

Medication Policy

Managing Medicines and Medical Procedures

All children have a right of admission to our setting and have the right to continue to attend as long as they are well enough to engage in the normal activities. This includes children with short, long-term or specific medical conditions, which require medication or treatment. Due consideration will be given to how medical needs can be best accommodated, not just to provide for children's individual requirements, but also to ensure that all regulatory and Health and Safety aspects for both the child and staff are met.

Long-term medical conditions

For children with long-term medical conditions requiring ongoing medication, medical treatment or a special diet (such as asthma, epilepsy, eczema, diabetes or food allergies), an Individual Care Plan will be drawn up with parent/carers (and health professionals where appropriate). The care plan should include:

- The name of the child.
- Details of the condition.
- Special requirements e.g. dietary needs.
- Medication needs and any possible side effects of medication.
- What constitutes an emergency.
- What to do in an emergency and who to contact.
- The role of staff members.

The care plan must be agreed and signed by the parent/carer. Where necessary, staff will be given special training in the administration of medicines or medical treatment e.g. when the use of an adrenaline-pen may be required or other non-oral medication. Training must be given by a health professional and confirmation must be provided for the setting by the health professional, that the person or persons trained are competent to perform the procedure.

Care plans and medical records will be kept secure in accordance with the Data Protection Act 2018, however they must be known to and readily accessible to all staff caring for the child.

Short-term conditions

Sometimes children may be well enough to attend the setting but may still require some form of medication for a short period e.g. antibiotics. In this case, a Medication Form including any medicines to be administered, will need to be completed by the parent/carer. The medicine form should include:

- The child's name.
- Authorisation from the parent/carer for staff at the setting to administer the medicine.
- The date of the authorisation.
- The name of the medicine.
- Date course of medicine commenced.
- Prescribed dose and frequency.
- Method of administering dose.
- Time last dose was given and when next dose is required.

The parent/carer must sign the authorisation. The staff must sign when they have administered the medicine and state the time given. This will be witnessed and duly signed by a second staff member. The parent/carer must sign to acknowledge that they are aware that the medicine has been given. Prescribed medicines must be in their original container and clearly labelled with the child's name, the name of the medicine and dosage. Non-prescribed medicines will not be administered with the exception of over-the-counter nappy rash creams and over-the-counter skin moisturisers.

Storage of Medicines

Medicines must be kept in a secure place away from children i.e. in a clearly identifiable box reserved for the purpose. Medicines that need to be kept in the fridge must be kept in a labelled plastic container.

Staff

Staff, volunteers or students are required to keep any personal medication they carry in a secure place which is inaccessible to the children. They must not be under the influence of any medication which may affect their ability to care for children, medical advice must be sought and confirmed that it's unlikely to affect their ability to care for children. A Risk Assessment will be carried out if it's necessary for long term medicines (over 14 days) to be taken.

Staff, volunteers or students are strictly forbidden to be under the influence of alcohol or any other substance which may affect their ability to care for children. In the event of a member of staff being absent through illness for a period of time, greater than 14 days, a certificate from their GP stating they are fit to work is required. Staff, in case of Chronic Illness, such as Asthma or Epilepsy, should also have an Individual Care Plan.