

Coniston Early Years Centre Policy Document

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.

Coniston Early
Years Centre



High Quality Care for All Children
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6.1 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 attend pre school, we do understand that there are times when it may be necessary to administer medication to a child. This may be to ensure their well-being, such as when they have long term or complex medical needs, or when they are in the very final stages of recovering from an illness.

In many cases GP's are able to prescribe medication that can be administered 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 to them during pre school hours. If a child has not had a medication before we ask parents to keep the child at home for the first 48 hours to ensure they do not suffer any adverse reaction to the medicine and also to allow the medication to begin to take effect.

These procedures have been written in line with the document *Managing Medicines in Schools and Early Years Settings*.

The key person is responsible for the correct administration of the medication to children for whom they are the key person. This includes ensuring that parent consent forms, health care plans are completed, that medicines are stored correctly and that records are kept according to pre school policies and procedures. In the absence of the key person, another suitably qualified and experienced member of staff is responsible for the overseeing of administering medication.

Procedures

- Children taking prescribed medication must be well enough to attend pre school.
- Only medication prescribed by a doctor, (or other medically qualified person) is administered. It must be in-date and prescribed for the current condition. **NB Medications 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 children.
- Labels on medication must be legible and clearly show child's name, the dose and expiry date.

- Parents give prior written permission for the administration of medication. The staff receiving medication must ask the parents to sign a consent form stating the following information. No medication may be given without these details being provided.
 - The full name of the child and their date of birth;
 - The name of the medication and strength;
 - Who prescribed it;
 - The dosage to be given in the setting;
 - 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.
- The administration of medicine is recorded accurately on the child's medication record each time it is given and is signed by the key person and one other member of staff. Parents are shown the record at the end of the day and asked to sign it to acknowledge the administration of the medication. The child's medication record includes the following details;
 - Name of the child;
 - Name and strength of the medication;
 - Date and time of the dose;
 - Dose given and method;
 - Signatures of two staff members (one of which should be the child's key person);
 - Parents signature.

Storage of medicines

- All medication is stored safely in a locked medicine cupboard or refrigerated as required.
- The child's key person is responsible for ensuring medicine is handed back at the end of the day, where applicable, to the child's parent.
- For some conditions, medication may be kept at pre school to be administered on a regular or as and when required basis. Key persons check that any medication held in the pre school is in date and return any out of date medication back to the parent.

Insert details here of how and where medicines are stored in the pre school. State how staff are informed of this.

Childrens medications are stored in the two locked medical cabinets in the children's bathroom, these cupboards are located high enough to prevent access by children and remain locked at all times. A chart is located next to the cabinet detailing the expiry dates of children's medications and it is the responsibility of the key person to ensure this is checked regularly and updated as applicable.

Staff medication is stored in a locked medical cabinet in the staff toilet.

Staff are informed of these procedures as part of their induction process.

- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant members of staff by a qualified health professional.
- If rectal diazepam is given, another member of staff must be present and must sign the child's medication record. NB due to the invasive nature of the administration of such medication staff will only administer such medication where there is no other option available and if they are happy to do so.
- Where outside circumstances such as pandemic situations are present and the need to administer such medication requiring such invasive procedures arises, staff will be provided with and required to wear full PPE equipment.
- 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 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 a long term medical condition that requires ongoing medication. This is the responsibility of the manager in conjunction with the child's key person. Any such risk assessments should be shared with the whole staff team. Other medical or social care personnel may need to be involved in the risk assessment. Where applicable the risk assessment should also be shared with such personnel even where they have not been involved in writing 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 should 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 GP 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 frequently if necessary. This includes reviewing the medication, eg changes to the medication or 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, staff accompanying the children must include 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 children requiring it is taken in the outings bag that is packed before any trip /outing.
- The child's health care plan and medication record will also be taken and details of medication administered recorded as before.
- If a child on medication has to be taken to hospital, the child's medication goes with them along with their health care plan and personal file.
- As a precaution children should not eat when travelling in vehicles.
- This procedure is read alongside the outings procedure.

Legal Framework

- The Human Medicines Regulations 2012

Further guidance

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