

OPS014 Challengers Medication Policy

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| Review date | Reviewed by |
| July 2025 | Debbie Court & Ella Arbelaez-Rodriguez |

Contents

| | | |
|-----|---|---|
| 1. | About this policy | 2 |
| 2. | Training | 2 |
| 3. | Parent and Carers Role | 3 |
| 4. | Documentation – Information staff need | 5 |
| 5. | Designated Medication Person | 5 |
| 6. | Signing in and out the medication..... | 5 |
| 7. | Administering the medication – the five R’s | 7 |
| 8. | The Witness and Checker | 7 |
| 9. | Troubleshooting..... | 7 |
| 10. | Challengers Medication Safe | 8 |
| 11. | Challengers Staff Medication..... | 8 |
| 12. | Document Change History..... | 9 |

1. ABOUT THIS POLICY

Challengers recognises that children and young people who attend our schemes may require us to administer medicines. This policy will:

- Give instruction to staff how to receive, record, store and administer medicines to children and young people who require medication while they are at Challengers.
- Make sure parents and carers have clear instructions and understand their role in supporting the policy.
- Support staff with guidance about safe behaviour and 'human factors' while managing this high-risk activity safely for children and young people.
- Give guidance on staff's own emergency or routine drugs whilst on scheme, who is responsible and where this should be kept.

2. TRAINING

- Challengers employ a Registered Nurse to train staff and provide advice and support to staff members working with children and young people.
- Medicines may only be administered by a trained member of Challengers staff who has completed the nurse lead Medication Administration course and been signed off by the Challengers Nurse as competent to practice.
- Staff trained will refresh Medication Administration course once a year. Without an up to date refresher course staff cannot administer medication.
- Medication Administration training will cover all aspects of this policy as well as respond to the different needs of staff/schemes/children.
- There are 2 levels to this training:

- Level 1 - First time meds admin training: Challengers Nurse will confirm you have been signed off as completing the Theory training. You can be a meds witness on scheme.

Qualification: Medication Administration Theory (Meds Witness). Valid for 12 months.

You will only support someone (Level 2 trained) to give medication and be given as many opportunities to witness medication administration and sign in these under supervision. You must understand the processes, policies and responsibilities of giving medication thoroughly. Speak to your line manager to authorise a competency sign off with Challengers Nurse.

- Level 2 – Medication Competency Sign off: Challengers Nurse will confirm you have been signed off as competent to give meds. You can give meds on scheme. Qualification: Medication Administration Competent. Valid for 12 months.

3. PARENT AND CARERS ROLE

If any aspects of this policy are not met Challengers will not accept the medication or the child/young person on to the scheme.

Information

All information about medicine administration must be done with the 'Designated Medication Person' at each Challengers scheme. If necessary, the Leader will direct the parent/carer to the Designated Medication Person.

For every child and young person who needs medication while at Challengers a medication administration record (*OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record*), recording parental consent to give medicine, instructions how to administer and every dose of medication given (and not given) must be completed.

Parents must provide clear information about their son or daughter's medical requirements whilst he or she is attending a Challengers scheme.

Parent/carers must inform Challengers immediately of any changes relating to the medication, care or medical condition of their child particularly those which may have a direct effect on the child's health using:

- *OPS015 Challengers Children and Young Peoples Information Sheet* or;
- *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record*.

Bringing medication to Challengers

Instructions on *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record* must match the pharmacy label.

Medicines brought to Challengers must be handed in to the 'Designated Medication Person' - they will be stored in the 'Designated Medication Area' locked and away from children and young people.

Medicines brought into the scheme must be:

- in an original container with a pharmacy label;
- with the name of the child;
- the name and dose of the medicines;
- the time and dosage to be administered;
- where practicable, only the tablets/medication to be administered whilst in Challengers care on any given day should be brought to the centre.

Challengers staff are not permitted to accept medication in an old container or a container on which the label has been altered or when the medicine is passed its expiry date.

Household medicines

'Household' medications (antiseptic etc.) must be prescribed by a prescribing nurse or doctor. The only exception is paracetamol and Sudocrem.

Paracetamol will be accepted on scheme and the designated medication person can administer this if they have clear information about last dose and total doses in 24 hours (Only a total of 4 doses can be given in any 24-hour period), and there is a clear reason why the paracetamol is required. If a child or young person requires regular paracetamol, this must be prescribed.

Sudocrem can be accepted on scheme, the designated medication person will administer it, as long as they have clear information on when and where this should be used. This must be handed in at the start of the day in its original packaging.

In response to the difficulties of obtaining antihistamine on prescription and the addition of this drug type to Asthma and Anaphylaxis protocols, antihistamine can now be given at Challengers without prescription if it is included in an Asthma and/or Anaphylaxis protocol or the child/young person is obviously struggling with hay fever symptoms. Provided that the recommended daily (24hr) dosage guidelines are followed.

