



# Caterpillars Pre-School

Administering Medicines Policy

June 2018



## 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 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 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 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 48 hours to ensure no adverse effect as well as to give time for the medication to take effect.

The key person is responsible for the correct administration of medication to children for whom they are the key person. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. In the absence of the key person, the manager is responsible for the overseeing of administering medication.

## Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only prescribed medication is administered. It must be in-date and prescribed for the current condition.
- Non-prescription medication, such as pain or fever relief (e.g. Calpol) and teething gel, may be administered, but only with prior written consent of the parent and only when there is a health reason to do so, such as a high temperature. Children under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor. The administering of un-prescribed medication is recorded in the same way as any other medication.
- 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 will 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;
  - who prescribed it;
  - dosage and times to be given in the setting;
  - method of administration
  - how the medication should be stored and expiry date;
  - any possible side effects that may be expected should be noted; and
  - signature, printed name of parent and date.
- The administration is recorded accurately in our medication book each time it is given and is signed by the person administering the medication. Parents are shown the record at the end of the session and are asked to sign the record book to acknowledge the administration of a medicine. The medication record book records:



- name of child;
  - name and strength of medication;
  - the date and time of dose;
  - dose given and method; and is
  - Signed by person giving the medicine
  - Parent/carer signature.
- If the administration of prescribed medication requires medical knowledge, we obtain individual training 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.
  - We monitor the medication record book is monitored to look at the frequency of medication given in the setting. For example, a high incidence of antibiotics being prescribed for a number of children at similar times may indicate a need for better infection control.

### **Storage of medicines**

- All medication is stored safely or refrigerated.
- The child's key person 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. Key persons check that any medication held is in date and returns any out-of-date medication back to the parent/carer.

Caterpillars medication is stored in the locked filing cabinet. During the session the medication book and medicines such as e.g. Epipens are kept on the hatch in a blue box. Parent's bringing in any medication for the session put the medication in there e.g. Asthma sprays. All staff sign a form to say that they have read the medication book and understand who has what condition.

### **Children who have long term medical conditions and who may require on 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.



- For children attending who is Diabetic we Provide a box for the child containing: sharps box, gloves, wipes, high energy snacks/gluco tabs and Ibuprofen. Parent brings in a bag daily his blood level monitors with strips and scanner.
- The risk assessment includes arrangements for taking medicines 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 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, 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, usually at Pre-School the parent/carer attends with the child. The key person will bring a completed risk assessment.
- If the child is not accompanied by a parent or carer the medication for a child is taken in a sealed plastic box clearly labelled with the child's name, 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 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. Inside the box is a copy of the consent form signed by the parent.
- This procedure is read alongside the outings procedure.

This policy was adopted at a meeting of Caterpillars Pre-School

Held on	May 2018
Date to be reviewed	May 2019
Signed on behalf of the management committee	
Name of signatory	Dan Mitchell
Role of signatory (e.g. chair/owner)	Chair of Committee