



2: Health

The Burrow is committed to Safeguarding and Promoting the Welfare of Children and Young People and expects all staff, students and volunteers to do the same. Safeguarding children is everyone's responsibility.

2.5 Administration of Medication

Policy statement

At The Burrow we feel children who are unwell should be cared for at home until well enough to return to the setting. However, we will agree to administer medication as part of maintaining a child's health and well-being, when they are on short-term medication to aid full recovery from an illness, or long-term medication for an on-going medical condition. We ensure that all medication is given correctly and in accordance with legal requirements.

A member of the management team, together with the key person, is responsible for the correct administration of medication to children who attend the setting. This includes ensuring that parental consent forms have been completed, that medicines are stored correctly, and that records are kept according to procedures.

Procedures

Medication in setting

- If children appear unwell during the day staff will call the parents or emergency contact and ask them to collect their child
- On registration parents are asked for details of any long-term illness or medication their child requires **Registration Form (App 1.3a)**,
- On registration, written consent is also requested for staff to administer non-prescription paracetamol when a health reason, such as a high temperature, presents during the session
- This administration is recorded in the same way as any other medication
- Children taking prescribed medication must be well enough to attend the setting
- Other than nursery-provided paracetamol, we only administer medication prescribed by a doctor or other medically qualified person
- All medication must be clearly labelled, with original prescription labels, including instructions on how to administer the medication
- On receiving the medication, a member of staff checks the label to ensure all the information is correct and completes the **Medication Record (App 2.5a)**. Parents are requested to give written permission allowing staff to administer the medication

- The administration of medicine is recorded accurately on the Medication Record each time it is given and is signed by the member of staff. Parents are shown the form at the end of the day and asked to sign the record to acknowledge the administration of the medicine. Parental consent must be kept on file
- In the case of long-term medication, an **Illness, Allergy, Medication Action Plan (App 2.4c)** is also completed
- If the administration of prescribed medication requires specific medical knowledge, individual training is obtained for the relevant member of staff from a health professional, prior to the child attending the setting
- No child may self-administer medication. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell a member of staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication
- Medication Records are monitored to look at the frequency of medication 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
- If a child on medication needs to be taken to hospital during the nursery session, their medication is taken in a sealed box clearly labelled with the child's name and the name of the medication. Inside the box is a copy of the Medication Record and IAMAP as appropriate
- We adhere to all **Risk Assessment (App 3.9a)** procedures for correct storage and administration of medication
- If we are unsure about any aspect, we contact our current insurance provider for further information.

Storage of medicines

- All medication is stored appropriately and safely, and in line with guidance for each specific medication, in their original containers, and are inaccessible to the children
- The key person or member of the management team is responsible for ensuring medicine is handed back to the parent at the end of each session
- 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 that any medication held in the setting is in date and return any out-of-date medication to the parent.

Short-term medication

- In many cases, it is possible for children's GPs to prescribe medicine that can be taken at home, outside setting attendance hours
- Administering medicines by the setting will only be carried out if parents are unable to administer the required dosage of medication outside nursery hours, and it would be detrimental to the child's health if medication was not given during that time
- If a child has not had a particular medication before, it is required 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.

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 on-going medication. This is the responsibility of the manager, and all staff are made aware. Other medical or social care personnel may need to be involved in the risk assessment
- Parents will 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's medical condition
- For some medical conditions, key staff will require training in understanding of the condition, as well as how the medication is to be administered correctly. The training requirements for staff form part of the risk assessment
- An IAMAP for the child is drawn up with the parent, outlining the child's symptoms and needs and any action to be taken. The IAMAP will include the measures to be taken in an emergency
- The IAMAP will be 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 IAMAP, and each contributor, including the parent, signs it.

Managing medicines on trips and outings

- If children on medication are going on outings, staff accompanying the children must include a member of staff who is fully informed about the child's needs and/or medication and a risk assessment of the outing completed
- Medication for a child is taken in a sealed box labelled with the child's name and the name of the medication. Inside the box is the completed Medication Record to record when it has been given
- On returning to the setting the parent is shown the Medication Record and is asked for their signature.

Signed: *L.B. Mee*

Name: Lynn Mee

On behalf of The Burrow Nursery