

Blackhall Nursery

Administration of Medicine Policy

The following policy takes into account guidelines from The Care Inspectorate, Early Years Scotland) (Section 1) and the City of Edinburgh Council (Section 2) and refers to Consent Forms provided in “The Handbook of Procedures for the Management of Pupils with Health Care Needs in Educational Establishments” supplied by CEC/NHS Lothian.

General principles

This policy falls under the remit and responsibilities of the Health and Safety Policy and may be used in conjunction with the Additional Support for Learning Policy.

Consent - Prior written consent from the parent/carer is required for the administration of **any** medication and clear written instructions must be obtained. The parent/carer must complete the appropriate form from the Handbook of Procedures (see page 2 of this policy) which will confirm that the child has previously been given at least one dose of the medicine.

Roles and Responsibilities –

Parental Role

It is the responsibility of the parents to ensure that the child is well enough to attend the setting. The parent will inform staff of any medication that is currently being administered. Parents will also inform the setting if the child has received the medication at home, when it was administered and how much was given to ensure the correct dosage instructions are being followed.

Parents/adult with parental responsibility will be required to complete (and regularly update) a consent form (see Handbook of Procedures) giving permission for staff to administer the medication. A new form will be completed for each new medication required by the child. Parents will be asked to sign and acknowledge the medication given to their child each day. Parents will inform the setting if the child stops taking medication. Medication must be supplied to the Nursery in its original container and box, clearly labelled with the child's name.

Staff Role

Staff will ensure that they have the required written permission from the parent for the setting to administer the medication. Each time a staff member administers medication to a child, an Administration of Medication form will be completed and signed. Staff will need to complete the Administration of Medication Form each time medication is given, noting the date, time and dosage.

Administration - The **person in charge** will normally be the only member of staff with authority to administer medication and appropriate training will be given. In some instances where immediate emergency action may be needed e.g. an epi-pen for an allergic reaction, other members of staff will be allowed to administer the medication when appropriate training has been given and written consent received. A written record will be kept of such training. Staff will not give the first dose of a new medicine to a child. Parents should already have given at least one dose to ensure that the child does not have an adverse reaction to the medication. This does not include emergency medication such as an adrenaline pen where the risk of not giving it could outweigh any adverse reaction.

If the child spits out, vomits or refuses the medication no further dose should be given and the parent should be informed. If the child is given too much medication, or medication is given to the wrong child, staff will inform the parent immediately. Further advice/instructions should be sought from a doctor.

If a child on medication is taken to hospital the child's medication should be taken in a sealed bag/box, which contains a copy of the signed parental consent form and which is clearly labelled with the child's name.

Outings - When a child requiring such medication goes on an outing, the child's medication must be taken along by the person in charge of the outing. See *Outings and Excursions Policy*

Documentation - Medication Administration Recording System (MARS)

A Medication Administration Recording System must be kept, showing the child's name, name and strength of medicine administered, form of medication (e.g. tablet, liquid), reason for administration of medicine, date and time administered, dosage/quantity, name and signature of person administering medicine, date and time of any activity (receipt, administration and disposal), time of notification to child's parent/carer when medicine has been given and Parent/Carer's signature. A separate page will be kept for each child within the MARS to ensure confidentiality and best practice. (see Blackhall Nursery Administration of Medicine Record Book and Record Sheet.)

The person in charge of the Nursery is responsible for making sure that this policy is complied with.

SECTION 1

The appropriate Nursery staff may administer oral medication without completing an Early Years Scotland consent form **provided that the relevant consent form from the Handbook of Procedures has been signed by the parent/carer. This form will be kept by the Nursery. Asthma inhalers and nebulisers** are treated as "oral medication" for the purposes of insurance provided through Early Years Scotland. The Nursery must ensure that appropriate staff training has been given for the administration of this type of medication, and that the appropriate consent form from the Handbook of Procedures has been completed and filed with the medication supplied.

