

THIS POLICY HAS BEEN WRITTEN TO PROTECT CHILDREN AND STAFF IN THE ADMINISTRATION OF MEDICINES WHILST IN THE CARE OF PETER'S PATCH DAY NURSERY.

The statutory guidance to which providers should have regard states:

Providers should ask parents about the medicines that their child needs to take and provide details of any changes to the prescription or the support required.

If the administration of prescription medicines requires technical/medical knowledge, then individual training should be provided for staff from a qualified health professional.

Medicines should not be administered unless they have been prescribed for that child by a doctor, dentist, nurse, or pharmacist.

Non-prescription medication e.g., Calpol or teething gel may be administered, but only with the prior written consent of the parent and only when there is a health reason to do so.

Nursery Nurses will enquire about all children's well being at the start of each session and record this in daily record books and on the white boards situated in each room area.



Supervisors will find out the following information and record it on the administration of Medicine recording sheet:

Obtaining Consent

- When, how much and why a child has had medicine before attending Peter's Patch.
- Record details of any dosage given when it was given and the amount of the dose.
- Record the date, Childs name, DOB, Parents name.
- Ask parents to stipulate medication and the amount required and sign the consent.

Administrating Medicine

Two Nursery Nurses are required for the administration of medicines.

One Nursery Nurse stays with the child while the Supervisor collects the medicine and administers it.



Contact the parent by telephone prior to administering any medication.

(not required for prescribed medication such as antibiotics all other procedures remain unchanged)

- · Check the expiry date for the medicine has not elapsed.
- Two Nursery nurses check the identity of the child, record and sign the record sheet.
- Administer the medication.
- If a child is reluctant to take the medicine, or is immediately sick following administration, this should be noted on the records and the parents informed.
- Close observation / recording of child's temperature (where appropriate) should be undertaken on $\frac{1}{2}$ hourly intervals throughout the child's session.
- The parent should be informed of any deterioration in condition and asked to collect the child in accordance with the infection control sheets.

If your child's rash is not linked to a fever or any other symptoms he can probably go to nursery. So, if he has slapped cheek disease he can go to nursery if he is feeling well.



In case of emergency

Calpol may be given in for aches and pains or when a child develops a high temperature whilst at nursery and a consent form has not been signed. Nursery Manager/Deputy or Supervisor must ring to inform parents of the situation.

- Gain written consent where possible.
- If written consent cannot be achieved the Manager may take verbal consent in extreme circumstances.
- The manager must obtain written consent when the child is collected at the end of their session.



Following items should also apply:

Storage of antibiotics. Children's antibiotics are stored in the fridge, labelled with the child's name and d.o.b. The procedure for the storage of self - held medication such as inhalers is to be kept in the child's room in the high cupboard at all times.

Storage of children's sun creams, lotions and nappy creams are within the changing area labelled and named for each child.

Staff medication is stored in the office where children do not have access.

Records

Children's records are completed and remain in the child's room under the supervision of supervisors until completion by the end of the session.

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