

## **Administration of Medications Policy**



This policy takes into account the information and guidance as set out in the Statutory Guidance: 'Supporting Pupils at school with medical conditions'. (September 2014 & updated August 2017 - [www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3](http://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3) )

### **1. Introduction**

- Children and adults at Grangetown Primary School have a right to pastoral care. This includes emergency first aid provision and the administration of medicines. Some of our pupils have ongoing or temporary medical needs which mean that additional measures are required to ensure that they are enabled to have full access to the curriculum, that the impact of their medical difficulties upon their life in school is minimised as far as possible, and that all staff who work with the pupil understand the nature of their difficulties and how best to help them.
- There is no legal or contractual duty on staff to administer medicines or supervise pupils taking their medicines. Nevertheless we wish to support our pupils where we can. Pupils with special medical needs have the same right of admission to school as other children and cannot be excluded from school on medical grounds alone. Teachers and support staff are in loco parentis and may need to take swift action in an emergency, both in school and off site.
- The prime responsibility for a pupil's health lies with the parent or carer who is responsible for the pupil's medication and should supply the school with any relevant information.

### **2. Aims**

Through this Policy, we aim to:

- adopt and implement any national or LA policies in relation to medication in schools
- arrange training for staff who volunteer to support individual pupils with special medical needs
- liaise as necessary with medical services in support of the pupil
- ensure that pupils with special educational needs are enabled to access the full life of the school where possible
- maintain appropriate records
- give clear structures and guidelines to all staff regarding all areas of first aid and medicines
- ensure the safe use and storage of medicines in the school
- ensure the safe administration of medicines in the school
- ensure good first aid cover is available in the school and on educational visits (see our separate 'First Aid Policy').

### **3. Staff Training**

- As a school, we accept that all employees have rights in terms of supporting pupils with medical needs, in relation to: choosing whether or not become involved in administering medication, in receiving appropriate training, having concerns about legal liability and in bringing any concerns they have about supporting pupils with medical needs to the senior leadership of the school.
- Two members of staff have accessed online training: Amy Burlison and Jess Rimmington (Admin Officers). This training took place in 2021 and covered all of the guidelines around administering medication.
- Staff, including supply staff, will be informed of any pupil's medical needs where relevant. All staff, pupils and parents/carers will be informed of the designated staff for managing

medication. The designated staff are: Amy Burlison and Jessica Rimmington.

#### **4. Responsibilities of Parents/Carers**

It is the responsibility of parents/carers to:

- Ensure their child is fit enough to attend school, and to encourage attendance unless their child is not fit enough to attend.
- Inform the school of their child's medical needs
- Administer the medication at home where possible, if only 3 times or less per day. If over 3 times, or if times are specified by GP, medication will be administered at school.
- Ensure that medications have not passed the expiry date.
- Collect and dispose of any medications held in school at the end of each term
- Provide any medication in a container with a prescribed clear label with:
  - the child's name
  - name of medication
  - dose and frequency of medication
  - any special storage requirements

**Pupil Information.** At the start of each year parents/carers must give the following information to school:

- Details of child's medical needs
- Medication, including any side effects
- Allergies
- Name of GP/other medical professionals involved in long term medical needs
- Special requirements e.g. dietary needs, activity precautions
- Emergency contact information
- Cultural and religious views regarding medical care.

#### **5. Rights of Pupils**

Pupils have the right to be involved in discussions about how and where medication is administered, but cannot over-rule a doctor's decision to prescribe that medication. All pupils have the right to:

- Be treated with respect and dignity,
- Expect privacy when their medical needs are being dealt with in school,
- Expect staff to note any concerns they might have, and pass those on to the right person,
- Expect staff to deal with their medication regimes professionally and accurately.

Older Pupils have a right to:

- Be involved in setting up their own care plans with staff, parents and other appropriate personnel,
- Express their preference as to how much information other people are given about their medical needs,
- State their views about the appropriateness of their medical regime, and be given opportunities to discuss any concerns they might have with appropriate medical personnel

#### **6. Refusing medication**

- If a child refuses to take their medication no member of staff will put undue pressure on the child to take it. The parent/carer will be notified as soon as possible.
- Refusal to take medication will be recorded and dated on the child's record of medication form, along with the reason for refusal and any action taken.

#### **7. Administering Medication**

- School will not accept medicines that are not in their original container with the prescription details clearly printed on the label by the pharmacist. Only a small minority of pupils should need to access medication during the day. Where this happens, GPs and other medical officers can be asked to consider issuing split prescriptions that will enable pharmacists to dispense

medication to be taken in school separately from that to be taken at home. This avoids the problem of medication being decanted into alternative containers without the doctor's specific directions being available.

- No medication will be administered in school without prior written permission, including written medical authority if the medication needs to be altered (e.g. tablets crushed).
- If medication is to be administered in school a request to administer medication form must be completed (see attached).
- All medication will normally be given during natural breaks in the school day e.g. playtimes or lunchtime unless other arrangements have been made and outlined on the form.
- Pupils will be told where their medication is kept and who will administer it.
- The member of staff administering the medication should check on each occasion
  - Name of pupil
  - Written instructions provided by the parent/carer – which must be backed-up by instructions from GP (e.g. on label of pack or bottle).
  - Prescribed dose
  - Expiry date.
- Written permission from parents/carers will be required for pupils to self-administer medication and the appropriate form completed (request to self-administer medication form).
- No medication will be given in foods, milk or other drinks from home. Medication that requires water as part of the solution will need to be brought to school in the original packaging with all administered instructions to enable the staff to make the medication up correctly.

