



Safeguarding and Welfare Requirement: Health

Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date.

6.1 Administering Medicines

Policy statement

Impact Montessori Nursery recognises that some children may need medication during their time at nursery to maintain their health, manage a medical condition or support their recovery from an illness.

We will administer medication only where it is necessary, appropriate and in accordance with the child's individual needs, parental/carers instructions, medical advice where applicable, the requirements of the Early Years Foundation Stage (EYFS), and our insurance arrangements.

Children who are unwell should normally remain at home until they are well enough to attend nursery and are outside any applicable infectious-disease exclusion period. Our **Managing Children Who Are Sick, Infectious or Have Allergies Policy** sets out the arrangements for children who become ill or infectious.

Where possible, parents/carers should arrange for medicines to be administered outside nursery hours. However, where a child requires medication during the nursery day, we will make reasonable arrangements to administer it safely.

We will ensure that:

- medication is administered only with the required written parental/carers permission;
- prescription medication is prescribed for the individual child;
- medication is stored safely and appropriately;
- medication is administered by appropriately authorised staff;

- staff receive additional training where administration requires medical or technical knowledge;
- a written record is completed each time medication is administered;
- parents/carers are informed on the same day that medication has been administered, or as soon as reasonably practicable;
- medication is regularly checked to ensure it remains in date;
- appropriate risk assessments and individual healthcare plans are completed for children with ongoing medical needs;
- confidentiality is maintained in relation to children's medical information.

These arrangements reflect the current EYFS statutory requirements. GOV.UK

1. General principles

Children taking prescribed medication must be well enough to attend nursery.

Medication will not normally be administered where the child is too unwell to participate safely in nursery activities or where their condition requires them to remain at home under current public health guidance.

We will not administer medication that has not been appropriately authorised.

Where a child has recently been prescribed a new medication, parents/carers should provide the nursery with information about the medication and any known or expected side effects.

Parents/carers should, where possible, administer the first dose of a new medication at home so that any unexpected reaction can be identified before the child attends nursery.

The nursery will consider each child's individual circumstances rather than applying an automatic exclusion period solely because a medication has been newly prescribed.

2. Prescription medication

Prescription medicines must be prescribed for the individual child by an appropriate healthcare professional, including a doctor, dentist, nurse or pharmacist, in accordance with the EYFS requirements.

Medicines containing aspirin will only be administered where they have been specifically prescribed for the child by a doctor.

Prescription medicines must:

- be in their original container;
- have the child's name clearly stated;
- have the dispensing/pharmacy label where applicable;
- include clear dosage and administration instructions;
- be within the expiry date;
- be prescribed for the child's current condition.

The nursery will not administer medication where the label or instructions are unclear.

3. Non-prescription medication

Non-prescription medicines may only be administered where **written permission for that particular medicine has been obtained from the child's parent and/or carer.**

Examples may include certain:

- pain-relief medicines;
- fever-relief medicines;
- teething preparations;
- topical preparations;
- other medicines that may appropriately be used for children.

The nursery will consider whether administration is necessary and appropriate in the circumstances.

We will not routinely administer non-prescription medication simply for convenience.

We will follow the manufacturer's instructions and any professional advice relevant to the child's age, condition and circumstances.

Paracetamol and fever

The current EYFS requires written permission for the particular medicine, including non-prescription medicines. Therefore, Impact Montessori Nursery will not rely on verbal consent alone to administer paracetamol. GOV.UK

Where a child has a high temperature or is otherwise unwell, staff will follow the nursery's **Managing Children Who Are Sick, Infectious or Have Allergies Policy** and contact the parent/carer as appropriate.

4. Written parental/carer permission

Before administering any prescription or non-prescription medicine, the nursery must obtain **written permission for that particular medicine** from the child's parent and/or carer.

The written permission must include, where applicable:

- child's full name;
- child's date of birth;
- name of medication;
- strength of medication;
- reason for the medication;
- prescribed or recommended dosage;
- time(s) the medication should be administered;
- method/route of administration;
- storage requirements;
- expiry date;
- relevant instructions;
- any known side effects or precautions;
- parent/carer's full name;
- parent/carer's signature;
- date of consent.

Consent must be renewed where there is a significant change to the medication, dosage or instructions.

5. Medication administration records

A written record will be completed **each time medication is administered**.

The record will include:

- child's name;
- date;
- name and strength of medication;
- prescribed dosage;
- actual dosage administered;
- time medication was administered;
- method/route of administration;
- reason for administration where appropriate;
- name/signature of the staff member administering the medication;
- name/signature of a witness where the nursery's procedure requires one;
- any relevant observations or concerns;
- confirmation that the parent/carers has been informed.

Parents/carers will be informed on the same day that medication has been administered, or as soon as reasonably practicable. GOV.UK

Parents/carers may be asked to sign or acknowledge the medication record in accordance with the nursery's recording procedure.

