

ADMINISTERING MEDICINES POLICIES AND PROCEDURES FOR WHIZZ KIDS PRE-SCHOOL

Policy statement

It is not our policy to care for sick children, who should be at home until they are well enough to return to our pre-school.

In many cases, it is possible for children's GP to prescribe medicine that can be taken at home in the morning and evening. The pre-school will only administer medicines where it would be detrimental to the child's health if not given during our pre-school session. If a child has not had the medication before, it is advised that the parent/carer 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.

These procedures are written in line with current guidance in 'EYFS Statutory Framework 2017' and the managers are responsible for ensuring all staff understand and follow these procedures.

Procedures

- Children taking prescribed medication must be well enough to attend our pre-school.
- 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 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 parent to sign a consent form as no medication may be given without these details being provided.

Storage of medicines

- All medication is stored safely in a locked cupboard or refrigerated. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- The child's key person is responsible for ensuring that the medicine is handed back at the end of the session to the parent.
- For some conditions, medication may be kept at our pre-school. 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any medication held to administer on an as and when required basis, or on a regular basis, is in date and returns any out-of-date medication back to the parents.
- If the administration of prescribed medication required medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- If rectal diazepam is to be given, then another member of staff must be present and co-sign 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 their key person what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

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

- A risk assessment is carried out for each child with long term medical conditions that require 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 also contribute to a risk assessment. They would be shown around our pre-school, 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 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 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 every six months or more if necessary. This includes reviewing the medication, eg changes to the medication or the dosage, any side effects noticed etc.
- Parent/carers 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 for a child is kept in a sealed plastic box clearly labelled with the child's name, name of the medication, consent form and details of dosage/times.
- On returning to our pre-school the information is transferred to the medicine record book 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 labelled with the child's name, name of the medication and inside the box is a copy of the consent form signed by the parent.

Legal framework

- Medicines Act (1968) - Medicines Act 1968 is up to date with all changes known to be in force on or before 30 October 2018. There are changes that may be brought into force at a future date

Further guidance

- EYFS Statutory Requirements 2017

This policy and its procedures was adopted at a meeting between Mrs Terina Wilkinson and Mrs Sara Ward on 26th November 2019 and will be reviewed annually or sooner if necessary.

Signed by

Mrs Terina Wilkinson

Room 1 Manager

And

Mrs Sara Ward

Room 2 Manager