Cranford

Administering Medicines Policy and Procedure

"Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date."

Statutory Framework for the EYFS 2017 (3.44)

PURPOSE: *This policy was written to encourage communication between the parent, the child's health care provider and the child care provider to assure maximum safety in the giving of medication to the child who requires medication to be provided during the time the child is in child care.*

INTENT: *Assuring the health and safety of all children in our Nursery is a team effort by the child care provider, family, and health care provider. This is particularly true when medication is necessary to the child's participation in child care. Therefore, an understanding of each of our responsibilities, policies and procedures concerning medication administration is critical to meeting that goal.*

GUIDING PRINCIPLES and PROCEDURES:

1. Whenever possible, it is best that medication be given at home. Dosing of medication can frequently be done so that the child receives medication prior to going to child care, and again when returning home and/or at bedtime. The parent/guardian is encouraged to discuss this possibility with the child's health care provider.

2. The first dose of any medication should always be given at home and with sufficient time before the child returns to child care to observe the child's response to the medication given. When a child is ill due to a communicable disease that requires medication as treatment, the health care provider may require that the child be on a particular medication for 24 hours before returning to child care. This is for the protection of the child who is ill as well as the other children in child care.

3. Medication will only be given when ordered by the child's health care provider and with written consent of the child's parent/legal guardian. A "Permission to Give Medication form will be completed by parent/carer. All information on the Permission Form must be completed before the medication can be given. Copies of this form can be duplicated or requested from the child care provider.

4. "As needed" medications may be given only when the child's health care provider or parent/carer completes a Permission Form that lists specific reasons and times when such medication can be given.

5. Medications given in the nursery will be administered by a staff member normally the child's keyworker or designated by the Nursery Manager and will have been informed of the child's health needs related to the medication and will have had training in the safe administration of medication.

6. Any prescription or over-the-counter medication brought to the nursery must be specific to the child who is to receive the medication, in its original container, have a child- resistant safety cap, and be labelled with the appropriate information as follows:

    Prescription medication must have the original pharmacist label that includes the pharmacists phone number, the child's full name, name of the health care provider prescribing the medication, name and expiration date of the medication, the date it was prescribed or updated, and dosage, route, frequency, and any special instructions for

    its administration and/or storage. It is suggested that the parent/guardian ask the pharmacist to provide the medication in two containers, one for home and one for use in child care.

- Over-the-counter (OTC) medication must have the child's full name on the container, and the manufacturer's original label with dosage, route, frequency, and any special instructions for administration and storage, and expiration date must be clearly visible.
- Any OTC without instructions for administration specific to the age of the child receiving the medication must have a completed Permission Form from the health care provider prior to being given in the nursery.

    Examples of over-the-counter medications that may be given include:

    Antihistamines

    Decongestants

    Non-aspirin fever reducers/pain relievers

    Cough suppressants

    Topical ointments, such as nappy cream or sunscreen

7. All medications will be stored: Inaccessible to children

    Separate from staff or household medications
    Under proper temperature control
    A small lock box will be used in the refrigerator to hold medications requiring refrigeration.

8. For the child who receives a particular medication on a long-term daily basis, the staff will advise the parent/guardian one week prior to the medication needing to be refilled so that needed doses of medication are not missed.

10. Unused or expired medication will be returned to the parent/guardian when it is no longer needed or be able to be used by the child.

11. Records of all medication given to a child are completed in ink and are signed by the staff designated to give the medication. These records are maintained in the nursery medication book.

12. Information exchange between the parent/guardian and child care provider about medication that a child is receiving should be shared when the child is brought to and pick-up from the nursery. Parents/guardians should share with the staff any problems, observations, or suggestions that they may have in giving

medication to their child at home, and likewise with the staff from the nursery to the parent/guardian.

Confidentiality related to medications and their administration will be safeguarded by the Nursery Manager and staff. Parents/guardians may request to see/review their child's medication records maintained at the Nursery at any time.

14. Parent/guardian will sign all necessary medication related forms that require their signature in the medicine book, and particularly in the case of a medical emergency parents sign and agree this on their childs registration forms. Parent/carer will update the information as necessary to safeguard the health and safety of their child.

This medicine policy will be reviewed annually by: Fiona Harcourt

Reviewed: August 2018