



# **Bishop Cornish Preschool**

## **Administering Medicines Policy**

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#### **Policy statement**

While it is not the preschools policy to care for sick children, who should be at home until they are well enough to return to the setting, the preschool will agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness. The preschool will 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, especially a baby/child under two, 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.

Our staff are responsible for the correct administration of medication to children who attend the setting. 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.
- Staff 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), teething gel and antihistamines, 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/allergic reaction. 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. Prescribed medicines should be stored in

their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication, staff will check that it is in date and prescribed specifically for the current condition.

- Parents must give prior written permission for the administration of medication by completing the preschool medication consent form. Medication will not be administered without this form being completed by the parent/guardian. Verbal consent is not acceptable nor is consent given via a third party.
- The administration of medicine is recorded accurately in the medication record file each time it is given and is signed by the person administering the medication. 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 file records the:
  - name of the child
  - name and strength of the medication
  - 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).
- If the administration of prescribed medication requires medical knowledge, we obtain individual training for members of staff by a health professional.
- [If rectal diazepam is given, another member of staff must be present and co-signs 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 a member of staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- 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 in a locked cupboard or refrigerated as required. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- Staff will ensure 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. Staff 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*

- The manager will carry out a risk assessment for each child with a long term medical condition that requires on-going medication. 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, 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 risk assessment includes vigorous activities and any other 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 advice is sought from the child's GP if necessary where there are concerns.
- An individual health plan for the child is drawn up with the parent; outlining the role of the preschool 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.
- The preschool will 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 will 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 will accompany the children with a risk assessment, or another 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. For medication dispensed by a hospital pharmacy, where the child's details are not on the dispensing label, staff will record the circumstances of the event and hospital instructions as relayed by the parents.
- 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 procedure.

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