

Safeguarding and Welfare Requirement: Health

Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date.



6.1 Administering Medicines

Policy statement

Whilst 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 the health and well-being of a child or when they are recovering from an illness.

In many cases, it is possible for a child's Doctor to prescribe medicine that can be taken at home in the morning and evening. 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 medication 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.

All staff have responsibility 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. The manager is responsible for the overseeing of administering medication.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) can be 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 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 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 the medication
 - who it has been prescribed by
 - the dosage to be given in the setting (time and quantity)
 - how the medication should be stored and its expiry date
 - any possible side effects that may be expected
 - the signature of the parent, their printed name and the date.
- The administration of medicine is recorded accurately on our medication form each time it is given and is signed by the staff member or manager. Parents are shown the record at the end of the day and asked to sign the record book to acknowledge the administration of the medicine. The medication record form details the:
 - name of the child
 - name and strength of the medication
 - date and time of the dose
 - dose given and method
 - signature of the staff member who administered the medicine
 - signature of the staff member who witnessed the medicine being administered
 - parent's signature.

Storage of medicines

- All medication is stored safely in a locked cupboard or refrigerated as required.
- Staff are responsible for ensuring medicines are 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.
- All staff should check that any medication held in the setting is in date and return any out-of-date medication 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.
- Parents are asked to complete a long term medication form which is kept in the child's personal file.
- Another member of staff must be present and co-sign for all medication given with the setting.
- 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 member of staff 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 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 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.
- The Long Term Medication Form 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.

Managing medicines on trips and outings


- If children are going on outings, a member of staff accompanying the children must be 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. A signature form is taken in the outings folder, to record date, dosage, time, who administered it and signature.
- On collection of the child at the end of the session the parent signs the form to acknowledge the dose has been administered.
- 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 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.

Legal framework

- The Human Medicines Regulations (2012)

Further guidance

- Managing Medicines in Schools and Early Years Settings (DfES 2005)

This policy was adopted at a meeting of	Nomansland Pre-School
Held on	8 th May 2013
Date reviewed	May 2018
Date to be reviewed	May 2019
Signed on behalf of the provider	
Name of signatory	Nikola Bishop
Role of signatory (e.g. chair, director or owner)	Chair

Other useful Pre-school Learning Alliance publications

- Medication Record (2010)
- Daily Register and Outings Record (2012)