

Administering medicines

Early Years Foundation Stage 2017 Safeguarding and Welfare Requirement: Health (2017)

Medicines

3.44. *The provider must promote the good health of children attending the setting. They must have a procedure, discussed with parents and/or carers, for responding to children who are ill or infectious, take necessary steps to prevent the spread of infection, and take appropriate action if children are ill.*

3.45. *Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date. Training must be provided for staff where the administration of medicine requires medical or technical knowledge. Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist (medicines containing aspirin should only be given if prescribed by a doctor).*

3.46. *Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent and/or carer. Providers must keep a written record each time a medicine is administered to a child, and inform the child's parents and/or carers on the same day, or as soon as reasonably practicable.*

Policy statement

Whilst it is not Fennies policy to care for sick children, who should be at home until they are well enough to return to the setting, Fennies will agree to administer ***prescribed medication** as part of maintaining their health and well-being or when they are recovering from an illness. Fennies will ensure that where medicines are necessary to maintain health of the child, they are given correctly and in accordance with legal requirements.

In many cases, it is possible for children's GPs 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, parents are required to keep the child at home for the first 24 hours to ensure there are no adverse effects, as well as to give time for the medication to take effect (NB children who have been prescribed any type of antibiotic medication are required to be kept home for 48 hours following the first dose of medication).

Fennies staff are responsible for the correct administration of medication to children for whom they are responsible for. 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 medication must be well enough to attend the setting.
- Fennies will only administer medication when it has been prescribed for a child by a doctor (or other medically qualified person i.e. Pharmacist, dentist); it must be in-date, clearly have the child's name printed on the medication and prescribed for the current condition. In all cases it must have a label which notes:
 - Child's name
 - the name and address of the pharmacy that dispensed the medicine
 - the date the medicine is dispensed
 - the name of the medicine
 - the dose needed to be taken, how to take it and how often
 - the amount of medicine in the container and the strength
 - if necessary, any cautions or warning messages that apply to your medicine
- Children under the age of 16 years are never given medicines containing aspirin unless prescribed specifically for that child by a doctor.
- The administering of non-prescribed medication is NOT permitted at Fennies, the only exception to this is where the antipyretic Calpol is administered with the written consent of the parents in the case of a high temperature, and the antihistamine Piriton is administered in the event of a child's first allergic reaction whilst in our care. **We do not use any other brands of antipyretic or antihistamine in Fennies nurseries.**
- Calpol will be administered in order to prevent febrile convulsion and only where a parent or named person has emailed their permission and is on their way to collect the child (within the hour). Staff will administer 2.5ml for children under 6 months and 5 ml for children 6 months +.
- Please note, we do not administer antipyretics, such as Calpol, at any other time unless prescribed for a specific condition, as antipyretics can also mask other symptoms and make diagnosis of the underlying cause of serious illness difficult (Royal College of Nursing, 2015)
- It is at the Nursery Manager's discretion whether or not to allow a child into nursery who have been given Calpol or other antipyretics before coming to nursery.
- Piriton will be administered in order to prevent anaphylaxis and only where a parent or named person has emailed their permission and is on their way to collect the child (within the hour). Staff will administer 2.5 ml for children aged 1-5 years. Piriton must not be given to children under 12 months old.
- We recognise that some families access other health care systems, such as homeopathic medicines, which are not subject to the same regulation as medicines. Whilst we value diversity and respect the right to choice, Fennies staff do not administer treatments other than those medicines/treatments prescribed by a legally registered medical practitioner.
- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children. On receiving the medication, the member of staff will check that it is in date and prescribed specifically for the current condition.
- Parents must give prior written permission for the administration of medication (short term medicine form to be completed). Staff will ask the parent/carer to sign a consent form stating the following information. No medication may be given without these details being provided:
 - the full name of child and date of birth;
 - the name of medication;
 - The ailment the medicine is for;
 - the dosage and times to be given in the setting;
 - the method of administration (see label for full details);
 - how the medication should be stored and its expiry date;
 - any possible side effects that may be expected; and
 - the signature of the parent, their printed name and the date.

- The administration of medicine is recorded accurately on the medication form each time it is given and is signed by the person administering the medication (must be level 3 qualified staff member) and a witness. Parents are shown the record at the end of the day and asked to sign the medicine form to acknowledge the administration of the medicine.
- If prescribed formula milk is needed, staff must ensure that the same procedure is followed (this is recorded on a long term medicine form)
- No child may self-administer medication. 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.
- Fennies monitor the medication forms and monitored to look at the frequency of medication given in the setting. For example, a high incidence of antibiotics being prescribed for a number of children at similar times may indicate a need for better infection control.
- For any children on long term medication a critical care plan / risk assessment will be carried out by the management team with the parents and key person, this will be displayed/stored appropriately e.g. medication box or on display for staff. Advice will be sought from the child's GP if necessary where there are concerns.
- We are not able to add medicines to any food, drinks or milk feeds
- It is at the Nursery Manager's discretion whether or not to allow a child into nursery if they are showing signs of illness, even if there is no exclusion period or if this is after any exclusion period has passed or if a doctor has stated that they are not infectious. The Nursery Manager will need to take into account the demeanour of the child and whether they are well enough to participate in nursery activities.

