



Medication Policy

Purpose of the Policy

The safety and welfare of the children in my care are paramount. This policy outlines how I will support the administration of prescribed and 'over-the-counter' medication to the children in my care, ensuring the procedure is safe for your children, for you as a parent, and for myself from a legal perspective.

General Conditions

The first dose of any new medicine should be administered by the parent at home due to the risk of adverse reactions. If there are no side effects, I will continue administering the medication at the setting.

All medication will be kept out of reach in the top cupboard in my kitchen. Medication requiring refrigeration will be kept at the rear of the refrigerator on the top shelf.

I will record parental consent to administer medication to their child and maintain a log of the dosage given on my Medication Administration Form (provided as part of your registration pack). Any completed Medication Administration Forms will be retained until the child reaches the age of 21.

I will not administer medicine that is out of date, has changed its form (e.g. chipped or crushed tablets, tablets that stick together, or are harder or softer than normal). Defective medication will be set aside and returned to you at the end of the session for safe disposal. I will contact you to discuss whether an alternative supply is required.

If your child has a self-held medication (e.g. asthma inhaler, EpiPen), please provide an additional one to be kept at the setting. While I have had training in administering medication as part of my Paediatric First Aid qualification, additional condition-specific training may be required before I can care for your child. I will not administer specialist medication (e.g. an EpiPen) without appropriate training and a written individual care plan in place. Please discuss your child's needs with me before their start date. Where a child requires self-held medication such as an inhaler or EpiPen, a spare must also be carried on all outings in line with my Outings Policy.

Prescription medication

Prescription medicine will only be given to the person named on the bottle for the dosage stated.

Prescription medicines must be in their original containers with the labels of the issuing pharmacist attached.

Parents must give prior written permission for the administration of each and every medication, using my Medication Administration Form. However, I 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. The written permission is only for that brand name of medication and cannot be used for similar types of medication. If the brand of medication changes, a new form will need to be completed.
2. The dosage on the written permission is the only dosage that will be administered. I will not give a different dose unless a new form is completed.
3. Parents should notify me 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 administered).

I will not administer a dosage that exceeds the recommended dose stated on the pharmacist's label unless accompanied by a written letter from a doctor.

Parents will be asked when the child had last been given the medication before starting their session; this information will be recorded on the Medication Administration Form. Similarly, when the child is picked up, the parent will be given precise details of the times and dosage given throughout the day. The parent's signature will be obtained at both times.

If the child refuses to take the medication, then a note will be made on the Medication Administration Form.

Where medication is "essential" or may have implications if not taken (for example, insulin, anti-epileptic medication, or daily preventative asthma treatment), I will contact parents immediately to agree an appropriate course of action. If parents cannot be reached, I will follow the child's individual care plan or seek guidance from the emergency services.

Non-Prescription medication

Parents must give prior written permission for the administration of each and every non-prescription medication, using my Medication Administration Form. I will not administer a dosage that exceeds the recommended dose on the packaging instructions.

Parents will be asked when the child had last been given the medication before starting their session; this information will be recorded on the Medication Administration Form. Similarly, when the child is picked up, the parent will be given precise details of the times and dosage given throughout the day. The parent's signature will be obtained at both times.

I will not continue to administer the medication if it appears the child does not require it. A phone call will be made to discuss this approach with the parents.

I will not administer aspirin to any child under 16, nor teething gels containing lidocaine or salicylates to children under 2, in line with NHS guidance.

If the child refuses to take the medication, then a note will be made on the Medication Administration Form.

In an emergency, non-prescribed medicine will be administered only if the appropriate consent has been given previously or as directed by a medical professional. If possible, parents will be informed prior to administration, however, if this is not possible parents will be informed afterwards, giving full details of what has been given, how much and at what time.

Publication & Version History

Version	Date	Description of Change
1.0	05 June 2025	Initial publication
1.1	04 June 2026	Corrections and policy improvements: typo fix; clarified defective medication return procedure; strengthened self-held medication and individual care plan requirements; expanded essential medication escalation pathway; added 3-year record retention period; added NHS-guided exclusions for aspirin (under 16) and teething gels (under 2); named Medication Administration Form with registration pack reference; improved emergency consent wording.
2.0	05 June 2026	Annual review and sign-off

Next Scheduled Review: 05 June 2027

This policy is subject to ongoing revision. Minor amendments may be made between annual reviews and will be recorded in the table above.