



SEAHAM HARBOUR NURSERY SCHOOL

POLICY STATEMENT FOR ADMINISTERING MEDICATION

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 medication as part of maintaining their health and well-being or when they are recovering from an illness. We have a 'Policy for Supporting Children with Medical Conditions in Early Years Settings' in place which we also follow.

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.

Staff have completed the appropriate training and are responsible for the correct administration of medication to children in our setting. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures.

Procedures

- Children taking prescribed and un-prescribed medication must be well enough to attend the setting.
- Children's prescribed medicines are stored in their original containers, are clearly labelled with a prescribed untampered label and are inaccessible to the children.
- Children's un-prescribed medicines are stored in their original container which is clearly labelled with the child's name.
- Parents give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form 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.
- **No medication may be given without this consent form being signed.**
- The administration is recorded accurately each time it is given and is signed by the staff member administering the medication and a staff member who witnesses the administration of the medication. At the end of day/session the child's parent is asked to sign to say the child has had the medication given.
- The administration is recorded accurately each time it is given and is signed by staff. The medication record shows:
 - name of child;
 - name and strength of medication;
 - the date and time of dose;
 - dose given and method; and is
 - signed by the person administering the medication and witnessed by another member of staff
 - signed by the parent at the end of session/day

Storage of medicines

- The setting has their own epi pen, salbutamol inhaler and spacer available at all times, and is stored in nursery in the first aid cupboard. These are for emergency use only. Children's individual inhalers are stored in individual bags within the first aid cupboard.
- All medication which needs to be readily accessed is stored in the first aid cupboard or in the refrigerator (if required) in the staff kitchen.
- If needed any other medication is stored safely in a locked cupboard.
- Staff are responsible for ensuring medicine is handed back at the end of the session and that the adult collecting the child has signed the administration of medication record so that they know when the medicine was administered and how much.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for 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 member of staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- Parents are requested to leave 'spare medication' at nursery, eg inhalers

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

- A Health Care Plan is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the Headteacher alongside the key person. Other medical or social care personnel may need to be involved in the Health Care Plan.
- Parents will also contribute to the Health Care Plan. 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 staff will need to have training in a basic understanding of the condition as well as how the medication is to be administered correctly.
- Once the Health Care Plan is drawn up with the parent, it must be shared with all 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 year or more if necessary. This includes reviewing the medication eg changes to dosage etc.
- Once complete the parents will sign the plan alongside the Head teacher and any other Health professional who has contributed.
- The Health Care Plan is displayed at suitable places around the school.

Managing medicines on trips and outings

- If children are going on outings, staff accompanying the child must remove the medicine from where it is stored with another member of staff as witness. Upon return the member of staff must replace the medication back in the cupboard with another member of staff as witness.

Legal Framework

- Medicines Act (1968)

Further Guidance

- Managing Medicines in Schools and Early Years Settings (DfE 2005)
- Supporting pupils at school with medical conditions – statutory guidance for governing bodies of maintained schools and proprietors of academies in England – December 2015

Adopted by Governing Body on
30th November 2017

Reviewed Bi-annually: Autumn Term