**First Aid and Medication**

**Standards and Regulations**

**Fostering Services National Minimum Standards (England) 2011**:

* [Standard 6 - Promoting Good Health and Wellbeing](http://www.minimumstandards.org/fost_six.html).

**Training, Support and Development Standards for Foster Care:**

* [Standard 2 - Understand your role as a foster carer](https://www.fosteringhandbook.com/bradford/files/fost_care_tsd_standards_guid.pdf);
* [Standard 3 - Understand health and safety, and healthy care](https://www.fosteringhandbook.com/bradford/files/fost_care_tsd_standards_guid.pdf);
* [Standard 5 - Understand the development of children and young people](https://www.fosteringhandbook.com/bradford/files/fost_care_tsd_standards_guid.pdf).

1. **Introduction**

You should be clear about what decisions you can make about giving consent for medical treatment and this will be recorded in the child/young person's [Placement Plan](http://trixresources.proceduresonline.com/nat_key/keywords/placement_plan.html).

You should have a fully equipped first aid box in the home and in each vehicle used to carry children. Your Supervising Social Worker will make sure arrangements are in place to keep first aid boxes fully stocked when they do a Health and Safety check. You should make sure that you take the opportunity to attend health and safety training opportunities when they arise.

First aid boxes should be kept in a safe accessible place, not within reach of small children, where the people who need to get access to them can do so.

The first aid box may be looked at in an unannounced visit.

1. **First Aid**

If a child is at risk or requires first aid, you should apply first-aid if it is safe to do so, and contact your Supervising Social Worker as soon as possible. You must not delay the process of getting medical help.

You should always assess the situation and in a medical emergency, send for medical help and an ambulance or the Police if this is needed.

Before help arrives:

* Do not move the person other than to remove them from immediate danger or place them into the recovery position;
* Try to find out what has happened;
* Do not try and make them sick;
* Observe the child/young person; keep them calm, warm and quiet.
* If the person is unconscious:
  + Ensure they can breathe and place them in the recovery position;
  + Do not move them if they are likely to have spinal or other serious injury which may not be obvious;
  + Do not give anything by mouth;
  + Do not attempt to make them sit or stand;
  + Do not leave them on their own.

When medical help arrives, pass on any information available, including any medication they may taking.

If a child who is placed with you has particular health needs, the child’s social worker should provide information and advice on specialist advisory or support groups.

You must have written consent/guidance on giving both prescribed and non prescription medication

You are expected to complete records when you administer any medication or when there has been a medical incident i.e. hospital admission, consultant/GP appointments.

If you accept responsibility to give medicines either by injections, administering rectal medication or tube feeding etc. the following criteria should be met:

* The child’s parent/carer has given written consent;
* You are instructed in the technique by a qualified nurse or doctor who is satisfied that you are competent to do it. You should also be aware of any possible reactions to the medication and the necessary steps to correct such an occurrence.

Any health-related issues should always be discussed in supervision meetings and recorded.

You will receive training in relation to the management and administration of medication.

1. **Home Remedies**

Home Remedies may only be given to a child with the consent of the parent, if the young person is over 16 or after consulting with the child's GP and it is recorded in the [Placement Plan](http://trixresources.proceduresonline.com/nat_key/keywords/placement_plan.html).

Home Remedies are medicines that can be bought over the counter without prescription, including Paracetamol, Aspirin, homeopathic, herbal, aromatherapy, vitamin supplements or alternative therapies. Consideration should be given as to how long a child continues to use Home Remedies before you arrange to see their GP.

Although Aspirin may be purchased 'over the counter', without prescription; it may not be given to children unless prescribed by a medical practitioner.

Home Remedies must be kept in a locked cabinet that is only accessible to you, unless a child is permitted to keep their own Home Remedies, in which case the arrangements for this must be set out in the Placement Plan.

Home Remedies, other than Paracetamol, should only be given for a maximum of 48 hours. If the symptoms continue the child should see a GP before further dosages are given. Where children are not able to give Home Remedies themselves, care must be taken to make sure they take it correctly and with you there.

1. **Medicines**

The following steps must be followed:

* Check the medicine to make sure it is prescribed for the child and it is within the expiry date;
* Make sure the child’s name, the name of the medication, and the dosage is correct;
* Give the medicine in accordance with the instructions;
* Record when you give the medicine including the date, time, how much, your name and signature;
* Record if the child refuses the medicine or the reason it was not given;
* You should not attempt to administer another dose of medication if the dose of medication has been partially swallowed or spat out.

**4.1 Receipt of Medicines**

All medicines from whatever source, including medication from hospital should be recorded.

The record should show:

* Date you got the medicine;
* Name, strength and dosage of medicine;
* Quantity received;
* Expiry date;
* Name of the child for whom medication is prescribed/purchased;
* Your signature for receiving the medicine.

1. Safe Management of Controlled Drugs

Some children and young people are prescribed controlled drugs. Examples of controlled drugs are morphine and pethidine for pain, methadone for withdrawal and Ritalin for hyperactivity.

**ALL CONTROLLED DRUGS MUST BE STORED SAFELY BY BEING KEPT IN A LOCKED CABINET. NO MORE THAN 28 DAYS' SUPPLY SHOULD BE KEPT AT A TIME.**

See also: [CQC information on Controlled Drugs](https://www.cqc.org.uk/guidance-providers/controlled-drugs/controlled-drugs).

1. **Disposal of Medicines**

A record is required to identify what happens to medication in the home. This record should show:

* Date you finished the medicine or disposed of it/returned it to the pharmacy;
* Name and strength of medicine;
* Quantity taken;
* Name of the child for whom the medicine was prescribed/purchase;
* Your signature if you arranged disposal of the medicine.

First aid and records of all medicines that have been given will be recorded in the daily record; if advice is sought from a GP, NHS 111 or pharmacist, you should record details of the discussions. If an accident occurs, which results in a visit to GP/hospital, it should be recorded.