3.2 Administering Medicines

Wherever possible, children who are prescribed medication should receive their doses at home. Staff should not normally administer medication to a child unless it is prescribed by a GP, dentist, nurse or pharmacist, and enclosed in the original packaging with the child's name and prescription details attached. Staff will not administer medication unless the request is from the child's parent or carer and is given in writing, stating frequency and dosage. Parents/carers can make such a request by completing and signing a Medicine Form via the Famly App. Non-prescription medication can be administered only with prior written consent using the Administering Medication Form. Children will never be given medicines containing aspirin unless prescribed by a doctor.

Before administering any medication, staff check that it is appropriate for the child, in date, and that the dosage and instructions are clear. If uncertain, staff seek advice from a pharmacist or appropriate healthcare professional and do not administer until clarified.

Staff may raise concerns about their competence to administer medication. Where a child requires medication involving technical or medical knowledge, the manager will agree an individual care plan with parents and relevant health professionals and ensure that the staff involved receive appropriate training.

Medication will not be given without written parental permission and any relevant healthcare instructions. In an emergency, staff will seek urgent medical help and follow the child's agreed emergency care plan.

Procedures

All medicines will be stored strictly in accordance with product instructions, in a secure designated location inaccessible to children, or in a designated medicine refrigerator where refrigeration is required. Emergency medication must be readily accessible to authorised staff while remaining inaccessible to children.

A designated member of staff will administer medication for each child and ensure that:

• Prior written consent and instructions are in place.

• The medicine is correctly labelled, in date and safely stored.

• The child, medicine, dose, time and route are checked against the instructions.

• A second member of staff witnesses administration wherever practicable, in accordance with nursery procedure.

• Every administration is recorded immediately, including the child's name, medicine, dose, date, time and name of the administering staff member; parents are informed and asked to acknowledge the record.

Medication will not be forced on a child who refuses it. The refusal, any missed dose or suspected administration error will be recorded; the manager and parents will be informed promptly, and medical advice sought where appropriate. Any suspected overdose or serious reaction requires urgent medical assistance.

If the type, dosage or instructions change, a new Medicine Form must be completed and the revised instructions checked before further administration.

Children with ongoing medical needs

For children with ongoing conditions, including allergies or asthma, the nursery will work with parents and healthcare professionals to agree an individual healthcare or emergency plan, including staff training, medicine access, review arrangements and procedures for outings. Staff will know how to respond promptly to a medical emergency.

Storage and monitoring

Medicine storage conditions, expiry dates and supplies will be checked regularly. Parents will be asked to replace expired medication. Medicines will be returned to parents when no longer required and disposed of safely where return is not possible.

Staff medication will also be kept inaccessible to children. Any staff member returning from sick leave will complete a return-to-work form declaring medication that may affect their ability to work safely with children.

Related guidance

EYFS statutory framework for group and school-based providers; nursery First Aid, Safeguarding, Allergies and Health and Safety procedures.