



MONTESSORI GARDEN Nursery School

Policies & Procedures ("PP") – F1 Administration of Medication

F < HEALTH >

Montessori Garden Nursery School promotes good health of children in our care, ensuring we follow our policies and procedures below to correctly deal with sickness or illness of our staff and children, including controlling infectious diseases and our parents are informed of these through our verbal communication, emails in response to sickness and illnesses as well as our Health policies being available to all our parents on our website. We have plan in place to prevent the spread of infection (*PP F2.1. Infection Control*).

F 1. Administration of Medication (SF 3.44-3.46)

Who is Responsible?

- ✓ The Managers are responsible for ensuring that:
 - (1) There is written parental/guardian permission to administer medication to children during the session. It is the responsibility of the staff to ensure that parent / carer completes a medication authorisation form prior to any medication being administered and a signature is obtained giving authorisation.
 - (2) The administration is recorded accurately each time it is given and is signed by staff. The medicine administration form must be signed again by the parent or carer when they are collecting their child to acknowledge the administration of a medicine.

Gathering information

- ✓ (*link SF s.3.45*) At Montessori Garden Nursery we ensure we are up-to-date with children's needs for medication through asking for this information in the initial **registration form**, we will also speak to parents about their child's needs **during settling-in (settling in form)**, including needs for medication and we always make time for parents **at drop-off (note in relevant form/book)** to observe the child and ask how child is feeling. If a child becomes unwell in our care we have procedures to follow (*PP F 2.3*) and make observations and, where necessary, recommend parents to seek out their GP and update us. We also ask that parents to inform us of any need for medication the child may have as soon as they become aware.
- ✓ It is vital that **Parents/carers inform us** of any medication you may have given your child before they arrive into our care. We need to know what medicine they have had, the dose and time given.
- ✓ Please also inform us if your child has been unwell during the night. Parents/carers must inform us of any diarrhoea or vomiting that occurred within 48 hours and adhere to the exclusion period.
- ✓ If your child has medical or non-medical dietary requirement, please refer to our Dietary Requirements Policy.

Which Medication do we accept

- ✓ Medication also includes dietary supplements such as vitamins, probiotics, boosters, oils, as well as homeopathic remedies, creams, sun creams (must have min.factor 30 ideally 50), nappy creams etc...
- ✓ If it is a **homeopathic** remedy, it must be prescribed by a Licenced Homeopath together with written instructions from the homeopath, follow same requirements as any other medicine.
- ✓ Medicines must be **Prescribed** by a doctor, dentist, nurse or pharmacist and carry the POM (Prescription Only Medicine) or P (Pharmacy) symbol on the packaging, except for epi-pens.
- ✓ **Non-prescribed** medicine purchased over the counter in the UK is normally NOT accepted but if it must be given to the child, it **must have an acceptable health reason** to give the medication



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and must **NOT** contain any trace of aspirin, must **NOT** be administered by injection, pessaries or suppositories involving intrusive nursing.

✓ All medication must:

- i. clearly bear your **child's full name**;
- ii. be **renewed annually**;
- iii. product instructions must be **in English**;
- iv. medication must be in its **original container**;
- v. within the use-by date / in date / **not expired**; and
- vi. already been **tried at home prior to 48hrs before** bringing to nursery.

the only exception is the setting's own non-prescribed over the counter medicine such as Calpol or Piriton.

Medication specifics:

