

Administering medicines

Policy statement

While it is not our policy to care for sick children, 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.

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 been given prescribed medication, we ask that the parent keeps the child at home 24 hours from the first dose. This is to ensure there are no adverse effects, as well as to give time for the medication to take effect.

If your child requires Calpol or Ibruprofen (e.g. to bring down a fever) before attending the setting then they should not attend preschool.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- We only administer medication when it has been prescribed for the child by a doctor (or other medically qualified person). It must be in-date, prescribed for the current condition and have the child's name on the label.
- Non-prescription medication, such as pain or fever relief (e.g. Calpol) and teething gel, may be administered, but only with prior consent from 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. The administering of un-prescribed medication is recorded in the same way as any other medication.
- Children's prescribed medicines must be stored in their original containers, clearly labelled and are inaccessible to the children.
- Two members of staff are present when administering medication. Both staff members are to check that the medicine is for the correct child, in date and that the correct dose has been drawn.

- 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 will be given without these details being provided:
 - the full name of child and date of birth
 - the name of medication
 - the dosage and times to be given in the setting
 - how the medication should be stored
 - the signature of the parent, their printed name and the date.
- If the administration of prescribed medication requires medical knowledge, we obtain training 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 a member of staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- We monitor the medication forms to look at the frequency of medication given in the setting. For example, a high incidence of antibiotics being prescribed for many children at similar times may indicate a need for better infection control.

Storage of medicines

- All medication is stored safely in a locked 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 and kept within the office.
- The medication will be given to the parent at the end of the day – not given to the child to give to their parent.
- For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when-required basis. Staff check that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

At Busy Otters, medication is generally required to be stored in the fridge. This is located behind a locked gate where children have no access to the kitchen. Other medication such as inhalers are stored in a box on a high shelf out of reach of children.

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

- Staff and Parents will carry out a risk assessment for their child where necessary if there is a long-term medical condition that requires on-going medication. Other medical or social care personnel may need to be involved in the risk assessment of this.
- For some medical conditions (eg diabetes), 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.
- 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.