



# ADMINISTERING MEDICATIONS POLICY

## **Policy Statement**

Whilst 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 the 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 medication 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 parents keep 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.

A child's key person is responsible for the correct administration of 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 a child's key person, the Manager or Director is responsible for overseeing the administration of the medication. We notify our insurance provider of all required conditions, as laid out in our insurance policy.

## **Procedures**

- Children taking prescribed medication must be well enough to attend the setting.
- We will administer medication when it has been prescribed for a child by a doctor (or other medically qualified person). It must be in date and prescribed for the current condition.
- Parents must give prior written permission for the administration of medication (see Appendix 1). The staff member receiving the medication will ask the parent to sign a consent form. No medication may be given without these details being provided.
- Non-prescription medication, such as pain or fever relief (ie: Calpol and teething gel) may be given with written consent of the parent and only when there is a health reason to do so, such as a high temperature (see Appendix 2).
- Children's medicines are stored in their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication, the member of staff checks that it is in date and prescribed specifically for the current condition.
- The administration of medication is recorded accurately in our medication record book 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 book to acknowledge the administration of the medicine. The medication book records the following:
  - Name of the child
  - Name and strength of the medication
  - Name of the doctor that prescribed it (where applicable)
  - Date and time of the dose
  - Dose given and method

- Signature of the person administering the medication, and a witness who verifies that the medication has been given correctly
- 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 (eg: 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 to when a child requires medication.
- We monitor the medication record book to check the frequency of medication given in the setting.

### **Storage of medicines**

- All medication is stored safely in a box on the top shelf of the on site shed, or refrigerated as required. Where the storage box or refrigerator is not used solely for storing medicines, the medication is kept in a marked plastic box.
- The child's key person is responsible for ensuring medication is handed back to the parent at the end of the day.
- For some conditions, medication may be kept in the setting to be administered on a regular, or as-and-when, basis. The key person is responsible for checking any medication held in the setting is in date, and for returning any out of date medication back to the parents.

### **Children with long term medical conditions and who may require ongoing medication**

- We carry out a risk assessment for each child with a long term medical condition that requires ongoing medication. This is the responsibility of the Director alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will also contribute to the 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 form part of the risk assessment.
- The risk assessment includes any activities that may give cause for concern regarding an individual child's health needs.
- The risk assessment also includes arrangements for taking medications on outings and advice is sought from the child's GP if necessary where there are concerns.
- An individual health plan for the child is drawn up with the parents, outlining the role of the key person, and what information should be shared with other adults who care for the child.
- The individual health plan should include measures to be taken in an emergency.

- The individual health plan will be reviewed every six months, or more frequently if necessary. This also includes reviewing the medication, dosage and side effects.
- Parents receive a copy of the individual health plan and each contributor, including the parents, sign it.

### **Managing medications on off site visits**

- If children are going on off site visits, the key person will accompany 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 and the name of the medication. Inside the box is a copy of the consent form and a card to record when the medication has been given, including all the details that need to be recorded in the medication record book (as stated above).
- On returning to the setting, the record card is stapled to the medication record book and the parent signs it.

### **Hospital admission of a child on medication**

- If a child on medication needs to be taken to hospital, the child's medication is taken in a sealed plastic box, clearly labelled with the child's name and the names of the medication. Inside the box is a copy of the consent form signed by the parents.

### **Legal framework**

- The Human Medicines Regulations (2012)

**Policy Monitoring and Review**

This policy is monitored by the staff and management of Churchwood Kindergarten and will be reviewed annually, or before if necessary.

*Date created:* 7<sup>th</sup> February 2019

*Created by:* Caroline Bennetts

*Reviewed by:*

*Signed:* .....

*Date:* .....

*Name:* .....

*Role:* .....

*Review date:* 7<sup>th</sup> February 2020

*Reviewed by:*

*Amended / Updated?*            *Yes / No*

*Brief explanation of changes:*

*Signature of reviewee:*

*New review date set:*

**Appendix 1**      **Consent form – Administration of medication**

I give permission for staff to administer medication to my child, following the details provided below.

<b>Child's name</b>	
<b>Child's date of birth</b>	
<b>Name &amp; strength of medication</b>	
<b>Prescribed by</b>	
<b>Dosage to be given</b>	
<b>Times to be given</b>	
<b>Method of administration (oral, injected, inhaled)</b>	
<b>Storage instructions</b>	
<b>Expiry date</b>	
<b>Any possible side effects?</b>	

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Appendix 2**      **Consent form – Pain or fever relieving medication**

I give permission for staff to administer pain relieving products (eg: Calpol or teething gel) to my child in the event of a raised temperature, and on the understanding that I will be planning for my child to be collected as soon as possible in accordance with the setting's procedures on the administration of medications.

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Date: \_\_\_\_\_