



Hail Weston Pre-School, The Village Hall, High Street, Hail Weston, Cambs. PE19 5JS, Tel: 01480 214574

Administering Medicines Policy

Policy statement

While it is not our policy to care for sick children at Hail Weston Pre-school Activity Group (HWPAG) 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 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 Chairperson and Leader are responsible for ensuring all staff understand and follow these procedures.

The Leader/Deputy are responsible for the correct administration of medication to all 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 Leader/Deputy, the room leader/Key Person is responsible for the overseeing of administering medication.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only prescribed medication is administered. It must be in-date and prescribed for the current condition.
- Children's prescribed medicines are stored correctly, in the refrigerator if required, 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 Medical Administration Permission 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;
 - who prescribed it;
 - dosage to be given in our 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.

Receipt of Prescribed Medication:

Medication should be handed to the Leader or Deputy leader.

Parental Consent:

Parents/carers will be asked to complete a Medical Administration Permission Form

Staff Team Awareness: Key Person or Pre-school Leaders

- The administration permission form is recorded accurately each time it is given. It is signed by the leader/deputy and witnessed by the deputy/key person. Parent/Carer signs the administration permission form to acknowledge the administration of a medicine when the child is collected at the end of the session.

Storage of medicines

- At HWPAG they are kept in a marked plastic box (on top of the cabinet in the disabled toilet) which is locked away in the pre-school 'walk in' cupboard outside of session times. If the medication needs to be refrigerated this will be done.
- The child's key person or leader/deputy is responsible for ensuring medicine is handed back at the end of the day to the parent if required.
- For some conditions, medication may be kept in the setting. Leaders check that any medication held to administer on a regular or an as-and-when required basis, is in date and returns any out-of-date medication back to the parent.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant members of staff by a health professional.
- An individual medicine procedure form is stored with the medicine for each individual child.
- 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 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 on ongoing medication

- An individual allergy risk assessment and /or Health care plan is carried out for each child with long term medical conditions that require on-going medication. This is the responsibility of the Leader alongside the key person.
- Parents will also contribute to a individual allergy risk assessment /health care plan. 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 will form part of the individual allergy risk assessment /health care plan.
- The individual allergy risk assessment /health care plan includes vigorous activities and any other pre-school activity that may give cause for concern regarding an individual child's health needs.
- The individual allergy risk assessment /health care plan 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 Leaders 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 annually or more if necessary, depending on what is being used. 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.

Managing medicines on trips and outings

- All staff are fully informed about the child’s needs and/or medication and a risk assessment is carried out.
- Medication for a child is taken in a suitable bag or container clearly labelled with the child’s name and details of the medication. A copy of the consent form and the long term medicine administration record will accompany the child and medicine.
- On returning to the setting, if medication has been administered, the medicine administration record will be countersigned by the parent.
- If a child on medication has to be taken to hospital, the child’s medication and consent forms will accompany them to hospital.
- As a precaution, children should not eat when travelling in vehicles
- This procedure is read alongside the outings procedure.

Legal framework

- Medicines Act (1968)

This policy was adopted at a committee meeting of HAIL WESTON PRE-SCHOOL ACTIVITY GROUP held on January 2020

Date to be reviewed: January 2021

Signed on behalf of the Management Committee:.

Lizzie Spear

Signatory:.....

Role of signatory: Chairperson

Hail Weston Pre-school Activity Group – Allergy / Medical Information



Date of completion of form:	Child's DOB	Child's name:
Home address:	Contact name 1: Tel. No.:	Contact name 2: Tel. No.:
Allergic to / medical condition:	Enter details of the allergic reaction / medical reaction:	Specific instructions in case of an allergic / medical reaction:
Allergic to / medical condition:	Enter details of the allergic reaction / medical reaction:	Specific instructions in case of an allergic / medical reaction:
Medication is required as below - Signed:		Medication is not required – Signed:
Name of medicationexpiry date 1 expiry date 2 Expiry date 3		
Name of medicationexpiry date 1 expiry date 2 Expiry date 3		
Name of medicationexpiry date 1 expiry date 2 Expiry date 3		
Name of medicationexpiry date 1 expiry date 2 Expiry date 3		
Name of medicationexpiry date 1 expiry date 2 Expiry date 3		
Should it be necessary I give permission for key members of staff to administer the above treatment to the named child. Signed:		
Should it be necessary I give permission for the emergency services to be called and for the named child to receive emergency treatment from a medical professional. Signed:		
I will keep the pre-school informed of any changes in my child's condition or medication.		Signed:

Medicine administration permission form

Child's Name.....DOB.....Reason for Medication.....

Day & date	Name of Medicine /Prescribed by /Storage information /Expiry date	Side effects read-Print &Sign	Time of last dose	Amount of last dose (mls)	Parent /Carer Signature and Print Name	Time to be given	Amount to be given (mls)	Given by Print & Sign	Witnessed by Print & Sign	Parent /Carer Signature and Print Name