



PEAK SCHOOL



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Safe Administration of Medication Policy

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Policy Owner: Mr Dave Jones (Deputy Headteacher)

Ratified: Local Governing Body January 2024



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1. Safe Administration of Medication Statement

It is the policy of Esteem Multi-academy Trust that we will administer medication in situations where medicines are required. This applies to both prescription and non-prescription medicines where taking these are essential during school time to allow a pupil to attend school.

It should however, be noted that where a pupil is not well enough to attend school they should not do so and not be sent in with medication.

The school understand that administering medicines is a purely voluntary activity with the exception of staff where this is written into their job description and they will not force, pressure or expect staff to undertake this activity.

The school will only accept medication that is in their original container and accompanied by a fully completed parental consent form. It is a parent/carers responsibly to supply the medicines in date and to collect and dispose of any unused medicines.

2. Roles and responsibilities

2.1 The Governing Board

- To review this policy periodically to ensure it is still relevant and up to date
- To support the Headteacher and staff in delivering this policy and to make any necessary resources available to enable them to do so
- To ensure that the key elements relating to parents/carers responsibilities are published and communicated to parents/carers in a suitable manner e.g. schools prospectus, schools website, newsletters
- To ensure suitable facilities for the administration of medicines are provided

2.2 The Headteacher

- To be responsible for the day-to-day implementation of this policy in school
- To ensure any staff who volunteer to administer medicines are trained to the correct competence levels for the task they are undertaking. If this is a clinical task, then the Headteacher should take advice from the healthcare service that delegates the duty to staff and are fully familiar with their responsibilities that are required



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- To ensure staff volunteering to administer medicines receive suitable training from suitable healthcare services, where necessary, and that this is kept up to date in line with healthcare recommendations
- To monitor the administration of medicines and the recording of this are in line with this policy
- To report to the Governing Body any issues that arise out of the implementation of this policy
- To ensure the policy is applied equitably and fully throughout the school
- To ensure any disputes regarding the application of this policy are resolved
- To ensure where staff support is required medicines are only administered where permission on the appropriate form has been obtained

2.3 Staff volunteering to administer Medication

- To ensure they are competent (and where necessary trained) and confident to undertake the administration of the medicine
- To fully check before administering any medication that it is the correct medication for the correct pupil and is being administered in line with the instructions on the label and the parental consent form
- To record all medicines administered on the correct recording form
- To immediately bring to the attention of the Headteacher and school nurse any mistakes made in the administration of any medicine
- To ensure any training undertaken is refreshed as necessary
- To ensure confidence (knowledge of) the immediate line management structure

3. Arrangements for administering medication

3.1 Receipt of medication

No medicines (prescribed or non-prescription) will be allowed into school unless accompanied by a fully completed consent form completed by a parent or guardian. An example template is located at Appendix 1.

The form and the medicines should be brought to the Medical Room and handed over to the school nurse.

Medicines will only be accepted with the following

- in their original container with the original dispensing label clearly stating as a minimum the name of the young person
- the name of the dispensing pharmacy
- date of dispensing
- name of medicine, amount of medicine dispensed and strength, the dose and how often to take it and if necessary, any cautions or warning messages
- Non-prescription medicines should be in their original bottle/containers clearly labelled with the young person's name

Ideally, only enough medicines for the day are to be supplied as this will avoid confusion or the chance of too much medicine being given. However, where a pupil is on a long term course of



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medication the school will by arrangement with parent/guardian, agree to store sufficient medicine on the understanding that these will be in date for the duration agreed, supplied as per the previous statement and parent/guardian accept they are responsible for collecting and disposing of any excess medicines or medicines which are out of date.

The staff receiving medicines will ensure that they check the information on the prescription label matches the information on the parental consent form. As prescription labels may have vague directions for administration such as “as directed” or “as before”, unless there are clear directions on the parental consent form the medicine will be rejected and won’t be stored or administered in the school until there are clear directions.

Any medicines not provided in the original containers, appropriately labelled and with a fully completed parental consent form will not be administered. If the school decide not to administer the medicine the parent/carer will be informed immediately so they can make alternative arrangements for the medicine to be administered.

Where possible all medicines should be administered at home, if medicine is prescribed three times a day then parents/carers should ensure that this is given outside of school hours.

3.2 Record keeping

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their child has been unwell at school.

Staff and parents/guardian should check and agree the quantity of medicine provided and this should be recorded on the Medicines Administration Record (MAR) sheet or suitable online system (Appendix 2) and signed by both the staff member and parent/guardian. Schools may have other methods of recording the medicines they receive but recorded evidence is required.

The school will ensure parents are made aware of the above requirements at the start of each year and are reminded of them periodically via the school messaging service.

The school will on receipt of the medication and completed parental consent form, ensure a suitable medication administration record (MAR) or online recording form is completed for the pupil and medication. Two staff will be involved in recording to ensure the information transposed onto the form or system is correct and complete.

3.3 Storage of medication

All medicines should be stored on a consistent and designated room; this is the medical room. Medicines will be stored as follows: -

- Medicines which are not “rescue medicines required immediately in an emergency” such as antibiotics, pain relief etc., will be store in a locked cupboard in the designated medical room.
- Medicines requiring refrigeration will be stored in a labelled container within a fridge only accessible to staff in the designated medical store. Where this is a long-term medication the fridge will be regularly defrosted, cleaned and the temperatures will be checked and recorded daily.



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- Emergency or rescue medication is that which is required immediately in an emergency situation such as asthma inhalers, adrenalin pens specific epilepsy medication. These need to be readily available to pupils as and when they are required.
- Where pupils are not deemed to have sufficient capacity to store and administer their own rescue medication, the school will ensure that it is stored so that it is readily accessible in an emergency but is only available for the child it has been prescribed for. In this school that will be in a secure but not locked cupboard in the pupils classroom. Where appropriate, it may be necessary for rescue medication to follow the pupil around school or outside school.
- Suitable arrangements will be in place to ensure these emergency medications are readily available during break/lunch times and other activities away from the classroom such as: - PE, Swimming, Offsite activities etc.

