



Medication Policy

Children attending will have a wide range of medicinal requirements related to their individual needs, including short term (finishing a course of medication) and/or long term (medication to keep them well).

Staff will ensure procedures are followed in order to meet these needs. Medication will only be administered in order to maintain the child's health and wellbeing and/or when recovering from an illness.

Most children with medical needs can participate in everyday day experiences within the setting.

Children taking prescribed medication must be well enough to attend their Little Rookies session.

Procedures for Administration of Medication

We will only administer prescribed medication when it is essential to do so. Parents/carers will provide us with written consent for their child to be given medication for a minor ailment or allergy. If children attend the setting on a part time basis parents/carers should be encouraged to administer the medication at home. If parents/carers are present during the session they will also administer the medication for their own child.

Parents/carers will administer the first dose of a course of medication and any adverse reactions to the medication will be noted.

Staff will only administer medication that has been prescribed by a doctor or pharmacist. The medication will be in the original container or box along with the information leaflet and will be clearly labelled with the child's name, date of birth and dosage instructions.

- Children's medicines will be stored in their original containers in a locked cupboard; they will be clearly labelled and inaccessible to the children.
- Medicine spoons and oral syringes must be supplied by the parent/carer if required.
- Medications may only be used for the child whose name appears on the medicine. This includes emergency adrenaline injections (Epipen)
- Parents/carers must 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:

- full name of child and date of birth
- name of medication and strength
- if child has had medication prior to nursery Y/N. If yes, what time and dosage amount
- dosage to be given in the nursery
- symptoms/reason for medication to be administered
- expiry date noted and/or instructions followed (no more than 7 days in a row... etc)
- signature, printed name of parent and date.
- verification by parent at the end of the session.

No medication may be given without these details being provided.

Management of medication in day care of children and childminding services:
<http://hub.careinspectorate.com/media/189567/childrens-service-medication-guidance.pdf>

If a child is given too much medication, or medication is given to the wrong child, staff will inform the parent/carer immediately. Further advice/instructions should be sought from a Doctor. 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 name of the medication. Inside the box is a copy of the consent form signed by the parent. This procedure complies with the safeguarding of information sharing, including General Data Protection Regulations (GDPR) procedures.

If the child spits out or vomits the medicine, no further dose should be given, and the parent should be informed

immediately, or as soon as reasonably possible.

Reducing risk

Systems in place which are checked at every point to reduce risk in administering medication:

- The consent forms are checked and complete with the parent/carer and colleague at the initial stage.
- When the prescribed medication is being administered, it is rechecked with a colleague, this includes the dispensed and expiry dates.
- Reviews ensure that the medication is for a current condition (something prescribed for a condition six months ago might not be appropriate now).
- If a medicine, not dispensed recently, is still appropriate for use (for example liquid antibiotics usually only have a seven to ten day shelf life and eye drops should be discarded 28 days after opening and returned to the parent/carer).
- Good practice is to review consent every 3 months and at the start of term.
- Any special instruction in relation to storage or administration of medication will be complete and adhered to.

Paracetamol and Daycare of children

The information in the Care Inspectorate's "Management of medication in daycare of children and childminding services" is in line with existing government advice and best practice guidance. It offers a framework for the routine management of medication in such services.

It allows parents/carers to pro-actively choose if they would like to leave a small amount of medication in the service for an agreed time and for use by their child under agreed conditions. Some will choose to exercise this option, others will not depending on individual circumstances.

There may be a few occasions where we consider a child to be unwell, and contacts NHS 24 for advice. The care inspectorate has been advised that on rare occasion NHS 24 have advised individual services to administer an over the counter (OTC) medicine such as paracetamol immediately.

The care inspectorate has clarified the temporal aspect of this advice with NHS 24, who advised administration as soon as is reasonably possible is the correct interpretation.

We will not (and should not) be contacting NHS 24 on a routine basis for advice on every presentation of an ailment.

Storage of medicines

All medication is stored safely in a locked cupboard below 25° or in a fridge between 2°-8° in an area where children cannot access alone.

Medication for individual children will be stored in separate zip bags and labelled clearly with the child's name and date of birth.

Staff are responsible for ensuring medicine is handed back at the end of the day to the parent/carer.

Medication will also be returned to the parent/carer once the course of medication has been completed.

For some conditions, medication may be kept in the nursery.

Staff must check that any medication held to administer on an as and when required basis or on a regular basis, is in date.

Any out-of-date medication must be returned to the parent/carer.

Children who have long term medical conditions and who may require ongoing medication must have a complete medical care plan.

A record will be kept of any medication used by the children that is retained within the setting.

Lifesaving medication needs to be accessible to those trained to administer it.

Care plan

A care plan for the child is drawn up with the parent/carer outlining Little Rookies role, and what information must be shared with other staff who care for the child.

The child's care plan should include the measures to be taken in an emergency.

The child's 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/carers receive a copy of the child's care plan and each contributor, including the parent/carer, signs the consent for compliance with Data Protection, including GDPR and confidentiality of information.

When a parent/carer is present they will be responsible for the storage of their child's medication. Otherwise the manager will take responsibility.

Managing medicines on trips and outings

Medication for a child is taken in a sealed zip bag labelled with the child's name and name of the medication.

Inside the box, with the medication, is a copy of the consent form/medication form with the details as given above, which the parent/carer signs on return to the setting.

On no account may medicine be decanted into other containers or packets or envelopes.

Roles and Responsibilities

Parental/carer Role

It is the responsibility of the parents/carers to ensure that the child is well enough to attend the setting and the parent/carer will inform staff of any medication that is currently being administered.

Parents/carers will also inform us if the child has received the medication at home, when it was administered and how much was given to ensure the correct dosage instructions are being followed.

Parents/carers will be required to complete a Medication Permission Form giving permission for staff to administer the medication. This form will be updated regularly and a new form will be completed for each new medication required by the child.

Parents/carers will be asked to sign and acknowledge the medication given to their child each day.

Parents/carers will inform the setting if the child stops taking medication.

Staff Role

Before administering medication staff will need to have the relevant information pertaining to the child.

Staff will ensure that they have written permission from the parent/carer to administer the medication.

Each time a staff member administers medication to a child an Administration of Medication form will be completed and signed.

A second member of staff will witness the administering of the medication and then countersign the form once the medication has been given.

Staff will need to complete the Administration of Medication Form each time medication is given noting the date, time and dosage etc. of medication given.

Ensure all spoons, syringes, spacers for inhalers etc. are labelled, stored with the child's medication, and cleaned appropriately after use.

Infection control issues in terms of applying creams, eye drops etc. will be considered.

Staff will ensure children's individual care and support is consistent and stable by working together with families in a way that is well coordinated for consistency and continuity of their child's care needs.

The Manager will ensure that all staff and volunteers know who is responsible for the medication of children with particular needs.

Staff will ensure the parent/carer signs the form daily to acknowledge the medication given to the child.

Parental/carer consent to administer medication should be time limited depending on the condition.

Long Term Medication

Children requiring medication for long term medical conditions such as epilepsy, diabetes, asthma need to have all relevant information recorded in their care support plan.

This will be done by the manager in consultation with the parent/carer.

Staff Training

Staff will be required to have training from a qualified health professional if a condition requires specialist knowledge in order to administer the medication.

Staff will also be trained to recognise the symptoms if medication has to be given on a 'when required basis'. This information will be recorded in the administration of medication form or care support plan as appropriate.

Training will be reviewed and refreshed on a three yearly cycle to ensure staff have the most up to date knowledge.

Outings

Relevant medical details for all children participating in an outing will be taken by accompanying staff.

Original copies will be left within the setting.

Medication will be administered to the child before leaving home or the setting where possible.

For children who may require medication during the trip this should be administered by appropriate staff.

Treatment of Minor Ailments/Fevers

If a child becomes ill during a session when the parent/carer is not present the manager will call the parent and/or the emergency contact.

If no contact can be made the manager may call NHS 24 if deemed necessary and follow advice given.