



## Administering medicines

Stretton Pre-school believe that children who are unwell/sick should remain at home until they are well enough to return to the setting, we agree to administer prescribed medication for children who are well enough to attend the setting, but need medication for health and well being or when children are recovering from illness. We ensure that where medication is needed to maintain health of the child, they are given correctly and in accordance with legal requirements. This policy includes children suffering with asthma, bronchiolitis and viral induced wheeze.

In many cases - where possible medication is being given at home in the morning and evening, medication will only be given where it would be detrimental to the child's health if not given when in the setting. If the child has not had the medication before (especially a baby/child under two), we advise that parents keep the child at home for the first 48 hours to ensure no adverse effects and for the medication to take effect.

At Stretton Pre-school senior practitioners are responsible for administering medication to children. We ensure that parent consent forms have been completed, that medicines are stored correctly and that all medication is in their original containers, with the pharmacy label. All records are kept in accordance to the procedures.

### Procedures

- Children taking prescribed medication must be well enough to attend the setting
- We only administer medication when it has been prescribed for the child by a doctor ( or other medically qualified person)
- Medication must be in date and prescribed for the current condition
- Non-prescribed medication (e.g. Calpol, antihistamine etc.) cannot be administered by pre-school practitioners unless it has been prescribed by a doctor (or other medically qualified person). This includes the application of topical creams for eczema (e.g. Diprobase).

- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication a senior member of staff checks that the medication is in date and specifically for the current condition.
- Parents must give prior written permission for the administration of medication, the senior member of staff will ask the parent to sign a consent form stating the following information. No medication may be given without these details being provided:
  1. The full name of the child and date of birth
  2. The name of the medication and strength
  3. Who prescribed it
  4. The dosage and times to be given in the setting
  5. The method of administration
  6. How medication should be stored and its expiry date
  7. Any possible side effects that may be expected; and
  8. The signature of the parent, their printed name and the date
- The administration of medicine is recorded accurately using individual medication records - each time the medication is given it is signed by the person administering the medication and a witness. Parents are shown the record at the end of the session and asked to sign to acknowledge that the medication has been given. The medication form records the:
  1. Name of child
  2. Name and strength of the medication
  3. Name of the doctor that prescribed it
  4. Date and time of does
  5. Dose given and method
  6. Signature of the person administering the medication and witness
  7. Parents signature
- If the administration of prescribed medication requires medical knowledge, we obtain individual training by a health professional (e.g. Epi Pen for anaphylaxis)
- No child may self-administer. Where children are capable of understanding when they need medication (e.g. for 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

- We monitor medication forms to identify times when infection has been high and put in place better infection controls

### ***Storage of medicines***

- All medication is stored safely in a locked box and/or refrigerated as required. The box in the refrigerator is solely for storing medication - the medication box is labelled.
- The senior member of staff is responsible for handing back medication 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. The key person will check medication held at 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***

- We carry out risk assessments for each child with a long term medication condition that requires on going medication - this is the responsibility the management team alongside the key person.
- We ask parents to contribute to a risk assessment
- For some medical conditions senior staff will need to have training in basic understanding of the condition, as well as how the medication is to be administered correctly, the training needs of the staff will form part of the risk assessment
- Risk assessments will take into account all activities that may cause for concern in terms of individual health needs
- Risk assessments include arrangements for taking medicines on outings and advice is sought from the child's GP if needed
- A health care plan for the child is drawn up with the parent; outlining the key persons role and what information must be shared with other adults who care for the child
- The health care plan should include the measures to be taken in an emergency
- Health care plans are reviewed every 6 month or as and when necessary - including medications, changes, dosages and side effects etc.

- Parents receive a copy of the health care plan and everyone who has input - the parents also signs the health plan.
- See also our 'Anaphylaxis & Epi Pen' policy.

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

- Any children with a risk assessment will be accompanied by their key person or a senior member of staff who is fully informed of 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 and the name of the medication - inside is the medication record and consent form
- On returning to the setting the parent will sign the medication record
- This procedure should be read alongside the outings procedure

## **Asthma**

Stretton Pre-School understands the importance around ensuring the safety of children whilst in our pre-school settings. Please note that although the policy refers to 'Asthma' it applies to children also diagnosed with bronchiolitis and Viral Induced Wheeze.

