



## Administering medicines- Denmead Day Care

### 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 therefore teething, high temperature etc. **We cannot care for, and are not carers for sick children**, by which is defined as a transferable illness such as a cold or sickness and diarrhoea, and in the instance of contagious illness, the child should be home.

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. Even if a child has had the medication before, our policy is that the parent keeps the **child at home for the first 24 hours** to ensure no adverse effect as well as to give time for the medication to take effect, especially if they are a baby/child under two. This is to ensure that any reactions a child may have to the medication will occur when they are cared for by a parent / carer, and to prevent the spread of infection throughout the setting.

The staff is 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. Two members of staff need to witness the procedure and sign the medication book. One of these members will administer. If a child refuses to take the medicine then parents will be contacted at the earliest opportunity and a note recorded on the medicine form.

### Non-prescription medication

Examples of non-prescription medication include creams for nappy rash, and teething gels or powders. The nursery will not administer any medication that has not been prescribed for a child with the exception of emergency paracetamol to reduce a temperature, creams for nappy rash or teething gels or powders. If a child is teething, parents are welcome to provide teething gels / powders to be administered at the setting. These containers **must** be provided unopened, and a consent form signed to permit staff to apply the medication when needed. These applications will be recorded on Family.

## Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) is administered. It must be in-date and prescribed for the current condition. This includes Calpol and any other types of paracetamol-based medication.
- **If a child has a persistent high temperature or fever whilst at the setting, we advise parents to keep them off for 24hrs to ensure they are fully recovered before they return. A high temperature means the body is trying fight something and children need rest to ensure they recover.**
- NB: We keep a bottle of children's paracetamol (un-prescribed) in our medication box and is only administered to prevent febrile convulsion or high temperature in children. If a parent is going to be a long time picking up their child, we will obtain verbal consent from the parent and they must sign the medication form upon arrival. 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 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 to be given in the setting;**
  - **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.**
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- The administration is recorded accurately each time it is given and is signed by staff. Parents 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 key person/manager/ or available staff member; and is**
    - **verified by parent signature at the end of the day.**

### **Storage of medicines**

- All medication is stored safely in a marked container or refrigerated. Where the cupboard is not used solely for storing medicines, they are kept in a marked plastic box.
- A member of staff 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. A dedicated member of staff (**Amy Ambrose at Nursery / Sarah B at Junior WRAP**) check 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 parent.

**Medicines are stored in a marked plastic container. This container is kept in the locked cupboard.**

- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- If rectal diazepam is given another member of staff must be present and co-signs the record book.
- A child may self-administer if he or she is of an age where they are capable to do so. 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 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 keyperson of the child. 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 setting 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's 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 yearly unless there is a change in the child's treatment. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.

***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 taken with the first aid kit. The medication should be clearly labelled with the child's name, name of the medication, A copy of the consent form and a card to record when it has been given should be included, with the details as given above.
- On returning to the setting the medication form needs to be signed by the parent/carer.
- If a child on medication has to be taken to hospital, the child's medication is taken and is 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.
- As a precaution, children should not eat when travelling in vehicles.

This policy was adopted on the 15 January 2012.

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