- ✗ We do **NOT** administer **antibiotics**. If your child is on antibiotics, we will require your child to complete his/her treatment at home before attending the setting.
- ✗ We do **NOT** store or administer any **controlled drugs**, such as morphine and senior staff must advise parents that they must return to the setting to administer. Under no circumstances is the medication stored in the setting or administered by staff.
- ✗ We do **NOT** administer any medication involving intrusive nursing such as suppositories, injections or pessaries.
- ✓ A Long Term Medical Care Plan will be completed by the Manager in consultation with the Parents/carers and Medical Professionals for all children on **long term medication** to ensure that the staff team have sufficient information to meet the child's individual medical needs (*link below to Long Term Medical Care Plan*).
- ✓ **Allergy Medication/Anti-histamines**: These will be kept out of the children's reach (as with all other medicines) but stored next to the first aid box located by entrance door within the nursery with the child's name on the bottle in a medication box. All details should be recorded on our Medication Record Form. Returned home daily.
- ✓ **Epi-pens**: If your child has acute allergies and carries/needs an Epi-pen, please discuss the matter with us in advance. We may need additional training to administer these forms of medication. Where a child requires an epi-pen for allergic reactions, the **child must carry one with them at all times, the setting should also be issued with at least one** (ideally two one for our outings/evacuation bag and one for our classroom). Only members of staff who are **trained** to administer this medication will be allowed to do so, whilst Montessori Garden Nursery School aspires that all members of staff receive the required training, parents are reminded that it is their responsibility to ensure that their children's medication requirements are up to date and that Montessori Garden Nursery School is kept up to date. These are also kept next to the first aid box located by entrance door within the nursery with the child's name on the bottle in a medication box. This exceptionally can be stored in school overnight.
- ✓ If your child has a **self-held medication**, we must obtain an additional one (ideally two one for our outings/evacuation bag and one for our classroom) for us to be kept at our setting (as what could be a simple puff of Ventolin could turn into a major incident). **Asthma Medications**: The child should have an inhaler with them, which will be stored at the setting in the case of an emergency, each child's inhaler should be kept next to the first aid box located by entrance door within the playroom with the child's name on the bottle in a medication box. The form should also be completed and detail the date when the inhaler was given to the setting and returned home if applicable.

Storing Medication

Date written: Feb 2016

Signed & named: Ujin Erdene

Updated date: April 2020



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- ✓ The Manager and Staff must ensure that all medications are:
 - i. inaccessible to children, stored out of children's reach;
 - ii. in their original containers;
 - iii. and in sealed containers in the fridge or cupboard, as per storage instructions on the original packaging;
 - iv. clearly labelled with their contents and the child's name.
- i.e. All medications must be kept in a cupboard out of the children's reach; each child's medication will be kept in the "medication" container or the "first aid" box (depending on type of medication) with the child's name on the bottle / box.
- ✓ No medication should be left in children's bags.
- ✓ Staff should record (in pen not pencil) on Medicine Form when medication comes into the setting, detailing the name of medication, child's name, date when the medication was given to the setting and date returned home. If the dosage or medicine to be given changes, a new medicine form must be completed.
- ✓ There will be no medication stored overnight at the setting (except for inhalers, epi-pens, skin creams & setting's own supply of emergency medication); all medication will be returned to parents each day. We will record and keep written records of all medication administered in our book and request a parental signature at the end of each day. If you have any concerns regarding medication, please do not hesitate to discuss them with us.
- ✓ Medication **MUST be returned home daily, except for inhalers, epi-pens, skin creams & setting's own medication** and the child's key person ensures these are in date and return any out of date medication back to parent requesting for replacement.

Administering medication

- ✓ Parents must give **prior written Permission / Consent Form** in writing (in pen not pencil) for the administration of medication. This states the:
 - 1. Full name of the child and date of birth
 - 2. date the medication starts,
 - 3. the name of the medication and strength
 - 4. prescribing doctor name
 - 5. the dosage and times to be given in the setting
 - 6. method of administration
 - 7. how the medication should be stored and its expiry date
 - 8. any possible side effects that may be expected
 - 9. Full name/s of parent(s);
 - 10. Signature of parent and Date
- ✓ Any and all medication administered to children must be authorised and supplied by the child's parent/carer. **The setting does not provide any form of medication**, save for any products in the First Aid bags including the setting's own over the counter Calpol or Piriton, which are only used in cases of emergency.
- ✓ The **first dose** of medication must be given at home in case the child has any reactions. The child must have 48 hours away from nursery to allow the medication to take effect. If the child has visited the doctor before their session starts and has been prescribed medication, then the child will not be allowed to attend Nursery, as we encourage parents/carers to start the course of medication straight away. Therefore, they will need 48 hours away from Nursery.
- ✓ If your child is taking **prescribed** medicine, we will **only administer/give these when essential** i.e. when it cannot be administered by you prior to arrival or after pick-up. We will also need an on-going permission form that will be regularly reviewed to ensure that there are no changes, and the medication must be in its original packaging, within use-by date, has English instructions for administration and bear the child's full name and dosage.



