



## **POLICY ON ADMINISTRATION OF MEDICATION**

### **Principle:**

This policy is developed in accordance with the Child Care Act 1991 [Early Years Services] [Registration of School Age Services] Regulations 2018).

### **Policy Statement**

To facilitate the promotion of health and well-being and to promote an inclusive setting we work in consultation with parents to ensure the safe administration of medication.

### **Procedure:**

- We do not routinely administer non-prescription/prescription medications. We only administer medicines with the correct signed permission.
- Where a child or children attending Acorns Afterschool have specific medical conditions which require specialised treatment or administration of medication it is the policy of our Service that key staff will be trained specifically in relation to such treatments and administration of medications pertaining to same.

Medicines must only be brought into the service for administration by the staff when it is essential. This means where it would be detrimental to the child's health if it were not to be administered.

- Designated personnel only are permitted to administer medicine
- Details of all persons trained and designated to administer medication are contained in children's individual care plans.
- Staff will be trained on medicine administration
- The Manager must be informed if your child is taking antibiotics or any other prescription or non-prescription medication.
- A full medical and medicine history must be provided for each child.



- A record of the child's medical history will be required on the registration form.
- Essential medicines will only be administered where a parent/guardian has signed a consent form which is contained in the Registration Form or on a separate consent form,
- We will only follow the dosage as instructed by the doctor who prescribed the medication.
- If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by a health professional.
- No child may self-administer unless they have the competence, knowledge to do so and only when full written authorisation is given by their parent/guardian.
- If a child refuses to take their medication staff will not force them to do so. But will seek advice from the parent.
- Parents/guardians must keep the service up to date on their child's medical needs.
- Parents/guardians must fill in the medicine consent form of the service, authorizing the administration of medicine (prescription or non-prescription) to their child. Staff cannot give medicine unless this written permission is given.
- Parents/guardians must hand staff the medicine, which then stored in the fridge or the medicine cabinet. Any form of medication must never be left in a child's bag, including inhalers.
- Medicines must be in their original packaging clearly labelled with the child's name, the current date, expiry date, storage instructions and dosage plus the name of the health care provider that recommended the medication. We will only administer medicine if licensed for the age group of the child. For example, an anti-febrile medication supplied by a parent for a 4.5-year-old child that is licensed for an over 6- year-old will not be administered.
- We will always have the documentation available related to the medicine to include directions for use, possible adverse reaction.

### **Care Plans:**

Where an individual care plans has been drawn up in respect of a child attending our Service, key and relevant staff will receive additional training where necessary in respect of such care plans. Such staff will be aware of



how to implement the instructions contained in the care plan, the medical condition(s) to which it refers, the method of administration of medication referred to.

### **Where a Child is Permitted to Self-Medicate:**

- We recognise that children have the right to take responsibility about their welfare and administer their own medication. In the event that a child is authorised and permitted by a parent/guardian to retain and self-administer medication written details of such medication must be furnished to our Service with written authority and instruction from the parents in respect of the retention and self-administration of such medication. If parental instructions are changed these must be given in writing. Verbal instructions will not be accepted. Parents must indemnify the After School service in respect of the self-administration of any medicine.
- The Service will facilitate the retention and storage of medication for the self-medicating child.
- Acorns Afterschool will carry out a risk assessment in respect of each child retaining medication and self-administering medication and this will be reviewed regularly Permission to self-medicate will be based on the child's capabilities and parental consent'
- Acorns Afterschool will ensure that the storage of the child's medication does not cause a safety concern to other children (e.g. younger children in the group). This will be assessed as part of the risk assessment
- The staff team will be familiar with the medication administration routine for each child self-medicating and will check-in that the child keeps a record and follows the routine
- The staff member will facilitate the proper storage of medication and ensure it is accessible to the child when he/she requires it.

### **Storage of Medicines:**

- All medication is stored in line with manufacturer's instructions out of reach of the children.
- Medication is stored in a press, in the classroom, out of reach of children.
- For self-medicating children, the availability and storage of their medication will be decided during the risk assessment.
- The Manager/person in charge is responsible for ensuring medicine is handed back at the end of the day to the parent.



- For some conditions, medication may be kept at our Service. The Manager will check that any medication held to administer on an as and when required basis, or on a regular basis, is in date and return any out-of-date medication to the parent.
- Unused medicines should be returned to the parent.
- Medicines, creams and ointments are not stored in the first aid box.
- All medication is returned to storage immediately following its administration to a child.

### **Disposal of Medication:**

The circumstances where disposal is necessary include:

- A child's treatment plan changes
- A child leaves or goes to new facility
- The medicine reaches its expiry date
- Any medication that has expired, is short dated or is no longer needed by the child will be returned to the parent or guardian. This is recorded in the medication diary. Procedures for staff administering essential medicines (Prescription and non-prescription)/record keeping:

1. Wash hands thoroughly.
2. Staff administering medicines must check
  - o The child's name.
  - o Prescribed dose.
  - o Expiry date of medicine.
  - o Written instructions provided by the prescriber on the label or original container.
  - o Time last dose was given.
  - o That the directions and instructions are in English
3. Staff must check that the medicine contains the directions as prescribed the doctor and dispensed by the pharmacy
3. Check parents/guardians have completed and signed 'Administration of Medicines' Consent form and Anti Febrile Medication form if relevant.
4. Staff are aware of how the medication reacts with food, fluids or other medications. e.g. some medications cannot be given with milk, or when taking another medication.
5. Following the administration of medication staff will maintain a record of the outcome of the administration of the medication. e.g. was there



a reduction in temperature after administration of anti-febrile agent;  
has the child developed a rash following administration of medication.

