



The Cabin Crew Out of School Club

Administering Medication Policy

While it is not our policy to care for sick children, who should be at home until well enough to return to the club, If a child attending The Cabin Crew Out of School Club requires prescription medication of any kind, as part of maintaining their health and well-being we will agree to administer medication. The parent or carer must complete an **Authorisation to Administer Medicine** form (attached) in advance. Staff at the Club will not administer any medication without such prior written consent.

Procedures

The Cabin Crew Out of School Club can only administer medication (including medication containing Aspirin) which has been prescribed by a doctor (or other medically qualified person). All medication provided must have the prescription sticker attached which includes the child's name, the date, the name and strength of the medicine and the dosage. The **Authorisation to Administer Medication** form must also include the same information and additionally how the medicine should be stored and the expiry date, any possible side effect, the signature of the parent/carers, their printed name and the date.

A designated staff member will be responsible for administering medication or for witnessing self-administration by the child. The designated person will record receipt of the medication on the *Authorisation to administer medication* form, will check that the medication is properly labelled, and will ensure that it is stored securely during the session.

Children's prescribed medication must be stored in the original container, clearly labelled, placed in a named plastic box and kept in the locked filing cabinet in the office, or refrigerated if necessary and inaccessible to children.

Before any medication is given, the designated person will:

- Check that the Club has received written consent
- Ask another member of staff to witness that the correct dosage is given.

When the medication has been administered, the designated person must:

- Record relevant details on the *Authorisation to administer medication* form
- Ask the child's parent or carer to sign the form at the end of the session to acknowledge that the medication has been given.

When the medication is returned to the child's parent or carer, the designated person will record this on the *Authorisation to administer medication* form.

If a child refuses to take their medication, staff will not force them to do so. The Manager and the child's parent or carer will be notified, and the incident recorded on the *Authorisation to administer medication* form.

If a child suffers from a long term medical condition the Club will ask the child's parents to provide a medical care plan from their doctor, to clarify exactly what the symptoms and treatment are so that the Club has a clear statement of the child's medical requirements, outlining the clubs role and information shared with staff who care for the child. The plan should include measures to be taken in an emergency and reviewed frequently. The club may also produce a health care plan with the parent/carer.

Certain medications require specialist training before use, e.g. Epi Pens. If a child requires such medication the Manager will arrange appropriate training as soon as possible. It may be necessary to absent the child until such training has been undertaken. Where specialist training is required, only appropriately trained staff may administer the medication.

A child's parent or carer must complete a new *Authorisation to Administer Medication* form if there are any changes to a child's medication (including change of dosage or frequency).

This policy was adopted by The Cabin Crew Out of School Club.	Date: 12/04/2023
To be reviewed: 12/04/2024	Signed: <i>Justine Reilly</i>
Name of signatory: Justine Reilly	Role of signatory: Manager

Written in accordance with the Statutory Framework for the Early Years Foundation Stage (2014): Safeguarding and Welfare Requirements; Health (3.45-3.47)



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AUTHORISATION TO ADMINISTER MEDICATION

Name of child.....Date of birth.....

I give permission for The Cabin Crew staff to administer to my child;

Name of medication.....Strength.....
 Dosage.....Storage.....
 Expiry date.....Prescribed by.....
 Reason for medication.....
 Time of medication.....
 Possible side effects.....

Signed by Parent/Guardian.....Date.....
 Print name.....
 Name of child's doctor.....Doctors phone number.....

Date	Time	Administered by	Supervising adult	Witnessing adult	Parent/carers Signature

Any additional notes to be written on reverse.