



Administering Medicines

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 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 leader 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 the session leader, the 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 leader checks that it is in date and prescribed specifically for the current condition.
- Parents must give prior written permission for the administration of medication. Parents will be asked to sign a consent form, which will be kept in a locked filing cabinet and will state the following details:
 - the full name of child and date of birth
 - the name of medication and strength
 - who prescribed it
 - the dosage and times to be given in the setting
 - the method of administration
 - how the medication should be stored and its expiry date
 - any possible side effects that may be expected
 - the signature of the parent, their printed name and the date
- The administration of medicine is recorded accurately in our medication record book 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 medicine record book is kept in a locked filing cabinet. The medication record book records the:
 - name of the child
 - name and strength of the medication
 - name of the doctor that prescribed it
 - 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
 - parent's signature (at the end of the day).
- We use the Pre-school Learning Alliance Medication Administration Record book for recording the administration of medicine and comply with the detailed procedures set out in that publication.

- 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 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 the session leader 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) and teething gel, 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 as part of the child's registration pack. 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 as part of the child's registration pack. 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 the preschool until they have been seen by a GP. The 3 days include any days when a child is not at the preschool. Please communicate with the Preschool Manager who will advise you when your child is able to return.

- The manager will monitor the medication record book 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 kitchen 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 leader 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 leader 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 the refrigerator. The date of opening will be recorded on the bottles. The bottles will be checked by the Preschool Manager every three months to ensure supply is available, and disposed of after six months if opened.

Although the session leader 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 our 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, the session leader / key worker 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 key person 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 preschool’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)

General Data Protection Regulation (2018)

The statutory framework for the early years foundation (2017)

Other useful Pre-school Learning Alliance publications

Medication Administration Record (2015)

Daily Register and Outings Record (2015)

This policy was reviewed in March 2020

This policy will be reviewed annually or on a need to do basis.

Signed by the Pre-School Committee:

Signed by the Pre-School Manager:

