

Health: **Administering Medicines**

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 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, it is advised that the parents keep the child at home for the first 48 hours to ensure no adverse effect as well as to give time for the medication to take effect.

The Key Person is responsible for the correct administration of medication for children for whom they are key Person (Pre-school), and Reception class teaching assistants are responsible for the correct administration of medication in reception class. This includes ensuring that parent consent 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 overseeing the administering of medication.

It is preferable for the parents to undertake the responsibility of administering prescribed medicine to their child. In the absence of a parent a designated member of staff will be responsible for the correct administration of the prescribed medicine. No child may self administer medicine.

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.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor is administered. It must be in date and prescribed for the current condition.

- No medication shall be administered to any child without prior written consent of the parent /carer.

The staff giving the medication must ask the parent to sign a consent form stating:

- The full name of the child;
 - The name of medication and strength;
 - The dosage to be given in setting;
 - How the medication is to be stored and
 - The signature of the parent, their printed name and date.
- Each time medicine is given the Key Person/ Manager sign the record book to acknowledge administration of the medicine. The book is signed by two members of staff in Pre-School.
 - Parents are shown the record at the end of each day and asked to sign the book to acknowledge the administration of the medicine.
 - Staff to check the medication is clearly marked with the child's name, dosage and date of dispensing.
 - Dosages should be recorded in written form with time/ date and amounts, retained for the future, and signed by staff and parent/carer.
 - Staff will be required to check the dates on long term medicine.
 - Only prescribed medication will be administered in school.

Storage

Storage of medicines

- Medication will be stored in their original containers, in a safe, secure place depending on storage instructions and away from children. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- The designated adult is responsible for ensuring that any medicine is returned to the parent at the end of the day.
- 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 is in date and return any out-of-date medicine back to the parent. (e.g. prescribed medication for allergies/skin conditions).

- If the administration of the prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- 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 (Pre-school) or any member of staff in Reception class 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 Care Plan/Risk Assessments 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 Care Plan/Risk Assessments.

Parents will also contribute to a Care Plan/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 forms part of the risk assessment.

The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding and individual child's health needs.

A health care plan for the child is drawn up with the parents; outlining the Key Person's role and what information must be shared with other staff who care for the child.

The health care plan includes 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 or the dosage, any side effects noted etc.

Parents receive a copy of the health care plan and each contributor, including the parents, signs it.

Managing medicines on trips and outings:

If children are going on trips and outings, staff accompanying the children must include the Key Person for the child with a risk assessment, or with 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 there is a copy of the consent form and a completed medicines form to record when it has been given, including all the details that need to be recorded in the medicines form as stated above. Parent's signs the medicines form after the visit.

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 there is a copy of the consent form signed by the parent.

As a precaution children should not eat whilst travelling in vehicles.

This procedure is read alongside the outings procedure.

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