Medication

Policy

At **Evergreen** we promote the good health of children attending nursery and take necessary steps to prevent the spread of infection (see sickness and illness policy). 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.

Antibiotics

Standard exclusion period of 48 hours is reasonable and should be consistently applied to reduce the risk of spreading infection and to monitor for any adverse reactions to medication – even if the child has taken it before. Variations in ingredients and the nature of the virus could mean that children may still be contagious or react differently. Maintaining this approach also helps protect both the child and the wider setting.

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 this 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.

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 where they are infectious or too unwell to 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 they must inform the 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.

Insurance

The director will always check in with our insurance company for anyone on long term medication, specialist treatment or conditions.

It is important to note that staff working with children are not legally obliged to administer medication

Medication

Policy into Practice

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.
- Medicines must be **stored in the medicine cabinets,** which are out of reach of all children.
- Any antibiotics **requiring refrigeration** must be kept in the bottom shelf of the fridge door.
- All medications must be in their original containers, **dispensing labels** must clearly state the child's name, DOB, be legible and not tampered with or they will not be administered.
- All prescription medications should have the **pharmacist's details** and any 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 should be handed over to the most **senior member of the team** available, who will then complete a **medication form** on the child's FAMLY profile and send this to the parent (with parental responsibility) to acknowledge before it is able to be given. This will be followed up with a phone call, if not acknowledged.
- Prior **permission** must be given for each and every medication. However, we will accept permission once for a whole course of medication or for the ongoing use of a particular medication under the following circumstances:
  - The permission is only acceptable for that brand name of medication and cannot be used for similar types of medication.
  - The dosage on the permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed.
  - 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/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** (including revised prescriptions) from a relevant health professional.

- The parent must be asked when the child has last been given the medication before coming to nursery; and use this information to **record what times** the doses should be given in setting.

- A member of the team who is **first aid trained will administer** the medication at the prescribed time and in the prescribed form. This will be witnessed by another member of the team. The time, name of the administrator and witness will be added to the FAMLY medication form.

- Any child on **long term medication** must have a completed **care plan** that is reviewed with parents half termly.

Antibiotics

- If children are prescribed antibiotics they must remain at home for the **first 48 hours.** This should be consistently applied to reduce the risk of spreading infection and to monitor for any adverse reactions – even of the child has taken it before (GOV.UK)

Non-prescription medication

- The nursery will not administer any non-prescription medication containing aspirin.

- Non-prescription medications (including **nappy creams, teething gels**) MUST have a medication form completed BEFORE they can be administered.

- If we feel 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 professional.

- If a child needs liquid paracetamol or similar medication to control a **high temperature** (above 38 degrees) during their time at nursery, parents will be telephoned and asked to collect the child.

- On registration, parent's consent will be requested to allow their child to be given **liquid anti-histamine,** in circumstances such as a reaction to a wasp or bee sting. If this is to be given, instructions on the medicine leaflet will be followed, this will be written up in the child's notes and emergency medication form. Parents will be telephoned to be informed and asked to acknowledge the medication form.

- An **emergency nursery supply of anti-histamines** will be stored on site. This will be checked at regular intervals by the manager to make sure that it complies with any instructions for storage and is still in date.

- If any child may require **medication for teething** 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 further doses will be given based on this information.

- All **medication records** are the **responsibility** of the nursery manager/deputy manager and will then be checked at audit by the Quality Assurance manager half termly.

Team medications

- Team members on long term medication must complete a health care plan and share this with their manager. This should be revisited and reviewed regularly.

- Where team members need medication, this must be kept in the person's bag, in a locked room where children do not have access, or in the medication cabinet.

This policy was adopted on	**Signed on behalf of the nursery**	**Date for review**
April 2022	*L Davy*	*March 2023*
October 2022	*L Davy*	*October 2023*
April 2024	*L Davy*	*April 2025*
July 2024	*L Davy*	*July 2025*
June 2025	*L Davy*	*June 2026*
October 2025	*L Davy and A Astley*	*October 2026*