

## **Medication policy**

### **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 our nursery, 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 a child's GP 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 nursery. If a child has not had a medication before, it is our policy that the parent keeps the child at home for the first 48 hours to ensure no adverse effect, as well as to give time for the medication to take effect. This statement also applies to all children on antibiotics.

These procedures are written in line with current government guidance: 'Supporting Pupils at School with Medical Conditions'. The Manager is responsible for ensuring all staff understand and follow these procedures.

Staff are responsible for administering medicine to the children in their care. In most cases, this person will be the child's Key Person. Administering medicine includes ensuring that a consent form has been completed by parents, 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.
- Children's prescribed medicines are stored in their original containers, are clearly labeled and are inaccessible to the children.
- 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 and strength
  - Date and time of any doses given at home prior to arrival
  - Dosage to be given in the setting
  - How the medication should be stored and the expiry date
  - Signature, printed name of parent and date.
- The member of staff who takes the medicine on arrival (usually the Key Person) will be responsible for administering the medicine and setting an alarm/reminder in order that this is done at the correct times. They must make arrangements for their group of children to be supervised by another member of staff in their absence.

- Two members of staff must be present when administering medication to a child, one to administer the medication and the other to witness the correct procedure.
- Medicines must be returned to parents at the end of every day. The parent should sign the Medication Form to say that they have received the medicine.
- All qualified staff have the ability to administer medication, although where possible this responsibility should lie with the Key Person. If any staff member feels uncomfortable or incompetent in administering the medication, the responsibility will lie with the Nursery Manager.
- The administration is recorded accurately each time it is given and is signed by staff. Parents sign to acknowledge the administration of a medicine. The medication form records:
  - Name of child
  - Name and strength of medication
  - Date and time of dose
  - Date and time of any doses given at home prior to arrival
  - Dose given and method
  - Signature of the key person/Manager
  - Signature of verification by the parent at the end of the day.

### **Storage of medicines**

- All medication is stored safely in a high cupboard or refrigerated. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked box.
- The child's Key Person is responsible for ensuring medicine is handed back to the parent/carer at the end of the day.
- For some conditions, medication may be kept in the setting. The Key Person checks that any medication held to administer on an as and when required basis, or on a regular basis, is in date and returns any out-of-date medication back to the parent.
- If a child requires paracetamol to keep a high temperature down, they are not well enough to be attending the setting. If a staff member recognises that a child's temperature is raised and a child is unwell whilst attending the setting, then a staff member may administer Calpol as a first aid procedure to reduce a fever (temperature over 38°C). The parent/carer is called to collect the child. If the child's temperature is worryingly high, the procedures for a medical emergency will be followed.
- All medication is stored either in a high marked cupboard or if medication needs to be refrigerated, it is stored away from all food and drink and clearly labelled.
- 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.

- If a child refuses medication, the parent will be called and will advise the nursery how to proceed. Children will never be forced to take medicines at the setting, the only exception being the rare emergency situation in which adrenalin injections have to be administered to a child in anaphylactic shock.

### **Allergies**

- If a child has an allergy for which they carry adrenalin injections, a procedure for storing and carrying these medicines is discussed with parents and put in place.
- Staff will have training on the signs and symptoms of anaphylaxis and training on how to administer an adrenalin injection.
- Parents are responsible for ensuring that any adrenalin pens kept at the nursery are in date and new ones are supplied when the use by date is reached.

### **Children who have long-term medical conditions and 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 Manager alongside the Key Person. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents 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 needs for staff is part of the risk assessment.
- The risk assessment includes vigorous activities and any other nursery 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 the child's GP's advice is sought if necessary, where there are concerns.
- A health care plan for the child is drawn up with the parent; outlining the Key Person's role, and information must be shared with other staff who care for the child.
- The health care plan should include measures to be taken in an emergency.
- The health care plan is reviewed every six months or more 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, staff accompanying the children must include the Key Person for the child with a risk assessment, or another member of staff who is fully informed about the child's needs and/or medication.
- 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 and a card to record when it has been given, with the details as given above.
- On returning to the setting the card is stapled to the Medication Form 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 labeled 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 is read alongside the Outings Policy

### **Legal framework**

Medicines Act (1968)

### **Further guidance**

'Supporting Pupils at School with Medical Conditions'

### **Other useful Pre-school Learning Alliance publications**

Register and Outings Record (2010)

This policy was adopted at a meeting of The Natural Nurture Nursery Management Committee held on the 3<sup>rd</sup> March 2016.