Consent forms in the Handbook of Procedures

Consent forms available:

Form 1: Request for Nursery to issue non-prescribed medication in school

Form 2: Request for Nursery to issue non-prescribed topical creams

Form 3: Request for Nursery to prescribed medication

Form 4: Request for Nursery to issue long-term "as required" prescribed medication in school

- This form will detail the medication concerned, the appropriate dosage, clear instructions as to how to administer the medication and will have been signed by the parent/carer.
- It will include confirmation that the parent/carer has previously given at least one dose of the medicine to the child to ensure that there is not an adverse reaction to it.
- Nursery staff will not accept paracetamol with the purpose of reducing a temperature. This will only be accepted as pain relief eg for teething

Nursery staff will not be able to administer such medication until the form has been completed and signed.

Life saving or emergency invasive medication (e.g. rectal diazepam for epilepsy or adrenaline injections/epi-pen for anaphylactic shock):

Every situation must be dealt with individually. **The Nursery must contact Early Years Scotland on 0141 221 4148 before agreeing to administer any life saving or emergency invasive medication.** If necessary, a separate form supplied by Early Years Scotland must be completed by both the nursery and a parent/carer and returned to Early Years Scotland who will advise of the outcome in writing as soon as possible.

In order for the Nursery's insurance cover to be extended to cover administration of such medication, copies of the following documentation must be sent to Early Years Scotland's Insurance Team (see address separately) for appraisal:

- Written consent, stating the child's condition, the treatment required, and consent for the staff to administer medication from the child's parent/carer
- Confirmation of staff training in the administration of such medication by a qualified health professional such as the child's GP/District Nurse/Child Nurse Specialist/Community Pediatric Nurse or approved first aid training agency. An individual care plan consent form for the administration of rectal diazepam should be requested from EARLY YEARS SCOTLAND Centre.

When a child requires help with everyday living (e.g. breathing apparatus, colostomy bags, feeding tubes)

The Nursery must forward to Early Years Scotland's Insurance Team for appraisal:

- Written consent, stating the child's condition, the treatment required and consent from the child's parent/carer for the staff to administer medication.
- Confirmation of staff training in the administration of such medication by a qualified health professional such as the child's GP/District Nurse/Child Nurse Specialist/Community Pediatric Nurse or approved first aid training agency. These staff should also be trained to recognise the symptoms that may warrant such medication being given. Refresher training should be completed on a 3 year cycle.

Storage of medicines

Medicines will not be stored in the lockable cupboard in the kitchen area but will be kept in separate sealed bags/boxes together with the parental consent form and, if required, the relevant Action Flowchart. This cupboard will be kept unlocked when children are on site.

SECTION 2

Severe Allergies, Asthma and Epilepsy

Staff are required to update their knowledge of these conditions by attending CPD sessions every 2 years. City of Edinburgh Council guidelines contained in "the Handbook of Procedures....." * issued in November 2009 and updated January 2016, recommend that in a nursery setting, a core of 3 members of staff, to include one from senior management and staff with a First Aid remit, should be trained.

The following flowcharts will be displayed in the snack/kitchen area of the Nursery:

- A Symptom and Action Flowchart for Asthma Attack and
- A Symptom and Action Flowchart for Severe Allergic Reaction (Anaphylaxis) NOT Using an Adrenaline Pen
- A Symptom and Action Flowchart for Severe Allergic Reaction (Anaphylaxis) Using an Adrenaline Pen
- A Symptom and Action Flowchart for an Absence/Atonic/Complex partial Epileptic Seizure
- A Symptom and Action Flowchart for Generalised Tonic Clonic Epileptic Seizure

* CEC/NHS Lothian's *"The Handbook of Procedures for the Management of Pupils with Health Care Needs in Educational Establishments"*, Appendix 1

For children with the following conditions:

Severe Allergies

Epilepsy

Diabetes

Cystic Fibrosis

And for guidance on the use of school Health Care Plans, staff must refer to "the Handbook of Procedures...." and follow that guidance for the purposes of training and administration of the appropriate medication.

