# Administering Medicines Policy

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. However, 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 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 particular medication before, it is advised that the parent keeps 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.

The session managers are responsible for the correct administration of medication to children. This includes ensuring that parent consent has been sought, that medicines are stored correctly and that records are kept according to procedures. In the absence of the manager, the deputy manager will be responsible for the overseeing of administering medication.

Procedures

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

We only usually 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.

Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication, the session manager checks that it is in date and prescribed specifically for the current condition.

Permission for the administration of medication is given via the Parenta app. Staff will record the following information:

- the full name of child and date of birth
- the name of medication and strength
- the dosage and times to be given in the setting
- how the medication should be stored and its expiry date
- any possible side effects that may be expected

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

If rectal diazepam or other medication is given, another member of staff must be present whilst administering the dose.

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 staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

Non-prescription medication, such as pain or fever relief (e.g. Calpol) , may be administered, but only with prior written consent of the parent and only when there is a health reason to do so, such as a high temperature. Children under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor.

We may administer children's paracetamol (un-prescribed) for children in the case of extremely high temperature to prevent febrile convulsion and where a parent or named person is on their way to collect the child. We will have prior written consent from parents to the administration of such medication. We will also seek verbal consent prior to administering the medication.

We may administer children's Piriton syrup (un-prescribed) in the case of allergic reaction to reduce the symptoms of anaphylactic shock and where a parent or named person is on their way to collect the child. We will have prior written consent from parents to the administration of such medication. We will also seek verbal consent prior to administering the medication.

The administering of any un-prescribed medication is recorded in the same way as any other medication.

Please note, as per the label on the bottle, Calpol must not be given to a child for more than 3 days. Therefore if a child has been given Calpol on 3 consecutive days they will not be able to return to Pavilion until they have been seen by a GP. The 3 days include any days when a child is not at Pavilion. Please communicate with the session manager who will advise you when your child is able to return.

The manager will monitor the medication reports on Parenta 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

All medication is stored safely in a wall cupboard or refrigerated as required. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.

The session Manager is responsible for ensuring the medicine is handed back at the end of the day to the parent.

For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when- required basis. The session Manager will check that any medication held in the setting is in date and return any out-of-date medication back to the parent.

A supply of children's paracetamol suspension (Calpol) and children's Piriton syrup will be stored in a wall cupboard. The date of opening will be recorded on the bottles. The bottles will be checked by the session manager every three months to ensure supply is available, and disposed of after six months if opened.

Although the session manager is responsible for the administration of medicine, the staff are informed of the procedure and reminded at regular intervals during staff meetings.

## Children who have 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 on-going medication. This is the responsibility of the session manager alongside the key person if applicable. 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, the session Manager/key person/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 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 child's GP if necessary where there are concerns.

An individual health plan for the child is drawn up with the parent; outlining the key person's role and what information must be shared with other adults who care for the child.

The individual health plan should include the measures to be taken in an emergency.

We review the individual health plan every six months, or more frequently 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 individual health plan and each contributor, including the parent, signs it.

## Managing medicines on trips and outings

If children are going on outings, the session manager or practitioners will accompany the children 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, the original pharmacist's label and the name of the medication. Inside the box is a copy of the consent form and a card to record when it has been given, including all the details that need to be recorded in the medication record as stated above. For medication dispensed by a hospital pharmacy, where the child's details are not on the dispensing label, we will record the circumstances of the event and hospital instructions as relayed by the parents.

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 and the name of the medication. Inside the box is a copy of the consent form signed by the parent.

The setting's supply of Calpol and Piriton syrup will be taken out alongside the First Aid kit for any instances of high temperature or allergic reaction as described above, and the same procedures will apply as to administration within the setting.

This procedure should be read alongside the outings procedure.

Legal framework

The Human Medicines Regulations (2012)

UK GDPR and the Data Protection Act 2018.

The statutory framework for the Early Years Foundation Stage (2025)

This policy was created in September 2021

This policy will be reviewed annually or as required.

Last updated: 07.07.26

Signed by Chair of Trustees: 

Signed by the Operations Manager: