

Administering Medicines

We recognise it is not in the best interests of children to care for children who are ill or unwell at nursery. Children who are unwell require time to be looked after and recover at home. The nursery will agree to administer medication as part of maintaining a child's health and well-being or when they are recovering from an illness. We will administer medication that is recommended by a pharmacist or nurse without a written prescription, as well as any medication prescribed by a doctor, dentist or an appropriately qualified pharmacist or nurse.

In many cases it is possible for children's GP's to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be undertaken 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 24 hours after taking the initial dose to ensure there are no adverse effects and to give the medicine time to take effect.

These procedures are written in line with current guidance in 'Managing Medicines in Schools and Early Years Settings'. The Manager has overall responsibility for ensuring all staff understand the policy and the deputy manager the implementation and monitoring of procedures and policy.

The principle person responsible for the administration of medication to a child is the child's key worker as far as possible. The Senior practitioner has a responsibility to also be aware of any child who requires medication. This responsibility includes ensuring that a parent consent form has been completed, that the medicine is stored correctly and that records are kept according to the procedures. In the absence of the key worker, the Senior practitioner is responsible for the overseeing of administering medication.

Not all medicines, both prescription and non-prescription have to have been prescribed for a child by a doctor, dentist, nurse or pharmacist for example nappy cream, teething gel. However, the nursery cannot decide for itself that a particular child needs medication. Both prescription and non-prescription medicines can only be administered where written permission has been obtained from the child's parent or carer. The nursery should not expect parents to make unnecessary appointments with their child's doctor to obtain prescriptions for medicines (other than for medicines containing aspirin) that can normally be obtained directly from a chemist.

Procedures

Administering medication

- Children taking prescribed medication must be well enough to attend the setting and be free from sickness and diarrhoea for at least 48 hours
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- Parents must give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign the 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
 - who prescribed it; - dosage to be given in the setting

- how the medication should be stored and expiry date
 - any possible side effects that may be expected should be noted
 - Parental consent with signature, printed name of parent and date.
- The administration is recorded accurately each time it is given and is signed by the administering member of staff. Parents are shown the record at the end of the session and asked to sign the record to acknowledge the administration of a medicine. The medication record records: -
 - name of child
 - name and strength of medication
 - the date and time of dose
 - dose given and method
 - signed by key worker/manager
 - Verified by parent signature at the end of the day

Storage of medicines

- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- All medication is stored safely in the labelled First Aid draw or refrigerated as required.
- Whenever possible all stored medicines are to be kept in a marked (named) plastic bags.
- The child's key worker is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the setting for example allergy medication. The key worker must check that any medication held to administer on an 'as and when' required basis, or on a regular basis, is in date and any out-of-date medication is returned to the parent.

Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children must include the key worker for the child with a Health Care plan is needed, 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 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 medicine record and the parent signs it.

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

- A medical risk assessment is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the Manager, Deputy Manager alongside the keyworker. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will be asked to contribute and review contribute to a medical risk assessment.
- 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. Training needs for staff form part of the risk assessment.

- The risk assessment includes any 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 worker's role and what information must be shared with other staff who care for the child.
- The Health Care Plan should include the measures to be taken in an emergency. The Health Care Plan is reviewed yearly or more if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.
- If a child on medication is to be taken to hospital, the child's medication is taken in a clearly labelled sealed bag with the child's name, name of the medication and signed consent form.

Administration of Non Prescribed paracetamol when a child becomes unwell at nursery

- Children's paracetamol (un-prescribed) is only administered for children in the case of a high temperature to primarily prevent febrile convulsion. The parent will be contacted to discuss the reason for administration and seek consent for paracetamol and discuss if there is a need to collect the child. The staff member will complete a parental permission for paracetamol form.
- The child's presentation and temperature will be retaken after 30 minutes and if the child's temperature has not returned to normal, the child is upset or not coping with the nursery day the parent will be asked to collect their child. On collection of the child, parents need to sign the medication form and log to acknowledge the administration of the paracetamol

Further guidance

- Managing Medicines in Schools and Early Years Settings
- Giving medication to children in registered childcare A childcare factsheet

Manager's signature

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