* CEC/NHS Lothian's *"The Handbook of Procedures for the Management of Pupils with Health Care Needs in Educational Establishments"*

Early Years Scotland

21 Granville Street

Glasgow

G3 7EE

Tel: 0141 221 4148

Additional documents:

- Symptom and Action Flowchart for Asthma Attack
- Symptom and Action Flowchart for Severe Allergic Reaction (Anaphylaxis) NOT using an Adrenaline Pen
- A Symptom and Action Flowchart for Severe Allergic Reaction (Anaphylaxis) Using an Adrenaline Pen
- A Symptom and Action Flowchart for an Absence/Atonic/Complex partial Epileptic Seizure
- A Symptom and Action Flowchart for Generalised Tonic Clonic Epileptic Seizure
- Administration of Medication Record Book + Record Sheet

Adopted on: 04.12.24

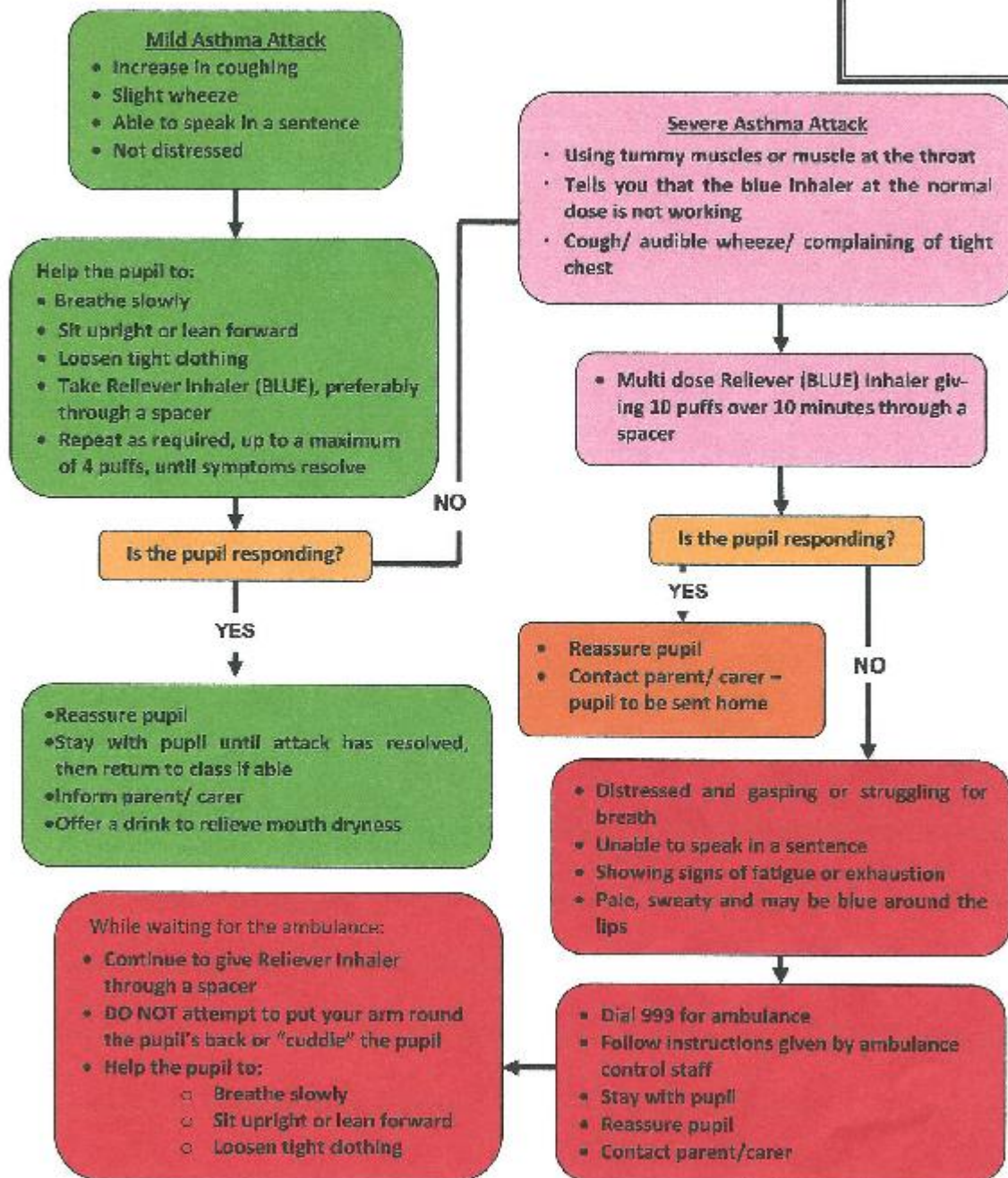
FG 11.2.10/18.11.13/03.15/LS/KW03.10.16/23/09/2019 GS 11/22, 05/23, 12/24 (CI guidance updated)

