

Harrold Pre-School Policies



Administering Medicines

Policy statement

While it is not our policy to care for sick children, who must 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.

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.

The key person will be responsible for the correct administration of medication to children for whom they are the key person. This will include 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 preschool leader or deputy will be responsible for the overseeing of administering medication.

Procedures

Children taking prescribed medication must be well enough to attend the setting.

Only medication prescribed by a doctor, dentist, nurse or pharmacist (or other medically qualified person) will be administered. It must be in-date and prescribed for the current condition.

Children's prescribed medicines will be stored in their original containers, clearly labelled and inaccessible to the children.

Parents will give prior written permission for the administration of medication. The staff receiving the medication will ask the parent to sign a consent form stating the following information. No medication will 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;

- how the medication must be stored and expiry date;
- any possible side effects that may be expected
- signature, printed name of parent and date.

The administration of medication will be recorded accurately each time it is given and will be signed by one member of staff and witnessed and signed by another. Parents will sign the record sheet to acknowledge the administration of a medicine. The medication record sheet records:

- name of child;
- name and strength of medication;
- the date and time of dose;
- dose given and method; and is
- signed by key person/manager;

and is verified by parent signature at the end of the day.

Storage of medicines

All medication will be stored safely on a high shelf in a lockable cupboard. They will be kept in a marked plastic box. When required, the child's key person will be 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 will check that any medication held to administer on an as and when basis, or on a regular basis, is in date and will return any out-of-date medication back to the parent.

If the administration of prescribed medication requires medical knowledge, individual training will be provided for the relevant member of staff by a health professional.

No child will be allowed to self-administer. Where children are capable of understanding when they need medication, for example with asthma, they will be encouraged to tell their key person what they need. However, this will not replace staff vigilance in knowing and responding when a child requires medication.

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

- A risk assessment will be carried out for each child with long-term medical conditions that require ongoing medication. This will be 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 will be shown around the setting, given an explanation of the routines and activities and asked to point out anything that 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 be part of the risk assessment.
- The risk assessment will include vigorous activities and any other preschool activity that may give cause for concern regarding an individual child's health needs.
- The risk assessment will include arrangements for taking medicines on outings and the child's GP's advice will be sought if necessary where there are concerns.
- A health care plan for the child will be 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 will include the measures to be taken in an emergency.
- The health care plan will be reviewed every six months or more if necessary. This will include reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents will receive a copy of the health care plan and each contributor, including the parent, will sign it.

Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children will 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 will be taken in a sealed plastic box clearly labelled with the child's name and name of the medication. Inside the box will be 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 will be stapled to the medicine record sheet and the parent will sign it.
- If a child on medication has to be taken to hospital, the child's medication will be taken in a sealed plastic box clearly labelled with the child's name and name of the medication. Inside the box will be a copy of the consent form signed by the parent.