



# Rainbow Teddies Pre-school Policy Document

## Administering Medicine

### Safeguarding and Welfare Requirements:

#### 6) Health (Medicines/Food)


### EYFS Key Themes and Commitments:

<i>A Unique Child</i>	<i>Positive Relationships</i>	<i>Enabling Environments</i>	<i>Learning and Development</i>

This policy was adopted at a meeting on: .....

Review Date: .....

Signed: ..... on behalf of the Management Committee

Print Name: ..... Position: .....

Signed: ..... Pre-school Manager



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We agree to administer medication as part of maintaining a child's health and well-being or when they are recovering from an illness.

In many cases, it is possible for children's GP's 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 child is kept at home for the first 48 hours to ensure no adverse effects, as well as to give time for the medication to take effect.

The key person is responsible for the correct administration of medication to children for whom they are the key person. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. In the absence of the key person, the Room Leader is responsible for the overseeing of administering medication.

## **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 (medicines containing aspirin will only be given if prescribed by a doctor).
- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children (*Terrace Room- locker* )
- 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 and printed name of parent/carer and date.



# Rainbow Teddies Pre-school Policy Document

The administration of medicine is recorded accurately each time it is given and is signed by staff. Parents sign the record sheet to acknowledge the administration of medicine- the sheet 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; and is
- verified by parent signature at the end of the day.

## ***Storage of medicines***

- All medication is stored safely in a designated locker or refrigerated as required.
- The child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent/carer.
- For some conditions, medication may be kept in the setting (e.g. inhalers for Asthma) Key persons check that any medication held to administer on an 'as and when required basis' or on a regular basis, is in date and that they return any out-of-date medication to the parent/carer.
- 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 sheet.
- 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 their key person. 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***

- Our First Aiders are suitably qualified in the use of administering Epi-pens
- Parents/carers will need to ensure that **two Epi-pens are available for use at the setting** (this, in the case of the first one 'failing'). It will also be advised that a liquid anti-histamine (such as 'Piriton' ) be provided and held at the setting (*all usual records will be completed*).
- 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 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.



# Rainbow Teddies Pre-school Policy Document

- 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 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/carer; 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 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 receive a copy of the *Health Care Plan* and each contributor, including the parent, signs it.

## ***Snacks/Foods/Allergies***

- We will endeavour to offer snacks which are free from nuts and nut products and will remind parents/carers through our termly newsletter that we are a 'nut free zone'.
- Special medical and/or dietary requirements will be adhered to and/or parents/carers will be given the choice to provide a selection of snacks for their own child in a named plastic/lidded container.
- Any particular dietary needs will be discussed with parents/carers at the point when the *Child Information Booklet* is completed, or sooner if these needs are 'flagged up' before a child joins our setting.

## ***Managing medicines on trips and outings***

- If children are going on outings, staff accompanying the children must include the key person for the child, or another member of staff who is fully informed about the child's needs and/or medication.
- A risk assessment will be completed prior to the trip/outing as appropriate.
- Medication for a child is taken in a sealed plastic box clearly labelled with the child's name, name of the medication. Inside the box is a copy of the consent form and a card to record when it has been given, with the details as given above.
- On returning to the setting the card is stapled to the *Administered Medicine* sheet 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, name of the medication. Inside the box is a copy of the consent form signed by the parent.



## Rainbow Teddies Pre-school Policy Document

- Information regarding allergies and/or medical needs is notified through the *Child Information Booklet* completed by parent/carers when a child joins the pre-school.
- Life threatening allergies and their management will be discussed with staff/parent/carers and appropriate information recorded.
- A *Health Care Plan* will be available for each child ( as appropriate).
- All staff will be notified of allergies and be aware of the *Health Care Plan* of children who have them.
- Where necessary, information with photo will be displayed on the walls in both rooms (with parental consent)