Symptom and Action Flowchart for Asthma Attack

Photograph of pupil

Name _____

Date of Birth _____

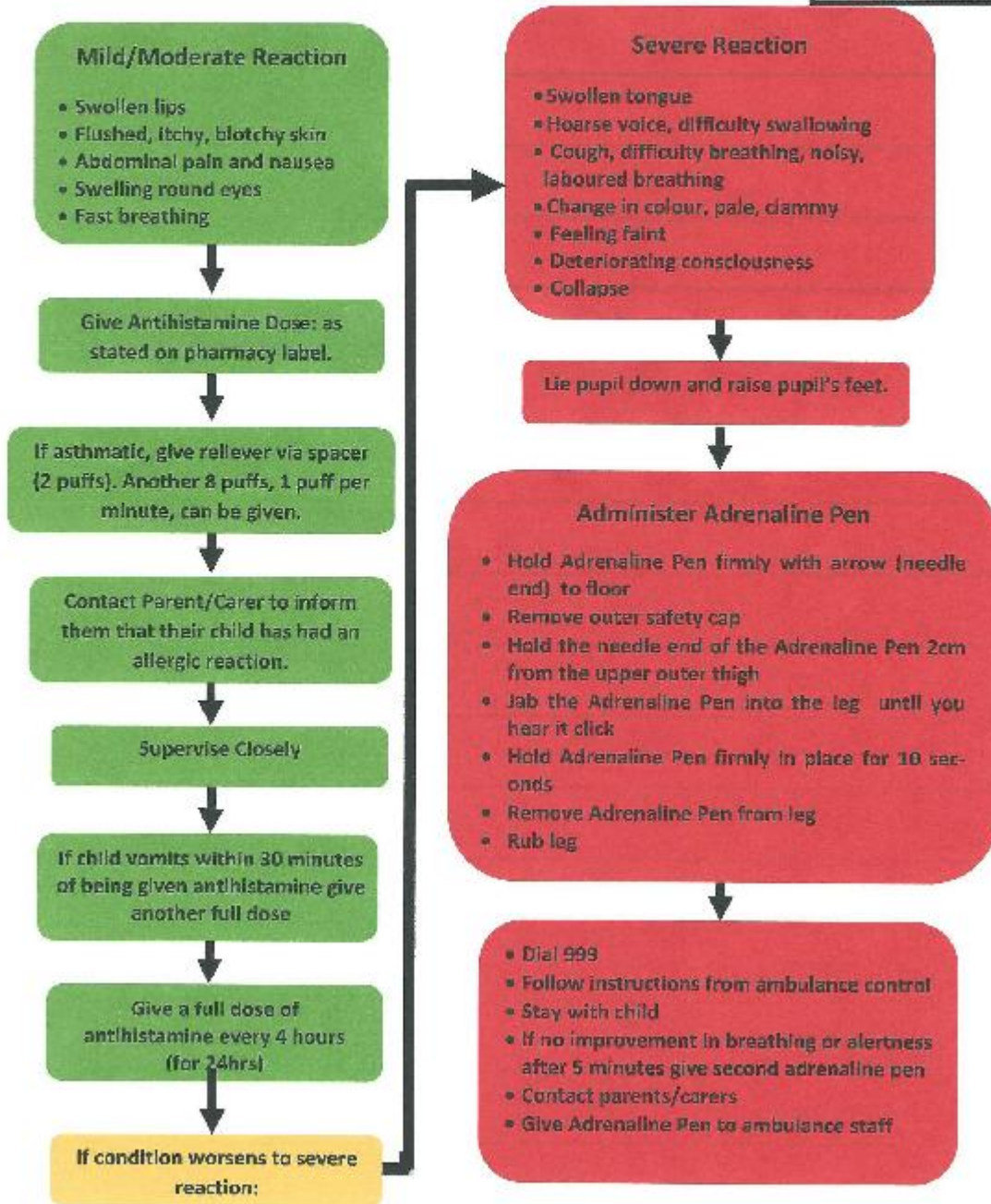


Symptom and Action Flowchart for Allergic Reaction Including an Adrenaline Pen

