



## **Administration of Medicines Policy**

Medication will only be administered if it is essential (i.e. 'that it would be detrimental to the child's health if the medicine were not administered during the setting day'.) Wherever possible, dosages of medicine should be worked out so that they can be taken outside pre-school sessions.

At TreeHouse Pre-School we will only administer medicine that has been prescribed for a named child.

All medicine should be:

- In its original container as dispensed by a pharmacist and include the child's name and prescriber's instructions for administration.
- Brought to the setting by the parents daily (collecting the medicine at the end of the session is the parent's responsibility) or a supply of medication provided specifically for use at pre-school.
- Provided in small quantities.

**Medicine not in its original packaging cannot be administered**

**Non prescription medicine cannot be administered.**

**If a child is on a course of prescribed medicine, we will ask the parents to complete a consent form detailing time and dosage.**

**For children suffering from Asthma, where an inhaler is prescribed this must be kept on site at all times. Failure to supply an inhaler will result in the child being withdrawn from the session.**

Before administering medicine to a child the member of staff will check:

The child's name

Prescribed dose

Expiry date

Written instructions provided by the prescriber on the label or container

All steps in administering medicine will be witnessed by another member of staff.

**Records** will be kept of all medication brought to the setting and when medication is administered this will also be recorded in the medicine file and signed by the parents.



## **Administration of Medicines Policy**

**Refusal** – If a child refuses to take their medication, staff will not compel them to do so. They will record in the child's record the refusal and any surrounding circumstances and will inform the parents as soon as possible and at the end of the session at the latest.

### **Medicine Storage:**

All medicines will be stored in a cupboard or in the staff fridge, if they need refrigeration. Emergency medicine that needs to be on hand at all occasions (e.g. inhalers and epi-pens) will be placed in the kitchen cupboard above the oven, on the top shelf.

**Medicine File** – the medicine file will contain:

- A record of all medicines on site and their location
- Copies of parents consent forms (originals will be kept in children's file)
- Records of administration of medicines to individual children
- Copies of children's health care plans

### **Emergency Procedures:**

Actions to be taken in an emergency and what constitutes an emergency for a particular child are contained in the child's health care plan. All staff where appropriate will have read and discussed the emergency procedures so that they are able to respond appropriately. Copies of the emergency procedure will be laminated and stuck to the inside of the store cupboard door, so they are readily available for consultation in the event of an emergency.

### **Trips and Outings**

Before a trip is undertaken an additional risk assessment will be carried out in relation to children with medical needs. Steps will be taken to minimize risks and to ensure that all children can be included on the trip.

Medicine for children, who may require it on the trip, will be carried by the member of staff allocated to that child for the trip (usually the key person) or by the child's parent if they are attending the trip.

If it is thought that additional staffing is necessary to ensure the safety and enjoyment of the trip by everyone, this will be put into place.

Copies of emergency procedures will be taken on the trip along with relevant contact numbers.

Adults supervising children with medical needs and the trip leader will carry mobile phones.