Teething:

We recognise that teething can be distressing for some babies, and offer different strategies to comfort babies during this process. These include:

- Teething gels may be administered when requested and provided by parents/carers. Teething gels can be offered to babies over four months old. Teething gels often contain a mild local anaesthetic, which helps to numb any pain or discomfort caused by teething. The gels may also contain antiseptic ingredients, which help to prevent infection in any sore or broken skin in your baby's mouth.
- Teething rings to ease their discomfort and distract them from any pain.
- If your baby is six months or older, we can give them healthy things to chew on, such as raw fruit and vegetables.

Storage of medicines

- All medication is stored safely in a named sealed container or refrigerated as required. Where the refrigerator is not used solely for storing medicines, they are kept in a named plastic box.
- The staff member who hands over to the parent at the end of the day is responsible for ensuring the medicine is handed back and medicine form is signed by the parent.
- For some conditions, medication may be kept in the setting to be administered on a regular or as-and-when- required basis. Staff must check that any medication held in the setting, is in date and return any out-of-date medication back to the parent. All medication including asthma pumps are stored in a named sealed plastic container.
- Long term medication forms must be kept with the prescribed medication such as asthma pumps, prescribed milk etc.

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

- Fennies will carry out a risk assessment and complete a critical care plan for each child with a long term medical condition that requires on-going medication. This is the responsibility of our

management team alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.

- Parents may also contribute to a risk assessment / critical 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. The training needs for staff, form part of the risk assessment.
- The risk assessment includes vigorous activities and any other 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 advice is sought from the child's GP if necessary where there are concerns.
- An individual care plan for the child is drawn up with the parent outlining the child's condition and medication needed, this would be updated by the keyworker, when parents inform staff of any changes.
- The individual care plan should include the measures to be taken in an emergency.
- The key person will review the individual care plan every six months, or more frequently if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.

Managing medicines on trips and outings

- If children are going on outings, a medical risk assessment will be completed and taken on the outing along with any medication needed.
- Medication for a child is taken in a sealed plastic box clearly labelled with the child's name and the name of the medication. Inside the box is a copy of the long term medication form and risk assessment form.
- 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 and the name of the medication. Inside the box is a copy of the consent form signed by the parent.
- This procedure should be read alongside the outings procedure.
- Each nursery will store an emergency supply of anti-histamine (Piriton) and antipyretic (Calpol) in a lockable cabinet in the nursery office. A risk assessment for the storage and usage of both Calpol and Piriton must be completed by the Nursery Manager.

Disposal of medication

- All medicines prescribed and dispensed for a child are the property of the parent. If the child leaves the nursery their medicine should be given to the parent, unless the parent gives consent for their safe disposal.
- No staff within Fennies can dispose of medication themselves. They must be returned to a pharmacist who is responsible for the disposal of medication.

Notes for clarification:

The Medicines Act 1968 defines three legal categories of medicines:

- Prescription Only Medication (POM) which are legally available only with a valid prescription from a prescriber, usually from your GP. However, in some cases, your medicine may be prescribed by your dentist, nurse, pharmacist. A prescription drug (also prescription medication or prescription medicine) is a pharmaceutical drug that legally requires a medical prescription to be dispensed.

- General Sales List (GSL) medicines can be sold by a wide range of shops, such as newsagents, convenience stores and petrol stations. GSL medicines are available off the shelf with no pharmacy training required to sell.
- Pharmacy Medicines (P) are medicines which are legally neither a POM or GSL medication. These can be sold from a registered pharmacy but should not be available for self-selection. 'P' medications are reserved from the GSL list as they are either associated with a need for advice on use, or used in conditions which may require referral to a medical prescriber. Only pharmacies may sell these medicines and a pharmacist must make or supervise the sale.

Further information is available here:

<http://www.nhs.uk/chq/pages/1325.aspx?categoryid=73&subcategoryid=101>

At Fennies Nurseries:

- We administer Prescription Only Medicine, following the above procedure
- We do not administer pharmacy medicine
- We administer topical treatments (a topical medication is a medication that is applied to a particular place on or in the body) from the General Sales List such as teething gel and Sudocrem (with written consent from parents). The only oral treatments from the GSL that we administer are Calpol and Piriton, this is with the written consent of the parents in the case of a high temperature or allergic reaction.

Legal framework

- The Human Medicines Regulations (2012)

Internal use only

This policy was adopted on	Signed on behalf of the nursery	Date disseminated to staff	Date for review
<i>June 2018</i>			<i>June 2019</i>