Our commitment is as follows, we;

- fully welcome all children suffering with asthma
- recognise that asthma is an important condition affecting many children
- encourage and help children with asthma to participate fully in all activities provided for the children in our care
- ensure all children have immediate access to reliever inhalers and support children to use these as necessary
- ensure the group environment is favourable to children with asthma we will eliminate risks where possible or ensure that risks are minimal.
- ensure that other children in the group understand to their stage/age of development that asthma can be serious
- provide guidance for staff on what to do if a child has an asthma attack to ensure the child's welfare in the event of an emergency
- work with parents of children with asthma to ensure that their children are in a safe, caring environment
- promote action by parents and practitioners to actively support the policy in the group.

### **We also commit to:**

- Ensuring that our key persons are confident to help a child with their medicine and decide who should administer the medicine when the key person is not available.
- Ensure the group environment is as safe as possible for children with asthma. For example,
  - ✓ we will ensure inhalers are accessible,
  - ✓ we have adopted a no smoking policy and
  - ✓ we avoid keeping furry or feathery pets as we understand that these can trigger asthma symptoms.

### **Roles and responsibilities in pre-school provision**

#### **Parents/carers need to:**

- Inform Stretton Pre-School if their child has been diagnosed with asthma, bronchiolitis or Viral Induced Wheeze.
- Provide written information detailing:
  - ✓ what asthma medicines their child takes, how they take it and when
  - ✓ what triggers their child's asthma and what to do if the child's asthma gets worse
  - ✓ the child's parent/carer emergency contact details, we have 'School Asthma Card' for you to complete which are ideal for this.
- Provide the pre-school with an inhaler if used (or bring daily for every session they attend). This must be in date, in the original box with the pharmacy label attached.
- If a child has been prescribed an inhaler/pump for their condition they will not be allowed to attend pre-school if the relevant (and within date) inhaler/pump is not provided by parent/carers. Stretton Pre-School reserves the right to ask the family to collect their child until we are provided with their inhaler/pump.
- Ensure any spare medicines stored by the group are labelled and will not have passed their expiry date by the end of each half term when they will be returned to you by the setting for replacing and updating information on child's current asthma condition .
- Keep the pre-school up to date with any changes to their child's condition, medicines and/or treatment.

**Management committees need to:**

- Ensure that a suitable asthma policy is implemented by the group.
- Provide insurance policies that give clear indemnity to staff who look after children with asthma and administer medicines, in accordance with the agreed guidance and co-operation with and consent of parents/carers.
- Ensure that parents/carers of children with asthma are informed about the policy and given a copy of this policy.

**Key persons need to:**

- Have the knowledge, ability and confidence to care for children with asthma.
- Liaise with parents/carers of children about planning for and controlling their children's asthma.
- Know what triggers a particular child's asthma.
- Know where the child's asthma records are kept.
- Know where young children's asthma medicines are kept and how they should be administered.
- Know how to recognise if a child's asthma symptoms are getting worse and what to do if a child has an asthma attack or in the event of an emergency.
- Involve children who have asthma in physical activities.
- Involve all children in the setting as appropriate to their age and stage so that they can learn more about asthma and what to do in an emergency (helps alleviate stressful situations to both the child having attack and those observing it).

**Managers and Supervisors need to:**

- Work in partnership with parents/carers and healthcare professionals to identify the needs of children with asthma and work with their personal asthma action plans to ensure that their asthma is effectively controlled.
- Inform all parents/carers about the asthma policy of the group and their responsibilities.
- Ensure children have immediate access to their reliever inhaler. It is important for all staff to have knowledge of where all inhalers will be situated (the adult kitchen) in a prominent area for easy access by keyworker or nominated person.
- Ensure that clear written records (individual health plan) are kept for children with asthma, detailing information from the parent/carer on:

- ✓ what medicine is to be taken
- ✓ when it is to be taken
- ✓ how it is to be taken
- ✓ how to tell when the child's asthma is getting worse and what to do if it gets worse
- ✓ We will use the School Asthma Card for this.
- ✓ Ensure the child's asthma medicines are labelled with the child's full name.
- ✓ Ensure that a record is kept each time a child takes their medicines.
- ✓ Make sure that the person collecting the child is informed if the child has had to take their medicines.
- ✓ Ask parents/carers to bring a spare inhaler to be kept at the group in case of emergency.
- ✓ Keep spare reliever inhalers marked with the child's full name in an agreed and readily accessible place.
- ✓ Make sure that inhalers are always taken on group trips.

This policy was adopted by

Stretton Pre-School

On

6 October 2016

Date to be reviewed

Annually

Signed on behalf of the provider

Name of signatory

Sarah Morris

Role of signatory

Chair person