Administration of Medication

While it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being, or when they are recovering from an illness.

Children taking any medication must be well enough, in the opinion of the Nursery Manager or Deputy, to attend the setting. In practice this means they must be eating and drinking normally and must be able to engage with activities as usual. If they require 1:1 support because they are unwell, they should remain at home until they are better.

If you have given your child any form of medication before they attend Nursery, you must advise us when they are dropped at the setting. This is to ensure that in an emergency, if your child spikes a temperature of 38C or above and we cannot get hold of you, we do not administer medication that could cause an overdose situation.

The EYFS states the following;

'Providers must promote the good health, including oral health, of the children they look after. They must have a procedure, which must be discussed with parents and/or carers, for taking appropriate action if children are ill or infectious. This procedure must also cover the necessary steps to prevent the spread of infection. Providers must have and implement a policy, and procedures, for administering medicines to children. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up to date. Staff must have training if the administration of medicine requires medical or technical knowledge. Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse, or pharmacist (medicines containing aspirin should only be given if prescribed by a doctor). Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent and/or carer. Providers must keep a written record each time a medicine is administered to a child and inform the child's parents and/or carers on the same day the medicine has been taken, or as soon as reasonably practicable.

Staff have the right to decline a request to administer medication from a parent/carer if they are in any way uncomfortable with the request. The

Nursery is likely to decline a request from parents/carers to administer medication where this involves technical knowledge or training that has not yet been undertaken'.

Administration of Calpol

Children who have been given Calpol before coming to Nursery will not usually be allowed to attend the setting without the permission of the Nursery Manager or Deputy Manager. Calpol will not be administered at Nursery unless written permission from parents or carers is held to do so.

If it is considered necessary to administer Calpol for any reason, even if permission is held, after discussion with the Nursery Manager or Deputy, a member of staff will try to make contact with the parent/carer to seek permission from and clarification that, the child has not already been given a dose in the previous 4 hours. If Calpol has to be administered at Nursery, because your child has a temperature above 38C, you will be asked to collect your child.

The only exceptions to the above are if a child has a fever as a result of teething or immunisations. In these situations, calpol will be administered, after reference to parents and the situation will be monitored for improvement. If the temperature does not go below 38C within the next hour, parents will be asked to collect their child.

Calpol will not be administered unless a child's temperature rises above 38C.
If your child has had Calpol for 3 days or more, we will advise that you seek medical advice before they attend the setting.

In all cases, reference should be made to the Nursery Manager or Manager on site, before administering medication or contacting parents/carers to collect their children.

Calpol should not be used on a routine basis so that your child is well enough to attend Nursery as it may be masking an underlying condition.

Procedures

Medicines containing aspirin will only be given if prescribed by a doctor.

Medicines are stored in their original containers, in a place which is inaccessible to children and are clearly labelled (usually in the fridge or on the shelf in the kitchen).

Consent

- Parents or carers must give prior written permission for the administration of medication. The staff receiving the medication must ask them to sign a consent form, stating the following information:
    - the full name of their child and their date of birth
    - the name of the medication and its strength
    - who prescribed the medication
    - the dosage to be given in the setting
    - how the medication should be stored
    - the medicine's expiry date
    - any side effects that may be expected
    - the signature of the parent or carer, alongside their printed name and the date
- The child's key worker, Level 3 or above, or Nursery Manager or Deputy Manager will receive the child's medication, ensure that a consent form is completed, and that other staff are made aware that it needs to be administered and when.
- Without this consent, no medication may be given.
- The person receiving the consent form will ensure a copy of it is kept in the kitchen, with a note in the communication book detailing the child concerned and time that medication needs to be administered. A timer will be set as a reminder.
- A note will be written on the whiteboard in the main room so that all staff are aware that the child needs to be given medication.
- At the end of the day, this form should be filed at the back of the medication folder. Once the prescribed review of paperwork has taken place by the Health & Safety representatives, it will be filed with the child's registration forms in the registration folders.
- In the case of life-saving or invasive treatments, such as adrenaline injections for anaphylactic shock or rectal administration of Diazepam for prolonged seizures, or in the case of children requiring assistance with tubes to help them with everyday living, the Nursery School's insurer must be consulted and provided with the following if required:
    - A letter from the child's GP or consultant stating the child's condition and what medication, if any, is to be administered.
    - Written consent from the parent or carer allowing staff to administer the medication.

- Proof of training in the administration of such medication.

