



# Administration of Medicines Policy

| Version | Date       | Author(s) | Changes   |
|---------|------------|-----------|---|
| 3       | March 2023 | S Corry   | Add epi pens to medication that may be carried by the student whilst on a residential trip.<br>Introduction – voluntary role in bold.<br>Removal of antibiotics from non-prescription medicine. |
| 4       | March 2025 | S Corry   | No Changes  |
| 5       | March 2026 | S Corry   | No Changes  |

## Policy information:

|                              |                |
|------------------------------|----------------|
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| <b>Ratified by:</b>          | Head Teacher   |
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| <b>Type of policy:</b>       | non-statutory  |
| <b>Target audience</b>       | Parents/Staff  |

**All staff and volunteers working in our school share a responsibility for promoting and safeguarding the welfare of the children with whom they come into contact.**

## **PURPOSE**

This policy sets out the circumstances in which we may administer medicines within school, and the procedures that we will follow. We hold the needs of our pupils as paramount to this policy.

## CONTENTS

1. Introduction
  2. The Role of Parents/Carers
  3. Prescription Medication
  4. Long Term Medical Needs
  5. Controlled Drugs
  6. Non Prescription Medication
  7. Administering Medicines
  8. Emergency Inhalers
  9. Self Management
  10. Refusing medication
  11. Offsite visits
  12. Disposal of Medicines
- Appendix 1 - Administration of Medication Permission and Record  
Appendix 2 - Administration of Medication Continuation Sheet  
Appendix 3 – Example Consent Form for Residential Visit  
Appendix 4 – Consent form: Use of Emergency Salbutamol Inhaler

## Introduction

Most pupils will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other pupils have medical conditions that, if not properly managed, could limit their access to education. Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. The Dasset Primary School is committed to ensuring that children with medical needs have the same right of access as other children.

**There is no legal duty that requires schools and staff to administer medication, this is a voluntary role. The ‘duty of care’ extends to administering medication in exceptional circumstances, and therefore it is for schools to decide their local policy for the administration of medication.**

## The Role of Parents/Carers

Parents/carers should, wherever possible, administer or supervise the self-administration of medication to their children. This may be by spacing the doses so that they are not required within school hours, or by the parent/carer coming in to school at lunchtime to administer the medication. However, this might not be practicable and in such a case parents/carer may make a request for medication to be administered to the child at school.

If medicine needs to be administered during school time, then a parent or carer must bring it to the school office and fill in the Administration of Medication Permission and Record form (Appendix 1). Medication must not be given to the class teacher, or brought into school by

the child themselves. If medication is for a short term condition, any remaining medication must be collected from the office by a parent or carer at the end of the school day.

### **Prescription Medication**

Prescription medicines should be administered at home wherever possible, for example medicines that need to be taken 3 times a day can usually be taken before school, after school and at bed time. Parents are encouraged to ask the GP to whether this is possible. Prescription medicines will only be administered by the school where it would be detrimental to a child's health if it were not done.

Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The exception to this is insulin which must still be in date, but will generally be available to school inside an insulin pen or a pump, rather than in its original container. Schools should never accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.

#### **In all cases it is necessary to check:**

- **Name of child**
- **Name of medicine**
- **Dosage**
- **Written instructions provided by prescriber**
- **Expiry date**

An Administration of Medicine Permission & Record form (Appendix 1) must be completed and signed by the parent / carer. No medication will be given without the parent's written consent.

Prescribed medication, other than emergency medication, will be kept in the Headteacher's office, either in the cupboard or the refrigerator as appropriate. All emergency medicines (asthma inhalers, epi-pens etc.) should be kept in the child's classroom and be readily available. A second Epi-pen for each child who requires one will be kept in the Headteacher's office, in a box clearly labelled with the child's name and photograph.

### **Long Term Medical Needs**

It is important for the school to have sufficient information regarding the medical condition of any pupil with long term medical needs. The school will draw up a health care plan for such pupils, involving the parents and the relevant health professionals. Refer to the "Supporting Pupils at School with Medical Conditions Policy" for more information.

Appropriate training will be arranged for the administration of any specialist medication ( e.g. adrenaline via an epipen, Buccal midazolam, insulin etc.) Staff should not administer such medicines until they have been trained to do so.

### **Controlled Drugs**

Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act. Therefore it is imperative that controlled drugs are strictly managed between the school and parents. Ideally controlled drugs are only brought in on a daily basis by parents, but certainly no more than a week's supply and the amount of medication handed over to the school should always be recorded.

