

# *Mad Hatters*

## **Medication Policy**

At Mad Hatter's Day Nursery, we promote the good health of children attending nursery and take necessary steps to prevent the spread of infection (see sick child policy). 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.

We follow strict guidelines when dealing with medication of any kind in the nursery and these are set out below.

### **Medication prescribed by a doctor, dentist, nurse or pharmacist**

*(Medicines containing aspirin will only be given if prescribed by a doctor)*

- Prescription medicine will only be given when prescribed by the above and for the person named on the bottle for the dosage stated
- If dosage is required three times a day – then nursery will administer one dosage at mid-day if the child is in for a full day.
- If dosage is four times a day and if child is in a full day then we will administer the two doses.
- Medicines must be in their original containers
- Less than three dosages then nursery will not administer unless on written authorisation from the doctor.
- Those with parental responsibility for any child requiring prescription medication should hand over the medication to a member of the management team who will then note the details of the administration in the medicine book.
- Those with parental responsibility must give prior written permission for the administration of each and every medication. However, we will accept written permission once for a whole course of medication or for the ongoing use of a particular medication under the following circumstances:
  1. The written permission is only acceptable for that brand name of medication and cannot be used for similar types of medication, e.g. if the course of antibiotics changes, a new form will need to be completed
  2. The dosage on the written permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed
  3. Parents must notify us IMMEDIATELY if the child's circumstances change, e.g. a dose has been given at home, or a change in strength/dose needs to be given.
  4. Parents need to inform management when their last dose was, and what time they require their next dose.
- The nursery will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a letter from a doctor or dentist
- The parent must be asked when the child has last been given the medication before coming to nursery; and management must record this information on the medication form. Similarly, when the child is picked up, the parent or guardian must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times

- At the time of administering the medicine, a senior member of staff will ask the child to take the medicine, or offer it in a manner acceptable to the child at the prescribed time and in the prescribed form. (It is important to note that staff working with children are not legally obliged to administer medication)
- If the child refuses to take the appropriate medication, then a note will be made on the form
- Where medication is “essential” or may have side effects, discussion with the parent will take place to establish the appropriate response.

**Non-prescription medication (*these will not usually be administered*)**

- The nursery will not administer any non-prescription medication containing aspirin
- The nursery will only administer non-prescription medication for a short initial period, dependant on the medication or the condition of the child. After this time medical attention should be sought.
- If the nursery feels the child would benefit from medical attention rather than non-prescription medication, we reserve the right to refuse nursery care until the child is seen by a medical practitioner
- If a child needs liquid paracetamol or similar medication during their time at nursery, such medication will be treated as prescription medication with the \*onus being on the parent to provide the medicine/\*nursery providing one specific type of medication should parents wish to use this.
- On registration, parents will be asked if they would like to fill out a medication form to consent to their child being given a specific type of liquid paracetamol or anti-histamine in particular circumstances such as an increase in the child’s temperature or a wasp or bee sting. This form will state the dose to be given, the circumstances in which this can be given e.g. the temperature increase of their child, the specific brand name or type of non-prescription medication and a signed statement to say that this may be administered in an emergency if the nursery CANNOT contact the parent.
- An emergency nursery supply of fever relief (e.g Calpol) and anti-histamines (e.g. Piriton) will be stored on site. This will be checked at regular intervals by the designated trained first aider to make sure that it complies with any instructions for storage and is still in date
- If a child does exhibit the symptoms for which consent has been given to give non-prescription medication during the day, the nursery will make every attempt to contact the child’s parents. Where parents cannot be contacted then the nursery manager will take the decision as to whether the child is safe to have this medication based on the time the child has been in the nursery, the circumstances surrounding the need for this medication and the medical history of the child on their registration form. Giving non-prescription medication will be a last resort and the nursery staff will use other methods first to try and alleviate the symptoms, e.g. for an increase in temperature the nursery will remove clothing, use fanning, tepid cooling with a wet flannel. The child will be closely monitored until the parents collect the child
- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, the manager will decide if the child is fit to be left at the nursery. If the child is staying, the parent must be asked if any

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kind of medication has already been given, at what time and in what dosage and this must be stated on the medication form

- As with any kind of medication, staff will ensure that the parent is informed of any non-prescription medicines given to the child whilst at the nursery, together with the times and dosage given
- The nursery DOES NOT administer any medication unless prior written consent is given for each and every medicine.

