Administering Medicine Policy



EYFS Statutory Requirements – page 27 section 3.44-3.46

EYFS Key Themes and Commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.4 Health and well-	2.2 Parents as	3.2 Supporting	
being	partners	every child	
	2.4 Key person		

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.

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.

Children under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor. If a child has already had a dose of medication for pain relief or fever and the child's health deteriorates during the session, the parent will be asked to collect. Children should only be given medicines containing aspirin when prescribed by a doctor.

Our staff are responsible for the correct administration of medication to children for whom they are the key person. 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 key person, the room leader or manager is responsible for the overseeing of administering medication.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- We only usually administer prescribed. It must be in-date and prescribed for the current condition. Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- * Over-the-counter medication such as pain and fever relief will be given at the discretion of the playschool, as children who need this medication may not be deemed as well enough to be in the setting.
- Parents give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form stating the following information which is logged in the medication book, which is kept on the desk next to the front door. 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;

- The method of administration;
- 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 administration of medicine is recorded accurately on our medication record sheets each time it is given and is signed by the person administering the medication [and a witness]. Parents are shown the record at the end of the day and asked to sign the record book to acknowledge the administration of the medicine.
- The key person is responsible for the correct administration of medication to children for whom they are the key person. 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 key person, the manager or room leader is responsible for the overseeing of administering medication.
- Staff should be witnessed when administering medicine. The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record book to acknowledge the administration of a medicine.
- If the administration of prescribed medication requires medical knowledge, we obtain individual training by a health professional.
- 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 require essential medication and do not have it with them at playschool will not be allowed entry into the playschool until they have their medication with them. Family members will be able to leave daily medication within the playschool if they can get extra prescribed by their GP. This will be noted on the medicine form and checked regularly by the key person for the quantity left and the use by date.
- * We monitor the medication record book is monitored 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

The child's key person is 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.

Medication is kept in a locked cupboard in each room with a sign on it.

Refrigerated medicine will be kept in the kitchen fridge.

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. Until training has been provided to staff, the child will not be accepted into the setting.
- 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.

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 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.

This policy was adopted at a meeting of: Warwick Community Association

Reviewed on: May 2017

This policy will be reviewed annually in February.

This policy will be reviewed annually, with changes made as required. The manager of the setting will be responsibility for maintaining this and sharing with the committee members of Warwick Community Association to be verified. This will be shown in the minutes of the meeting.