

WHITLEY LODGE UNDER FIVES

ADMINISTRATION OF MEDICINES POLICY

Statement of intent

Our pre-school recognises that children with medical needs have the same rights of admission to pre-school and the same opportunities to play and learn as other children. Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children however have longer term medical needs and may require medicines on a long-term basis to keep them well, for example children with well-controlled epilepsy or cystic fibrosis. Others may require medicines in particular circumstances, such as children with severe allergies who may need an adrenaline injection. Children with severe asthma may have a need for daily inhalers and additional doses during an attack.

Legislation and references

Disability and Discrimination Act (DDA) 1995 Part 3(included in The Equality Act 2010)

National Curriculum Inclusion Statement 2000

Managing Medicines in Schools and Early Years Settings (DfES 2005)

SEN and Disability Act (SENDA) 2001

Health and Safety at Work etc Act (HSWA) 1974

Control of Substance Hazardous to Health Regs 2002

Medicines Act 1968

Aim

The pre-school aims to include most children with medical needs, enabling them to attend regularly and take part in normal activities.

Method

- Children with medical needs may require additional support and staff may need to take extra care in supervising some activities to make sure that these children, and others are not put at risk.
- Parents/carers have the prime responsibility for their child's health and should provide pre-school with information about their child's medical condition. Space is provided for this information on the registration form.
- When pre-school is made aware of a child's medical condition a Manager will discuss this with them and may ask the parents to request information from the GP or paediatrician. With parental consent the health visitor or other agencies may be able to provide additional information or training for staff.
- Some children with medical needs have complex health needs that require more support than regular medicine. We will seek medical advice about each child's individual needs and if necessary access an individual support worker to meet these needs. (see Special Educational Needs Policy)
- Before a child with medical needs can be left in pre-school appropriate training will be sought on the administration of a particular medicine, e.g. epipen training, use of nebulisers and inhalers. With regard to the

administration of life saving medication such as epipens or the use of nebulisers, the position will be clarified with our insurers (Insurance Manager at National Centre, Early Years Alliance, Tel: 020 7697 2585).

- Medicines in pre-school must be managed and administered safely and for each individual case there will be an assessment of the risks to the health and safety of staff and others and measures put in place to manage any identified risks.
- Where a child has a complex medical condition a Manager/SENCO and parents will work together with health professionals to draw up an individual health care plan (see attached pro forma)
- Whenever possible parents should try to administer medicines themselves outside of session times and administering medicine to the child during the session will be done if only absolutely necessary by appropriately trained staff.
- Medicines are hazardous materials and at no time should parents leave medicines in children's bags, for use out of session times. All medicines should be handed to a member of staff for safe-keeping.

Procedure for the administration of medicines

- If a child requires or may require medicine during a pre-school session, parents or carers will be asked to complete a prior written agreement to consent that staff should administer the medicine. (please see attached pro forma)
- Medicines should be prescribed by a doctor and provided in their original container as dispensed by the pharmacist labelled with the child's name and instructions for administration. If the medication is dispensed by a hospital pharmacy, it will not have the child's details on the label but will have the dispensing label, staff will therefore check with the parent/ carer what the hospital instructions were and record this information.
- Medicines are stored in a labelled container on top of the kitchen cupboard out of reach of children, but easily accessible to staff in an emergency. If the medication needs to be refrigerated, it will be secured in a storage box and stored separately in the fridge. A record is kept of medicines stored.
- It is the responsibility of the child's key person or the person opening the door at collection time, to ensure that medication is given back to the parent/ carer at collection time unless it has been specified that the medication provided is to stay at pre-school.
- It is the responsibility of parents to ensure that pre-school is provided with up to date medicine and also to dispose of unused or obsolete medicine. Any uncollected medicine will be taken to a local pharmacy for safe disposal.
- It is the responsibility of parents to inform the staff of changes in medication or when a medicine is no longer required.
- When a child requires medicine the Leader should ensure there is a prior written agreement from the parent and then check:
 - the child's name and date of birth
 - the name of medication and strength
 - who prescribed it
 - how the medication should be stored

- the prescribed dose
- method of administration
- time/frequency of administration (including date and time of last dose)
- expiry date
- any side effects
- written instructions provided by the prescriber on the label or container
- signature and printed name of parent/ carer and date

This should be cross checked by a second member of staff and the medicine administered by the Leader. If there is any doubt about the procedure, staff should not administer the medicine but check with the parents or health professional before taking further action. When medicine is administered the record of administration of medicine should be completed and the parent will be informed and asked to sign the record.

- If a child may require medicine on an outing or trip the parent or their nominated person will be invited to accompany their child and be responsible for the safe carrying and administration of medicine if required.
- Non-prescription medicines will not usually be administered unless under clear instruction from a doctor.
- If a child refuses to take a medicine, staff should not force them to do so, but should note this in the child's records. Parents must be informed at the end of the session. If the refusal to take medicines may result in an emergency, parents must be contacted and if necessary emergency procedures taken e.g. telephone for an ambulance or paramedic.
- Some children may need to take precautionary measures before or during exercise, and may also need immediate access to their medicine e.g. inhalers. The Leader should ensure medicine is administered before exercise when necessary and the child's inhaler is taken outside for outdoor activities (together with a record sheet) for immediate use.
- If it is necessary to leave the premises in an emergency the 'door person' will collect any essential medicines such as inhalers and the 'grab bag' which contains the administration of medicines record.
- If any staff member require medication, the manager must be informed. The medication will be stored in a separate labelled container on top of the cupboard in the kitchen area or refrigerated if necessary. Risk assessments will be completed.

This policy was read and understood by all staff.

Carol Shields.....

Joanne Cameron.....

Helen Graham-Potts.....

Jayne Pronk.....

Amy Kennedy.....

Staff meeting date - 4th September 2023

To be revised September 2024

