POLICY DOCUMENT

The Recharge Club™

Medication Administration Policy

Safe Administration, Storage and Recording of Medication for Children and Young People Attending The Recharge Club

Document Owner:	Mrs Michaela Cmorej, Director and Designated Safeguarding Lead
Company Name:	NutriDive Ltd
Company Number:	16659858
Trading Name:	The Recharge Club™
Registered Office Address:	39 Coltsfoot Drive, Chorley, PR6 0JP
Designated Safeguarding Lead:	Mrs Michaela Cmorej, Director
Deputy Designated Safeguarding Lead:	Mr Michal Cmorej, Deputy Director
Status:	Mandatory Policy — applicable to all staff and bank staff
Date Adopted:	1st August 2026
Review Frequency:	Annually, and immediately following any medication error or change in statutory guidance
Next Review Due:	Twelve months from the date of adoption
Related Policy:	This policy is read alongside the Health and Safety Policy and the Child Protection and Safeguarding Policy

1. Policy Statement

Many children and young people attending The Recharge Club™ require medication during a session, ranging from routine prescribed medication to emergency medication for a life-threatening condition. The Recharge Club™ treats the safe administration of medication with the same rigour and care as any regulated childcare setting.

No medication is administered to a child without specific written parental consent, and every administration of medication is recorded accurately at the time it takes place.

> ***Medication is never administered from memory, and never without a completed, in-date, written consent from the family. If in doubt, staff do not administer, and contact the family or a medical professional first.***

2. Purpose and Scope

This policy applies to any medication, whether prescribed or over the counter, and any medical device or equipment, brought into The Recharge Club™ for a child or young person, and to every member of staff and bank worker who may be asked to administer or oversee medication.

This policy should be read alongside the Health and Safety Policy, the Child Protection and Safeguarding Policy, and each child's Individual Support Plan and individual health care plan.

3. Legal and Regulatory Framework

This policy has been written with regard to the following legislation and statutory guidance:

- The Children Act 1989 and the Children Act 2004
- The Human Medicines Regulations 2012
- Guidance issued by the Office for Standards in Education, Children's Services and Skills for providers registered on the Voluntary Childcare Register
- The Equality Act 2010, including the duty to make reasonable adjustments for children with a disability or long-term health condition
- The United Kingdom General Data Protection Regulation and the Data Protection Act 2018, in respect of the health information recorded to support safe administration of medication
- The Health and Safety at Work etc Act 1974, in respect of the safe storage and handling of medication

4. General Principles

- Medication is administered only with specific, written parental consent, completed before the medication is first given
- Prescribed medication is accepted only in its original container, labelled by a pharmacy with the child's name, the medication name, the dose, and the frequency
- Over-the-counter medication, such as pain relief, is administered only where a family has provided specific written consent for that named product, dose, and circumstance, and is never administered on a general or as-needed basis without this
- Medication that has passed its expiry date is never administered, and the family is asked to provide a replacement before the next session
- Wherever practicable, a second member of staff checks the medication, dose, and child's identity before it is administered

5. Consent and Information Required Before Administering Medication

Before any medication is administered for the first time, the family completes a written medication consent form, which becomes part of the child's Individual Support Plan and is reviewed at least every six months, or sooner if the medication or dose changes. The form records:

- The name of the medication, its dose, and the exact times or circumstances in which it is to be given
- The method of administration, such as oral, inhaled, topical, or injected
- Any known side effects the family wishes staff to be aware of
- Whether the child can self-administer with supervision, or requires the medication to be given to them
- The name and signature of the parent or carer giving consent, and the date

Where a child has a long-term or complex medical condition, such as epilepsy, diabetes, or a severe allergy, an individual health care plan is completed in addition to the medication consent form, setting out the signs and symptoms to look for, the action to take, and step-by-step emergency guidance specific to that child.

6. Storage of Medication

- All medication is stored securely, out of reach and out of sight of children, in a dedicated, clearly labelled storage area
- Medication requiring refrigeration is stored in a clearly labelled container within the refrigerator, inaccessible to children, and separate from food
- Each child's medication is stored separately and clearly labelled with their name, to prevent any confusion between children
- Emergency medication, such as an adrenaline auto-injector or emergency anti-seizure medication, is stored in a location immediately accessible to staff at all times during a session, with its exact location known to every member of staff on duty, rather than in the general locked medication store
- A running stock check is not required for routine medication, but staff check that sufficient medication has been provided for the session and that it remains in date

7. Administration Procedure

Before administering any medication, the member of staff checks what is known as the five rights: the right child, the right medication, the right dose, the right method, and the right time. Wherever practicable, this check is made alongside a second member of staff.

