



Crestwood Pre-school



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.

Promoting health and hygiene

1.15 Administering medicines

Policy Statement

This setting believes that the health and safety of children is of paramount importance. We make our setting a safe and healthy place for children, parents, staff and volunteers and administer medicines where necessary to enable inclusive practice.

We aim to make children, parents and staff aware of health and safety issues with regard to medicines and to minimise the hazards and risks to enable the children to thrive in a healthy and safe environment.

We ensure that any child who is receiving medication is well enough to attend the setting and is not contagious to any other child. We also ensure that up-to-date information is shared between parents/carers and the staff especially for those children who are receiving long-term medication.

EYFS key themes and commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning and Development
1.4 Health and well-being	2.2 Parents as partners 2.4 Key person	3.2 Supporting every child	

Administration of medication for long-term medical conditions

For children with long-term medical conditions requiring ongoing medication or medical treatment such as asthma, diabetes, allergies, epilepsy, a care plan will be drawn up with parents/carers and health professionals where appropriate.

The care plan will include:

- The name of the child
- Details of the condition
- 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 the staff members
- Any special requirements

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 epipen may be required or other non-oral medication.

This training must be given by a health professional or a trained parent to ensure that staff members are competent to perform the procedure.

Care plans and medical records will be kept secure in accordance with the Data Protection Act 1998.

However, they will be known to and readily accessible to all staff caring for the child.

All forms relating to parental agreement to administer medicine should be reviewed and new forms should be signed by the parents/carers termly.

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.

Giving the medicine

The pre-school manager or session supervisor must sign when they have administered the medicine and state the time given.

Prescribed medicines must be in the original container and clearly labelled with the child's name, the name of the medicine and dosage. Staff must ensure that the medication has not passed any expiry date.

Non-prescribed medication may be administered where there is a health reason to do so at the discretion of the pre-school manager. These must be in the original container and clearly labelled with the child's name and dosage required and a health care plan form must be completed.

Following specialist allergy and anaphylaxis training, a decision has been made that all parents/carers sign to agree that Piriton can be given in the situation of a suspected allergic reaction as part of the registration form.

A child's refusal to take Prescribed Medicines

If for any reason a child refuses to take a prescribed medicine the child's parent/carer will be contacted on the same day (as soon as possible to the dosage time). If the child's refusal to take his/her medication results in an emergency, the pre-schools emergency procedures will be followed. A member of staff (preferably one of the keypersons of the child or the senior team) should accompany the child to the hospital by ambulance and not in own car.

Storage of medicines

Medicines must be kept in a secure place away from children but easily accessible in case of need e.g. on a high shelf in the office area.

Medicines that need to be kept in the fridge should be stored in a labelled plastic container on the top shelf of the fridge.

All medicines should be returned to the child's parents/carers when no longer required to allow for safe disposal.

A record of all medicines administered will be kept.

Educational Visits/Outings

Reasonable adjustments may need to be made in order for children with medical needs to participate fully; this would include a full risk assessment. Ensuring that all staff are aware of any medical needs and that any child with a long-term health care plan will have a copy of their care plan taken on the visit/outing in the event of an emergency or medical need. Staff should always discuss any concerns with the child's parent/carer or GP/Health Professional.

Medication and Practitioners

Practitioners are required to keep any personal medication they carry in a secure place, which is inaccessible to the children.

Practitioners taking medication, which they feel may affect their ability to care for children, should seek medical advice and only work with children if the medication is unlikely to impair their ability to look after children.

Legal Framework

- Medicines Act (1968)
- The Human Medicines Regulations (2012)

Further guidance

- Managing Medicines in Schools and Early Years Settings (DfES 2012)
<http://dera.ioe.ac.uk/5357/>

This policy was adopted at a meeting of Crestwood Pre-school Committee

Held on _____ Date to be reviewed _____

Signed on behalf of the management committee _____

Name of signatory _____

Role of signatory _____