

6.0 HEALTH

6.1 Administering medicines

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

Oral medicines will only be administered if absolutely necessary, with a written instruction from the parent. We reserve the right to refuse to give medicine and to ask the parent/carer to come in and do it instead.

The managers/deputy are responsible for the correct administration of medication to children. This includes ensuring that parent consent forms have been completed, 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.
- We only usually administer medication that has been prescribed for the child by a doctor (or other medically qualified person). It must be in-date and prescribed for the current condition.
- A child's prescribed medicine is stored in its original container, in a box labelled with the child's name and a photograph, and is inaccessible to the children. On receiving the medication, the practitioner checks that it is in date and prescribed specifically for the current condition.
- Parents must sign a consent form giving written permission for the administration of medication.

The consent form contains:

- the full name of child and date of birth
- the name of medication and strength
- who prescribed it
- the dosage and times to be given in the setting
- the method of administration
- how the medication should be stored and its expiry date
- any possible side effects that may be expected
- the signature of the parent, their printed name and the date
- The administration of medicine is recorded accurately in our medication record book each time it is given and is signed by the person administering the medication.

The medication record book records

- name of the child;
- name and strength of the medication;
- name of the doctor that prescribed it;
- date and time of the dose;
- signature of the person administering the medication.

- If the administration of prescribed medication requires medical knowledge, we obtain individual training 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.

Storage of medicines

- All medication is stored safely in a cupboard out of children's reach and is kept in a named plastic box with a photograph of the child.
- The manager/deputy 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 to be administered on a regular or as-and-when- required basis. The manager will check that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

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

- For some medical conditions, staff will need to have training in a basic understanding of the condition, as well as how the medication is to be administered correctly.
- An individual health plan for the child is drawn up with the parent; outlining the key person's role and what information must be shared with other adults who care for the child.
- The individual health plan should include the measures to be taken in an emergency.
- Parents receive a copy of the individual health plan, signed by each contributor, including the parent.

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