

## Promoting health and hygiene

### General Welfare Requirement: Safeguarding and Promoting Children's Welfare

The provider must promote the good health of the children, take necessary steps to prevent the spread of infection, and take appropriate action when they are ill.

## 1.20 Administering medicines

### 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.

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, especially a baby/child under two, it is advised 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.

These procedures are written in line with current guidance in 'Managing Medicines in Schools and Early Years Settings; the Supervisor is responsible for ensuring all staff understand and follow these procedures.

The key person is responsible for the correct administration of medication to children for whom they are the key person. 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 person, the supervisor is responsible for the overseeing of administering medication.

### Procedures

- Children taking prescribed medication must be well enough to attend the setting.
- Only medication prescribed by a doctor (or other medically qualified person) is administered. It must be in-date and prescribed for the current condition.
- NB If your child needs to take medication during school hours, ensure it is stored in the original container and is clearly labelled with your child's name, the dose and when it is to be taken. Please give to the nursery supervisor.  
Children's paracetamol medication (Non prescribed like Calpol) can be administered to all children, whatever age they are, this will only be done after we have contacted the parent

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and gained their consent. This is to enable us to act quickly and start to lower the child's temperature whilst they are waiting to be collected. *(Updated on 08.12.15 by Mrs Sharpe)*

- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- 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.

*Insert details here of who receives the child's medication and ask the parent to complete a consent form. State how staff will be aware of this.*

Mrs D Stimpson Nursery Supervisor/All Key persons.

The medication forms are filled in by the parent alongside the Staff member who received the child's medication, this is then given to the child's key person to administer the medication alongside the Supervisor/Deputy.

- The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record book to acknowledge the administration of a medicine. The medication record book records:
  - name of child;
  - name and strength of medication;
  - the date and time of dose;
  - dose given and method; and is
  - signed by key person/supervisor; and is verified by parent signature at the end of the day.
- We use the Pre-school Learning Alliance's publication *Medication Record* for recording administration of medicine and comply with the detailed procedures set out in that publication.

### Storage of medicines

- All medication is stored safely in a high cupboard or refrigerated. Where the cupboard or refrigerator is not used solely for storing medicines, they are kept in a marked plastic box.

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- The child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the setting. Key persons check that any medication held to administer on an "as and when required basis", or on a regular basis, is in date and returns any out-of-date medication back to the parent.

*Insert details here of how and where medicines are stored in your setting. State how staff are informed of this- Medications that need to be kept in the refrigerator, clearly label with the child's name. Long term medication is stored in the small kitchen cupboard away from children and is regularly checked to make sure it is in date every term.*

- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member 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 person what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

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

- 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 is part of the risk assessment.
- The risk assessment includes vigorous activities and any other nursery 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 person'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. 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.

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### Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children must include the key person 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 signed medication form, and asthma card.
- On returning to the setting the medication form/book is given to the parent to sign.
- 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.
- As a precaution, children should not eat when travelling in vehicles
- This procedure is read alongside the outings procedure.

### **Legal framework**

- Medicines Act (1968)

### **Further guidance**

- Managing Medicines in Schools and Early Years Settings (DfES 2005) (this has been replaced with a new document from December 2015)
- Support Pupils at school with Medical Condition- December 2015
- Statutory Framework for the Early Years Foundation Stage- 2021

This policy was adopted at a meeting of	Downham Nursery School	name of setting
Held on	July 2024	(date)
Date to be reviewed	July 2025	(date)
Signed on behalf of the management committee PP		
Name of signatory	E. J. Laffeaty-Sharpe	
Role of signatory (e.g. chair/owner)	Principal / Proprietor	

- Medication Record (2006)

As of April 2019, Pre-School Learning Alliance became Early Years Alliance