



SAMPFORD PEVERELL C OF E PRIMARY SCHOOL

ADMINISTERING MEDICINES

This Policy was adopted by:

The Directors of Ventrus Multi Academy Trust

on17/07/19..... (date)

Signed by.....Chair of Directors

Review Date.....Signed.....

Review Date.....Signed.....

Safeguarding and Welfare Requirement: Health

Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date.

6.1 Administering medicines

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 medication as part of maintaining their health and well-being or when they are recovering from an illness. We ensure that where medicines are necessary to maintain health of the child, they are given correctly and in accordance with legal requirements.

In many cases, it is possible for children's GPs 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.

Our office staff are responsible for the correct administration of medicine to children who attend Sampford Peverell. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. Class teacher/ Lead Nursery Practitioner is responsible for administering inhalers to children with a diagnosis of asthma.

Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- We only usually administer prescribed medication when it has been prescribed for a child by a doctor (or other medically qualified person). It must be in-date and prescribed for the current condition.
- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication, the office staff check that it is in date and prescribed specifically for the current condition.
- Parents must give prior written permission for the administration of medication. The staff member receiving the medication will ask the parent to sign a consent form stating the following information (Parent agreement for school to administer medicine). No medication may be given without these details being provided:
 - the full name of child and date of birth
 - the name of medication and strength
 - who prescribed it
 - the dosage and times to be given in the setting
 - the method of administration

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- how the medication should be stored and its expiry date
- any possible side effects that may be expected
- the signature of the parent, their printed name and the date
- The administration of medicine is recorded accurately in our 'Application of medicine record' each time it is given and is signed by the person administering the medication and a witness. The 'Application of medicine record' records the:
 - date
 - name of the child
 - name of the medication
 - dosage given and time administered
 - signature of the person administering the medication and a witness who verifies that the medication has been given correctly
- If the administration of prescribed medication requires medical knowledge, we obtain specific training by a health professional.
- No child in our early years setting may self-administer. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell an adult what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- We monitor the Application of medicine record to look at the frequency with which medication is given in the setting. For example, a high incidence of antibiotics being prescribed for a number of children at similar times may indicate a need for better infection control.

Storage of medicines

- All medication is stored safely in a locked cupboard or refrigerated as required. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.
- The office staff are responsible for ensuring that medicine is handed back 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. Our school first aider checks that any medication held in the setting, is in date and returns any out-of-date medication back to the parent.
- Both classes have a first aid box in their cupboards containing basic first aid essentials. Inhalers are kept in named zippy wallets and epipens are stored in the classroom cupboard for quick access.

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

- We carry out a risk assessment for each child with a long term medical condition that requires on-going medication. Other medical or social care personnel may need to be involved in the risk assessment.

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- 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, our 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 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.
- An individual health plan for the child is drawn up with the parent; outlining [the key person's/my] role and what information must be shared with other adults who care for the child.
- The individual health plan should include the measures to be taken in an emergency.
- We review the individual health plan annually, 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 individual health plan and each contributor, including the parent, signs it.

Managing medicines on trips and outings

- If children are going on outings, a first aider will accompany the children with a risk assessment 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, the original pharmacist's label 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 above. 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 hospital instructions as relayed by the parents.
- 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 should be read alongside the outings procedure.

Legal framework

- The Human Medicines Regulations (2012)

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On	<hr/>	<i>(date)</i>
Date to be reviewed	<hr/>	<i>(date)</i>
Signed on behalf of the provider	<hr/>	
Name of signatory	<hr/>	
Role of signatory (e.g. chair, director or owner)	<hr/>	

Other useful Pre-school Learning Alliance publications

- Medication Administration Record (2015)
- Daily Register and Outings Record (2015)