



**LISAL**

LANCASTER INDEPENDENT SCHOOL  
FOR ALTERNATIVE LEARNING

# Early Years Administration of Medicine Policy and Procedure

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### Statement of intent:

At LISAL and Appledore Montessori Ltd we promote the good health of children attending our setting and take necessary steps to prevent the spread of infection (see infection control 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.

When dealing with medication of any kind in the setting, strict guidelines will be followed.

### 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 to the person named on the bottle for the dosage stated on the label or signed instructions by the dispenser / doctor.
- Medicines must be in their original containers.
- Those with parental responsibility for any child requiring prescription medication should hand over the medication to the most appropriate member of staff who will then note the details of the administration on the appropriate form and another member of staff will check these details
- Those with parental responsibility must give prior written permission for the administration of each and every medication. However, we 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 acceptable for that brand name of medication and cannot be used for similar types of medication, e.g. if the course of antibiotics changes, a new form will need to be completed.
  2. The dosage on the written permission is the only dosage that will be administered. We will not give a different dose unless a new form is completed.
  3. 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.
- We will not administer a dosage that exceeds the recommended dose on the instructions unless accompanied by written instructions from a relevant health professional such as a letter from a doctor or dentist.
- The parent must be asked when the child has last been given the medication before coming to our setting; this information will be recorded on the medication form. Similarly, when the child is picked up, the parent or guardian must be given precise details of the times and dosage given throughout the day. The parent's signature must be obtained at both times.
- At the time of administering the medicine, a senior member of staff will ask the child to take the medicine or offer it in a manner acceptable to the child at the prescribed time and in the

prescribed form. (It is important to note that staff working with children are not legally obliged to administer medication)

- If the child refuses to take the appropriate medication, then a note will be made on the form.
- Where medication is “essential” or may have side effects, discussion with the parent will take place to establish the appropriate response.

Non-prescription medication (these will not usually be administered)

- We will not administer any non-prescription medication containing aspirin.
- In general, we will not administer non-prescription medication to an unwell child but will ask for the child to be collected. Staff may administer Calpol / liquid paracetamol to a child awaiting collection if staff feel comfortable and competent to do so. Staff will ensure permission has already been obtained from the parent / guardian by contacting them and if unable to contact them checking the relevant emergency care permission form related to being unable to contact them.
- If we feel the child would benefit from medical attention rather than non-prescription medication, we reserve the right to refuse attendance until the child is seen by a medical practitioner.
- On registration, parents will be asked to fill out a medication form to consent (or refuse consent) to their child being given a specific type of liquid paracetamol in particular circumstances such as an increase in the child’s temperature. Parents may specify conditions on this form e.g. the circumstances in which this can be given and a signed statement to say that this may be administered in an emergency if we CANNOT contact the parent.
- An emergency supply of fever relief (e.g Calpol) will be stored on site. This will be checked as part of the office first aid box check by the designated trained first aider to make sure that it complies with any instructions for storage and is still in date.
- It is the duty of the person administering medication to always check the instructions and date on the medication before giving it to a child.
- For any non-prescription cream for skin conditions e.g. Sudocrem, prior written permission must be obtained from the parent and the onus is on the parent to provide the cream which should be clearly labelled with the child’s name.
- If any child is brought to the setting in a condition in which he/she may require medication sometime during the day, the manager and EY lead will decide if the child is fit to be left at the setting. 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 this must be stated on the medication form.

- As with any kind of medication, staff will ensure that the parent is informed of any non-prescription medicines given to the child whilst at the setting, together with the times and dosage given.

### Injections, pessaries, suppositories

As the administration of injections, pessaries and suppositories represents intrusive nursing, they should not be administered by any member of staff unless appropriate medical training is given to every member of staff caring for this child. This training would be specific for every child and not generic. LISAL 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 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 their line manager and seek medical advice. The manager or EY lead 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 may include any medical advice obtained by the individual or from an occupational health assessment if needed.

Where staff may occasionally or regularly need medication, any such medication must be kept in the person's separate locked container in the office or their locker or class room where staff may need easy access to the medication such as an asthma inhaler. In all cases it must be stored out of reach of the children. It must not be kept in the first aid box and should be labelled with the name of the member of staff.

### Storage

All medication for children must have the child's name clearly written on the original container and kept in a closed box, which is out of reach of all children.

Emergency medication, such as inhalers and EpiPens, will be within easy reach of staff in case of an immediate need, but will remain out of children's reach.

Any antibiotics requiring refrigeration must be kept in a fridge inaccessible to children (in the office).

All medications must be in their original containers, labels must be legible and not tampered with or they will not be given. All prescription medications should have the pharmacist's details and 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.