

Administering Medicines Policy

I am required to obtain written permission to administer any prescribed medication/treatment. The following details must be entered into the Accident, Incident and Medication Record Book:

- The date and time you last administered medicine or treatment and sign in order that all doses of medicine given to the child are recorded.
- The name of medication or a full description of the treatment.
- The dose to be given or the duration of treatment.
- The time at which the medicine or treatment should be administered.

The record should be completed by you for <u>every instance</u> of medication/ treatment – daily until the course of medicine/treatment has been completed. You should sign each time to give permission for the medicine/treatment to be administered. I will then sign each time to indicate that the medicine/treatment has been carried out according to your instructions. A carbon copy will be given to you for your records.

Childminder's name	Rachel Wiggins
Childminder's signature	
Date	
Parent(s)' name	
Parent(s)' signature	
Date	

I have read and understand the Administering Medicines Policy.

Date policy was written	August 2011
This policy is due for review on the following date	August 2012

Meeting the Welfare Requirements

Statutory Framework for the Early Years Foundation Stage Safeguarding and Promoting Children's Welfare

"The provider must promote the good health of the children, take necessary steps to prevent the spread of infection, and take appropriate action when they are ill."