

Developing an Administration of Medication Policy and Procedure

The provider must promote the good health, including the oral health, of the children they look after. Providers must have and implement a policy, and procedures, for administering medicines to children—Statutory Framework for the Early Years Foundation Stage — 2024 (GP 3.53) (CM 3.52)

The policy and procedures must include:

- Procedures for managing prescribed medicines which need to be taken during the day at the setting.
- > The procedure to follow if a child is in receipt of new medication, what is the process for this and how does the parent and setting share this information.
- The systems that the setting have in place for gaining information about a child's medication needs (i.e., the settings registration/administration form, care plans) and how this is kept up to date.
- > The process for staff training in relation to medication. This is essential if children attend the setting where specific administration is required, for example epi-pens. How are children admitted into the setting where a medical condition requires specific administration and what happens if children are already in attendance and a medication condition is diagnosed that requires specific administration.
- > How you ensure that prescribed medication as been authorised by a doctor, dentist, nurse or pharmacist. Aspirin should only be given if prescribed by a doctor.
- How does the setting ensure consent is gained before any medication is given to the child, whether prescribed or non-prescribed. Ensure written consent is given every time a new medication is brought into the setting.
- Guidance on non-prescribed medication Non-prescription medicines can include those that can be purchased from pharmacies (including some over the counter medicines which can only be purchased from a pharmacy), health shops and supermarkets, can refer to BMA advice: <u>Prescribing over-the-counter medicines in</u> nurseries and schools (bma.org.uk).
- How does the setting record each time medication is given, the recording form should include name of medication, last dose given at home, reason for medication, date prescribed, time, dosage. Parents should be notified on collection of any medication given and signatures from parent and practitioner should be obtained. Medication records should be recorded in English.
- Retention of medical records will be stored securely and retained for a reasonable time to comply with the EYFS and the Data protection legislation. At the end of this period records will be destroyed securely.

- Procedures for managing medicines on trips and outings, including the need to have at least one member of staff attending the outing who holds a relevant, up to date first aid certificate.
- The circumstances in which children may take any non-prescribed medicines (e.g., infant paracetamol, teething gel). How does the setting manage this. Prior written consent on admission should be gained from parent/carers.
- Notification to parents via text, email, telephone call for administering non prescribed medication i.e. calpol, piriton.
- > The settings policy on assisting children with long term or complex medical needs.
- > How is children's medical information kept up to date.
- > The procedure for children carrying and self-administrating their medication.
- N.B. It is essential that the provider check the content of their liability insurance, paying regard to the section 'special conditions', to highlight any special precautions needed where the staff may need to administer any lifesaving medications, for e.g., epi-pens, rectal diazepam, tubular medications, injections etc. Failure to understand and follow any 'special conditions' may result in the insurance becoming void.
- The settings procedure for staff having paediatric first aid qualifications, these should be in line with the recommendations as identified within the EYFS – (page 28 GP) (page 20 CM), point 3.25 and Annex A – EYFS (page 43 GP) (page 33 CM)
- The procedures to follow with regards to the 'hand over' of medication. For example when collecting children from another setting i.e. school, how do you obtain and keep a record when the child last received their dose.

The policy should be reviewed:

- > Following any occasion when any part of the procedure has been implemented.
- > Whenever changes to legislation are produced.
- > At least annually.
- > The policy and procedure needs to be signed by the registered person, include reviewed date and next review due date.
- If any changes are made to the policy when reviewed the staff and parents need to be informed.

This information is provided for guidance only. It is your responsibility to ensure that all statutory legal guidance is adhered to. Consideration needs to be given to any changes in legislation subsequent to the production of this information.

Consent to administer medication (Course)

Name of child:
Date
Name and strength of medicine
Reason medication is being administered
Dosage to be administered as stated on the label
Recommended time(s) to be administered
Storage details
Parent/carer name (please print)

To be completed by setting

To be completed by the parent/carer

	Monday	Tuesday	Wednesday	Thursday	Friday
Date	<u>-</u>	_	-	_	-
Time of last					
dose at home					
Time and dose					
administered					
Name of witness					
and signature					
Time and dose					
administered					
Name of witness					
and signature					
Time and dose					
administered					
Name of witness					
and signature					
Staff name and					
signature					
Name of witness					
and signature					
Additional					
information					
Parent signature	·				

All medication will be administered in accordance with the settings medication policy.