All these medications must be labelled with the child's name and a *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record* used. Before administration it must be established when the last dose was given and how many doses have been given in the last 24 hours. This is to ensure the maximum dosage is not exceeded.

A child will not be accepted onto the scheme if they do not attend with the correct medication as it appears on the *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record*.

Emergency medication

If a child or young person needs to use emergency medication, they must have an 'emergency care plan/protocol' that describes and instructs staff how and when to use the medication. This plan/protocol must be renewed in time with its expiry date. If there is not a clear expiry date it must not be older than 2 years from the date displayed.

A child or young person will not be accepted onto the scheme if they do not attend with their emergency medication and plan.

Changing the form of or mixing the medication

We know it is helpful sometimes to crush medication or disguise medication in food or drink in order to encourage children to take them. This, however, can alter how the drug works. If we are asked to alter the form of the drug (e.g. crush a tablet or empty a capsule) Challengers must have a doctor's letter to describe this.

All medication will be prepared and administered overtly – staff are not permitted to 'hide' medication (For example, in food)

We also need doctor's permissions if we are to mix more than one drug together, to ensure they are compatible.

4. DOCUMENTATION – INFORMATION STAFF NEED

Every step of the process must be recorded accurately, clearly and legibly.

Medication can only be administered if staff have a completed *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record* signed by the parent/carer. This should be completed in the presence of the parent

OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record is renewed termly or sooner if there are changes.

All old child/young person care and medicine information will be returned to Service Managers with scheme administration in a timely manner but at least at the end of every month. These will then be scanned and added to the child/young person's account on the system.

Changes to instructions or consent

Making changes to the *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record* – any alterations to instructions must trigger a new form. Old forms must not be used and need to be marked as 'old', signed and dated, archived and sent to Service Manager.

Emergency medication

If a child or young person needs to use emergency medication, they must have an 'emergency care plan/protocol' that describes and instructs staff how and when to use the medication. This plan/protocol must be renewed in time with its expiry date. If there is not a clear expiry date it must not be older than 2 years from the date displayed.

5. DESIGNATED MEDICATION PERSON

At every session there will be a Designated Medication Person to be responsible for all aspects of medication administration for the entire session – this will be recorded on the OPS028 Challengers Order of the Day Planner.

The Designated Medication Person must make themselves known to children, families and the staff team at sign in and team briefing.

The Designated Medication Person must have completed both levels of 'Medication Administration' (Theory and Competency) training and be signed off by the Challengers Nurse.

6. SIGNING IN AND OUT THE MEDICATION

The Designated Medication Person will sign in and out all medication.

OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record must be completed for every child/young person if they require any medication while they are at Challengers.

Designated Medication Person must use an existing *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record* or complete a new form if necessary. Every medicine must have a pharmacy label apart from paracetamol.

Emergency medication

If a child or young person needs to use emergency medication, they must have an 'emergency care plan/protocol' that describes and instructs staff how and when to use the medication as well as *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record*. This plan/protocol must be renewed in time with its expiry date. If there is not a clear expiry date it must not be older than 2 years from the date displayed.

A child or young person will not be accepted onto the scheme if they do not attend with their emergency medication and plan.

Check the pharmacy label

- The pharmacy label must have the exact same information as the *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record*.

Medication will be refused if this is not true.

Check the 5 R's (plus E) at sign in

1. **RIGHT MEDICATION** – name of medication;
2. **RIGHT PERSON** – person's name and correctly identified;
3. **RIGHT DOSE** – the dose and quantity match;
4. **RIGHT TIME** – when to give it;
5. **RIGHT ROUTE** – how to give;
6. **EXPIRY** – check medication is within expiry date.

Medication must not be given if this is not true or completed.

Additional checks when signing in

Liquids, drops, ointments and cream medications - may have expiry dates based on how long they have been opened. A date of opening must be handwritten on all liquid medications that have been opened. Challengers staff should hand write on the pharmacy label when they open any liquid medications.

If Buccal Midazolam comes in the Pre-filled syringes under the brand name Buccolam, these come in separate tubes. Each separate tube must;

- Have a pharmacy label on it
- Have details of expiry date

Medication will be stored in the Designated Medication Area if safe to do so. If another safe storage area needs to be set up this must be recorded in the scheme risk assessment.

All medication must be stored in a locked container and inaccessible to children and young people. This will be described in the scheme risk assessment.

All staff must know where the medication is stored on scheme so that emergency medication can be brought to the child/young person or the Designated Medication Person.

Storage of medication on trips

The Designated Medication Person will keep all medication and instructions safe so that:

- Medication is organised, ready and available to use at the right time;
- Medication is inaccessible to children and young people – for example in an appropriate lockable bag, this should always be kept by the Designated Medication Person.