Refer to School Healthcare Plan and medication container for dosages.

Photograph of
pupil

Name _____ Date of Birth _____



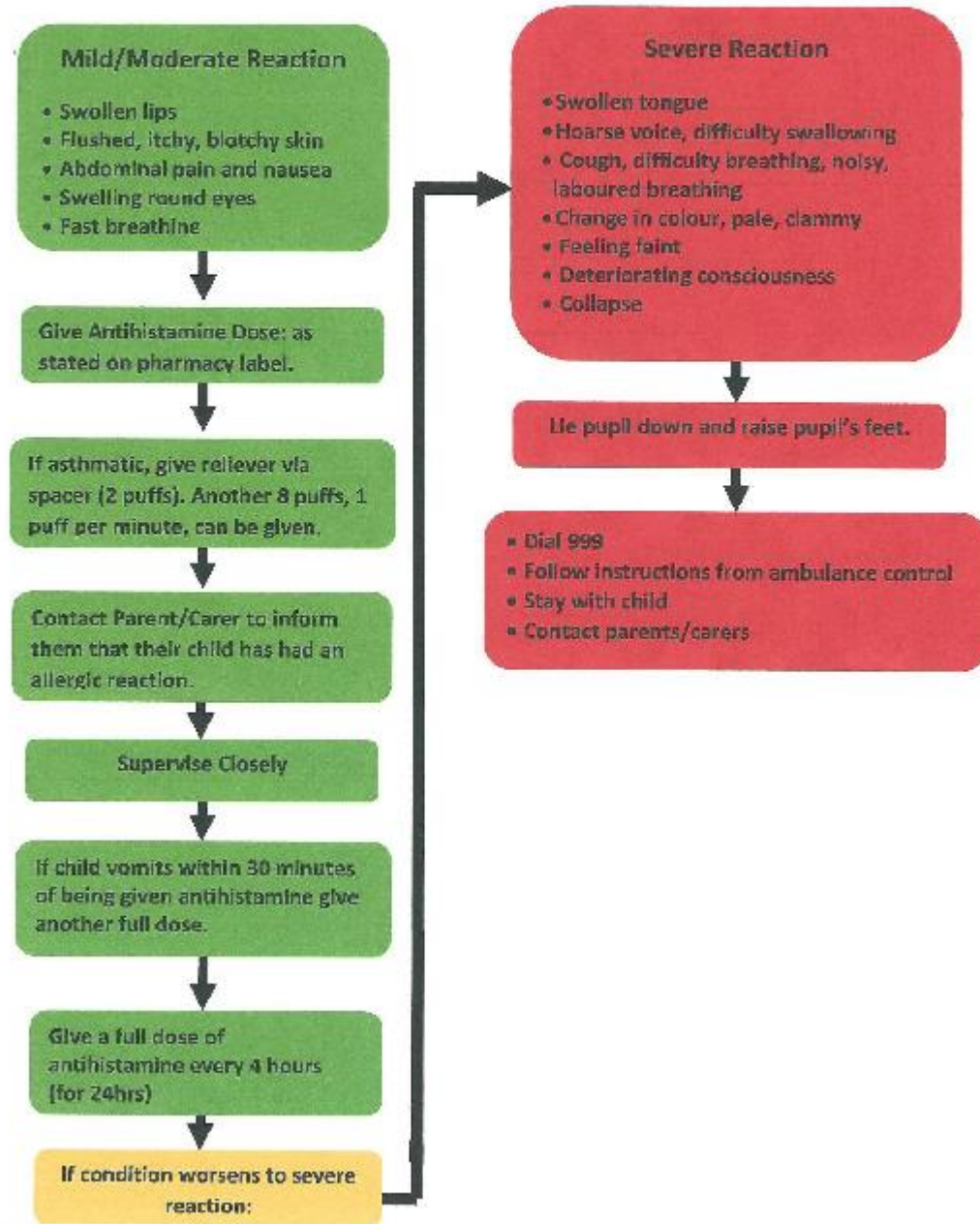
Symptom and Action Flowchart for Allergic Reaction NOT Including an Adrenaline Pen