6. Two-person checking procedure

Where practicable, two appropriately authorised members of staff will be involved in the administration of medication.

One member of staff will administer the medication and the second member of staff will act as a witness/checker.

Both staff members will check:

- the child's identity;
- medication name;
- strength;
- dosage;
- expiry date;
- route of administration;
- parental/carer consent;
- instructions on the medication;
- any relevant medical plan.

The administration will be recorded accurately.

Where circumstances mean that a second member of staff cannot be present, the manager will ensure that the nursery's risk assessment and medication procedures are followed and that the administration remains safe and appropriately recorded.

7. Staff responsibilities

Medication will normally be administered by staff who have been authorised by the manager.

Staff responsible for administering medication must:

- understand the child's medication requirements;
- check the medication and consent before administration;
- administer the correct medication and dose;
- follow the prescribed or authorised instructions;
- record the administration immediately;
- report any concerns or unexpected reaction;
- ensure medication is returned to secure storage.

Where administration requires medical or technical knowledge, staff must receive appropriate training from a suitably qualified health professional before administering the medication. This is specifically required by the EYFS. GOV.UK

The manager is responsible for ensuring that appropriate staff are trained and authorised.

8. Self-administration

Some children may be able to understand and manage aspects of their own medication as they develop independence, for example children who use an asthma inhaler.

Any self-administration will only take place where:

- it is appropriate for the child's age and understanding;
- parents/carers have provided the required written permission;
- the child's healthcare professional supports the arrangement where appropriate;
- a suitable risk assessment has been completed;
- staff remain aware of the child's medication needs;
- the medication remains safely controlled.

Self-administration does not remove the nursery's responsibility to supervise and respond appropriately to the child's medical needs.

9. Storage of medicines

All medicines will be stored safely and in accordance with the manufacturer's instructions.

Medication will be:

- kept in its original labelled container;
- stored securely;
- inaccessible to children unless the child's individual healthcare arrangements require immediate access;
- stored at the correct temperature;
- refrigerated where required;
- clearly identifiable;

- checked regularly for expiry.

Where medication requires refrigeration, it will be stored in a designated secure container within the nursery refrigerator, clearly labelled and inaccessible to children.

Emergency medication, such as adrenaline auto-injectors or asthma inhalers, must be readily accessible to authorised staff and must not be locked away where this would delay emergency treatment.

The manager will ensure that staff know where medication is stored and how it can be accessed quickly.

10. Checking and returning medication

Medication held at the nursery will be checked regularly to ensure that:

- it remains in date;
- the label is clear;
- the medication belongs to the child;
- the instructions remain current;
- the medication has not been damaged.

Expired, discontinued or no longer required medication will be returned to the parent/carer for safe disposal.

Medication will normally be returned to the parent/carer when the child leaves the nursery.

11. Long-term medical conditions

Where a child has a long-term medical condition requiring ongoing medication or medical support, the nursery will work with the parent/carer and, where appropriate, relevant health professionals.

An individual risk assessment will be completed where necessary.

An **Individual Healthcare Plan (IHP)** or other appropriate medical plan will be developed where the child's needs require one.

The plan will identify:

- the child's medical condition;
- medication required;
- dosage and frequency;
- symptoms and warning signs;
- the child's usual presentation;
- emergency procedures;
- what staff should do if the child's condition deteriorates;
- when emergency medical assistance should be sought;
- staff responsibilities;
- required training;
- arrangements for activities and outings;
- arrangements for storing and accessing medication;
- relevant contact information.

Parents/carers will be involved in developing the plan and will receive a copy where appropriate.

The plan will be reviewed whenever there is a change in the child's condition or medication and at least annually, or more frequently where necessary.

12. Training for children with complex medical needs

Where a child's medication or medical condition requires specialist or technical knowledge, the nursery will arrange appropriate training before staff are expected to administer the medication.

Training may be provided by:

- a nurse;
- specialist nurse;
- doctor;
- pharmacist;

- other appropriately qualified healthcare professional.

The nursery will keep appropriate records of staff training.

Training needs will form part of the child's individual risk assessment and healthcare plan.

13. Emergency medication

Some children may require emergency medication, including:

- adrenaline auto-injectors;
- asthma inhalers;
- seizure medication;
- other prescribed emergency medication.

Emergency medication will be immediately accessible to trained and authorised staff. Staff will follow the child's individual healthcare plan, emergency plan and medication instructions.

Where a medical emergency occurs, staff will seek emergency medical assistance by calling **999** where necessary.

Emergency treatment will not be delayed while waiting for a parent/carer to arrive.

14. Medication for seizures or other specialist treatment

Where a child requires medication such as buccal midazolam or another specialist treatment, staff will only administer it where:

- it has been appropriately prescribed;
- written parental/carer permission has been obtained;
- the child's healthcare plan provides clear instructions;
- staff have received appropriate training;
- the nursery's risk assessment has identified the arrangements required.

