



Medicines Policy

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.

Administering medicines during the child's sessions will only be done if absolutely necessary.

If a child has not had a medication before, it is advised that the parent/carer keeps the child at home for the first 48 hours to ensure there are no adverse effects.

Key persons are responsible for administering medicine to their key children; ensuring consent forms are completed, medicines are stored correctly and records are kept. In the absence of the key person, another member of staff is responsible for the overseeing of administering medication. We notify our insurance provider of all required conditions, as laid out in our insurance policy.

Consent for administering medication

- Only a person with parental responsibility, or a foster carer, may give consent. A childminder, grandparent, parent's partner who does not have parental responsibility, cannot give consent.
- When bringing in medicine, the parent informs the key person or if the key person is not available, the Pre-School Manager or Deputy Manager.
- Staff who receive the medication, check it is in date and prescribed specifically for the current condition. It must be in the original container (not decanted into a separate bottle). It must be labelled with the child's name and original pharmacist's label if prescribed.
- The member of staff who accepts the medicine is responsible for completing the consent form. They should ask the parent to sign a consent form stating the following information. No medication will be given without these details:
 - Full name and date of birth of child
 - Name of medication and strength
 - Who prescribed it
 - Dosage to be given
 - How the medication should be stored and the expiry date
 - A note of any possible side effects
 - Signature of the parent, printed name of parent and the date
 - Member of staff full name and date
- Non-prescription medication, such as pain or fever relief (e.g. Calpol), may be administered, but only with prior written consent of the parent/carer 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. The administering of un-prescribed medication is recorded in the same way as any other medication.

Administering medication

- 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
 - prescribed for the current condition
 - clearly named
 - in the original container (not decanted into a separate bottle)
 - labelled with the original pharmacist label
- Medication prescribed by a hospital pharmacy will not have the child's details on the label but should have a dispensing label. Staff must check with parents and record the circumstances of the events and hospital instructions, as relayed to them by the parent.
- Children's prescribed and non-prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- 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/carers 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 record book 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 who verifies that the medication has been given correctly
 - parent/carer'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.

The Pre-school Learning Alliance Medication Administration Record book is stored in the filing cabinet in the Pre-School office. New members of staff are shown its location and shown how to correctly complete the relevant paperwork as part of their induction process by the Pre-School Manager.

- 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 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 locked cupboard, out of reach of children 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 child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent/carer.
- For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when- required basis. In this case, a Healthcare Plan must be

completed. Key persons check that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

- Parents are not permitted access to where the medicine is stored to avoid a mix-up with medication or staff not knowing there has been a change.

The location of stored medication

In our setting medication is stored in the staff kitchen in either:

- The medicine cupboard which is labelled accordingly or
- The refrigerator

New members of staff are shown where medication is stored as part of their induction process

Children who have a long term medical conditions requiring 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/carers 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, 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 need for staff forms part of the risk assessment.
- The risk assessment includes any 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/carer; 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/carers receive a copy of the individual health plan and each contributor, including the parent/carer, signs it.

Managing medicines on trips and outings

- If children are going on outings, the key person for the child 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, 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/carers.

- On returning to the setting the card is stapled to the medicine record book and the parent/care 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/carer.
- This procedure should be read alongside the outings procedure.

Staff taking medication

Staff taking medication must inform their manager. The medication must be stored securely in staff lockers or a secure area away from the children. The manager must be made aware of any contra-indications for the medicine so that they can risk assess and take appropriate action as required.

Legal framework

The Human Medicines Regulations (2012)

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