



## MEDICINES 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 the setting, we will agree to administer prescribed 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.

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 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 to ensure there are no adverse effects, as well as to give time for the medication to take effect.

Our staff are responsible for ensuring that parent consent forms have been completed, that medicines are stored correctly according to manufacturers guidance and that records are completed according to our policy.

### **Prescribed medication**

- Children taking prescribed medication must be well enough to attend the setting.
- 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 and prescribed for the current condition. Children's prescribed medicines are stored in the kitchen cupboard in their original container, with prescription label intact.
- Parents must give prior written permission for the administration of prescribed medication. The staff member receiving the medication will ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:
  - The full name of child
  - Date medicine is being bought into setting
  - Reason for medication
  - The name of medication and strength
  - The dosage and times to be given in the setting
  - The method of administration
  - Any possible side effects that may be expected
  - Who it was prescribed by and on what date
  - The signature of the parent,

The member of staff will then check the information given alongside the medication and if the information is correct will sign the medicine form also to agree this will be given. If there are any discrepancies the staff member must speak with the manager or her deputy while the parent is still onsite.

- The administration of medicine is recorded accurately on a medication record sheet each time it is given and is signed by the person administering the medication and a witness. Parents are shown the record at the end of the day and asked to sign the administration of medication sheet.

### **Non-prescribed medication**

The Pre-School does not routinely administer non prescribed medication. The exceptions to this are children's paracetamol, children's ibuprofen and children's antihistamine (see illness policy). These will only be administered in emergency situations where a child has been given written consent on their registration form. When a member of staff administers this medication, they must ensure that dosage guidance are checked and a witness is present. The staff member must complete an administration of medication form and get the parent to sign this upon collection. Every effort will be made to contact the child's parent/carer before administration of such medicine, if it is safe to do so.

**We ask that parents inform us if they have given their child any medication within 4 hours of their arrival at Pre-School.**

### **Health & Care Plans for ongoing medical needs**

- For a child with an ongoing medical condition(s), the parents/carers will be required to complete a Health & Care Plan. This will include providing information about the medical condition, any medication that the setting may need to administer including dosages etc as well as instructions for further treatment i.e. when to call the emergency services. Administration of medication will be dealt with in the same way as any other prescribed medicines.
- 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 staff member what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- It may be necessary to carry out a risk assessment for a child with a long-term medical condition that requires on-going 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 be asked to contribute to the risk assessment and will agree its implementation.

### **Managing medicines on trips and outings**

- If children are going on outings, all staff on the outing will be 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 long-term medical treatment plan

### **Storage of medicines**

All medication is stored safely in the medication's cupboard, in a marked plastic box, in the kitchen (children do not have access to this area) or refrigerated as required.

- Staff are responsible to ensure that medicine is handed back at the end of the day to the parent, unless it is to be kept at the setting.
- For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when-required basis. The staff member in charge of Health & Safety checks that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

### **Legal framework**

- The Human Medicines Regulations (2012)

### **Policy written August 2022**