**Precaution Steps:**

Staff must ask for a person in charge or another member of staff to be present.

Ask them to confirm steps 1 and 2 and that the medicine can be administered.

- Staff MUST have a witness PRESENT to the medicine being administered. [Second person and countersigned by that person]

- Staff must record the child's name, date, time dosage and route in the medicines record and give a copy to the parent.

- Parents/guardians will be required to sign to say they were informed of the dosage of the medicine upon collection of the child.

It is extremely important that staff follow the procedures as detailed above. These measures are in place to ensure that no mistakes are made. Administering medication is a responsibility which must be undertaken with due caution. If staff are not sure how to administer it or have difficulty doing so, please inform the Manager/person in charge.

**The following should always be checked:**

- Correct Child
- Correct Medication
- Correct Dose
- Correct Time
- Correct Route

**Procedures for Children with Allergies Requiring Treatment with Oral Medication:**

- Asthma inhalers are regarded as "oral medication" Oral medications must be prescribed by a GP and have the manufacturer instructions clearly written on them.

- Staff must be provided with clear written instructions on how to administer such medication.

- Inhalers must be provided to the service clearly labelled with the child's name



· The service must have the parents/guardians' or guardians' prior written consent. This consent must be kept on file.

Emergency Medicines Where medical conditions exist for a child, we will develop individual medical care plans which will include the management in the event of an emergency relating to the condition.

This will be developed in conjunction with the parents and the child's medical advisers. Where a child has a condition that may require emergency medical treatment staff will be trained on the condition and the treatment. This would include medications like Ventolin, Glucagon or EpiPen.

Where medication is administered in the case of anaphylaxis or asthma emergency our Service will ensure that the emergency services are contacted as soon as is practically possible and the parents and guardians are also contacted as soon as possible. Emergency numbers for the local pharmacist and local medical practitioners are available within the Service.

**Life Saving Medication and Invasive Treatments:**

Adrenaline injections (EpiPens) for anaphylactic shock reactions (caused by allergies to nuts, eggs etc.) or invasive treatments such as rectal administration of Diazepam (for epilepsy).

**Where a Child Suffers an Allergic Reaction to Medication Administered in the Service:**

The length of time for an allergic reaction varies from person to person. Some people may react right away, while others might take the drug several times before they have an allergic reaction. Most of the time symptoms will appear between 1-2 hours after taking the drug unless someone has a more rare, delayed type reaction.

Symptoms of these less common drug allergies include fever, blistering of the skin, and occasionally joint pain. Symptoms from a drug allergy can be like other allergic reactions and can include hives or skin rash, itching, wheezing, light headedness or dizziness, vomiting and even anaphylaxis. A combination of these symptoms makes it much more likely that it is an allergy than nausea and vomiting on their own, which are common side effects of medications.

Where the Service suspects that a child has suffered an allergic reaction to medication administered, the parents/guardians will always be notified as soon as is practically possible by telephone.



Our Service will ensure that the emergency services are contacted as soon as is practically possible. Emergency numbers for the local pharmacist and local medical practitioners are available locally to our Service. Where it is necessary to contact the emergency services to bring a child to hospital, a member of staff will escort the child if the parent or guardian is unavailable. The staff member will remain with the child until the parent or guardian arrives at the hospital.

A handwritten signature in black ink, appearing to read 'E. Peery', is written over a faint rectangular box.

Manager Signature:

Date: 18th July 2023

**Appendix A**





**LITTLE ACORNS AND ACORNS AFTER SCHOOL MEDICATION CONSENT FORM**

<b>Child's Full Name:</b>	
<b>Child's Address:</b>	
<b>Date of Birth:</b>	
Details of Medical Condition i.e. what medicine is for.	
Name of Medicine:	
Name and contact details of prescriber:	
Dosage of Medicine:	
Route for administration of medicine (circle correct one)	Oral (by mouth) Topical (rub in) Inhale Injection Rectal
Frequency of dosage or times to be given:	
Effective from:	Date:
Effective to:	Date:
Any other information e.g. side effects, potential	

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adverse reaction or special precautions:	
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How the medication is to be stored (as on directions given on medication label)	
Printed name of parent:	

**Appendix B**

Staff members are required to record medication administered as follows:



MEDICATION ADMINISTRATION RECORD

**\*\*Each time medication is to be administered, you must first:**

- Confirm the child's identity
- Check that parent's/guardian's written consent has been given
- Check when medicine was last given
- Check the administration instructions, including the name of the medication, the method and times for administration and the required dose
- Check whether medication is within date

' Child's Name:

Date	Time	Name of Medication (state whether prescribed or non-prescribed)	Dose Given	Route of administration*	Signature of person administering.	Signature of witness	Comments



\*Route of administration: by mouth, topical (rub in), inhale, injection, rectal.

