



Edlesborough Under 5's

Managing and Administering Medicines

Parental Responsibility

“Parents have the prime responsibility for their child’s health and should provide schools and settings with information about their child’s medical condition.” (Managing Medicines in Schools and Early Years Settings, DfES 2005). At Edlesborough Under 5’s Pre-school we rely on parents to keep us informed about any medical condition or treatment that their child receives. Any treatment needing to be undertaken, during a session (whether regularly or in the event of an emergency) should be discussed with the Pre-School Leader and the child’s key worker. A health plan should be completed and if medication needs to be administered a parental consent form signed.

These procedures are written in line with current guidance in ‘Managing Medicines in Schools and Early Years Settings’.

Confidentiality

At Edlesborough Under 5’s pre-school we respect the child and parent’s right to confidentiality and information will only be shared with the relevant staff members who need to be informed after discussion with the parents.

Staff Responsibilities

- The pre-school Leader is responsible for ensuring all staff understand and follow these procedures.

- The child's key worker is responsible for the correct administration of medication to children for whom they are the key worker. 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 worker, the pre-school leader is responsible for the overseeing of medication administration.

Administration of Medication

In many cases, it is possible for children's GP's 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. If a child has not had a medication before, it is advised that the parent keeps the child at home for the first 24 hours to ensure no adverse effect as well as to give time for the medication to take effect. Wherever possible dosages of medicine should be worked out so that they can be taken outside the pre-school sessions.

Procedures

- Children taking the prescribed medication must be well enough to attend the setting.
- Only prescribed medication for a named child will be administered. It must be in-date and prescribed for the current condition.
- All prescribed medicines should be stored in their original containers as dispensed by a pharmacist and include the prescriber's instructions for administration.
- All prescribed medicines should be brought into the setting by the parents daily (collecting the medicine at the end of the session is the parent's responsibility). The prescribed medicine should be brought in a sealed plastic box with the child's name clearly labelled on the outside. The plastic box should contain the medication in the original container (as dispensed by a pharmacist and includes the prescriber's instructions for administration) and a copy of the signed consent form (Appendix A).
- Parents must give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form (see appendix A) stating the following information (no medication may be given without these details being provided):
 - full name of child and date of birth;
 - name of medication and strength;
 - who prescribed it;

- dosage to be given in the setting;
 - how the medication should be stored and expiry date;
 - any possible side effects that may be expected should be noted; and
 - signature, printed name of parent and date.
- Before administering medicine to a child two members of staff will check:
 - the child's name;
 - the prescribed dose;
 - expiry date of medicine;
 - written instructions by the prescriber on the label or container.
- The administration is recorded accurately each time it is given and is signed and witnessed by two staff. Parents sign the record sheet (see Appendix B) to acknowledge the administration of a medicine. The medication record sheet records:
 - name of child;
 - name and strength of medication;
 - the date and time of dose;
 - dose given and method; and is
 - signed by key worker/pre-school leader; and is verified by parent signature at the end of the session.
- A medicine file on site will contain:
 - copies of parent's consent forms (originals to be kept in children's files) (see Appendix A)
 - records of administration of medicines to individual children(see Appendix B);
 - copies of children's health care plans (where required) (see Appendix C)
 - Copy of risk assessment form (where required) (see Appendix D)
- All medication, including emergency medicine, will be stored in a labelled container provided by the parent out of reach of the children, or (if required to be refrigerated) in the staff fridge in an airtight box. Emergency medicine that needs to be on hand at all occasions (e.g. inhalers and/or epi-pens) will be placed out of the reach of children but readily available.
- Medication will not be stored in the setting. Parents are responsible for ensuring they bring the child's medication along to each session their child attends in a sealed plastic box clearly labelled with their child's name containing the medication and a signed copy of the consent form (see Appendix A).

- 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, name of the medication. Inside the box is a copy of the consent form signed by the parent.
- If the administration of prescribed medication requires specialist knowledge, the pre-school leader will ensure relevant training is provided for the relevant member(s) 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 their key worker what they need. However, this does not replace staff vigilance in recognising and responding when a child requires medication.

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

- A risk assessment may need to be carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the pre-school leader alongside the key worker. Other medical or social care personnel may need to be involved in the risk assessment (see Appendix D).
- Parents can 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 will form part of the risk assessment.
- The risk assessment will include any vigorous activities, known triggers and any other pre-school 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 the child's GP's 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 worker'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.
- 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, name of the medication. Inside the box is a copy of the consent form signed by the parent.

