

Administering Medicines

Policy statement

It is not the nursery policy to care for sick children, therefore children who attend the nursery need to be well enough to cope with the requirements of the day. The nursery will administer medication to a child as part of maintaining their health and wellbeing or to support the child's recovery from an illness. We ensure that when all medicines are administered they are given correctly and in accordance with legal requirements.

In many cases, it is possible for Doctors to prescribe medication 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 nursery. If a child has not had a medication before, it is necessary for the parent to keep the child at home for the 24 hours after the first dose to ensure no adverse effect as well as to give time for the medication to take effect, this includes antibiotics. Even though in some cases children may have had antibiotics before; it is necessary for this exclusion period to be adhered to with every course of antibiotics. The child can only return to nursery once they are well enough and are no longer infectious.

The child's key person is responsible for the correct administration of medication. 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, a Unit Head or Room Leader is responsible for the overseeing of administering medication.

These procedures are written in line with current guidance in 'Managing Medicines in Schools and Early Years Settings and the Early Years Foundation Stage Statutory Guidance; the Nursery Manager is responsible for ensuring all practitioners understand and follow these procedures.

Procedures

- Children taking prescribed medication must be well enough to attend the nursery.
- Only medication prescribed by a doctor (or other medically qualified person) is administered (does not apply to teething gels/granules, nappy creams/eye drops/Calpol). It must be in-date and prescribed for the current condition.
- Medication packaging and instructions must be written in English.

- Children's prescribed medicines must be stored in their original containers, clearly labelled and in a location inaccessible to children. The nursery will not accept any prescribed medication which is not in its original packaging.
- The nursery is not able to administer pain relief medication which contains Aspirin. All medications which contain Aspirin must be prescribed by a Doctor.
- Parents are required to give prior written permission for the administration of medication. The nursery must ask the parent to sign a consent form stating specific information. Only parents who are known to have parental responsibility are able to give permission for medication to be administered. No medication can be given without the following details being provided:
 - full name of child and date of birth;
 - name of medication and strength;
 - who prescribed it and the date it was prescribed;
 - Last dose given (to prevent over-dosing)
 - dosage to be given by the nursery and the method
 - how the medication should be stored
 - signature and printed name of parent and date.
- For medication dispensed by a hospital pharmacy, where the child's details are not on the dispensing label, we will record the circumstances of the event and the hospital instructions as relayed by the parents.
- The administration is recorded accurately. Each time the medication is given to a child by a practitioner the consent form is signed by the practitioner giving the medication and the practitioner who witnessed it.
- If the administration of the pre-scribed medication requires medical knowledge, we will obtain individual training by a health professional to ensure it is administered correctly.
- No child may self-administer. Where children are capable of understanding when they need their medication, for example asthma, they should be encouraged to tell their key person what they need. However, this does not replace practitioner's vigilance in knowing and responding when a child requires medication.
- No child will be forced to take medication. In instances where a child refuses the parents will be contacted.
- If rectal diazepam is given another practitioner must be present and co-signs the Medication Consent Form.
- Prescribed antibiotics can be administered providing the child has been on them for at least 24hours prior to returning to nursery.

Calpol and other Children's Paracetamol

- If you have administered Children's Paracetamol to your child prior to bringing them to nursery due to them having a high temperature they will be unable to stay and can only return to nursery once their temperature has returned to normal and you are no longer controlling it with medication.
- Calpol (or any other brand of children's paracetamol) can be administered when parents have provided this for their own child and only in cases where the temperature is 38°C or above. Parents must have previously given written consent by completing a Children's Paracetamol Consent Form. This medication must be labelled with your child's name and date of birth. The nursery will seek verbal permission from the parent prior to administering Calpol (or any other brand of children's paracetamol) and this will only be given once the parent has agreed to collect their child. Please be advised that the nursery does not store its own supply of children's Paracetamol.

Storage of Medicines

- All medication is stored safely in a locked cupboard or refrigerated. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- The parents and child's key person are responsible for ensuring medicine is collected at the end of the session.
- For some conditions, medication may be kept in the nursery. Key persons check that the medication which is administered when required or on a regular basis, is in date and that any out-of-date medication is returned to the parent.

Children who have long term medical conditions and who may require on-going medication

- Sometimes the nursery is required to carry out a risk assessment for specific children with long term medical conditions that require on-going medication. The need for this is decided depending on individual cases and is the responsibility of the management team alongside the key people and parents. Other medical or social care personnel may need to be involved in the risk assessment to provide professional guidance.
- For some medical conditions key people 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 practitioners will form part of the risk assessment.

- The risk assessment includes nursery activities 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 Doctors advice is sought if necessary where there are concerns.
- A health care plan for the child is drawn up with the parent; outlining the key person's role and what information must be shared with other practitioners 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 frequently 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.

Managing medicines on trips and outings

- If children are going on outings, practitioners accompanying the children must include the key person for the child with a personalised risk assessment, or another practitioner 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; name of the medication, inside the box is a copy of the consent form with the details as given above.
- If a child on medication has to be taken to hospital, the child's medication and consent form will be sent with them.

Over the Counter Eye Drops

Practitioners can administer eye drops bought over the counter to treat cases of conjunctivitis and other eye infections. As conjunctivitis is contagious but not excludable parents are asked to keep their child at home for 24 hours after the first dose this is so that the medication can start to take effect and to ensure there is no adverse reaction. Please note that we will not administer eye drops which have been brought over the counter to children under the age of two years as per the medication guidance. Written permission will need to be provided by the parents via the nursery Medication Consent Form.

Nappy Creams

The nursery allows parents to provide nappy creams such as Sudocrem, Bepanthen and Metanium to be used at nappy changes. Details of the brand of nappy cream and how often

it should be applied is recorded in the Child's Personal Details pack which is completed at registration. Any steroid based creams must be prescribed by a Doctor and parents must complete a form to give consent.

Teething Gels/Granules

The nursery can give children over the counter medications for teething, such as; teething gels and granules, however we prefer teething granules due to the method of administering. Parents must provide written permission for these to be administered by completing a Medication Consent Form.

