6.1 Administering medicines

Policy statement

We promote the good health of all children that attend the setting and take necessary steps to prevent the spread of infection. 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 may agree to administer certain medication as part of maintaining their health and well-being or when they are recovering from an illness. We ensure that where medicines are necessary to maintain the health of the child, they are given correctly and in accordance with legal requirements.

In many cases, it is possible for children's GPs to prescribe medicine that can be taken at home. 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 and if they are considered by staff to be well enough to attend. If a child has not had a medication before parents should keep the child at home for the first 48 hours to ensure they are no adverse effects, as well as to give the medication time to take effect.

Our staff are responsible for the correct administration of medication to children that attend our setting. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. The child's key person is usually responsible for administering medication and the manager/deputy for the overseeing of administering medication. We notify our insurance provider of all required conditions, as laid out in our insurance policy.

Procedures

- Children taking prescribed and non-prescribed medication must be well enough to attend the setting.
- Prescription medication will only be administered when it has been prescribed for a child by a doctor (or other medically qualified person). It must be in-date and prescribed for the current condition.
- Non-prescribed medication may be administered to children after discussion and agreement by the Pre-School manager or deputy manager.
- Both prescription and non-prescription medicines can only be administered where written permission has been obtained from the child's parent or carer.
- We will not administer non prescribed medications for coughs and colds and may not admit your child to the setting if they have been given non-prescribed medication before attending. This is to help prevent the spread of infection and maintain the wellbeing of all children and staff that attend the Pre-School.
- Non-prescription pain or fever relief medication (e.g.Calpol) will not be administered except in the case of an emergency (see below). Children under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor. The administering of non-prescribed medication is recorded in the same way as any other medication. NB We may administer children's paracetamol (un-prescribed) with prior written consent of the parents in the case of a high temperature and where a parent or named person is on their way to collect the child. An explanation and details will be given when parents complete the registration form with signed written consent.

- Children's medicines are stored in their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication, the member of staff checks that it is in date and prescribed specifically for the current condition.
- Parents must give prior written permission for the administration of all medication. The staff member receiving the medication will 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 medication and strength
  - who prescribed it (if applicable)
  - the dosage and times to be given in the setting
  - the method of administration
  - 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 a medication record form each time it is given and is signed by the person administering the medication. Persons collecting the child are shown the record at the end of the day and asked to sign the record form to acknowledge the administration of the medicine. The medication record form records the:
  - name of the child
  - name and strength of the medication
  - Details of the doctor/person that prescribed it (if applicable)
  - date and time of the dose
  - dose given and method
  - signature of the person administering the medication
  - Person collecting the child signature.
- If the administration of prescribed medication requires medical knowledge, we obtain individual training 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 form.
- 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 staff what they need. However, this does not replace staff vigilance in knowing and responding to when a child requires medication.
- We monitor the medication record forms to look at the frequency of medication given in the setting. For example, a high incidence of antibiotics being prescribed for a number of children at similar times may indicate a need for better infection control.

Storage of medicines

- All medication is stored safely on a high shelf or in a locked cupboard or refrigerated as required and is inaccessible to children. Medication is placed in a green medical bag and marked clearly with each child's name.

- The child's key person is responsible for ensuring medication 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 (for instance, creams to treat nappy rash). Key persons check that any medication held at the setting, is in date and return any out-of-date medication back to the parent.

Some medication such as life saving autoinjector pens for severe allergies and asthma inhalers are stored daily out of reach of children but available for staff to access quickly in the case of emergency.

Children who have long term medical conditions and who may require ongoing medication

- We complete a care plan for each child with a long term medical condition that requires on-going medication. This is the responsibility of our manager alongside the key person. Other medical or social care personnel may need to be involved in completing the plan.
- Parents will also contribute to the care plan. They should 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 care plan.
- The care plan may include a risk assessment for activities that may give cause for concern regarding an individual child's health needs.
- The care plan includes arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.
- The care plan should include the measures to be taken in an emergency.
- We review the care plan 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 care plan and each contributor, including the parent, signs it.

Managing medicines on trips and outings

- If children are going on outings, a member staff who is fully informed of the child's needs and/or the administering of any necessary medication will accompany them.
- Medication for a child is taken in the green medication bags clearly labelled with the child's name.

This policy was adopted by	Springfield Bees Pre-School
On	15/12/24
Date to be reviewed	15/12/25
Signed on behalf of the provider	
Name of signatory	
Role of signatory (e.g. chair, director or owner)	