- The health care plan is reviewed every six months or more 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.

Children who require life saving medication or invasive treatments

Adrenaline injections (Epipens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

- The Pre-school must have:
 - a letter from the child's GP/consultant stating the child's condition and what medication if any is to be administered;
 - written consent from the parent or guardian allowing staff to administer medication; and proof of training in the administration of such medication by the child's GP, a district nurse, children's nurse specialist or a community paediatric nurse. The pre-school will need to ensure the training needs of staff in relation to administering medication or otherwise treating any condition **before** a child may start at the pre-school but will endeavour to arrange appropriate training for staff as soon as possible.

Key person for special needs children - children requiring help with tubes to help them with everyday living e.g. breathing apparatus, to take nourishment, colostomy bags etc.

- Prior written consent from the child's parent or guardian to give treatment and/or medication prescribed by the child's GP.
- Key person to have the relevant medical training/experience, which may include those who have received appropriate instructions from parents or guardians, or who have qualifications. The pre-school will need to ensure the training needs of staff in relation to administering medication or otherwise treating any condition **before** a child may start at the pre-school but will endeavour to arrange appropriate training for staff as soon as possible.

Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children must include the key worker 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, name of the medication, Inside the box is a copy of the consent form and appendix B of their health plan to record when it has been given, with the details as given above.
- On returning to the setting appendix B is signed by the parent and returned to their health profile.
- 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, name of the medication. Inside the box is a copy of the consent form signed by the parent.
- If it is thought that additional staffing is necessary to ensure the safety and enjoyment of the trip by everyone, this will be put in place.
- Copies of emergency procedures will be taken on the trip along with the relevant emergency contact details.
- Adults supervising children with medical needs and the trip leader will carry mobile phones.
- This procedure is read alongside the outings procedure.

This policy was adopted at a committee meeting of Edlesborough Under 5s held on 18 January 2011 and reviewed, updated and approved at a committee meeting on 31 January 2012.

Date to be reviewed: January 2013

Signed by Chair of Committee Rebecca Newbert



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Appendix A:

Medication Consent Form

Full Name of Child:	
Date of Birth:	
Name of Key Worker:	
Medical Diagnosis/Condition:	
Name of Medication and Strength:	
Name of Prescriber:	
Title of Prescriber (GP, Nurse, Consultant):	
Dosage to be given in setting and Frequency:	
Please indicate if medication should be stored in fridge:	Yes/No <i>(please delete as appropriate)</i>
Possible Side Effects if expected:	
I hereby give my permission for the staff at Edlesborough Under 5's to administer prescribed medication to my child.	
Signature of Parent/Guardian:	
Print Name:	
Date:	
Emergency Contact Number of Parent/Guardian	



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Appendix B)

Medication Record Form

Name of Child:.....

Date of Birth:

I hereby give my permission for the staff at Edlesborough Under 5's to administer the following prescribed medication to my child.

Name/Type of Medication and Strength:.....

Dosage:.....

Time Dose Due:..... Or As Needed

Name of Prescriber:.....

Please indicate if medication should be stored in fridge : Yes/No (delete as appropriate)

Signed (Parent/Guardian):.....Print Name:.....

Medication Administered

Date/Time	Administered By		Witnessed By		Dosage Given	Medication in Date (Y/N)	Parent Signature
	Print	Sign	Print	Sign			



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Appendix C:

Child's Health Care Plan

Child's Full Name:.....

Date of Birth:.....

Child's Address:

Name of Key Worker:

Medical Diagnosis or Condition:

Known Risk Factors/Triggers:

Training Required for Staff (re Condition or Medication): Yes / No *(please delete as appropriate)*

If Training Required Date and Names of Staff Trained:.....

.....

Medication Prescribed and Dose:

Risk Assessment Required : Yes / No

Risk Assessment Attached: Yes / No *(please delete as appropriate)*

Emergency Contact Details

Family Contact	Name	Relationship to Child	Telephone Number	Type (home/ work/ mobile)
Contact One				Home
Contact One				Work
Contact One				Mobile
Contact Two				Home
Contact Two				Work
Contact Two				Mobile
GP Contact		N/A		Work
GP Surgery Name & Address:				
Hospital Contact		N/A		Work

Signature & Date of Key Worker:

Date of Health Care Plan Review (every 6 months):

Copy of Health Plan Given to Parent: Yes (please tick when undertaken)

