

3.6 Administering medicines

Policy

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 ensure that where medicines are necessary to maintain the health of the child, they are given correctly and in accordance with legal requirements. 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 no adverse effect as well as to give time for the medication to take effect. The key person is responsible for the correct administration of medication to children for whom they are the key person. This includes ensuring that permissions have been obtained and relevant forms have been completed, that medicines are stored correctly and that records are kept according to procedures. In the absence of the key person, a supervisor or the Manager is responsible for the overseeing of administering medication.

Procedures

Understanding 'prescription' & 'non-prescription' medicines:

What are prescription medicines?

A prescription medicine is a medicine that can only be made available to a patient on the written instruction of an authorised health professional, for example a doctor.

What are non-prescription medicines?

Over-the-counter medicines can be bought from pharmacies without a prescription. We class this as 'non-prescribed medicines'. Some over-the-counter medicines can also be bought from supermarkets and other retail outlets. These medicines include those used to treat minor illnesses that a parent and/or carer may feel are not serious enough to see a doctor.

Permission(s) for administering Medicines:

- Parents and/or carers must provide information about their child's needs for medicines and keep this information up to date on their ParentAdmin account.
- Parents and/or carers notify the setting of any changes in writing using ParentAdmin and sends a notification alongside any relevant information/ supporting documentation. Here is the link: <https://uk.parentadmin.com/login.php>
- Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that medicine has been obtained from the child's parent and/or carer.

Written permission must be obtained by the parent and/or carer for:

- Parent and/or carer provide written permission for particular 'prescription medicines' to be administered by our staff.
- Parent and/or carer provide written permission for particular 'non-prescription medicines' to be administered by our staff.
- Parent and/or carer provide written permission for Emergency 'non-prescription' CALPOL® (Infant Suspension, which contains paracetamol) to be administered in line with instruction/ dosage on the product and by a Manager and/ or Supervisor in the case of a high temperature. This is to prevent febrile convulsion.
- Parent and/or carer provide written permission that in an emergency based on seeking medical professional advice (999) particular 'prescription or non-prescription medicines' to be administered by our staff and/or NHS services, which include NHS first response. Requirement of registration.

The right to refuse childcare:

- Children taking prescription or non-prescription medicines must be well enough to attend the setting. The setting reserves the right, (and in its absolute discretion), to refuse admission to the premises until we are satisfied that there is no risk of cross infection and that the child is well enough to be in setting.
- Children displaying main symptoms identified on the 'at risk' list notified by the government.

- If the setting feels the child would benefit from medical attention rather than non-prescription medication, the setting reserve the right to refuse childcare until the child is seen by a doctor.
- Children cannot have medicine for more than three consecutive days without parents and/or carers speaking to the child's doctor.
- If the child requires a care plan, the setting reserves the right to temporarily refuse childcare until training and/or advice is sort to ensure staff are adequately prepared to support said child. In these circumstances the parent(s) and/or carer must provide contact details of multi-agencies involved so that the setting can access the support required.

Administering particular 'prescription or non-prescription' medication:

- Written permission must be obtained on ParentAdmin by the parent(s) and/or carer(s) for particular prescription or non-prescription medicine to be administered by our staff.
- 'Prescription medicines' must not be administered unless they have been prescribed for a child by a doctor, (or other medically qualified person).
- On receiving the prescription medication, a member of staff must:
 - Check prescription or non-prescription medicines are stored in their original container. If prescribed, the label must be clear and visible with the child's name on.
 - Check child's name is clear on the container.
 - Check the medication is in date.
 - Check that the prescribed or non-prescribed medication is specifically for the current use.
 - The parent(s) and/or carer(s) has provided written permission for particular 'prescription or non-prescription' medicine to be administered by our staff.
 - That the instructions and dosage/ recommendations are being followed in line with month/ age, of child in line with the medication instructions.
 - That any relevant form is completed, and information is recorded. The setting 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.
- If any of the following checks are not met, then the setting reserves the right to refuse childcare until the child is seen by a doctor.
- Medicines containing aspirin should only be given if prescribed by a doctor.
- The setting will not administer any non-prescription medication containing aspirin.
- 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.

Ensuring data is accurate

- On registration, parents/ carers will be asked if they would like to provide written permission and consent for their child to be given a specific type of liquid paracetamol in particular circumstances, in the case of a high temperature. This is to prevent febrile convulsion.
- The setting has the right to refuse a childcare place if written permission is not obtained by the parent and/or carer.
- The setting will only provide one specific type of medication should parents wish to use this. The product we use is: CALPOL® Infant Suspension, (which contains paracetamol) and issued in individual 5ml doses.

