



Administering Medicines

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.

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 at 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.

These procedures are written in line with the guidance in *Managing Medicines in Schools and Early Years Settings*; the manager is responsible for ensuring all staff understand and follow these procedures.

A member of staff is responsible for the correct administration of medication to children and this is then witnessed by a colleague. This includes ensuring that parental consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) is administered. It must be in-date and prescribed for the current condition (medicines containing aspirin will only be given if prescribed by a doctor).
- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- Parents give prior written permission for the administration of medication. The staff receiving the medication must ask the parents 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 the medication and strength;
 - the dosage to be given at the setting;
 - 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 a medication record card each time it is given and is signed by the keyperson/manager. Parents are shown the record at the end of the session and asked to sign to acknowledge the administration of the medicine. The record card records the:
 - name of the child;



- name and strength of medication;
- date and time of dose;
- dose given and method;
- signature of keyperson/manager; and
- parents signature.

Storage of medicines

- All medication is stored safely in a locked box or refrigerated as required. Where the box or refrigerator is not used solely for storing medicines, they are kept in a marked container.
- The child's keyperson/manager is responsible for handing the medicine 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. Key persons must check that any medication held in the setting is in date and return any out-of-date medication back to the parent.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.

Children who have a long-term medical condition who may require ongoing medication

- A risk assessment is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the SENCO alongside the keyperson. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will also contribute to the risk assessment. They should be shown around the setting, understand the routines and activities and point out anything which they think will be a risk factor for their child.
- For some medical conditions, key staff will need to have training and a basic understanding of the condition, as well as how the medication is to be administered correctly. The training for staff forms part of the risk assessment.
- The risk assessment includes vigorous activities and any other activity that may cause concern regarding an individual child's health needs.
- The risk assessment includes arrangements for taking medications on outings and advice is sought from the child's GP if necessary, where there are concerns.
- A health care plan for the child is drawn up with the parent; outlining the keyperson's role and what information must be shared with other staff who care for the child.
- The health care plan should include what measures should be taken in an emergency.
- The health care plan is reviewed 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.



Legal Framework

- The Human Medicines Regulation (2012)

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