

1.11 Medication Policy

Reviewed: May 2026
Next Review Date: September 2027

Table of Contents

Policy Statement.....	2
1.11.1 Medication prescribed by a doctor, dentist, nurse or pharmacist.....	2
1.11.2. Non-prescription medication.....	3
1.11.3. Injections, pessaries, suppositories.....	4
1.11.4. Staff medication.....	5
1.11.5. Storage.....	5

1.11 Medication Policy

Policy Statement

At Miss B's Nursery we promote the good health of children attending nursery and take necessary steps to prevent the spread of infection (see Sickness and illness and Infection control policies). If a child requires medicine, we will obtain information about the child's needs for this and will ensure this information is kept up to date.

We follow strict guidelines when dealing with medication of any kind in the nursery and these are set out below.

1.11.1 Medication prescribed by a doctor, dentist, nurse or pharmacist

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

- Prescription medicine will only be given when prescribed by the above, and for the person named on the bottle for the dosage stated.
- Antibiotics will be administered only after 48 hours have passed since your child received the first dose. Children are excluded from nursery for the first 48 hours of being given antibiotics.
- We can only administer medication that you have already given to your child, and no side effects have been noted.
- Medicines must be in their original containers with their instructions printed in English
- Those with parental responsibility for any child requiring prescription medication should hand over the medication to the most appropriate member of staff, who will then note the details of the administration on the appropriate form, and another member of staff will check these details
- Those with parental responsibility must give prior written permission for the administration of each and every medication. However, we will accept written permission once for a whole course of medication or for the ongoing use of a particular medication under the following circumstances:

1: Safeguarding and Promoting Children's Welfare

- a. The written permission is only acceptable for that brand name of medication and cannot be used for similar types of medication, e.g. if the course of antibiotics changes, a new form will need to be completed
 - b. The dosage on the written permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed
 - c. Parents must notify us **IMMEDIATELY** if the child's circumstances change, e.g. a dose has been given at home, or a change in strength or dose needs to be given
- The nursery will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a letter from a doctor or dentist
 - The parent must be asked when the child has last been given the medication before coming to nursery and the staff member must record this information on the medication form. Similarly, when the child is picked up, the parent must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times
 - At the time of administering the medicine, a senior member of staff will ask the child to take the medicine, or offer it in a manner acceptable to the child at the prescribed time and in the prescribed form
 - If the child refuses to take the appropriate medication, then a note will be made on the form.
 - Where medication is 'essential' or may have side effects, discussion with the parent will take place to establish the appropriate response.

1.11.2. Non-prescription medication

- The nursery will not administer any non-prescription medication containing aspirin.
- The nursery will not administer any non-prescription cough medication.
- The nursery will not administer Calpol and Nurofen on the same day.
- The nursery will only administer non-prescription medication for a short initial period, depending on the medication or the child's condition. After this time, medical attention should be sought.

1: Safeguarding and Promoting Children's Welfare

- If the nursery feels the child would benefit from medical attention rather than non-prescription medication, we reserve the right to refuse nursery care until the child is seen by a medical practitioner.
- If a child needs liquid paracetamol or similar medication during their time at nursery, such medication will be treated as prescription medication with the onus being on the parent to provide the medicine
- If a child does exhibit the symptoms for which consent has been given to give non-prescription medication during the day, the nursery will make every attempt to contact the child's parents. Where parents cannot be contacted, the nursery manager will decide whether the child is safe to have this medication, based on the time the child has been in the nursery, the circumstances surrounding the need for this medication, and the medical history on the Child's Registration Form.
- Parents are asked to give consent for their child to receive a specific type of liquid paracetamol (Calpol) or antihistamine (Piriton) in particular circumstances, such as an increase in the child's temperature (38 °C/100.2F and above) or an allergic reaction. In the case of a high temperature, the nursery will administer Calpol, the dosage of which will be relevant to the child's age, and only if the child has been at nursery for more than four hours. Piriton will only be given at the nursery to treat an allergic reaction for children over the age of 1 year. Piriton will only be administered to babies under one year of age if prescribed by the doctor. This may be administered in an emergency if the nursery CANNOT contact either parent, and an emergency nursery supply of fever relief (e.g., Calpol) and antihistamines (e.g., Piriton) will be stored on site in a locked medicine cabinet for this purpose. This will be checked at regular intervals by the manager to ensure it complies with storage instructions and remains in date.
- Giving non-prescription medication will be a last resort, and the nursery staff will use other methods first to try to alleviate the symptoms (where appropriate). The child will be closely monitored until the parents collect the child
- For any non-prescription cream for skin conditions, e.g. Sudocrem, prior written permission must be obtained from the parent, and the onus is on the parent to provide the cream, which should be clearly labelled with the child's name
- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, the manager will decide if the child is fit to be left at the nursery. If the child is staying, the parent must be asked if any kind of medication has already been given, at what time and in what dosage, and this must be stated on the medication form.

1: Safeguarding and Promoting Children's Welfare

- As with any kind of medication, staff will ensure that the parent is informed of any non-prescription medicines given to the child whilst at the nursery, together with the times and dosage given
- The nursery DOES NOT administer any medication unless prior written consent is given for each and every medicine.

1.11.3. Injections, pessaries, suppositories

- As the administration of injections, pessaries and suppositories represents intrusive nursing, we will not administer these without appropriate medical training for every member of staff caring for the child. This training is specific for every child and not generic. The nursery will do all it can to make any reasonable adjustments, including working with parents and other professionals to arrange for appropriate health officials to train staff in administering the medication. For children with long-term medical requirements, an Individual Health Care Plan from the relevant health team will be in place to ensure that appropriate arrangements are in place to meet the child's needs.

1.11.4. Staff medication

All nursery staff have a responsibility to work with children only where they are fit to do so. Staff must not work with children when they are infectious or feel unwell and cannot meet children's needs. This includes circumstances where any medication taken affects their ability to care for children, for example, where it makes a person drowsy.

If any staff member believes that their condition, including any condition caused by taking medication, is affecting their ability to care for children, they must inform their line manager and seek medical advice. The nursery manager will decide if a staff member is fit to work, including circumstances where other staff members notice changes in behaviour suggesting a person may be under the influence of medication. This decision will include any medical advice obtained by the individual or from an occupational health assessment.

Where staff may occasionally or regularly need medication, any such medication must be kept in the office in a locked container or in the nursery room where staff may need easy access to the medication, such as an asthma inhaler. In all cases, it must be stored securely out of reach of the children at all times. It must not be kept in the first aid box and must be labelled with the name of the member of staff.

1: Safeguarding and Promoting Children's Welfare

1.11.5. Storage

All medication for children must have the child's name clearly written on the original container and kept in the locked medicine cabinet, which is out of reach of all children.

Emergency medication, such as inhalers and EpiPens, will be within easy reach of staff in case of an immediate need, but will remain out of children's reach. Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children. This must be in a designated place with the child's name clearly written on the original container.

All medications must be in their original containers, labels must be legible and not tampered with, or they will not be given. All prescription medications should have the pharmacist's details and notes attached to show the dosage needed and the date the prescription was issued. This will all be checked, along with expiry dates, before staff agree to administer medication.

Medication stored in the setting will be regularly checked with the parents to ensure it continues to be required, along with checking that the details of the medication form remain current.