Administration of Medicine

- The administration of medicine must be carried out by a Paediatric First Aid qualified member of staff and recorded accurately in our medication record folder. Each time it is given, an 'Administration of Medication record form' is completed. Both are signed by the member of staff who administered the medication and witnessed by another member of staff, who should also be a qualified first aider. The child's parent or carer is shown the record form at the end of the session and asked to sign the form to acknowledge the administration of the medicine. A copy of this form will be given to the parent/carer.
- The medication book and form record the:
  - name of the child
  - name and strength of the medication
  - date and time of the dose
  - dose given and method
  - signature of the staff member/s who administered (and witnessed the administration of the medication, administration form only)
  - parent or carer's signature (administration form only)

If the administration of prescribed medication requires medical knowledge, individual training is provided for the relevant members of staff by a health professional. All staff with a PFA qualification have been trained in the use of an adrenaline pen which can be lifesaving in people who experience severe allergic reactions. There are also a number of staff who have been trained to support a child with diabetes.

- If rectal diazepam is administered (a treatment for prolonged seizures), this must be in accordance with that child's individual treatment protocol, as decided by a doctor. Another member of staff must be present who will co-sign the record book.
- No child may self-administer medication. Where children are capable of understanding when they need medication, for example with asthma, they should be encouraged to tell a member of staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.
- If for any reason a child refuses to take their medication, staff will not attempt to force them to do so against their wishes. If and when such a situation occurs, the Nursery Manager and the child's parent/carer will

be notified, and the incident recorded on the Record of Medication Administered form.

Storage of medicines

- All medication is stored safely in the kitchen on a high shelf or refrigerated as required.
- The Nursery Manager or Deputy is responsible for ensuring medicine is handed back at the end of the day to the parent.
- For some conditions, medication may be kept in the setting to be administered on a regular or 'as-and-when-required' basis. The Health and Safety representatives must check that any medication held in the setting is in date and return any out-of-date medication to the parent.
- These medicines are kept in the kitchen, in a labelled plastic box, with a photo of the child on it, out-of-reach of children, on a shelf next to the first-aid box. If medicines need to be kept refrigerated, they are stored in a labelled and sealed plastic box in the kitchen fridge. Staff, volunteers and students are informed of their location during their induction.

Children who have long term medical conditions and who may require ongoing medication

- A risk assessment is carried out for each child with long term medical conditions who require ongoing medication. This is the responsibility of the Manager alongside the key person. Other medical or social care personnel may need to be involved in the risk assessment.
- Parents will also contribute to a risk assessment. They should be shown around the setting, understand the routines and activities and point out anything which they think may be a risk factor for their child.
- For some medical conditions, key staff will need to have training in a basic understanding of the condition, as well as how the medication is to be administered correctly. The training needs for staff form part of the risk assessment.
- The risk assessment includes vigorous activities and any other activity that may give cause for concern regarding an individual child's health needs.
- The risk assessment includes arrangements for taking medicines on outings and advice is sought from the child's GP if necessary where there are concerns.
- A health care plan for the child is drawn up with the parent, outlining the key person's role and what information must be shared with other staff who care for the child.

- The health care plan should include the measures to be taken in an emergency.
- The health care plan is reviewed every six months, or more frequently if necessary. This includes reviewing the medication e.g. changes to the medication or the dosage, any side effects noted etc.
- Parents receive a copy of the health care plan.

Managing medicines on trips and outings

- If children are going on outings, staff accompanying the children must where possible, include the key person for each child with a risk assessment, or another member of staff who is fully informed about the child's needs and/or medication.
- Medication for a child is taken in a sealed plastic box/bag clearly labelled with the child's name and the name of the medication. Inside the box/bag is a copy of the consent form and paper to record when it has been given, including all the details that need to be recorded in the medication record as stated above.
- On returning to the setting the paper is stapled to the medicine record book and the staff member who administered it signs the paperwork.
- If a child on medication has to be taken to hospital, the child's medication is taken in a sealed plastic box/bag clearly labelled with the child's name and the name of the medication. Inside the box/bag is a copy of the consent form signed by the parent.
- In the context of trips or outings, this procedure is read alongside the outing's procedure.

Further guidance

- Managing Medicines in Schools and Early Years Settings
- Statutory Framework for the Early Years Foundation Stage – September 2026
- Policy Adopted On: 2nd January 2022

Review Date: November 2027

Signed:

Name: Gwen Pragnell

Position: Owner Highmoor Nursery School

Date: 1st November 2026