must have specific training in dealing with specific medical emergencies relevant to the child/ren in their care and this should be done in conjunction with the Parents /Carers and relevant professionals.

“When children have accidents or incidents within the Nursery, an accident/incident form must be completed with the details of the accident and first aid applied to the child.

The child’s parents must be informed at the end of the day of the accident and they will be asked to sign the accident/incident book.

If the accident was serious and the child’s condition requires him/her being taken to hospital, GP or a pharmacy to seek medical help, parents must be informed before the child leaves the Nursery’s premises or while the child is receiving the treatment if we cannot reach parents beforehand”.

Children with allergies procedures

When parents register their child at the Nursery they are asked if their child suffers from any known allergies. This is recorded on the child’s personal information form.

If A Child Has An Allergy, A Risk Assessment Form Is Completed To Detail The Following:

- The allergen (i.e. the substance, material or living creature) the child is allergic to such as nuts, eggs, bee stings, cats etc.
- The nature of the allergic reactions e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.
- What to do in case of allergic reactions, any medication used and how it is to be used (e.g. Epi pen).

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- Control measures – such as how the child can be prevented from contact with the allergen

This form is kept in the child's personal file and the Child's requirements are added to the Special Diets List (devised for all Nursery children who have allergies or special diet requirements) displayed where staff can see it, in all rooms, the kitchen and the office.

Parents should make necessary arrangements with their GP or Health Practitioner to train staff on how to administer special medication in the event of an allergic reaction.

Generally, no nuts or nut products are used within the Nursery, or to be brought in by parents in children's packed lunch or snack bag

Parents are made aware of this so that no nut or nut products are accidentally brought in.

The procedure for administering medication is as follows:

Medication will never be given without the prior written consent of the parent/carer and a written and signed instruction from the child's GP, including frequency, dosage; any potential side effects and any other pertinent information (see Administering Medication Consent Form).

A member of staff (mainly the key person) will be assigned to administer medication for each individual child concerned. They will also be responsible for ensuring that:

- Prior consent is arranged.
- All necessary details are recorded on the Medication Consent Form.
- That the medication is properly labelled and safely stored during sessions.
- The label on the medication corresponds with completed information on the Administration of Medication Consent Form
- If a reaction occurs, this is recorded in the medication form. The child's parents and G.P. should be contacted immediately.
- Another member of staff acts as a witness to ensure that the correct dosage is given.
- Parents/carers sign the Medication Record form to acknowledge that the medication has been given
- If for any reason a child refuses to take their medication, staff will not attempt to force them to do so against their wishes. If and when such a situation occurs, the Manager and the child's parent/carer will be notified, and the incident form to be completed.

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Staff will not administer 'over the counter' medication, only that prescribed by the child's **GP**. If there is any change in the type of medication – whether regarding dosage or other changes to the information given on the Administering of Medication Consent Form – a new form must be completed.

A new medication form must be completed daily even if the child is having a course of medication which will last for some days.

Full details of all medication administered along with all Administration of Medication Consent Forms, will be recorded and stored in the Medication Record Folder kept in the office.

Insurance requirements for children with allergies and disabilities

The insurance will automatically include children with any disability or allergy but certain procedures must be strictly adhered to as set out below.

For children suffering life threatening conditions, or requiring invasive treatments, a written confirmation from our insurance provider must be obtained to extend the insurance.

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Asthma inhalers are now regarded as "oral medication" by insurers and so documents do not need to be forwarded to the insurance provider.

- Oral medications must be prescribed by a **GP** or have manufacturer's instructions clearly written on them.
- The Nursery must be provided with clear written instructions on how to administer such medication.
- All risk assessment procedures need to be adhered to for the correct storage and administration of the medication.
- The Nursery must have the parents or guardians prior written consent. This consent must be kept on file. It is not necessary to forward copy documents to the insurance provider.

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Life saving medication & invasive treatments

Adrenaline injections (Epi pens) for anaphylactic shock reactions (caused by allergies to nuts, eggs...etc) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

The Setting Must Have:

- A letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;
- Written consent from the parent or guardian allowing staff to administer medication.
- Key person to have the relevant medical training/experience, which may include those who have received appropriate instructions from parents or guardians, or who have qualifications.
- After administering the medication, If the child appears unwell during the day have a fever, sickness, diarrhoea or pains, particularly in the head or stomach
- The Key Person/Manager should call the Parents and ask them to collect their child, or send a known carer to collect them on their behalf.
- If a child has a fever, they are kept cool, by removing top clothing, sponging their heads with cool water, but kept away from draughts.
- Parents are asked to take their child to the doctor before returning them to Nursery; the Nursery can refuse admittance to children who have a fever, sickness and diarrhoea or a contagious infection or disease.

Reporting of 'notifiable diseases'

When the setting becomes aware, or is formally informed of the notifiable disease, the manager informs **RIDDOR** and acts on any advice given by **the Health Protection Agency**. The Lewisham council Environmental Health department must be informed of the situation as soon as it occurs for guidance and advice.

Exclusion procedure for illness/ communicable disease

If a child is unwell they should not be in any care provision-not only to prevent the risk of infection spreading, but also because constant nursing and attention may be needed. If a child becomes unwell whilst in Nursery care, Parents/Carers will be asked to collect their child immediately. The child will be allowed to rest away from the other children until their Parents/ Carers arrive to collect them.

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Minimum period of exclusion from nursery

Disease/Illness	Minimal Exclusion Period
Antibiotics Prescribed	First 2 days at home
Fever	If sent home ill, Child must be off for 24 hours
Vomiting	48 hours once free from symptoms
Conjunctivitis	Until redness and discharge have gone
Diarrhoea	48 hours once free from symptoms.
Chickenpox	7 Days from appearance of rash
Gastroenteritis, Food poisoning, Salmonellas & dysentery	Until authorised by doctor
Infective hepatitis	7 Days from onset of jaundice
Measles	5-7 days from appearance of rash
Meningococcal infection	Until fully recovered from illness
Mumps	Until all swelling has gone, usually about 10 days
Pertussis (Whooping Cough)	21 days from the beginning of symptoms
Rubella (German measles)	10 days from appearance of rash
Shingles	7 days from appearance of rash
Scarlet fever& streptococcal Infection of throat	With appropriate medical treatment, no less than three days from start of treatment.
Threadworm	Until treated
Tonsillitis	At least 48 hours after starting Antibiotics
Tuberculosis	Until declared free from infection by doctor
Typhoid fever	Until declared free from infection by doctor
Impetigo	Until skin has completely healed
Pediculosis (lice)	Until appropriate treatment has been given
Ringworm of scalp	Until cured
Ringworm of body	Seldom needs exclusion
Scabies	Until treatment is complete

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This policy was adopted by	Step by Step Day Nursery	<i>(name of provider)</i>
On	June 8 th 2020	<i>(date)</i>
Date to be reviewed	June 2021	<i>(date)</i>
Signed on behalf of the provider		
Name of signatory	Nicola Richardson	
Role of signatory (e.g. chair, director or owner)	Director	