

# MELISSA'S CHILDCARE

## MEDICINE POLICY AND PROCEDURES

I follow the guidance and requirements set out in the Statutory Framework for the Early Years Foundation Stage (EYFS), specifically sections 3.44, 3.45, and 3.46 (p. 25).

#### **General Guidelines**

- Medication will only be administered when essential and with proper documentation.
- All medicines must be in their original packaging and clearly labelled.
- A record will be kept of all medicines administered, including the time, dosage, and any reactions.
- Parents will be asked to sign the medication form after each dose is administered.
- All medication records are stored in the child's personal file and retained until the child is 21 years and 3 months old for insurance purposes.

## **Non-Prescription Medication**

- I do not usually administer non-prescription medicines. Exceptions may be made if:
  - We have discussed the need in advance.
  - o There is an acceptable health reason.
  - You have completed and signed a Non-Prescription Medicine Permission Form.
- The permission form will be reviewed **annually** or updated sooner if needed (e.g., if the child's health needs change).
- You **must inform me** of any medication your child has received in the **24 hours prior** to attending my setting, including the name of the medicine, dosage, and time given.
- I will not administer any medication containing **aspirin** unless prescribed by a healthcare professional.

### **Short-Term Prescription Medication (up to 10 days)**

- For short courses of prescribed medication:
  - o Please discuss the medication with me in advance.
  - A "Permission to Administer Short Course Medication or Treatment Daily" form must be completed and signed daily.
  - Medication must be clearly labeled with the prescription and dosage instructions from the healthcare professional.

## **Long-Term or Ongoing Prescription Medication (over 10 days)**

- If your child requires ongoing medication:
  - o Please discuss this with me to ensure proper arrangements.





- A "Permission to Administer Medicine or Treatment Over an Extended Period" form will need to be signed.
- o This form will be reviewed with you every 3 months or sooner if necessary.

# **Administration & Storage**

- Medicines must **not be decanted** and should be in their **original container** with manufacturers or prescriber's instructions.
- I will administer medication exactly as directed.
- Medicines will be stored safely and securely, out of reach of children, and according to storage guidelines (e.g., refrigerated if required).
- If medication is needed while away from the setting (e.g., on outings), it will be kept accessible and secure.
- For self-administered medication (e.g., Ventolin inhalers or insulin pens), please provide an **additional device** for use at my setting.

#### If a Child Refuses Medication

- Any refusal will be recorded, and the parent will be notified immediately.
- If I feel it's appropriate, I will seek medical advice.

#### **Concerns**

If you have any questions or concerns about medication administration, please feel free to speak with me directly.





