



## 04 Health procedures

### 04.02 Administration of medicine

#### 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. We ensure that where medicines are necessary to maintain 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 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 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.

The pre-school leader is responsible for ensuring that staff administer the correct 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. In the absence of the pre-school leader the Health and Safety Officer is responsible for the overseeing of administering medication. We notify our insurance provider of all required conditions, as laid out in our insurance policy.

#### Consent for administering medication

- Children taking prescribed medication must be well enough to attend the setting.
- Only a person with parental responsibility (PR), or a foster carer may give consent. A childminder, grandparent, parent/carer's partner who does not have PR, cannot give consent.
- When bringing in medicine, the parent informs the staff. The pre-school lead should also be informed.
- We only usually administer medication when it has been prescribed for a child by a doctor (or other medically qualified person). Staff who receive the medication, check it is in date and prescribed specifically for the current condition. It must be in the original container (not decanted into a separate bottle). It must be labelled with the child's name and original pharmacist's label if prescribed.

- Medication dispensed by a hospital pharmacy will not have the child's details on the label but should have a dispensing label. Staff must check with parents/carers and record the circumstance of the events and hospital instructions as relayed to them by the parents/carers.
- Parents must give prior written permission for the administration of medication by completing the Health Care Plan 04.2a. The office administrator or pre-school leader 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; and
  - the signature of the parent, their printed name and the date.

## **Storage of medicines**

All medicines are stored safely. Refrigerated medication is stored separately in a marked box in the kitchen fridge.

*Medicines are stored in a box in the office, unless children who may need medication are on the premises. Staff are made aware of anyone starting at the pre-school who may need medicines administered and attention is drawn to the "Health Matters of Note" displayed at the Kitchen Room by the Snack area, Computer Room pin board and in the Office.*

- The office staff is responsible for ensuring medicine is handed back at the end of the day to the parent/carer.
- For some conditions, medication for an individual child may be kept at the setting. 04.2a Healthcare plan form must be completed. To be administered on a regular or as-and-when- required basis. The office administrator checks that any medication held in the setting, is in date and returns any out-of-date medication back to the parent.
- Parents/carers do not access where medication is stored, to reduce the possibility of a mix-up with medication for another child, or staff not knowing there has been a change.

## Record of administering medicines

The administration of medicine is recorded accurately on the child's individual file each time it is given and is signed by the person administering the medication. Parents are shown the record at the end of the day and asked to sign the record sheet to acknowledge the administration of the medicine. The medication record sheet records the:

- name of the child.
- name of the medication.
- date and time of the dose.
- dose given and method.
- signature of the person administering the medication;
- witnessed and co-signed by pre-school lead or another member of staff
- verified by parent/carer signature at the end of the day.

*Each Childs individual records for administering medication are kept with their medication in the office in the bright orange bag stating Medication.*

- If the administration of prescribed medication requires medical knowledge, we obtain training.
- If rectal diazepam is given, another member of staff must be present and co-signs the record sheet.
- No child may self-administer. If children are capable of understanding when they need medication, e.g. for asthma, they are encouraged to tell their key person what they need. This does not replace staff vigilance in knowing and responding.
- The medication records are monitored to look at the frequency of medication being given. For example, a high incidence of antibiotics being prescribed for several children at similar times may indicate a need for better infection control.

## Children with long term medical conditions requiring ongoing medication

- Risk assessment is carried out for children that require ongoing medication. This is the responsibility of the pre-school lead and key person. Other medical or social care personnel may be involved in the risk assessment.
- Parents/carers contribute to risk assessment. They are shown around the setting, understand routines and activities, and discuss any risk factor for their child.
- For some medical conditions, key staff will require basic training to understand it and know how medication is administered. Training needs are part of the risk assessment.

- Risk assessment includes any activity that may give cause for concern regarding an individual child's health needs.
- Risk assessment also includes arrangements for medicines on outings; advice from the child's GP's is sought, if necessary, where there are concerns.
- 04.2a Health care plan form is completed fully with the parent/carer; outlining the key person's role and what information is shared with other staff who care for the child.
- The health care plan should include the measures to be taken in an emergency.
- The plan is reviewed every six months (more if needed). This includes reviewing the medication, for example, 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, the key person for the child will accompany the children 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 bag clearly labelled with the child's name and the name of the medication. Inside the bag is a copy of the consent form and a record when it has been given, including all the details that need to be recorded in the medication record as stated above.
- On returning to the setting the record is kept in the child's individual file and the parent signs it.
- If a child on medication must be taken to hospital, the child's medication is taken in a sealed plastic bag clearly labelled with the child's name and the name of the medication. Inside the bag is a copy of the consent form signed by the parent.

### **Staff taking medication**

Staff taking medication must inform the pre-school lead. The medication must be stored securely in staff Medical Box in the office away from the children. The pre-school lead must be made aware of any contra-indications for the medicine so that they can risk assess and take appropriate action as required.

### **Further guidance**

[Medication Administration Record](#) (Alliance Publication)