7. ADMINISTERING THE MEDICATION – THE FIVE R'S

Staff administering medication MUST check 'The Five Rs' (plus E) every time for every medicine using *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record*:

- RIGHT MEDICATION – name of medication;
- RIGHT PERSON – person's name and correctly identified;
- RIGHT DOSE – the dose and quantity match;
- RIGHT TIME – when to give it;
- RIGHT ROUTE – how to give;
- EXPIRY – check medication is within expiry date.

8. THE WITNESS AND CHECKER

The Designated Medication Person must choose a suitable and trained witness and checker.

The witness/checker's responsibility is to check that every aspect of the medication policy is followed

The witness/checker must be involved in the whole process and be confident to challenge the process if required.

The witness and checker must have completed 'Medication Administration Theory' Level 1 training.

The witness and checker must confirm and check the Five Rs and witness the administration of the medication and sign to confirm that they have done so.

9. TROUBLESHOOTING

Refusal or not given (spilled/lost/not needed)

Medication refused or not given (spilled/lost) must be recorded on *OPS014D Challengers Parental Agreement for Challengers to Administer Medication and Administration Record* if child/young person refuses medication. If this happens call parent/cares immediately and on call for advice.

Do not force the child/young person to take the medication.

Medication errors

All errors (such as over medication, incorrect medication being given, missed dose) must be reported to the Service Manager or on call, and contact to be made with the parent/carers. An Incident Form should be completed on CPOMS alerting Challengers Nurse.

The Service Manager or on call will consider whether to apply safeguarding policy and/or an investigation.

10. CHALLENGERS MEDICATION SAFE

Medicines kept at Challengers which are not given on a daily basis but which are kept in case of emergency such as Buccal Midazolam or adrenalin injectors (Epipen, Jext) must be labelled in the same way as any other medication but must additionally be entered onto a *OPS014/ Challengers Medication Safe Register* which records any and all contents of the Medicine Safe which will be stored for more than one day.

Medication must not be held on scheme in the absence of a medication safe.

Use *OPS014/ Challengers Medication Safe Register* to record the date received, child/young person's name, medication name, quantity, expiry date, date removed and signed by the person removing the medicine.

A Designated Medication Person will check and sign the Medicine Safe Register for accuracy weekly.

When medication is nearing its expiration date it must be returned to parents to enable a replacement before it reaches its expiry date. If this is not possible, parents must be informed that if they are unable to collect it we will dispose of it appropriately. This will be done by a senior member of staff in consultation with the Challengers Nurse. The parent/carer must be informed, and a replacement requested if necessary.

The person entering the details of the medicine on the Medicine Safe Register should also check that we have the necessary written consent and care plan from the parent/carer. Effort should be made to keep the medicines kept in the site to a minimum.

11. CHALLENGERS STAFF MEDICATION

Routine Medication

If staff need to bring routine medication on scheme it must be locked away securely. If the staff area is always locked and secure away from the children/ young people it can be stored inside the staff members bag. If the medication could potentially have an adverse effect on the worker, then it is advised that they let the scheme leader know when they need to take it.

If there isn't a safe area within the staff room, secure from the children, all routine medication should be signed into the staff medication register and locked in the medication trolley/lockbox. The staff member remains accountable for the medication but will inform the medication responsible person that they have signed them in.

Emergency medication (For example inhalers, EpiPens, midazolam, glucose injection)

If staff are prescribed emergency medication it should be locked away in a trolley/lockbox and signed into the staff medication register. This is the responsibility of the staff member who will remain accountable when using the medication unless they have impaired capacity, e.g.

Unconscious. The leader of scheme and medication responsible person for the day must be informed that staff medication has been signed in. Risk assessment should be in place to support in the event of a medical emergency. Leader and designated medication person on day must be made aware of this risk assessment and know where it is kept.

Out Trips

If staff are on out trips and likely to split from the medication responsible person, any medication should remain on their person but stored in a lockable bag/backpack etc. If a staff member has emergency medication that may be required whilst on an out trip, they should not be left alone with any child/young person in case they require their medication and support from a colleague.

12. DOCUMENT CHANGE HISTORY

| DOCUMENT CHANGE HISTORY | | | | |
|-------------------------|----------------|--|----------------------------|--|
| Plan Version No. | Release Date | Summary of Changes | Section No./ Paragraph No. | Changes Made By |
| 1. | August 2018 | | | Jonathan Dobson |
| 2. | April 2019 | | | Ella Arbelaez-Rodriguez |
| 3. | November 2019 | | | Debbie Hull |
| 4. | September 2021 | | | Debbie Hull |
| 5. | November 2024 | Update of the whole document, addition of staff medication | Whole Document | Debbie Court (nurse), Ash Morgan |
| 6. | July | Update on antihistamine no longer being prescribed | 3 | Debbie Court & Ella Arbelaez-Rodriguez |