**Managing Medicine Policy**

**Statement of Intent**

We believe that relevant medicines should be administered to those who need it promptly, discreetly and without risk to other children so as to ensure that their access to the activities and opportunities provided are not unduly disrupted.

**Aim**

We aim to put in place effective management systems to support individual children with medical needs. We will work in partnership with children, parents and relevant healthcare professionals to collect sufficient information about a child’s short or long-term medical needs. Children with medical needs have the same rights of admission as other children.

**Methods**

**Preschool’s Medicine Matron** is in charge of ensuring that a parent bringing medicine into the setting understands our medicine policy and has completed a medicine form correctly. The Medicine Matron will ensure they understand the correct way to administer the medicine to the child including the appropriate time and any other special circumstances. Should the medicine matron be unavailable then a member of the management team will step in to ensure this is done correctly. Our medicine matron is Claire Kettle.

**Administration of Medication**

* Medication may be administered and medicines should only be brought into Pre-school if absolutely essential.
* Parents must consider the wellbeing of children before bringing them to preschool with medication and the pre-school reserves the right to refuse children entry if it is felt that children are too unwell to attend or may be contagious to others.
* Medication must be in-date, and if prescribed it must be from a g.p, nurse or pharmacist for the current condition, have written instructions on the container along with the child’s full name and date of birth along with the strength of the medicine.
* Children taking prescribed medication must be well enough to attend the setting.
* Children’s prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children.
* The administering is recorded accurately each time it is given and is signed by a member of staff. Another member of staff will witness the administering of medication and sign the medical form too. Parents will then sign the record book to acknowledge the administering of a medicine.
* If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant member of staff by parents and health professionals.
* Parents give prior written permission for the administering of medication. Children with medical needs will have individual health plans that state: the name of the child, name/s of parent(s), date the medication starts, the name of the medication and prescribing doctor, the dose and times, or how and when the medication is to be administered.
* Only parents with parental responsibility can authorise administration of medicines.
* In the event of a carer needing to sign the medical form for a child then Pre-school would require written permission from the child’s parent to authorise this.
* Children cannot be forced to take medication. In the event of a child refusingtheir medication their parent would be informed in the first instance and then relevant health professionals if necessary.
* If staff are still unsure or have any doubts about administering medication they are to inform the Pre-School Manager or person in charge (if the Manager is unavailable.) If the Manager or person in charge of the Pre-School is still unsure about administering the medication then they will inform the parents and relevant health professionals to seek advice or additional training.
* If staff are unsure how to administer a certain medication safely then parents will need to administer medication themselves until staff have been fully trained by a healthcare professional.

**Staff Responsibilities**

When staff are administering medication to a child they must check:

* Child’s name on the medicine container.
* The name of the medicine.
* How to administer the medication.
* The prescribed dose.
* The expiry date.
* The written instructions on the container.
* That the parent’s instructions are the same as they are on the container. We cannot legally defer from instructions printed on medication unless a GP has provided us with written consent to do so.
* That parents have signed a consent form.
* That another member of staff is witnessing medication being given and signs the medical form.
* That parents sign the medical form after medication has been administered.

**Staff are also responsible for:**

* Storing non-emergency medication in a place inaccessible to children and to make sure all emergency medication is readily available, including if children are taken on off-site visits.
* Making sure regular risk assessments are in place regarding medication and that all staff are aware of them.
* Keeping medical paperwork up-to-date and attending relevant training related to managing medicines.

**Parental Responsibility**

Parents are ultimately responsible for their child’s medical needs. If any child has a medical need before they start attending Pre-School then parents must inform the setting before they are admitted. This will ensure that we have time to put in place the right training and management systems. If a medical need develops when a child is attending Pre-school it is the parent’s responsibility to inform a member of staff as soon as possible.

**Storage of Medication**

* Pre-School will properly control the risk to the health of others when storing medication (as set out in the Control of Substances Hazardous to Health Reg. 2002 COSHH).
* We will store medicines strictly in accordance with product instructions.
* All emergency medication e.g. epipens, inhalers etc. are readily available and not locked away.
* Non-emergency medicine will be kept in a secure place not accessible to children.

**Self-Management of Medication**

Due to the age of the children attending Pre-School it is unlikely that self-management of medication will occur. However we recognise that this might occasionally be the case and we realise that it is good practice to support and encourage children who are able to administer their own medication.

**Asthma Policy**

Children who suffer with asthma need to be able to gain quick access to their inhalers (and spacers in the cases of younger children). Parents will fill out a medical health plan and give written consent as stated above. Members of staff are responsible for remembering the inhalers/spacers are taken on off-site visits. Staff will be given the relevant training related to asthma and the use of inhalers.

**Policy on the Administration of Epipens**

All members of staff who administer epipens are trained by relevant health care bodies about anaphylaxis and the administration of epipens.

Epipens are stored in a plastic box that contains an epipens with the children’s name clearly written on the prescription label. Members of staff are again responsible for remembering any epipens to be taken on off-site visits.

**What is Anaphylaxis?**

Anaphylaxis can be triggered by foods (nuts, shellfish, dairy products) or non-foods (wasp and bee stings, certain medicines). The symptoms can be identified by effects on the respiratory system, cardiovascular system, gastrointestinal system, skin, nervous system, genitourinary system. If we have a child who suffers from an allergy where anaphylaxis may be a concern, we will work with the parents to develop an individual health plan. In the event of an attack we will act in accordance with this written health plan.

It may be necessary from time to time that we ask parents to not include certain foods in lunch boxes so children with allergies can continue to attend pre-school. If we take this action it will be due to a serious allergy and we appreciate all parents cooperation with the removal of certain foods.

We accept medication for an ongoing condition, as prescribed by a health care professional. Temperature control medication must be given at home.

**Guidance on Infection Control**

Guidance on infection control in schools and other settings which sets out when and for how long children need to be excluded from settings, when treatment/medication is required and where to get further advice can be found at <https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf>

This policy was adopted by West Wycombe Pre-school Playgroup in October 2013. Policies are updated when necessary and reviewed on a yearly basis.

Reviewed and amended June 2025