

SECTION 1

General Welfare Requirement: Safeguarding and Promoting Children's Welfare

The provider must promote the good health of the children, take necessary steps to prevent the spread of infection, and take appropriate action when they are ill.

Promoting health and hygiene

1.15 Administering medicines

Policy statement

While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when they are recovering from an illness.

It is our policy to support children and their parents in managing long term illness so as to provide equal access to learning and development opportunities.

In many cases, it is possible for children's GP's to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given in the setting.

These procedures are written in line with current guidance in 'Managing Medicines in Schools and Early Years Settings; the manager is responsible for ensuring all staff understand and follow these procedures.

The key person is responsible for the correct administration of medication to children for whom they are the key person. This includes ensuring that parent consent forms have been completed, that medicines are stored correctly and that records are kept according to procedures. In the absence of the key person, the Playroom Leader or the Manager is responsible for the overseeing of administering medication.

EYFS key themes and commitments

1.4 Health and well-being	2.2 Parents as partners 2.4 Key person	3.2 Supporting every child	
---------------------------	---	----------------------------	--

Procedures

- Children taking prescription medication must be well enough to attend the setting.
- Only prescription medication is administered. It must be in-date and prescribed for the current condition.
- Children's prescription medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
- Parents give prior written permission for the administration of medication. The staff receiving the medication must ask the parent to sign a consent form.
- This states - name of child, name/s of parent's, date medication starts, the name of the medication and prescribing doctor, the dose and times, or how and when the medication is to be administered (form 3a).
- The administration is recorded accurately each time it is given and is signed by staff. Parents sign the record book to acknowledge the administration of a medicine (form 5).
- If the administration of prescription medication requires medical knowledge, training is provided for the relevant members of staff by a health professional and a record kept (form 8).

Assisting Children With Long-Term or Complex Medical Needs

- Children with long-term medical needs will have a written health care plan, involving the parent's and relevant health professionals (form 2).
- Children who are able will be encouraged and supported by staff to take responsibility to manage their own medicine. If children take their medicine themselves staff will supervise. Parental consent will be required (form 7).

School Visits

- Risk Assessment when taking children out of school on visits is routine. Arrangements for taking additional staff, parents or volunteers and necessary medicines are taken into consideration. A copy of any health care plan will be taken on visits in the event of information being needed in an emergency.
- It is the responsibility of the parent to provide the Pre-school staff with information about their child's medical needs if treatment or special care is needed.

Emergency Procedures

- Information on contacting emergency services is kept on the Staff notice board in playroom and in the office (form 1). The on duty administrator is responsible for carrying out emergency procedures. In their absence the pre-school staff will take this responsibility.

List of Forms Available

Form 1	-	Contacting Emergency Services
Form 2	-	Health Care Plan
Form 3a	-	Parental agreement for school to administer medicine
Form 4	-	Head practitioner agreement to administer medicine
Form 5	-	Record of medicine administered to an individual child
Form 6	-	Record of medicine administered to all children
Form 7	-	Request for child to carry his/her own medicine
Form 8	-	Staff Training Record
Form 9	-	Authorisation for the administration of rectal diazepam

Legal framework

- Medicines Act (1968)

Further guidance

- Managing Medicines in Schools and Early Years Settings (DfES 2005)
<http://publications.teachernet.gov.uk/eOrderingDownload/1448-2005PDF-EN-02.pdf>

This policy was adopted by

Young Discoverers

On

10th July 2012 (date)

Signed

Name of signatory

Mrs Karen Keene

Role of signatory

Manager

1.15 Administering medicines

A: Procedure for use of EPIPEN

If a child has been prescribed EPIPEN, the parent/carer will provide a care plan for the individual child and a clearly named box containing 2 EPIPENS and any other medication to be kept in the setting.

The medication should be prescribed for the child by a doctor and be clearly labelled.

It is the parent's responsibility to ensure that the EPIPENS are within expiry date.

The care plan provided by the parent will provide a thorough guide to the use of the EPIPEN for that individual child and should be followed accordingly.

Only staff within the pre-school that have received training in the use of an EPIPEN will administer the EPIPEN.

In the event of a child showing signs of allergic reaction or anaphylaxis, the child's INDIVIDUAL CARE PLAN and EPIPEN Guidance should be followed.

If EPIPEN or PIRITON is administered, all necessary paperwork must be completed and signatures obtained as soon as possible.

If EPIPEN has been used, a child MUST NOT return to pre-school until EPIPEN medication has been replaced and there are 2 EPIPENS for the child on site. Obtain support and assistance from the Health Visitor.

Preventative measures to avoid anaphylaxis or allergic reactions should be taken in the pre-school including –

- Staff and other families should be made clearly aware.
- All food should be checked for possible allergens and avoided.
- Cooking recipes should be adapted accordingly to avoid the allergens.
- Other items such as other children's lunches, sun creams etc should be clearly labelled and kept away from the child if they could contain the allergen.

EPIPENS marked with child's name will be kept in individual's first aid box, in the playroom.

All necessary paperwork, medication and a telephone should be taken on any occasion when leaving the pre-school for a walk or trip.

Necessary documentation should be obtained as per insurance details attached.

Guidance for a child that has been prescribed EPIPEN.