## **Injections, pessaries, suppositories**

As the administration of injections, pessaries and suppositories represents intrusive nursing, we will not administer these without appropriate medical training for every member of staff caring for this child. This training is specific for every child and not generic. The nursery will do all it can to make any reasonable adjustments including working with parents and other professionals to arrange for appropriate health officials to train staff in administering the medication.

## **Storage**

All medication for children must have the child's name clearly written on the original container and kept in a closed box, which is out of reach of all children.

Emergency medication, such as inhalers and EpiPens, will be within easy reach of staff in case of an immediate need, but will remain out of children's reach.

Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children.

All medications must be in their original containers, labels must be legible and not tampered with or they will not be given. All prescription medications should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with expiry dates, before staff agree to administer medication.

## **Adult Staff Medication etc.**

### **Introduction**

Staff, parents, visitors, and part-time staff (e.g., students and college students) may carry medications or other potentially hazardous items including medical equipment in their purses, backpacks, or pockets etc.

Early care, other care and education programme's medication policy and procedure should address medications required by adult staff members to ensure children are and others are not put at risk of harm.

It is vitally important that children do not have access to such medication etc. and therefore they cannot consume, or attempt to use it, so as to harm themselves or others.

## **Policy - Statement of Intent**

The aim of this policy is to establish a clear adult staff medication procedure and to comply with all relevant legislation, including:

- Health and Safety at Work etc. Act 1974
- Management of Health and Safety at Work Regulations 1999
- Legislation and frameworks for arrangements for the protection of children

## **Employer Responsibilities**

To ensure that any adult staff medication etc. is minimised and/or controlled if on our premises, we will:

- ensure that a clear adult staff medication protocol is communicated throughout the company;
- provide suitable levels of training to employees
- provides adequate facilities to ensure secure storage of adult staff medications etc. which are separate from children's medications
- appoint a responsible person who will ensure compliance with policy, procedures and arrangements
- ensure all injury accidents and incidents are recorded in the accident book;
- investigate all accidents, incidents and near misses fully, to establish their root cause and to inform new procedures to reduce recurrence;
- appoint a responsible person who will report internally and/or externally any accidents or incidents to the relevant authorities;
- review accident and incident statistics periodically, to identify trends; and
- review this policy at least annually, but more frequently if necessary.

## **Procedure**

To fulfil our responsibilities as outlined above, we will:

- provide suitable levels of training to employees from recruitment / induction and periodically throughout employment on the control of medication (children's and adults');
- require staff taking medication which they believe may affect their ability to care for children to seek medical advice and only work directly with children if that advice is that the medication is unlikely to impair their ability to look after children;
- require staff taking medication which they believe may affect their ability to care for children to inform their employer (Registered Manager or Duty Manager) immediately before undertaking work;
- provides adequate facilities to ensure secure storage of adult staff medications etc. which are separate from children's medications and which are only accessible by the medical needs co-ordinators– typically this will be a lockable medicine cabinet in the office – one for children and one for staff.
- require staff taking medication to use the secure storage facilities at all times and not to carry medication on their persons,

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- require staff taking medication not to dispose of such medication on our premises, and medication to be taken in the office
- establish and communicate a clear accident, incident and near miss reporting protocol where any such occurrence is reported to the responsible person;
- provide easily accessible accident books for the reporting of accidents and incidents;
- appoint a responsible person to report appropriate accidents, incidents and near misses and to provide training, where practicable;
- ensure all employees are aware of emergency procedures in the event of a major accident or incident;
- establish whether an accident or incident is reportable and contact the relevant authorities as soon as possible, through the Online Management Tools - Incident and Accident Recording toolkit;
- co-operate with the relevant authorities on any external investigations;
- investigate incidents fully, taking witness statements where possible, to establish their root cause and to develop new procedures to reduce recurrence;
- ensure disciplinary action is taken if breaches of policy or misconduct are established by the investigation;
- ensure all elements of an accident, incident or near miss investigation are recorded and filed for future reference;
- protect the health, safety and welfare of our employees by providing appropriate support facilities (such as counselling) for those affected by the accident;
- periodically review accident, incident and near miss statistics to identify trends and set realistic timescales for improvement actions; and
- periodically review compliance with our policy and procedures to identify trends and set realistic timescales for improvement actions.

**The named Medical Needs Officers are; Sarah Holmes, Samantha Rutter and Jemma Daniels**