

Sunbeams Play

Registered Charity No. 1152188

Health and Safety

21. Administering Medicines.

Policy statement

It is not our policy to care for sick children/young people, as they should be at home until they are deemed well enough to return to the setting, or until the seclusion period for the illness is over. We will not administer medication for these children/young people at Sunbeams and reserve the right to send them home or refuse to accept them into the setting. However this rule does not apply to medication needed for a child/young person with a long term illness.

In many cases, it is possible for children's/young people's GP's to prescribe a medicine that can be taken at home in the morning and evening. The parents/carers should inform staff if their child/young person is taking medication, especially if a child/young person has not had a medication before, it is advised that the parent/carer keeps the child/young person 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 manager is responsible for ensuring all staff understand and follow these procedures.

Procedures

Self-administering medication such as inhalers

Children/young people taking any self-administering prescribed medication at home must be well enough to attend the setting.

- Children's/young people's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children/young people.
- . No medication may be given without these details being provided:
 - Full name of child/young person 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.
- Signature, printed name of parent/carer and date.

The senior on the day will be responsible for checking that medication is signed in correctly. All medicines will be signed in and out.

The administration is recorded accurately each time it is taken by the child/young person and is signed by staff. Parents/Carers sign the record book to acknowledge the administration of a medicine. The medication record book records:

- Name of child/young person.
- Name and strength of medication.
- The date and time of dose.
- Dose given and method.
- Signed by key person/manager.
- Verified by parent/carer signature at the end of the day.
- The emergency services will be called if a child/young person becomes unable to administer their inhaler, a first aid trained staff member will stay with the child/young person whilst the emergency services and then the parents/carers are called.

Storage of inhalers

- All medication is stored safely in a locked filing cabinet. Where the cabinet is not used solely for storing medicines, they are kept in a marked plastic box.
- The child's key person is responsible for ensuring medicine is handed back at the end of the day to the parent/carer.

Medication is kept in a clear named box either in the locked filing cabinet or medicine cabinet. Staff are made aware of this during their induction.

- Only children/young people that take inhalers may self-administer. Where children/young people 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/young person requires medication.

Staff will be first aid trained also trained in the use of Epi pens for children/young people who have severe reactions to allergens.

Children/young people who have long term medical conditions and who may require on ongoing medication

- A risk assessment is carried out for each child/young person with long term medical conditions that require ongoing medication before they attend their first session. This is the responsibility of the 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/young person.
- 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 activity that may give cause for concern regarding an individual child's/young person's health needs.
- A health care plan for the child/young person 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/young person.
- 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/carers receive a copy of the health care plan and each contributor, including the parent/carer, signs it.

If we feel we cannot offer the care this child/young person needs, the parents should be informed of this, and that they would be expected to administer any medication if necessary and to also follow our procedures whilst doing this.

Legal framework

- Medicines Act (1968)

This policy was adopted on

20th April 2015

Policy updated

April 2020

Date to be reviewed

April 2021

Signed on behalf of the management committee

Name of Signatory

Role of Signatory

Reviewed By	Date