

ADMINISTERING MEDICATION POLICY

1. PURPOSE

- 1.1. At RAFA Kidz we promote the good health of children attending nursery and take necessary steps to prevent the spread of infection. If a child requires medicine we will obtain information about the child's needs for this, and will ensure this information is kept up to date.
- 1.2. We follow strict guidelines when dealing with medication of any kind in the nursery and these are set out below to provide staff with clear guidance on the storage, administration and disposal of medication.

2. SCOPE

- 2.1. This policy applies to all employees, volunteers and any agency/contracted workers of RAFA KIDZ.
- 2.2. The aim is to provide good practice within the setting and be compliant with the Safeguarding and Welfare requirements of the Early Years Foundation Stage.
- 2.3. Where possible, the key worker is responsible for the correct administration of medicine and ensuring appropriate consent forms have been completed. To ensure that medicines are stored and labelled correctly, and records are accurate in accordance with this procedure.

3. DEFINITIONS

- 3.1. Lifesaving medication would be considered as Epi pens, asthma pumps, epilepsy medication etc. If any of these are required for a child in the setting specific training will be given before the child can attend the setting. Subsequently if the child arrives without such medication, they will be unable to attend the session.
- 3.2. Children within the Early Years age group are those from birth to 5 years old.

4. PRINCIPLES

- 4.1. The setting will not care for sick children who should be at home until they are well enough to return.
- 4.2. We advise that parents/carers administer medicine prior to the child attending a session and on collection to minimise the frequency of medication being administered in our service.
- 4.3. Staff will only administer prescription medication with prior written consent from the child's parent/carer. Staff are to ensure the medication form is complete before doing so.

- 4.4. Medicines containing aspirin will not be administered unless prescribed by a medical professional.
- 4.5. The exception to non-prescribed medication is a child developing a temperature during a session. To prevent febrile convulsion child paracetamol can be administered after a verbal discussion with the parent, who then must collect their child from the setting. This medication will be in sachet form and only if the setting has it in stock.
- 4.6. Teething gel will be administered with prior written permission from the parent, the parent must supply this.
- 4.7. The key worker is responsible for the correct administration of medication, a second member of staff will witness and countersign the administration form.
- 4.8. It is the parent's responsibility to collect any medication at the end of a session.

5. STORAGE AND DISPOSAL

- 5.1. All medication must be stored securely, out of the reach of children. Lifesaving equipment must be stored where it is easily accessible to staff for quick administration in the event of an emergency. All staff must be made aware of where this can be located.
- 5.2. All medication kept on site will be reviewed at least termly to ensure that it is in date. If out of date, it will be initially offered back to the parent for disposal or disposed at the local chemist.
- 5.3. Where staff bring medication for themselves, it must be stored in the office or staff room that children don't have access to. This must be taken in the same areas.

6. LONG TERM MEDICAL CONDITIONS

- 6.1. A risk assessment and care plan must be carried out for each child with long term medical conditions.
- 6.2. A member of management is responsible for drawing up the document with the parent/carer and other professionals when needed, which should include provision for taking the medication during outings.
- 6.3. The plan must include what arrangements should be in place following an emergency.
- 6.4. The risk assessment **MUST** be reviewed every six months whilst the child is attending the setting.
- 6.5. Specific training for staff will be accessed if required to administer medication or care.
- 6.6. Parents/carers are to be given a copy of the Health Care plan.

7. MEDICINES ON OUTINGS

- 7.1. The key worker familiar with the child's needs, must be present on the trip, with one other member of staff fully briefed before the event.
- 7.2. Medication must be transported in a sealed plastic box which is clearly labelled with the child's name, medication and dosage. Inside the box must be the consent form with details of when administered, dosage given and signature of two members of staff.
- 7.3. On return to the setting, the form must be given to the parent for them to sign.
- 7.4. If the child is taken to hospital, the box with the medication and parent consent form must be handed in at the hospital.

8. RESPONSIBILITIES

Leaders and employees are responsible for the daily administration of this policy.

9. REVIEW

This policy will be reviewed annually, unless an incident occurs or when procedural/legislative changes arise that would have impact on it.

Date Originated	MAY 2019	Signature
Date Reviewed		