Refer to School Healthcare Plan and medication container for dosages.

Photograph of
pupil

Name _____

Date of Birth _____



Symptom and Action Flowchart for Absence, Atonic and Complex partial Epileptic Seizures

Photograph of pupil

Name

Date of Birth

Symptoms:

- **Absence seizure:** brief loss of awareness.
- **Atonic seizure:** "drop attack", pupil fall straight down, normally recovers quickly.
- **Complex partial seizure:** may look blank, pale, lip licking/smacking, plucking at clothes.

DO NOT speak abruptly to the pupil.
DO NOT handle the pupil abruptly.

Note time
Speak calmly.
Guide pupil to sit if standing.

Does the seizure last longer than 5 minutes or the time specified in the pupil's individual healthcare plan?

YES

NO

Is emergency medication prescribed for use in school?

YES

NO

Give medication as per School Healthcare plan.

Is the pupil beginning to respond to verbal stimuli?

NO

YES

YES

YES

- Dial 999 for ambulance stating that the pupil is having an epileptic seizure.
- Follow instructions given by ambulance control staff.
- Stay with pupil.
- Reassure pupil.
- Contact parent/carer.

Reorient pupil to:

- Place
- Time
- Task

Does the pupil have any injury that requires treatment?

NO

Are you unsure or worried?

NO

- After a seizure the pupil may feel sleepy.
- Allow pupil to rest in a quiet area.
- Inform parents/carers.
- Fill in epilepsy record chart.

Symptom and Action Flowchart for a Generalised Tonic Clonic Epileptic Seizure

Photograph of pupil

Name _____

Date of Birth _____

Symptoms: goes stiff, would fall if standing, is unresponsive, eyes may deviate, colour may change, all limbs jerk/shake/twitch.

DO NOT try to move the pupil
DO NOT try to stop the pupil jerking
DO NOT put anything in the pupil's mouth

1. Note time.
2. Move furniture/object pupil could bang against.
3. Place something soft under pupil's head.
4. When possible put pupil on his/her side.

Does the seizure last longer than 5 minutes or the time specified in the pupil's individual healthcare plan?

YES

NO

Is emergency medication prescribed for use in school?

YES

Give medication as per School Healthcare plan.

Has the pupil stopped jerking or is relaxing after a further 5 minutes?

NO

NO

- Dial 999 for ambulance stating that the pupil is having an epileptic seizure.
- Follow instructions given by ambulance control staff.
- Stay with pupil.
- Reassure pupil.
- Contact parent/carer.

When pupil stops jerking/relaxes place on their side and cover them from the waist down in case of incontinence to minimize embarrassment.

Does the pupil have any injury that requires treatment?

YES

YES

YES

- After a seizure the pupil will probably feel sleepy.
- Allow pupil to rest in a quiet area.
- Inform parents/carers.
- Fill in epilepsy record chart.

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06/7/2016

