

**Glen Family Centre**

Administration of Medicine

**Introduction**

Many children will at some time need to take medication while attending nursery. For many, this will be short term, perhaps finishing a course of medication.

Other children may have medical conditions such as asthma that if not properly managed could limit their access to the centre.

Some children have conditions that require emergency treatments e.g. severe allergic reactions.

* **Information on medical needs will be gathered at least annually.**
* **Parents and carers have a responsibility to ensure this information is updated where circumstances or needs change.**

**Medication should only be given in the Family Centre when absolutely necessary. If a child is unwell they should normally be absent from the centre.**

A list of illness requiring exclusion is available on the Centre website and from our office.

This policy provides information on:

* storage and administration of medication
* consent to treatment
* record keeping
* disposal of medicines

**Key Principles for staff**

* The agreement of the Head of centre or her delegated representative is required for the administration of medicines in nursery and it is the Head of Centre’s overall responsibility for the administration of medicines in nursery; form AM1 (Appendix 1)
* The parents must **request in writing** - form AM1 (Appendix 1) for medication to be administered to their child
* Parental agreement must be obtained for the administration of all medicines (Appendix 2)
* Medicines must be administered in accordance with directions contained on the packaging and associated information leaflets; staff should always read the information leaflet
* All medication must be delivered complete with the original pharmacy or dispensed label identifying:
* child’s name
* date of dispensing
* name of the medication and strength
* dosage, frequency and method of administration
* expiry date
* The medication record sheet must be completed each time staff gives medication to a child. **Parents must sign form on a daily basis** to acknowledge staff administrations. Completed forms must be filed in folder in main office (Appendix 2)
* On each occasion of a child being administered medicine staff must check:
* the child’s name, any written instructions and prescribed dose
* the dispensed and expiry dates
* that the medication is for a current condition (something prescribed for a condition six months ago might not be appropriate now)
* if a medicine, not dispensed recently, is still appropriate for use
* The nursery should not give the first dose of a new medicine to a child. Parents should have already given at least one dose to ensure the child does not have an adverse reaction to the medication e.g. allergic to an antibiotic
* There are occasions when it will be appropriate to administer non-prescribed medicines, for example nappy rash. In these instances, the same procedures should be followed as for prescribed medicines, including: head teacher agreement; parental consent and completion of form AM1; secure and appropriate storage; recording of the medicine being administered.
* Where ‘when required’ medication is kept in nursery the parent/carer should be contacted before medicine is administered – informing them of need and asking when medication was last given prior to child arriving at nursery
* A record must be maintained, after each administration, of ALL medication administered or supervised by staff on an individual pupil record sheet (Appendix 2)
* Medicine should be administered with an appropriate degree of privacy and confidentiality
* Where a child spits out or refuses the medication a parent must be advised immediately, and where required the emergency services called. If the medication is spat out no further dosage should be given to compensate loss.
* In the unlikely event of a wrong dosage being administered, or of medicine being given to the wrong child, the same assessment of consequences should be carried out. In addition for early years children the Care Inspectorate must be informed. (All such information must be recorded in the pupil’s records)
* Time or course expired medication should always be returned to the parent/pharmacy
* Permission from the parent should be time limited and reviewed every 28 days.

**Storage**

* Each individual child’s medication should be kept separate and stored in an individual container clearly labelled with the child’s name and date of birth
* Medication is stored in the top cupboard in the kitchen, as children have no access to this area.
* If medication requires storage in a fridge, the medicine should be stored in a box with a lid and be clearly labelled with the child’s name and date of birth. (kitchen fridge)
* All spoons, syringes, spacers for inhalers etc. should be labelled, cleaned as described in product information after each use and returned to the storage box containing medication
* Medication should be reviewed by parent/keyworker and returned if necessary after 28 days

**Permission Forms**

* Forms are located in medicine cupboard in kitchen
* If staff have any concerns then they should consult a member of the management team
* Further queries should be directed to the parent, checked with the G.P, a pharmacist or NHS