



Administering Medicines

A unique child	Positive Relationships	Enabling Environments	Learning and Development
1.4 Health and Well being	2.2 Parents as partners 2.4 Key Person	3.2 Supporting every child	

Statement

While it is not our policy at The Village Pre-school E17 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 the child's GP 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 been prescribed medication by their doctor, parents will be expected to keep their child home for the first 48 hours to ensure no adverse effects as well as to give time for the medication to take effect.

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

The Manager is responsible for the correct administration of medication to children. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures.

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.

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 Manager or Deputy Manager upon 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:

- full name of child and date of birth;
- name of medication and strength;
- who prescribed it;
- dosage to be given in the setting;
- how the medication should be stored and expiry date;
- any possible side effects that may be expected should be noted; and
- signature, printed name of parent and date.

The Manager or Deputy Manager must ensure that all the information is correctly filled in.

The Manager or Deputy Manager must inform all the staff regarding the medication and where it will be stored.

2 members of staff will be present for the administration of the medication which is recorded accurately each time it is given in the medication book and is signed by staff. Parents sign the record book to acknowledge the administration of a medicine. The medication record book records:

- name of child;
- name and strength of medication;
- the date and time of dose;
- dose given and method; and is
- signed or initialled by key person/manager; and is
- verified by parent signature or initials at the end of the day.

We use the Early Years Alliance's publication Medication Record for recording administration of medicine and comply with the detailed procedures set out in that publication.

Storage of medicines

All medication is stored safely in a high cupboard, inaccessible to the children or refrigerated if needed. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.

The Manager or Deputy Manager is responsible for ensuring medicine is handed back at the end of the day to the parent.

For some conditions, medication may be kept in the setting. The Manager checks that any medication that is held to administer on an as and when required basis, or on a regular basis, is in date and returns any out-of-date medication back to the parent.

Medicines stored in the cupboard above the nappy changing station or in the fridge if required. (Staff are informed of this)

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 and co-signs the record book.

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 a staff member 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 on 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 alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.

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 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 needs for staff is part of the risk assessment.

The risk assessment includes vigorous activities and any other pre-school 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 the child's GP's advice is sought 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 if necessary. This includes reviewing the medication, e.g. changes to the medication or 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, name of the medication, Inside the box is a copy of the consent form and a card to record when it has been given, with the details as given above.

On returning to the setting the card is stapled to the medicine record book 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, name of the medication. Inside the box is a copy of the consent form signed by the parent.

As a precaution, children should not eat when travelling in vehicles.

This procedure is read alongside the outing's procedure.

Legal framework

Medicines Act (1968)

Policy reviewed and updated **September 2021**