- The medication consent form or individual health care plan is checked immediately before administration, not relied upon from memory
- The child is supported to take the medication in a manner appropriate to their communication needs and preferences, explained calmly and without pressure
- The administration is recorded immediately afterwards, including the time given, the dose given, and the name of the staff member administering it, and, wherever practicable, the name of the staff member who checked it
- The family is informed at collection of every dose of medication administered during the session

Where a child refuses medication, this is not forced. The refusal is recorded, the family is informed at collection, and, where the medication is essential to the child's health, such as anti-seizure or diabetes medication, the family is contacted at the time so that appropriate advice can be sought without delay.

8. Emergency Medication

Where a child's individual health care plan identifies a need for emergency medication, such as an adrenaline auto-injector for severe allergic reaction, or emergency anti-seizure medication for prolonged seizure, staff follow the specific, individual protocol set out in that plan without delay.

- At least one member of staff trained in the administration of the specific emergency medication required is present at every session a child with that need attends
- Emergency medication is never withheld while waiting for a second opinion or for the family to be contacted; it is administered in line with the child's individual health care plan, and the emergency services are contacted immediately afterwards where the plan indicates this is required
- Following any use of emergency medication, the family is contacted immediately, not left until collection, and a full written record is completed on the same day
- A spare, in-date supply of a child's emergency medication is requested from the family wherever practicable, in case the primary supply is used or found to be faulty

9. Self-Administration

The Recharge Club™ recognises that some older young people manage their own medication confidently and independently, for example carrying and using their own asthma inhaler. Self-administration is agreed only with written parental consent and is recorded in the young person's Individual Support Plan, including where the medication is kept during the session and how staff will be made aware if it is used.

Even where a young person self-administers, staff remain aware of what medication they carry and why, in case of an emergency, and any self-administration is still recorded in the same way as staff-administered medication.

10. Medication Errors and Adverse Reactions

Where a medication error occurs, for example a missed dose, an incorrect dose, or medication given to the wrong child, the member of staff involved reports it to the Designated Safeguarding Lead immediately, without exception and without fear of blame for reporting honestly.

- The family is contacted immediately, and advice is sought from a pharmacist, general practitioner, or the emergency services as appropriate to the medication and error involved
- Where a child shows any sign of an adverse reaction to medication, the emergency services are contacted on 999 without delay if the reaction is severe, and the family is contacted at the same time
- A full written record of the error or reaction is completed on the same day, and the incident is reviewed by the Designated Safeguarding Lead to identify what went wrong and what change is needed to prevent a recurrence

11. Record Keeping

A medication record is completed for every child who receives medication during a session, and is kept securely as part of the child's confidential records, separate from general administrative paperwork. Medication consent forms, individual health care plans, and medication administration records are retained in line with the organisation's Data Protection Policy, and are made available to the family, and to relevant health professionals with appropriate consent, on request.

12. Training

Training	Applies To	Frequency
General medication administration, including the five rights	All staff and bank staff	Before administering any medication; refreshed every two years
Administration of a specific child's emergency medication, such as an adrenaline auto-injector or emergency anti-seizure medication	Staff working directly with that child	Before the child's first session; refreshed annually or whenever the child's protocol changes
Recognising anaphylaxis and severe allergic reaction	All staff and bank staff	Before unsupervised contact with children; refreshed every two years
Recognising and responding to a seizure	All staff and bank staff	Before unsupervised contact with children; refreshed every two years

13. Roles and Responsibilities

Designated Safeguarding Lead	Mrs Michaela Cmorej, Director. Ensures medication consent forms and individual health care plans are complete and current before a child's first session, oversees the investigation of any medication error, and ensures all staff receive appropriate training.
Deputy Designated Safeguarding Lead	Mr Michal Cmorej, Deputy Director. Deputises fully for the Designated Safeguarding Lead in respect of medication oversight in their absence.
All Staff and Bank Staff	Administer medication only in line with this policy and the relevant child's individual health care plan, record every administration accurately and immediately, and report any error or concern without delay.

14. Monitoring, Review and Related Policies

This policy is reviewed at least annually, and immediately following any medication error, adverse reaction, or change in statutory guidance. Medication records are reviewed by the Designated Safeguarding Lead at least every six months to confirm all consent forms and individual health care plans remain current.

This policy should be read alongside the following related policies and documents:

- Health and Safety Policy
- Child Protection and Safeguarding Policy
- Individual Support Plan and individual health care plan templates
- Data Protection Policy and Privacy Notice for Families

This policy has been approved by the Director of The Recharge Club™ and forms part of the organisation's statutory compliance framework.