



Buckden Pre-School Playgroup

A place for Children to grow, to learn and to flourish

Registered Charity No. 291840

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Reflecting on Quality
committed to improvement

Safeguarding and Welfare Requirement: Health

Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date.

Administering medicines

October 2016

Policy statement

While 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 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.

Our staff are 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. The manager is responsible for the overseeing of administering medication.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- We only 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 under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor.
- Children's prescribed 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.
- Parents must give prior written permission for the administration of medication. The staff member receiving the medication will ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:

- 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; and
- the signature of the parent, their printed name and the date.
- The administration of medicine is recorded accurately on the child's individual medicine form and signed by the person administering the medication [and a witness]. Parents are shown the form at the end of the day and asked to sign the form to acknowledge the administration of the medicine. The medicine form records the:
 - name of the child;
 - name and strength of the medication;
 - date and time of the dose;
 - dose given and method;
 - signature of the person administering the medication and a witness and
 - parent's signature.
- We generate a form for each child from Nursery Manager for recording the administration of medicine.
- If the administration of prescribed medication requires medical knowledge, we obtain individual training (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.
- We monitor medication forms 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

- Emergency medicines are kept on the shelf above the sink with a care plan and parental permission to administer. These medicines and care plans are discussed at staff meetings and updated with parents as needed. Any medications that require refrigeration are kept in the fridge in the quiet room and tablets and medication that need storing at room temperature are kept in the First Aid box in the quiet room above the sink. Michelle, this is the handwritten part on the paper copy within the insert box.
- All medication will be stored in accordance with instructions.
- All medication is stored safely in individual boxes, which are kept out of the reach of all children, or refrigerated as required.
- Staff on duty are responsible for ensuring any medication is handed back to parents 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-required basis. In this instance staff must check that all medication is in date, relevant to the child and must get the parents to complete a care plan to allow ongoing administration. All care plans must be checked with parents half termly to ensure they are still relevant and to ensure medication remains in date.

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

- A health care plan for the child is drawn up with the parent (Forms 2 and 3, Managing Medicines in Schools and Early Years Settings)
- The health care plan should include the measures to be taken in an emergency.
- 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 health care plan.
- The health care plan includes vigorous activities and any other activity that may give cause for concern regarding an individual child's health needs.
- Staff will seek advice from parents regarding arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.
- We review the health care 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 health care plan and each contributor, including the parent, signs it.

Managing medicines on trips and outings

- If children are going on outings, the key person for the child 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 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.
- 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.
- This procedure should be read alongside the outings procedure.

Legal framework

The Human Medicines Regulations (2012)

This policy was adopted by		<i>(name of provider)</i>
On		<i>(date)</i>
Date to be reviewed		<i>(date)</i>
Signed on behalf of the provider		

Name of signatory

Role of signatory (e.g. chair,
director or owner)

Other useful Pre-school Learning Alliance publications

Medication Record (2013)
Daily Register and Outings Record (2012)

This policy will be reviewed annually.