

## **8.1**

### **MEDICINE ADMINISTRATION**

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

Medication must be administered following strict guidelines. Any deviation breaks the license of the drug; and staff administering the medication would be accountable. It is important for parents and carers to note that staff members working with the children are not legally obliged to administer medication.

Paracetamol and Ibuprofen can be given if parents consent to this in writing.

- Children taking prescribed medication must be well enough to attend the setting.
- We only usually 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.
- 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. On receiving the medication, the member of staff checks that it is in date and prescribed specifically for the current condition. Prescribed medication will only be administered to the child whose name is on the prescription label.
- Parents must give prior written permission for the administration of 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 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 and a witness. Parents are shown the record at the end of the day and asked to sign the record book to acknowledge the administration of the medicine. The medication record book records the:
    - name of the child
    - name and strength of the medication
    - name of the doctor that prescribed it
    - date and time of the dose
    - dose given and method
    - signature of the person administering the medication and a witness who verifies that the medication has been given correctly
    - parent's signature (at the end of the day).
  - We use the Pre-school Learning Alliance Medication Administration Record book for recording the administration of medicine and comply with the detailed procedures set out in that publication.

Medication should be:

- In original containers
- Will only be administered to the child whose name is on the prescription label
- The dose on the prescription will be followed and no other dose will be allowed to be administered
- The medication must be in date and the correct date on the container
- To be safely stored out of reach of the children.
- Any antibiotics requiring refrigeration will be stored away from food in an area inaccessible to children.
- Emergency medication, such as inhalers and epi-pens, will be within easy reach of staff in case of an immediate need, but will remain out of reach of children.

Storage of medicines

- All medication is stored safely in a cupboard out of reach of the children. It is stored in the cupboard in the playroom, clearly marked with a 'first aid box' label, or refrigerated as required. As the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when- required basis. Key persons 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

- We carry out a risk assessment for each child with a long term medical condition that requires on-going medication. This is the responsibility of our 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 form part of the risk assessment.
- The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding an individual child's health needs.
- 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.
- We review the individual health plan every six months, or more frequently 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 individual health plan and each contributor, including the parent, signs it.

#### Managing medicines on trips and outings

- If children are going on outings, staff accompanying the students must include the key person for the student 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 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 consent form and a card to record when it has been given, including all the details that need to be recorded in the medication record as stated 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 and the name of the medication. Inside the box is a copy of the consent form signed by the parent.

- This procedure should be read alongside the Outings Policy.

### Sun Cream

- Students must wear sun cream at all times and a sun hat when outside in the sunny weather. The Ark Centre ask parents to supply sun cream and a hat for their child.
- Permission will be obtained from the parents/carers for the staff to be able to apply sun cream while the student is at The Ark Centre. However, parents/carers will be encouraged to apply the sun cream before the student starts their session. The staff will only reapply the cream if felt necessary.
- On days or times of day when the sun is extremely hot, the child's time outside will be reduced or they will be kept out of direct sunlight.
- As much as possible, children will be taught the need to protect themselves in the sun and the need for increase in fluids.
- Staff should be aware that children of Asian and black skin colouring can be very tolerant to sunshine. However, it is important to remember that burning can still occur and sun cream should still be applied.

### **Legal framework**

- The Human Medicines Regulations (2012)

### **Other useful Pre-school Learning Alliance publications**

- Medication Administration Record (2015)
- Daily Register and Outings Record (2015)