09 Health Policy

**09.06 Medicine Administration**

We aim to promote the good health of children attending our setting and take necessary steps to prevent the spread of infection. Parents / Guardians should administer or supervise the self-administration of medication to their children. This may be by spacing the doses so that they are not required within pre school hours, or by the parent / guardian coming into pre school at lunch time to administer the medication.

In many cases, it is possible for children’s GPs to prescribe medicine that can be taken at home in the morning and evening.

If a child has started a new course of medication, it is our policy that the parent keeps the child 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. We cannot accept a child into Pre School within the first 48 hours of the medication being administered from the first dose.

These procedures are written in line with guidance in *Managing Medicines in Schools and Early Years Settings;* the managers are responsible for ensuring all staff understand and follow these procedures.

**Inhaler**

Pre School staff can administer Inhalers but a copy of the child’s Health Care Plan must be supplied prior to any staff member giving the inhaler. Inhalers must be in their original packaging with the prescription sticker attached. The parent/carer will need to complete the Pre School administering medication form and sign this along with a manager prior to the inhaler being used at Pre School

**Calpol**

Parley Community Pre School are a ‘non- Calpol’ pre school. This means that we will not administer Calpol to a child unless the child has an individual extreme reason which will be discussed with the parents. (For Example in the case of a child fitting regularly and needing to keep the temperature down urgently) If you have administrated Calpol to your child, they should not attend pre school for 24 hours from the time when the medicine was ingested. This is because Calpol can mask the effects of illness which could then be passed on to other children. If a child becomes ill at pre school we will immediately call the parents/carers and ask them to come and collect their child. We will try and make the child as comfortable as we can until they are collected.

**Procedures**

* Children taking prescribed medication must be well enough to attend the setting.
* The administration of inhalers is recorded accurately each time it is given on the child’s medication record form and is signed by the manager. Parents are shown the record at the end of the session and asked to sign it to acknowledge the administration of the inhaler. The medication records the:
* Name of the child
* Name and strength of the medication
* Date and time of the dose
* Dose given and method
* Signature of the manager
* Parent’s signature

**Storage of Medicines for Long Term Medical Conditions**

* For some long term medical conditions, medication may be kept in the setting to be administered on a regular or as-and-when- required basis. The manager responsible for First Aid will check that any medication held in the setting, is in date and return any out-of-date medication back to the parent.

*Medication will be stored in a zipped hanging bag on a hook over the ‘teachers’ table’ where it is accessible by adults but not by children.*

*Medication requiring refrigeration will be stored in a labelled plastic box in the fridge which is secured with a fridge lock.*

* If the administration of prescribed medication for long term medical conditions requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
* 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 a teacher what they need. 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-Going Medication**

* A risk assessment is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the Preschool management. 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.
* 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 form 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 advice is sought from the child’s GP 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 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 term, 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 for Long Term Medical Conditions on Trips and Outings**

* If children are going on outings, staff accompanying the children must include the key person for the child with a risk assessment, or another member of staff 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 and the name of the medication. Inside the box 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 previously.
* On returning to the setting the card is stapled to the child’s medicine record 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 and the name of the medication. Inside the box is a copy of the consent form signed by the parent.
* This procedure is read alongside the outings procedure when there are children being taken who have long term medical conditions and who may require on-going medication.