

Promoting health and hygiene

Administering medicines

(See administering medication protocol and forms)

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, especially a baby/child under two, it is advised that the parent keeps 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.

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

The staff are 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. Medicines can be administered by first aid qualified staff and witnessed by a second member of staff (**senior**) at all times. Nappy creams will be applied by all staff/key carers. **Due to health and safety reasons we do not accept teething jewellery such as amber bracelets or necklaces into the setting.**

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only prescribed medication is administered, with exception to teething gel and nappy creams. It must be in-date and prescribed for the current condition.
- Due to health and safety reasons we do not accept teething jewellery, such as amber bracelets or necklaces, into the setting.
- We will administer nappy creams and teething gels where necessary. The same procedures for prescribed medication will be followed for administering teething gel.
- All parents who wish their child to have nappy cream applied by staff are asked to fill in a nappy cream permission form and sign at the end of day to acknowledge that their child has had cream applied throughout the day. All nappy creams are supplied with by the parent and will be clearly labeled with the child's name, they will be kept with the child's nappies and wipes.

- NB Children's paracetamol (un-prescribed sugar free Calpol) is administered only for children under the age of four years with the verbal consent of the parents heard by 2 members of staff on duty in the case of a high temperature exceeding 38.5C. This is to prevent febrile convulsion and where a parent or named person is on their way to collect the child.
- Verbal agreement will be heard by at least 2 members of staff
- Children's prescribed medicines are stored in their original containers, are clearly labeled and are inaccessible to the children.
- Parents give prior written permission for the administration of prescribed medication, teething gels and nappy creams. 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:
 - 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 staff on duty will take the medication and ask the parent to fill out the medical consent form, where possible this will be their keyworker. Staff will be aware of this procedure as set out in the policies read and signed.

- The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record sheet to acknowledge the administration of a medicine. The medication record sheet records:
 - name of child;
 - name and strength of medication;
 - the date and time of dose;
 - dose given and method; and is
 - Signed by 2 members of staff and is verified by parent signature at the end of the day.

Storage of medicines

- All medication is stored safely in a locked cupboard or refrigerated. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked container.
- The members of staff on duty are 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. Key persons check that any medication 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 are stored in a lockable first aid unit in each room which is out of reach to children, and medicines that need to be in the refrigerator are locked in a marked container. Staff will be aware of this procedure as set out in the policy read and signed.

- 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 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 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 nursery 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.

Asthma

If a child requires steroids for their Asthma condition the setting requests that the child is excluded from us until the end of the course (usually a maximum of 5 days)

Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children and where possible including 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 outings procedure.

Legal framework

- Medicines Act (1968)

Further guidance

- Managing Medicines in Schools and Early Years Settings (DfES 2005)
<http://publications.teachernet.gov.uk/eOrderingDownload/1448-2005PDF-EN-02.pdf>

This policy was adopted on	<u>2010</u>	(Dimension Childcare)
Held on	<u>October 2015</u>	(date)
Date to be reviewed	<u>October 2016</u>	(date)
Signed on behalf of Management	<hr/>	
Name of signatory	<hr/>	
Role of signatory (e.g. Manager/Room Leader)	<hr/>	

Other useful Pre-school Learning Alliance publications

- Medication Record (2006)
- Register and Outings Record (2006)