Where two staff members are required by the child's healthcare plan, training or nursery risk assessment, both will be present.

The administration will be recorded immediately.

15. Medication during outings

Where a child requires medication during an outing:

- the medication will accompany the child;
- it will be kept secure and appropriately stored;
- it will remain accessible where it is emergency medication;
- the relevant written consent and healthcare information will be available;
- a trained and appropriately informed member of staff will accompany the child;
- staff will know how and when the medication should be administered;
- administration will be recorded.

Emergency medication must not be left at the nursery when the child is away from the setting.

The outing risk assessment will consider the child's medical needs.

16. If a child needs hospital treatment

If a child requires hospital treatment:

- staff will call **999** where appropriate;
 - a member of staff will accompany the child if required until a parent/carer or appropriate responsible adult arrives;
 - relevant medication will accompany the child where appropriate;
 - the child's healthcare plan and relevant medical information will be provided to emergency services where appropriate;
 - the parent/carer will be contacted immediately;
 - the manager will ensure that the incident is fully recorded.
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17. Refusal or missed dose

If a child refuses medication, spits it out, vomits after administration, or a dose is missed:

- staff will not administer another dose unless this is clearly authorised by the medication instructions or an appropriate healthcare professional;
- the incident will be recorded;
- parents/carers will be informed;
- medical advice will be sought where necessary;
- the manager will review whether any further action is required.

Staff must never double a dose to compensate for a missed dose unless specifically instructed by an appropriate healthcare professional.

18. Medication errors

If the wrong medication, wrong dose, wrong child or wrong route of administration is involved, or if medication is administered without the required consent:

- the manager will be informed immediately;
- appropriate medical advice will be obtained without delay;
- emergency medical assistance will be sought where necessary;
- the parent/carer will be informed;
- the incident will be recorded;
- the nursery will review its procedures to prevent recurrence.

Any required regulatory or insurance notification will be made.

19. Confidentiality

Information concerning a child's medical condition, medication and healthcare needs will be treated as confidential personal information.

Relevant information will be shared with staff who need it to safely care for the child.

Information will be handled in accordance with:

- the Privacy Notice;
- Children's Records Policy;
- Confidentiality and Client Access to Records Policy;

- Information Sharing Policy;
 - Safeguarding and Child Protection Policy.
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20. Monitoring medication records

The manager will regularly review medication records to identify:

- repeated administration;
- missed doses;
- medication errors;
- changes in medication;
- frequent use of particular medicines;
- emerging health concerns;
- training needs;
- any recurring infection or illness patterns.

Where appropriate, the manager will discuss concerns with parents/carers and signpost them to appropriate healthcare advice.

21. Parents and carers

Parents/carers are responsible for:

- providing accurate and up-to-date medical information;
- providing written permission for each medication;
- providing medication in its original labelled container;
- ensuring medication is within its expiry date;
- providing updated medication instructions;
- informing the nursery of changes to medication;
- replacing expired or used emergency medication;
- informing the nursery of relevant changes in the child's health;
- collecting medication when it is no longer required.

Parents/carers should not send medication into the nursery without informing the appropriate member of staff.

22. Insurance

The nursery will ensure that its insurance arrangements are appropriate for the medication and medical procedures it undertakes.

Where specialist medical procedures are required, the manager will check the nursery's insurance requirements and ensure that any necessary conditions are met.

Where specialist training, equipment or additional risk controls are required, these will be put in place before the procedure is undertaken.

23. Related policies

This policy should be read alongside:

- **6.2 Managing Children Who Are Sick, Infectious or Have Allergies**
 - **First Aid Policy**
 - **Health and Safety Policy**
 - **Food and Nutrition Policy**
 - **Safeguarding and Child Protection Policy**
 - **SEND Policy**
 - **Risk Assessment Policy**
 - **Children's Records Policy**
 - **Privacy Notice**
 - **Confidentiality and Client Access to Records Policy**
 - **Outings Policy**
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Legal and statutory framework

This policy has regard to:

- **Early Years Foundation Stage (EYFS) Statutory Framework for Group and School-Based Providers**, effective from 1 September 2026;
- **Human Medicines Regulations 2012**;
- **UK General Data Protection Regulation (UK GDPR)**;
- **Data Protection Act 2018**;
- relevant public health and infection-control guidance;
- relevant safeguarding legislation and statutory guidance.

The current EYFS requires providers to have and implement a medicines policy and procedures, including systems for obtaining and updating information about children's medication needs. It also requires appropriate staff training where administration requires medical or technical knowledge. GOV.UK

Policy review and approval

This policy was adopted by: Impact Montessori Nursery

Date adopted: _____

Date of last review: _____

Date to be reviewed: _____

Signed on behalf of the provider: _____

Name of signatory: _____

Role of signatory: _____