



Administering Medicines

Dated 10th September 2020

While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness.

In many cases, it is possible for children's GPs 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 setting. If a child has not had a medication before, especially a baby/child under two, it is advised that the parent keeps the child at home for the first 48 hours to ensure that there are no adverse effects, as well as to give time for the medicine to take effect.

These procedures are written in line with guidance in Managing Medicines in Schools and Early Years Settings; the manager is responsible for ensuring all staff understand and follow these procedures.

Two members of staff work together to ensure that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. Two members of staff oversee administration of medication to ensure accuracy.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) is administered. It must be in-date and prescribed for the current condition (medicines containing aspirin will only be given if prescribed by a doctor).
- Children's prescribed medicines are stored in their original containers, are clearly labeled and are inaccessible to children.
- Parents give prior 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:
- The full name of child and date of birth;
 - The name of medication and strength;
 - Who prescribed it;

- The dosage to be given in the setting;
 - How the medication should be stored and its expiry date;
 - Any possible side effects that may be expected; and
 - The signature of the parent, their printed name and the date.
- The administration of medicine is recorded accurately in our medication record sheet each time it is given and is signed by the key person/manager. Parents are shown the record at the end of the session / day and asked to sign the sheet to acknowledge the administration of medicine. The record sheet records:
 - Name of the child
 - Name of the medication
 - Date and time of the dose
 - Signature of the key person / manager
 - Parent's signature
 - All medication is stored safely in a cupboard out of reach of the children (in the kitchen) or refrigerated as required. Staff are advised clearly of this.
 - The staff on duty are responsible for ensuring medicine is handed back at the end of the session / day to the parent.
 - For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when required basis. Key persons check that any medication held in the setting, is in date and return any out-of-date medication back to the parent. Staff to diary note half termly when checked and initial.
 - If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member/s of staff by a health professional.
 - If rectal diazepam is given, another member of staff must be present and co-sign the record sheet.
 - No child may self administer. Where children are capable of understanding when they need medication, eg with asthma, they should be encouraged to tell their key person what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

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

- A risk assessment is carried out for each child with long term medical conditions or allergies that require ongoing medication. This is the responsibility of the manager (Head Teacher / Proprietor) alongside the key person. Other medical or social care personnel may need to be involved on the risk assessment process.

- 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 will 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 needs for staff form part of the risk assessment.
- The risk assessment includes vigorous activities and any other 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 advice is sought from the child's GP if necessary 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 for an emergency.
- The health care plan is reviewed every six months, or more frequently if necessary. This includes reviewing the medication eg changes to the medication or dosage, any side effects noted etc.
- Parents receive 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 must include the key person for the child with a risk assessment, or another member of staff who is fully informed about the child's needs / allergies and / or medication.
- Medication for a child is taken in a sealed plastic box clearly labeled with the child's name and name of the medication. Inside the box is a copy of the consent form and a card to record when it has been given, including all the details that need to be recorded on the medication record sheet.
- On returning to the setting the card is stapled to the record sheet 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 box clearly labeled with the child's name and name of the medication. Inside the box is also a copy of the consent form signed by the parent.
- As a precaution, children should not eat when travelling in vehicles.
- This procedure should be read alongside the outings procedure.

