



Jeavons Wood Pre-school

Administration of Medication Policy

Our Policy

It is not our policy to care for sick children, they should be at home until they are well enough to return to the setting. However, we will administer medication as part of maintaining their health and well-being or when they are recovering from an illness.

In many cases, it is possible for children's GP's to prescribe medication that can be taken at home in the morning and evening. As far as possible, medication will only be administered where it would be detrimental to the child's health if not given in the setting. If a child has been prescribed medication, it is our policy that the child is kept at home for the first 48 hours. This is to ensure that no adverse effects take place in the setting as well as to give time for the medication to take effect.

The Manager is responsible for ensuring all staff understand and follow these procedures.

The key person, where possible, is responsible for the correct administration of medication to the child. This includes ensuring that parental consent forms have been completed, that medications are stored correctly and that records are kept according to procedures. In the absence of the key person, the Manager is responsible for the overseeing of administering medication.

High temperatures

Children are not allowed to attend the setting if they have a temperature above 37 degrees and/or if medication has been given that day for this temperature.

If a child presents with a temperature above 37 degrees whilst in the setting, parent/carers will be contacted and asked to collect their child as soon as possible. In the event of a parent/carer not being able to be

contacted, we will try to contact people from the child's emergency contacts on the registration form. If no one is contactable, we will administer emergency medication (Calpol) if necessary and if consent has been given. If the child's temperature has not reduced after 30 minutes of being given Calpol and still no one has been contactable, an ambulance will be called.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only prescribed medication complete with the prescription label is administered. It must be in-date and prescribed for the current condition.
- Children's prescribed medications are stored in their original containers, are clearly labelled and are put in a box labelled 'Children's Medication' on the top of the white cupboard (inaccessible to children) or stored in the fridge (if required).
- 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. No medication may be given without these details being provided:
 - full name of child and date of birth.
 - name of medication.
 - the reason for medication.
 - date, time and dosage to be given in the setting.
 - how the medication should be stored and expiry date.
 - any possible side effects that may be expected should be noted.
 - consent from parent/carer and date of consent
- All staff are made aware of this procedure during induction, staff meetings and as an on-going basis when a consent form is completed.
- The administration is recorded accurately each time it is given and is signed by staff. Parents sign the form to acknowledge the administration of medication. The medication form records:
 - name of child.
 - name of medication.
 - the date, time and dose given.
 - signed by the keyperson/manager/staff member.
 - parent signature at the end of the session.

Storage of medication

All medication is stored safely in a box out of child reach or refrigerated. All staff are made aware of this system during their initial induction to the setting.

The child's key person is responsible for ensuring medication is handed back at the end of the session to the parent/carer.

For some conditions, medication may be kept in the setting. Key persons check that any medication held to be administered on a long-term basis, is in date and returns any out-of-date medication back to the parent/carer. Any long-term medication is reviewed with the parent/carer every 3 months.

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

If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff 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.

A risk assessment is carried out for long term medical conditions that require ongoing medication. This is the responsibility of the Manager. Other medical or social care personnel may need to be involved in the risk assessment.

Parent/carers will sign and contribute (where necessary) to a risk assessment. They should be shown around the setting, understand the routines and activities and discuss anything which they think may be a risk factor for their child.

A medical care plan for the child is drawn up with the parent; outlining the medical condition and what actions to follow in the case of an emergency.

Managing medication on trips and outings

Medication for a child is taken in a sealed container clearly labelled with the child's name and name of the medication. Inside the container is a copy of the consent form/long-term medication form.

If a child on medication has to be taken to hospital the child's medication is taken, clearly labelled with the child's name, the name of the medication, along with a copy of the consent form signed by the parent/carer.

Legal framework

- Medicines Act (1968)

Policy Written - June 2013

Date Reviewed - March 2020

Date to be Reviewed - March 2021

Signed:

Dated:

Governor: