

## Medication

### 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 medications as part of maintaining their health and well-being or when they are recovering from an illness.

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 the medication before it is advised that they aren't kept 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.

These procedures are written in line with guidance in Managing Medicines in schools and Early Years settings 2005.

### Procedures

- ❖ Children taking prescribed medication must be well enough to attend the setting
- ❖ Only medication prescribed by a doctor is administered. It must be in date and prescribed for the current condition.
- ❖ Children's prescribed medicines are stored in their original containers they must be clearly labelled with the child's name and dosage instructions
- ❖ Medication will be logged on the family app and parents will authorise the administration of the medication, staff administering medication must complete information on the Family app. Management and parent will then acknowledge the medication has been given.
- ❖ All medication to be stored inaccessible to children
- ❖ All medicines stored in a locked cupboard outside of school hours
- ❖ Medications will be checked on a regular basis to ensure that they have not expired.
- ❖ If the administration of medication requires specialist training then the training will be received prior to the child attending the setting.
- ❖ No child may self-administer, where they are capable of understanding their need for their medication, they are encouraged to seek out a Pre-School practitioner. This does not replace the staff vigilance in knowing and responding to a child's medication requirements.

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

- ❖ The manager will complete a risk assessment for each child with long term medical conditions that requires ongoing medication. Other medical or social care personnel will be involved in the risk assessment if appropriate.
- ❖ Parents will also contribute to a risk assessment. They will 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.
- ❖ The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding individual child health needs.
- ❖ A health care plan will be drawn up for the child and displayed inside the kitchen cupboard. This plan will outline what procedures should be adopted in an emergency. This is reviewed every 6 months

### Managing medicines on trips and outings

- ❖ If children are going on outings staff accompanying the trips must include practitioners who are fully informed and or trained of the child's needs/medication.
- ❖ Medication will be taken in a sealed plastic envelope clearly labelled with the child's name and the name of the medication. Inside the envelope 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. This is then shared on Family app with the parents.
- ❖ If a child on medication has to be taken to hospital the child's medication is taken in sealed plastic box clearly labelled with the child's name, along with the consent form.

#### Exceptions to administering prescribed medication

- ❖ Nappy rash creams
- ❖ Suncream
- ❖ Emergency use Calpol

#### Administering emergency Calpol Procedure

- ❖ Calpol is only to be administered at the discretion of management
- ❖ Parents must have signed the Calpol permissions
- ❖ Calpol will only be administered if a child has a high temperature and their parents or carers are unable to collect their child swiftly and or if there is risk of seizure.

**This policy was adopted by**  
**Position within the Pre-School**

**Katy Platt**  
**Manager & nominated individual**