

Medication Policy



Prescribed Medication

Magdalen Gates Preschool will only administer prescribed medication when it is essential to do so, that is where it would be detrimental to a child's health if the medicine were not administered. Where a child receives medication three times a day, it is reasonable for the preschool to administer a maximum of 1 dose but only when the child attends for more than 4 hours. We follow guidance in the EYFS 2017 which states

“Medicine (both prescription and non-prescription) 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”

Short-Term Medication

The preschool is able to administer prescribed medication such as antibiotics in order to finish the course or apply lotions. A medicine request form giving prior written permission for staff to administer medication must be completed by the Parent.

Procedure:

The preschool only accepts medication that is prescribed.

When administering prescribed medication the preschool staff must ensure they receive the following information:

- A medicine request form giving prior written permission for staff to administer medication completed by the parent, stating the name of medication and the time and dosage that staff will be required to give medication.
- Where applicable any written instructions;
- If the administration of medicines requires technical/medical knowledge then individual training will be required for staff from

a qualified health professional. Training is specific to the individual child concerned;

The preschool will not accept medicines that are not in their original containers as originally dispensed. All medicines must be clearly labelled with the child's name. All short term medication must be returned to the parent at the end of the child's session.

Written records must be held by the preschool:

All medication forms will be completed by the member of staff administering or applying the medication,

Members of staff administering medication are required to complete the medication form with the date, time, dosage and their signature when medicine has been given.

A second member of staff are required to witness the administering of any medication to any child and are required to countersign once medication has been given.

The parents/carer will be asked to sign to acknowledge entry.

Nappy Rash Cream

Nappy rash cream can be applied by preschool staff provided the parent specifies when the cream should be applied and how much to apply. The nappy rash cream supplied must be a recognised nappy cream that can be purchased at a chemist.

Infection control

We follow the PHE infection control guidelines for certain diseases - The EYFS 2017 will includes a link to guidance published by Public Health England specifically for schools and childcare settings [on infection control for various conditions](#) (including conjunctivitis) which sets out when and for how long children need to be excluded, when treatment/medication is required and where to get further advice. This useful guidance can be found [here](#).

Attached : form for administration of prescribed medication

Policy updated March 2017

Medication on Magdalen Gates Preschool Premises Form



Name of Setting: Magdalen Gates Preschool

Address of setting: Bull Close Road, Norwich, NR3 1NG

Telephone Number: 01603 665783

Prescription Medications:

*Medication is administered in accordance with the pharmacy label directions as prescribed by the child's health care provider.

*The instructions from the child's parent/carer shall not conflict with the label directions as prescribed by the child's health care provider.

I hereby authorise designated staff of Magdalen Gates Preschool to administer the

Following medication to.....

Parent/Guardian name.....

Child's condition.....

Purpose of medication is.....

Time of administration.....

Time and date of last administration.....

Name of medication.....

Method of administration.....

Possible side effects.....

Name and Tel number of Doctor.....

Parent/Guardian signature.....Date.....