

## Management of Medication

In Holy Trinity After School we aim to promote the good health of the children in our care, taking the necessary steps to prevent the spread of infection, and taking appropriate action when children are ill. 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.

Prescribed medicines will not be accepted without complete written and signed instructions from the parent.

Staff will not give non-prescribed medicine to a child unless there is a specific prior written permission from the parent.

Each item of medication must be delivered to the setting in normal circumstances by the parent, in a secure and labelled container as originally dispensed or purchased. Each item of medication must be clearly labelled with the following information:

- Child's name
- Name of medication
- Dosage
- Frequency of administration
- Date of dispensing
- Storage requirements
- Expiry date

Items of medication in unlabelled containers will not be accepted.

All medicines are stored securely in the locked medicine cabinet in the office. If required medication may on occasion need to be stored in the fridge in a secure area of the fridge out of reach from children.

Management are trained to be competent with administering medication.

Where necessary, a personal medication record is maintained for each child which will be available for parents to view. Such records are constructed, completed and maintained in such a manner so as to ensure a clear audit trail with names, signatures, dates and times and include:

- Medicines prescribed or requested
- Medicines administered
- Medicines refused
- Medicines returned to parents

Medicines are administered as follows:

- Medicines which have been prescribed by a GP or other authorised prescriber are only administered to the child for whom they are prescribed and in accordance with the prescriber's instructions
- Non-prescribed medicines are administered only on the written request of the parent in accordance with the manufacturer's instructions.

Staff will not make changes to dosages on parental instructions.

Before a medicine is administered to a child, the following practices are followed:

- The child's medication record is consulted to identify the medicine, dosage instructions required and to confirm when the medicine was last administered.
- The medicine pack is checked to confirm it is labelled with the child's name, dosage instructions and to ensure the expiry date has not passed.
- Medicine doses are prepared immediately prior to their administration from the container in which they are dispensed.

- The correct dose is identified and appropriately administered at the specified times according to the prescriber or manufacturer's instructions which should be clearly written on the medication label or product.
- 2 members of staff are present, one of which is the designated member of staff.
- When the medicine is administered, the medicine record is immediately updated with details of the dose given, names and signatures of the staff involved and the time and date.
- Any refusal of medication by the child is recorded and reported to the parent.
- Parents are informed daily of the medicines that have been administered to their child and asked to sign to acknowledge this.

It is the responsibility of the parent to notify the setting in writing if the child's need for medicine has ceased.

Staff will not dispose of medicines. Date expired medicines or those no longer required for treatment will be returned to parents for transfer to a community pharmacy for safe disposal. When necessary training in specialist techniques for administering medication is provided for named staff by a qualified health professional. Training is specific to the individual needs of the child. The administration of specialist treatment is carried out in accordance with the written authorisation of the prescribing practitioner.

The arrangement for the administration of medicines comply with the terms of any insurance cover.

Any staff caring on a long term basis for a child with a specific condition has a thorough understanding of the conditions and the medicines (if any), that are to be administered.

### **Long Term Medical Conditions**

A risk assessment is carried out for each child with long term medical conditions that require on-going medication. This is the responsibility of the manager and the room leader. Other medical or social care personnel may need to be involved in the risk assessment.

Parents/carers will also contribute to the risk assessment. Before enrolment parents/carers will be shown around the setting to help them to understand the routines and activities and point out anything which they think may be a risk factor for their child.

For some medical conditions a key member of staff will be allocated to the child and this staff member will need to have training in a basic understanding of the condition as well as how any medication is to be administered correctly. The training needs of staff will be part of the risk assessment. A health care plan for the child is usually drawn up with the parent/carer by the GP/Medical practice, outlining the staff member's role and what information must be shared with other staff who care for the child. The health care plan should include measures to be taken in an emergency and reviewed every six months or earlier if there has been a change in condition or medication.

### **Managing Medicines on Trips or Outings**

When children go on outings, staff accompanying the children must have knowledge and be fully informed on any children attending the trip who has a medical need or may need medication. Medication for a child is taken in a sealed plastic box clearly labelled with the child's name, name of the medication, inside the box is a copy of the consent form and a card to record when it has been given, with the details given above.

If a child on medication has to be taken to hospital, the child's medications are taken in a clear plastic box clearly labelled with the child's name, name of medication and inside the box is a copy of the consent form signed by the parent.

### **Procedure for dealing with known or suspected allergic reactions:**

If a child has an allergy, a risk assessment form is completed to detail the following:

- The allergen (i.e. the substance, material or living creature the child is allergic to such as nuts, eggs, bees, dairy, pets etc.)
- The nature of the allergic reactions e.g. anaphylactic shock reaction, including rash, reddening of skin, swelling, breathing problems etc.
- What to do in case of allergic reactions, any medication used and how it is to be used (e.g. Epipen).
- Control measures – such as how the child can be prevented from contact with the allergen.
- The form is kept in the child's personal file and a copy displayed where staff can see it.
- If necessary, the manager will seek further medical training from the Local Health and Social Care Trust or parents.
- Parents are made aware that no nuts or nut products are used.
- Named first aiders are trained to recognise allergic reaction symptoms.
- Medication required for treatment of an allergic reaction is to be stored in a first aid cabinet and clearly labelled.
- In the event of a suspected allergic reaction an ambulance must be called at all times. The telephone operator must be informed of the possibility of anaphylactic shock.