Link: <https://www.calpol.co.uk/our-products/calpol-infant-suspension>

- Prior to administering the non-prescription CALPOL® Infant suspension medicine, the manager and/ or supervisor checks:
 - That the child has a high continuous and/or increase in temperature .
 - The parent(s) and/or carer(s) has provided written permission for Administering Emergency 'non-prescription' CALPOL® (Infant Suspension, which contains paracetamol) to be administered in line with instruction/ dosage on the product and by a manager and/ or Supervisor in the case of a high temperature. This is to prevent febrile convulsion.
 - Child's temperature is checked at regular intervals by a designated trained paediatric first aider.
 - The parent(s) and/or carers are contacted to seek verbal consent prior to administering medicine.
 - That is stored in the original container.
 - Clearly labelled and with the instructions.
 - The medication is in date.
 - That the following instructions and dosage/ recommendations are being followed in line with month/ age of child in line with the medication instructions.
 - That any relevant form is completed, and information is recorded.
 - The setting 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.
- If a child does exhibit the symptoms, for which consent has been given to give non-prescription CALPOL® infant suspension medicine, then the setting will make every attempt to contact the child's parents. Where parents cannot be contacted, then the settings manager and/or supervisor will contact 111 and follow medical advice.
- In emergency our workforce will immediately call 999 and follow the advice from the senior medical professional.
- The settings manager and/or supervisor will take the decision as to whether the child is safe to have this medication based on the time the child has been in the setting, the circumstances surrounding the need for this medication, and the medical history of the child identified on their registration form.

Training:

- Training must be provided for staff where the administration of medicine requires medical or technical knowledge.
- If rectal diazepam is given, another member of staff must be present and co-signs the medical documents.
- 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:

- We carry out a risk assessment for each child with a long-term medical condition that requires on-going medication. This is the responsibility of our manager alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents/ carers will also contribute to a risk assessment. 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, 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 training needs 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 health plan for the child is drawn up with the parent/ carers outlining the key person's role and what information must be shared with other adults who care for the child.
- The individual health plan should include the measures to be taken in an emergency.
- We review the individual health 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.
- Parents receive a copy of the individual health plan and each contributor, including the parent, signs it.

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.
- On returning to the setting any relevant form is completed, and information is recorded. . All documentation of records are kept.
- 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.
- As a precaution, children should not eat when travelling in vehicles.
- This procedure is read alongside the outings procedure.

Permission(s) for administering Inhalers:

- Parents and/or carers must provide information about their child's needs for inhalers and keep this information up to date on their ParentAdmin account.
- Parents and/or carers notify the setting of any changes in writing using ParentAdmin and sends a notification alongside any relevant information/ supporting documentation. Here is the link: <https://uk.parentadmin.com/login.php>
- Inhalers must only be administered to a child where written permission for that inhaler has been obtained from the child's parent and/or carer. Any relevant form is completed, and information is recorded by parent / guardian prior to use. (Letter from Doctor if applicable).
- Parent and/or carers are to provide guidance/ instructions on how to administer the inhaler to their child. If necessary, seek professional guidance.
- Inhaler and spacer to be labelled clearly with child's name.
- Written permission must be obtained by the parent and/or carer for:
- You (parent and/or carer) provide written permission for child's inhaler to be administered by our staff.
- You (parent and/or carer) understand the setting and its workforce are unable to administer a preventative inhaler. (Contains steroid medicine).

Administering inhaler:

- Make sure the child is in a comfortable position.
- Check any relevant form for information, for dosage and use by date.
- Prepare spacer and mouthpiece.
- Shake inhaler.
- Connect inhaler into mouthpiece.
- Place mouthpiece over child's mouth and nose then administer inhaler.
 - 1 puff hold for ten seconds, unless stated differently.
(Child will breathe in and out)
- Remove inhaler from mouthpiece shake and repeat.
- Any relevant form is completed, and information is recorded and countersigned by staff.
- Ventolin takes approximately fifteen minutes to take effect.

When to administer inhalers:

Side effects / symptoms maybe:

- Wheezing.
- Coughing.
- Stomach moving up and down.
- Base of throat sunken in (dial 999).

In an emergency give ten puffs of Ventolin and then 1 puff every minute until ambulance arrives. You cannot overdose.

Care of inhalers and spacers:

- Wash in soapy water once a week. Drain do not dry.
- Store mouthpiece in spacer.
- If used daily spacer to be changed every 6 months.

Procedure for child carry's and/or taking own inhaler:

- Any relevant form is completed by parent/ carer, and information is recorded prior to child being collected.
- Staff collecting children for school club are to ensure the child's inhaler is with them prior to departure. On return to the setting the inhaler is to be placed in the locked medicine cabinet.
- Parent can provide written permission via notification for a school club child to hold/ carry and administer own inhaler but supervised by a member of staff.
- Staff to assess if the child needs their inhaler.
- Child must always administer inhaler with a staff member present.
- Check the inhaler for the following:
 - Correct medication.
 - Expiry date.
 - That the inhaler is not blocked.
 - Record the time and dosage.
 - Staff to countersign.
 - Staff to check the child's condition every ten minutes and record.
 - Any relevant form is completed, and information is recorded and is to be signed by a parent on arrival.

