

Written by: Anuska Abeyssekera Date: 23/3/24

The statutory framework in England is the Early Years Foundation Stage (EYFS). The latest version of the framework is here: <https://www.gov.uk/government/publications/early-years-foundation-stage-framework--2>

The requirements of the EYFS in relation to medication state:

- **Overarching statement:** the provider must promote the good health, including the oral health, of children attending the setting.
- **Policy requirement:** 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.
- **Training** must be provided for staff where 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).
- **Non-prescription medication:** a footnote confirms that, 'Non-prescription medicines can include those that can be purchased from pharmacies (including some over the counter medicines which can only be purchased from a pharmacy), health shops and supermarkets.' See also BMA advice: <https://www.bma.org.uk/advice-and-support/gp-practices/managing-workload/prescribing-over-the-counter-medicines-in-nurseries-and-school>.
- **Permission requirement:** medicine (both prescription and non-prescription – see footnote) 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, or as soon as reasonably practicable.
- **Record keeping:** providers must ensure that staff have sufficient understanding and use of English to ensure the well-being of children in their care. For example, settings must be in a position to keep records in English, to liaise with other agencies in English, to summon emergency help, and to understand instructions such as those for the safety of medicines or food hygiene.
- **Medication storage:** all medication on the premises must be securely stored, and out of reach of children, at all times.

Medication policy statement

I am committed to ensuring your child's medical needs are met and to promoting the good health of all the children in the setting. I aim to comply with the requirements of the latest version of the Early Years Foundation Stage (EYFS) at all times.

Medication procedures

Overarching statement – there is a requirement in the EYFS to support children's health, including their oral health:

- I have information about oral health to share with you.
- The curriculum includes teaching your child about dental hygiene.
- When your child is first registered in the setting, I ask you for details about your child's dentist – please keep this updated if there are any changes. Also, please let me know about dentist appointments, so I can help your child prepare.

Also see Health and Safety Policy and Illness and Infection Control Policy.

Policy requirement: childminders are not required to have written policies beyond Safeguarding and Complaints, but this is an essential policy to set out how medication is managed.

Training: all staff are trained to administer medication as required. Further training is accessed as necessary to keep children safe.

Prescription medication: must include a pharmacy label with your child's name and dosage instructions. You should hand all medication over its original container, with spoon or syringe (if required) and the information leaflet should be inside the box (if provided).

Non-prescription medication: some medications are not prescribed by the doctor, dentist or nurse and might, for example, be advised by a pharmacist. I must have written permission, in advance, to administer these medications or treatments, possibly as part of a Care Plan for your child which includes an Ongoing Medication Permission form. You will be informed when the medication or treatment has been given.

Non-prescription medication might include, for example, eczema emollient purchased over the counter, teething gel, hand cream for sore hands after outside play or excessive hand washing, nappy rash cream, hay fever tablets or spray, homeopathic or natural remedies etc; note that I cannot give aspirin unless it has been prescribed by a doctor.

Permission: medication cannot be administered without prior written permission. This might mean you drop your child off early to complete the form before leaving for work – please confirm this with me first. It is a requirement of the EYFS that all medication administration requests are recorded.

Record keeping: I will ask you to complete a medication administration form. The form asks for details about the last dose of medication and how much – this is so I do not overdose your child. At the end of each session, you will be asked to sign to confirm the medication has been given. To comply with the EYFS and my Information Commissioner's Office registration:

- Medication information will be recorded in English.
- Records will be retained in a secure location in your child's file.
- Records will be retained for 'a reasonable period of time' to comply with the EYFS and data protection legislation; 2-year retention period for children on the Childcare Register (compulsory register).
- Records relating to serious injuries or death of a child will be retained for longer, as advised.
- At the end of the required retention period records will be shredded and any information stored on computer safety destroyed.

Medication storage: you must inform me where the medication should be stored – for example, in the fridge. If medication is needed on outings, I will keep it secure and store it in a cool bag if necessary. If medication is found in your child's bag, I cannot give it to your child – it will be stored in a safe place until your child is collected. To ensure health and safety:

- Medication must be clearly labelled and stored out of sight and reach of children.
- Expiry dates for stored medication are checked regularly.
- Medication will be returned to you for replacement and safe disposal when no longer needed.
- Medication will be stored in its original container.
- Medication will be stored out of sight and reach of children but, where necessary, immediately accessible in case of a medical emergency.

Further medication considerations

Medication administration procedures: as part of an ongoing risk assessment, the following procedures are followed when medication is administered to your child:

- Medication is checked – is it in the correct container? Does it include the name of your child? Is the dose correct? Does the medication treat the condition?
- The permission form will be checked – is signed permission in place to administer the medication?
- Hands are washed, medication is prepared and offered to your child – if your child refuses to take or spits up the medication, you will be contacted to come and administer it to them.
- The medication administration form is completed on the same day.

Notes: if I am unsure about any procedures I will take medical advice and you will be informed if there is a delay while advice was sought; I cannot give aspirin unless it has been prescribed by a doctor.

Emergency medication administration procedures: if your child falls ill during the day, or there is a medical emergency, I will:

- Make every effort to contact you and ask for written permission to administer medication.
- Contact NHS Direct or your child's doctor if I am unable to contact you and follow their advice.
- Make every effort to contact you or your child's emergency contacts to collect, unless your child needs urgent hospitalisation, in which case I will follow Emergency Procedures.
- Inform you about what has happened and complete documentation for you to sign as soon as possible.

In an emergency, I might be advised to give your child medication after consultation with a medical practitioner. I will follow medical advice and make every attempt to contact you as quickly as possible. If medication is administered, I will record it for you to sign.

Self-medication: sometimes, older children carry medication if it is needed at school. I will discuss this you and your child during induction and regularly review records to ensure all children are safe. I need to be aware of any medication on the premises and I must be confident it is stored safely. Medication use will be supervised when your child is on the premises.

Caring for children with long-term medical needs: if your child has long-term medical needs, I will work with you to complete a Care Plan which will detail their care needs. As part of the Care Plan, you will be asked to give me permission to administer medication or treatment long-term or medication in an emergency. I will record any medication given to your child and ask you to sign.

Note: information about your child's ongoing medical needs must be updated regularly.

Allergic or other reactions: I will not normally give the first days' dose of a new medication in case of an allergic reaction and ask that your child stays at home during this time. If your child has a reaction to any medication or treatment, I will stop administering it immediately and request medical advice. I will make every effort to inform you as soon as practical.

If you have any questions, please ask. Thank you.

Signed:

Abyesekem.

Review date:

23/3/25

Policy updates

Updated 08.2021: wording reviewed and adapted where relevant to comply with the changes to the Early Years Foundation Stage (EYFS).

Updated 08.2023 – general wording check to ensure policy is current and valid.