#### **8. Carrying and storage of medication**

- For safety reasons pupils and staff are not allowed to carry medication. All pupils' medication must be handed by an adult to the main reception desk on entry to school. All medication will be kept locked in the school office or first aid room in Foundation Stage, in a fridge if necessary and logged in the school's file. Staff medication must also be kept in a locked cupboard away from the reach of children.
- An exception to this is with regards to inhalers and epipens. These will be stored in a safe place in the class room for ease of access by an adult. They will also be clearly labelled with child's name for use in an emergency. The child will also be informed where these are kept.

#### **9. Records**

Each time medication is given the member of staff will complete and sign a record sheet which is kept with medication (inhalers/epipens) or in the school office. These sheets contain the following information:

- Name of pupil
- Date and time of administration
- Person supervising the administration
- Name of medication
- Dosage
- A note of any side effects (if any)
- If medication has been altered for administration (e.g. tablets crushed) and authority for doing so.

#### **10. Advice & Guidance for Staff administering medication**

- Training and advice will be accessed from health professions for staff involved in the administration of medication. Training for all staff will be accessed, as and when appropriate, on a range of medical needs, e.g. epilepsy, diabetes etc.
- The Headteacher and Governors will also ensure that staff are comfortable with the role, and that there is a system in place for regular dialogue between the Identified Person(s) and the senior management team to ensure that any difficulties, concerns or problems are properly identified and addressed.
- Staff employed by the LA are fully indemnified against claims for alleged negligence providing

that they are acting within the remit of their employment.

### **11. Health Care Plans**

- Pupils who access medication on a regular basis in school, those who are on short term but complex regimes, and those who might not need medication regularly but who have other medical needs should all have a care plan.
- When necessary a personal health care plan will be drawn up in consultation with school, health professionals and the parents/carers. The health care plan will outline the child's needs and the level of support in school. This must be reviewed at least once a year or if any needs / staff change. Appropriate advice may also be taken from the Local Authority's Health and Safety Officer.
- The care plan sets out:
  - The details of the pupil's identify
  - Their particular medical condition
  - The key facts about the impact of that medical condition on the pupil
  - The medication regime (where appropriate)
  - Additional information (e.g. the behaviour management strategies for a pupil with ADHD)
  - Key contact people (including parents, doctors, social workers etc.)
  - Emergency procedures
  - Any other information essential to safeguard the welfare of the pupil.
- When a pupil who accesses medication or who has other medical needs goes off-site, e.g. on a school trip, a copy of the care plan will be held by a supervising member of staff on the trip. This will help to ensure that accurate information is available for medics and others in the event of an emergency.
- Staff should be aware that it is never appropriate to take a care plan that has been devised for one pupil and assume that the same arrangements will be appropriate for another. All care plans need to be individually tailored to meet the needs of the pupil in question.

### **12. Intimate or invasive treatment**

- Such treatment will only take place in exceptional circumstances, at the discretion of the Headteacher and Chair of Governors and with written permission from the parents/carers.
- Two adults, one of the same gender as the child must be present for the administration of such treatment. The case will be reviewed on an annual basis and records kept as above.

### **13. Educational visits**

- A risk assessment is completed prior to each visit to ensure the safety of all pupils and staff.
- Parents /carers of children with medical needs will be consulted prior to the visit and consent gained for a member of staff to administer medication whilst off site.
- Any necessary medication (e.g. inhalers, allergy medication etc.) will be taken on trips and held safely by the adult in charge.

### **14. Residential visits**

- As with educational visits, a risk assessment will be completed prior to the residential visit to ensure the safety of all pupils and staff.
- Parents /carers of children with medical needs will be consulted prior to the visit and consent gained for a member of staff to administer medication whilst off site.
- Sufficient medication and appropriate health care plans will be taken and controlled by the member of staff in charge of the visit.
- If additional supervision is required for activities e.g. swimming, school may request the assistance of the parent/carer.

### **15. Emergency procedures (See also First aid policy)**

- All staff working with a vulnerable pupil should know what action to take in the event of an

emergency.

- A member of staff should always accompany a child to hospital and remain there until the parent/carer arrives.
- If a child is subject to a care plan, a copy of this will also be sent.
- Staff should never take a child to hospital in their own car, unless this is the only safe course of action or advised to do so by the emergency services. In all other circumstances, the ambulance service should be used. If this is the only course of action, ideally, the vehicle should be covered by an appropriate motor insurance policy but this should be checked by each school for themselves. The DCSF information 'Insurance: A guide for schools' (DfES 2003) should be consulted.

#### **16. The transport of medication**

- Sometimes it is necessary to transport medication for a pupil, e.g. on an educational visit. Parents/carers should bring the medication to school and complete all consent forms necessary for the medication to be administered on an educational or residential visit or to another setting as part of transition plans.
- The medication should be packaged securely and held by an adult on route.
- In the case of an educational visit, medication will be stored securely by the adult leading the visit.
- In the case of a transition visit to another setting, the medication should be handed to an appropriate adult along with recording registers. The medication is then recorded in the register in the normal way.

#### **17. Monitoring**

- We will regularly undertake an audit of what medications are in school and check expiry dates, check when supplies are running low etc. Parents/carers will be alerted to this so that pupil welfare is safeguarded.
- Care plans will be checked at least termly to ensure that they reflect the pupil's current needs and to ensure that up to date medical advice is followed. For pupils with Education and Health Care Plans, a review of the care plan will take place at each annual review meeting.
- An annual risk assessment will be undertaken in school to ensure that the potential for harm to any adult or child from medicines, syringes, or other equipment is reduced to an absolute minimum.

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Policy last reviewed & updated: February 2025

Next scheduled Review: February 2026 (unless DfE guidelines or legislation changes)