*Trained staff member should sit with child on lap ready to administer medication if necessary.
Further adult should assist with everything else.*

ALWAYS CONSULT THE CHILD'S INDIVIDUAL CARE PLAN FOR EXACT DIAGNOSIS AND TREATMENT

1. Identify possible signs of an allergic reaction (these could include coughing and wheezing, shortness of breath, nettle rash, excess salivating, swelling of face and lips, difficulty swallowing, clamminess).

Keep calm and ask another adult to obtain the necessary paperwork and medication.

Move the child to a calm place away from other children and noise as they may be frightened (ensure that other children are safe and supervised).

Check ABC, check child's breathing, can they say more than 4 words in one breath – if not they are having breathing difficulties.

2. If the child is showing any of the above signs -

CHECK AND FOLLOW INDIVIDUAL CARE PLAN

IF prescribed, administer PIRITON immediately as per care plan.

Talk to the child – try to ascertain what they may have eaten.

Look for evidence of what could have caused the reaction.

Assisting adult should document as appropriate.

3. If child appears to improve, contact parent immediately for further advice.

4. If signs and symptoms persist

GET HELP IMMEDIATELY – Dial 999, tell them that it is anaphylaxis and EPIPEN may be needed.

Emergency services will stay on the line and ask questions and offer support (the ambulance will already be on its way).

If EPIPEN has been prescribed and you answer yes to the following three questions (you may be in doubt) but EPIPEN should definitely be administered immediately as per care plan, if –

- **DEFINITE SIGNS AND SYMPTOMS**
- **DEFINITE DETIORATION**
- **DIRE CONSEQUENCES IF NO MEDICAL INTERVENTION**

To administer EPIPEN –

- 1. Check that EPIPEN is in box clearly prescribed for the child in question. The pen should be in a yellow tube (check it contains the clear liquid).*
- 2. Remove safety catch and hold pen in fist.*
- 3. Locate the child's middle 3rd of thigh above seam line.*
- 4. Push EPIPEN firmly into thigh – MUST CLICK – count 10 seconds.*
- 5. Hold flesh either side of pen with two fingers and gently pull pen out, rub the area for 10 seconds*
- 6. Carefully replace pen in tube with lid and retain for ambulance crew.*
- 7. Ensure airway is clear and remain with child.*
- 8. If you are scratched by the needle, hold under water for 5 mins and squeeze to make it bleed. Obtain medical assistance (you will need to go to A & E).*

Assisting adult should document as appropriate.

Sitting child up and leaning forwards on table (as for asthmatic) may help breathing.

5. Continue to observe child and assess ABC until ambulance arrives.

The ambulance crew will want to know what has happened, times and care plan followed etc.

If the parents have not arrived, a staff member must accompany the child to the hospital and stay with the child until the parents arrive.

6. If signs and symptoms persist after 5-10 mins.

IF prescribed, administer second EPIPEN as per care plan.

Let the emergency services know what is happening and ask for further assistance.

1.15 Administering medicines

B: Administration of Rectal Diazepam

It is our setting's policy to aid parents with the treatment of their children, and to provide children with the best possible access to their education, by supporting them in the administration of medicines by staff while their children are in our care.

We administer, store and keep the relevant paperwork pertaining to individual requirements in accordance with our medicines policy (copy attached). Medicines can only be given to the named person it has been prescribed for and should only be administered in the circumstances which the prescribing doctor has given permission for.

It is our policy to train staff in the administration of certain medication, but staff are not required to administer medication if they do not wish to do so. A named person is responsible for the administration of medicines; in their absence the Lead Practitioner or Manager is responsible for the administration.

Rectal Diazepam is a preparation used to treat convulsions caused by epilepsy or fever. It is administered into the rectum (back passage) to give a quick effect when it is not possible to administer the medicine by mouth.

Managing the situation

1. If a child starts to convulse make sure you **DO NOT REMOVE** them from where they are lying. Remove any toys or furniture from around them and protect their head from injury.
2. Other children should be removed immediately from the room in a calm manner. Take them outside if the weather is warm enough or use the quiet room. Inform Heath Lane Children's Club that you need the quiet room so that they can make amendments to their routine as necessary. (3 members of staff)
3. Another member of staff is to inform the manager or responsible person so that the care plan can be carried out and emergency procedures followed.
4. DO NOT LEAVE the child unattended. If the convulsion lasts for 5 minutes the medication is to be administered and an ambulance called.

How to administer Rectal Diazepam suppositories

If the convulsion lasts for 5 minutes Rectal Diazepam needs to be administered.

1. Check that the medication is for the correct person
2. Lie the patient on their side with their knees drawn up towards their chest and with one leg drawn up more than the other. (Like the recovery position)
3. Remove the wrapping from the suppository
4. **WEARING GLOVES/APRON** (in box), gently insert the suppository into the rectum (back passage), pointed end first, as far as it will go.
5. If the suppository comes out immediately, it was not inserted far enough, and it should be reinserted.
6. After giving the dose, lower the patient's legs to a comfortable position to help hold the medicine in place. The patient may feel an immediate urge to go to the toilet. Encourage them to ignore this.
7. The patient may fall asleep or feel tired or dizzy for several hours.