**Policy on administration of medication**

**Part III Regulation 10. Policies, procedures etc of pre-school service –schedule 5 (c)**

Ulla Beag is committed to supporting each child’s well-being. To facilitate this we will work in consultation with parents to ensure the safe administration of medication in the event that:

 • a child is taking prescribed medication, with the prior written permission of their parent(s) or guardian(s)

 • a child becomes unwell while attending the setting and, only with the prior written permission of their parent(s) or guardian(s), is given pain relief or temperature reducing medication.

 This policy is underpinned by the Childcare (Preschool Services) Regulations 2006. Any medical or administration of medicine needs should be documented

**1.Written Permission and Records:**

* Medication should never be administered without written permission from parent(s) or guardian(s).
* Written permission should be obtained from parent(s) or guardian(s) on enrolment especially in relation to the administration of medication, in the event of a high temperature or an emergency in the future.
* Where a child has a chronic condition which requires daily medication the written permission and a written care and administration plan should be obtained on enrolment and be reviewed regularly.
	1. Parents should also be requested to notify the service if their emergency contact details change. Allergies: Upon enrolment, the service should also obtain written confirmation from the parent(s) or guardian(s) of all of the child’s allergies, including an allergy to any medications such as Calpol or Nurofen.
	2. Should medication be required:

• Parents/guardians must complete and sign a medication form for the days which the medication is needed

• Only staff members authorised by the Manager are to manage and administer medication

• The member of staff authorised to administer medicines should check the: a. Recipient’s name b. Prescribed dose Principle: Sample Procedure c. Expiry date d. Written instructions provided by the prescriber on the label/container as dispensed by the pharmacist

• A second authorised staff member must check the medication and dosage and sign if it is correct prior to any medication being administered to a child.

• Staff can only administer medication that has been prescribed for a particular child

 • A health care professional such as a GP can write a standing order for a commonly used nonprescription medication (such as Calpol) that defines when the medication should be used for any child in the service.

 • Medications are accepted for use only when they are within their expiration period. These must be labelled with the child’s name and in their original container • Parents/carers should always be notified in every instance when medication is used • Non-prescription medications should be given according to the manufacturers’ instructions unless a health care professional provides written instructions otherwise

• Medication should not be added to the child’s bottle or food.

 • If there is any doubt about any of the procedures, the member of staff should check with parents/guardians or a health professional before taking further action. • Staff involved must keep records each time they administer medication.

• Ointments for nappy rash are not applied unless for treatment purposes and where a health care professional has directed their use for the child on whom they are being used

1. **Storage of Medications:**

• All medications brought into a childcare setting should have child-proof caps and be stored in correctly: a. At the proper temperature (according to the label) b. Away from food c. Out of the reach of children

• Medications requiring refrigeration should be clearly marked and separated from food in an airtight container marked ‘Medications’. Access to the fridge should be restricted

 • Inhalers should be stored in a manner that allows them to be accessed quickly in case of emergency 4. Analgesic (pain relief) and anti-febrile (temperature reducing) medication: Services should have a well-stocked medicine cabinet, which is locked, out of reach of children and stored appropriately. It is good practice to have a supply of analgesic and anti-febrile medication (such as Calpol or Nurofen for Children) in liquid suspension form, in child-proof containers and with the appropriate measuring devices.

The date the medication is opened should be clearly labelled on the container. Medications with illegible labels or medications which are over 6 months old should be discarded. Medication in tablet form should never be administered to children under 5 years of age.

1. **Staff Training** The manager must ensure that all identified staff members receive appropriate guidance and they must not administer medicines until guidance has been received. A record of the training should be made. Staff members should receive guidance about the purpose, expected response and possible side effects of medications they are expected to administer. They also need training on the proper use of equipment such as inhalers, nebulisers epi-pens etc. A GP or Public Health Nurse can demonstrate how to use these correctly.

The “Five Rights” of Medication Administration: The “Five Rights” is a procedure which should be consulted before the administration of medication. It is set out as follows; “Right medication, right child, right dosage, right form, right time” .Documenting the administration of medication

The authorised person giving the medication should ensure that they document the medication times and dosage precisely and have the process witnessed and signed by another authorised member of staff. Any administration of medication should be documented in a record book and signed by parents/carers.

 **Sunscreen- needs to be included in the policy**

This policy was updated by: Denise Sheridan Ulla Beag

 Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on behalf of Management.

 This policy will be reviewed annually.