



Administration of Medicines Policy

Policy Statement

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 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 setting. 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 there are no adverse effects, as well as to give time for the medicine to take effect.

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 authorisation 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 Manager is responsible for the overseeing of administering medication.

These procedures are written in line with current guidance in 'Managing medicines in Schools and Early Years settings' and also guidance from Ofsted, 'Giving medication to children in registered childcare'.

The Manager is responsible for ensuring all staff understand and follow the procedures.

Procedures

- Children taking prescribed medication (whether prescribed by a doctor, dentist, nurse or pharmacist), must be well enough to attend the setting.
- The medication must be in-date and prescribed for the current condition.
- Medication can only be administered when requested by a parent and if there is an accepted health reason to do so.
- Children's prescribed medicines are stored in their original containers, 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 an authorisation form stating the following information. No medication may be given without these details being provided.
 1. The full name of the child
 2. The name of the medication
 3. The dosage to be given
 4. The circumstances under which the medicine is to be given
 5. How the medication should be stored and it's expiry date
 6. Any possible side effects that may be expected
 7. The signature of the parent, their printed name and date
 8. The name of the person who gave the medication, date and time.

Please note that The Statutory Framework recommends that children under 16 should never be given medicines containing aspirin unless a doctor has prescribed that medicine for that child.

Storage of medicines

- All medication is stored safely in individual plastic boxes on top of a cupboard on the wall in the kitchen or refrigerated as required. All medication is clearly labelled with the child's name.
- The child's key person is responsible for ensuring the medicine is handed back at the end of the 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.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- If rectal diazepam is given, another member of staff must be present.
- Another staff member must sign the authorisation form as a witness to the administration any medicine.
- No child may self-administer. Where children are capable of understanding when they need medication, for example 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 that require ongoing medication. This is the responsibility of the manager/administrator, alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will also contribute to the 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 for staff needs to 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 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 in an emergency.
- The health care plan is reviewed every six months, or more frequently if necessary. This includes reviewing the medication, e.g. changes to the medication of the 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 and/or medication.
- Medication for a child is taken in a sealed plastic box clearly labelled with the child's name and the name of the medication. Inside the box is a copy of the authorisation form to record when it has been given, including all the details that need to be recorded in the medication record as stated above.
- On returning to the setting, this copy is stapled to the original authorisation form 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 and the name of the medication. Inside the box is a copy of the authorisation form completed by the parent.
- As a precaution, children should not eat when travelling in vehicles.
- This procedure is read alongside the outings policy.

Further guidance

- Medicines act (1968)
- Managing medicines in Schools and Early Years settings
- Ofsted guidance – Giving medication to children in registered childcare

This policy was adopted at a meeting of Trustees held on

and was checked and re-affirmed on

Signed on behalf of The Little Pennies Pre-School

..... (Chairperson)