Controlled drugs should be stored in a **locked non portable container**, such as a safe, and only specific named staff allowed access to it. Each time the drug is administered it must be recorded, including if the child refused to take it. If pupils refuse to take medication, school staff should not force them to do so. The school should inform the child's parents as a matter of urgency. If necessary, the school should call the emergency services. The person administering the controlled drug should monitor that the drug has been taken. Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

As with all medicines any unused medication should be recorded as being returned back to the parent when no longer required. If this is not possible it should be returned to the dispensing pharmacist. It should not be thrown away.

### **Non Prescription Medication**

Where possible, the school will avoid administering non-prescription medicine. However, we may do so, if it will facilitate the child attending school and continuing their learning. This will usually be for a short period only. This may include applying a lotion or administering paracetamol for toothache or other pain. However, such medicines will only be administered in school where it would be detrimental to a child's health if it were not administered during the day. School will recommend that, if possible, parents attend school to administer the medication during the school day.

A child under 16 should never be given aspirin-containing medicine, unless prescribed by a doctor.

If non-prescription medication is to be administered, then the parent/carer must complete an Administration of Medicine Consent form (Appendix 1), and the same procedure will be followed as for prescription medication. The medicine must be provided in its original container, with dosage information on it. The parent's instructions will be checked against the dosage information, and this will not be exceeded.

### **Administering Medicines**

Medicines will only be administered by members of staff who have been trained in the safe administration of medicines or by a first-aider. The headteacher may administer vital, prescription medicines as agreed with Parents. Appropriate training will be arranged for the

administration of any specialist medication (e.g. adrenaline via an epipen, Buccal midazolam, insulin etc.) Staff should not administer such medicines until they have been trained to do so. The SENDCo will maintain a record of staff trained in specialist medication for children with Health Care Plans.

When a member of staff administers medicine, they will check the child's Administration of Medication Permission and Record form against the medication, to ensure that the dose and timing are correct. They will then administer the medicine as required, and record this on the form. For long-term medication, an Administration of Medication Continuation Sheet (Appendix 2) will be used as necessary.

### **Emergency Inhalers**

In line with "Guidance on the use of emergency salbutamol inhalers in schools" March 2015, the school will keep emergency reliever (blue) inhalers for the emergency use of children whose own inhaler is not available for any reason. They will be stored in the Headteacher's office, along with appropriate spacers. Parents must sign a "Consent form: use of emergency salbutamol inhaler" (Appendix 4) to consent to their child being allowed to use the emergency inhaler. These will be kept in the Asthma file in the Headteacher's office.

### **Self Management**

It is important that as children get older they should be encouraged to take responsibility and manage their own medication. This should be clearly set out in the child's health care plan in agreement with the parents, bearing in mind the safety of other pupils.

Staff should be aware of the need for asthmatics to carry medication with them (or for staff to take appropriate action). Children should know where their medicines are stored.

### **Refusing medication**

If a child refuses to take medication staff should not force them to do so, but note this in the records and inform parents of the refusal. If the refusal leads to a medical emergency, the school will call the emergency services and inform the parents.

### **Offsite visits**

It is good practice for schools to encourage pupils with medical needs to participate in offsite visits. All staff supervising visits should be aware of any medical needs and relevant emergency procedures. Where necessary, individual risk assessments will be completed. A member of staff who is trained to administer any specific medication will accompany the pupil and ensure that the appropriate medication is taken on the visit. Inhalers must be taken for all children who suffer from asthma.

**Travel Sickness** - Tablets can be given with written consent from a parent but the child's name, dosage, time of dose and any possible side effects (the child must have had the travel sickness preventative at home before the trip in case of side effects) should be clearly marked on the container, which must be the original packaging. Parents will need to complete an Administration of Medication Permission and Record form.

**Residential visits** – All medicines which a child needs to take should be handed to the teacher in charge of the visit. The only exception are asthma inhalers, which should be kept by the child themselves. The parents will sign a consent form for any medicines which they need to take during the visit, plus consent of emergency treatment to be administered – see example form in Appendix 3. A child who has emergency medication needs ( such as an Epi pen) must have this with them at all times. An adult, from school or from the site visited, must be trained to help administer this.

All off site visits will be planned carefully so that medicines can be administered when necessary. Permissions will be sought from parents in the same way as they are during the normal school day. The coordinator of the visit will ensure that the medicines are stored carefully and away from other children. Children will carry their own medicines (inhalers) when it is deemed necessary and in agreement with parents.

### **Disposal of Medicines**

The responsible teacher will check all medicines kept in school each term to ensure that they have not exceeded their expiry date. Parents/carers will be notified of any that need to be replaced. Parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the disposal of needles. If any child requires regular injections (eg. Insulin), they will have their own sharps box which can be taken offsite with them on trips etc. The parents will be notified when the box is almost full so that they can bring in a new box and take the full box for disposal. While in school, this box will be kept in the headteacher's office.