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- ✓ Only certain members of staff and senior practitioners i.e. **First Aider or Manager on duty** will be allowed to administer medication and responsible for keeping accurate records of any medicine administered, with exception of regular over the counter skin creams which can be given/applied and noted on e.g. nappy form or relevant notebook for suncreams.
- ✓ These staff can only administer medication for the length of time stated on the bottle and will not administer medication beyond this time-scale unless we have a Doctor's letter.
- ✓ 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 any medication. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- ✓ If a child refuses to take their medication staff will never attempt to force or coerce compliance. Refusal should be noted in the form and parents informed as soon as is required but no later than at pick-up on the same day.
- ✓ Before medicine is administered (with exception of regular over the counter skin cream), the designated member of staff should check the medicine Administration Form for any changes.
- ✓ The medicine Administration Form will detail (in pen not pencil):
 1. the name of the qualified practitioner who administered the medication
 2. another staff member will sign as a witness to the administration of the medication
 3. name of child
 4. name and strength of medication
 5. name of the doctor that prescribed it
 6. date and time of dose
 7. dose given and method used
 8. parent name signature and date at end of day
- ✓ The medicine Administration Form should be completed each time the child receives their medication, this form must be completed and signed by the person administering the medication, witness and be countersigned by the parent or carer when they collect their child.
- ✓ When administering medication staff must:
 1. Wash their hands
 2. Ensure that there is a witness to the administration who will counter sign the form
 3. Refer to the medicine form and carefully check that all details are correct
 4. Be certain of the identity of the child to whom the medication is being given
 5. Check that the prescription on the label of the medication is clear and unambiguous
 6. Administer the medication as instructed on the label and as specified in the permission on the form
 7. Keep clear and accurate, signed records of all medication administered, withheld or refused
 8. Monitor any children taking medication and report any side effects immediately to the person in charge
 9. Inform parents at pick-up and ask them to sign the form for each administration

Auditing Medication

- ✓ At no time should the medication form be completed in pencil, **must be in pen**. Parents should be signing their names and not printing.
- ✓ Parent's signature must be clearly seen at the bottom of the medication form.
- ✓ It must be clearly stated why the child is on medication.
- ✓ Medication forms will be **checked daily by the senior staff that will be signing forms and countersigned by the managers**.
- ✓ All medication forms should be easily accessed by the managers in the play area.



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- ✓ Management will audit all medications brought in and out of the setting, this will be countersigned by the managers. **Medications MUST be returned home daily** (except for inhalers, epi-pens, skin creams & setting's own medication).

Managing medicines on trips and outings (*pls also read PP H2. Outings*)

- ✓ If children are going on outings, the key person for the child will accompany the children with a risk assessment, or another member of staff who is fully informed about the child's needs and/or medication.
- ✓ Medication for a child is taken in a **sealed** plastic box/bag clearly labelled with the child's name, the original pharmacist's label and the name of the medication. Inside the box is a copy of the Consent Form and Administration Form to record when it has been given.
- ✓ On returning to the setting the Administration Form is filed in/ stapled to the medicine record book and the parent signs it.
- ✓ If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box/bag clearly labelled with the child's name and the name of the medication. Inside the box is a copy of the Consent Form signed by the parent.
- ✓ For medication dispensed by a hospital pharmacy, where the child's details are not on the dispensing label, we will record the necessary details, circumstances of the event and hospital instructions as relayed by the parents.

Long Term Medical Care Plan

- ✓ We carry out a risk assessment for each child with a long term medical condition that requires on-going medication. This is the responsibility of our managers alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.
- ✓ Parents will also contribute to a risk assessment. They should be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.
- ✓ For some medical conditions, key staff will need to have training in a basic understanding of the condition, as well as how the medication is to be administered correctly. The training needs for staff form part of the risk assessment.
- ✓ The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding an individual child's health needs.
- ✓ The risk assessment includes arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.
- ✓ An individual health plan for the child is drawn up with the parent; outlining the key person's role and what information must be shared with other adults who care for the child.
- ✓ The individual health plan should include the measures to be taken in an emergency.
- ✓ We review the individual health plan every six months, or more frequently if necessary. This includes reviewing the medication, e.g. changes to the medication or the dosage, any side effects noted etc.

Parents receive a copy of the individual health plan and each contributor, including the parent, signs it.