ALL MEDICATIONS WILL BE STORED IN THEIR ORIGINAL LABELED/NAMED CONTAINERS IRRESPECTIVE OF WHERE THEY ARE STORED.

4. Storage and Administration of Controlled Drugs

There are certain legislative requirements concerning controlled drugs. As such there is a separate section (see appendix 3) of this policy which will be followed should any medication designated as a controlled drug be required in school.

4.1 Administration of Medicines

There are 3 levels of administration of medicines in schools:

- The child self-administers their own medicine of which the school/ service is aware
- The child self-administers the medication under supervision
- A named and trained consenting staff member administers the medicine

Administering medications is a purely voluntary activity (unless specified as part of a staff member's job description). Therefore, participation in the administration of medication is on a voluntary basis and staff cannot be compelled to administer medicines unless they have accepted job descriptions that include duties in relation to the administration of medicines. The school will encourage staff to be involved where necessary in administering medication to ensure pupils access to education is not disrupted however:

- Individual decisions on involvement will be respected.
- Punitive action will not be taken against those who choose not to consent

All staff who administer medications will receive sufficient information, instruction and where necessary training to undertake this task. Training from a health professional will always be required for invasive procedures requiring a specialised technique. Examples include (but are not limited to) diabetes, epilepsy, gastronomy and rectal medication.



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Medication will only be given by the School Nurse or following the administration levels outlined below.

Level 1 – Pupils who can draw up and administer their own medication

Level 2 – Trained staff draw up and administer oral medications

Level 3 – Trained and signed off gastro/rescue/rectal medication

Where a child has complex health needs and an individual treatment plan and requires specific or rescue medication the staff administering the medication will have detailed knowledge of the individual treatment plan which is included in their Individual Health Care Plan and will have received suitable training from health professionals to undertake the administration of the medicine. This training will be refreshed annually or as required should there be any significant changes to the medicine or administration procedure.

For all administration of medicines, the following procedures will be adopted:

1. Two staff members will be involved in the process to ensure that the correct dose of the correct medicine is given to the correct child and once the medicine has been administered both will sign or acknowledge on the recording sheet or system. (for example on the Medicines Administration Record (MAR) sheet or on an online system for the recording of medication)

2. Before the medicine is given each time, staff will ensure they have checked the following

Right Person	Is this the right person for this medicine?
Right Medicine	Is it the correct medicine? Do the label instructions match up with the instructions on the written consent? Is the name the same?
Right Dose	Dose the label state the same as the instructions? Remember to check not just the amount e.g. 5ml or 10ml but also the correct concentration e.g. 125mg/5ml
Right Time	Are you sure it is 12 midday that this medicine should be given? Where can you check?
Right Route	Are you sure that the way you are about to give the child this medication is the right way? You are not going to put ear drops in their eye?
Right Date	Ensure the medication has not expired. Always check on the label for instructions that may relate to this e.g. Do not use after 7 days. Always check the documentation that is has not already been given



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3. Medication will only be given to 1 pupil at a time and the recording sheet or system will be completed before any medication is given to the next pupil.
4. Only the medication for that pupil will be taken out of the storage and this will be returned to storage before starting the process for the next pupil

IF THERE IS ANY DOUBT WHETHER THE MEDICATION SHOULD BE GIVEN FOR ANY REASON THEN THE MEDICATION WILL NOT BE GIVEN. FURTHER ADVICE SHOULD THEN BE SOUGHT FROM HEALTH PROFESSIONALS AND / OR PARENTS AND THIS SHOULD BE RECORDED AND REPORTED TO THEIR LINE MANAGER.

5. If a pupil refuses to take their medication or it is suspected that they have not taken a full dose staff will record this on the recording sheet or system and immediately seek advice from health professionals and/or parents/carers. This should also be reported to their line manager. **They should not attempt to give another dose or try and force the pupils to take another dose.**

4.2 Changes to Medication

The school will not change the dose of a prescribed medication without written authorisation from a health professional.

5. Non-prescription drugs

The school will accept non-prescription medications

Non-prescription medicines must be supplied by parents/carers in their original containers labelled with the pupil's name. They must be in date for the duration that they are required for and must be accompanied by the fully completed parental consent form. Parents must also on a daily basis inform school of what dose has been given to the pupil that day to avoid accidental overdosing.

Schools who give non-prescription medicines in line with these guidelines should inform parents/guardian of any dose given in writing.

6. Complex Health Needs

Pupils with complex health needs will have an Individual Health Care Plan. This will specify exactly how and when medicines should be administered and what clinical health training is required. The school will follow the guidance and comply with the codes of practice. A list of these specific codes of practice is contained at Appendix 4

6.1 Specialist Training

Many of the conditions indicated in the previous section require that staff undertake specific training to be able to administer the medication in line with the pupil's individual care plan.

School should ensure that they follow the advice given by healthcare professionals for frequency of refresher training and who to report incidents to if they should arise.

7. Medicine Incident Management



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7.1 Definition and process

A medicine incident is any incident or error associated with the use of medicines regardless of whether any harm occurred or was possible. Such incidents may be related to any of the steps of the medicines use process. This includes prescribing, preparation, dispensing, administration and monitoring of the medicine and the transfer of associated information. Medicine incidents include the delay in administration of a “critical medicine”.

These incidents should be reported according to the Esteem MAT Incident Management Protocol and where appropriate a joint incident investigation should take place with the appropriate healthcare service who have delegated the activity to the school or have provided training to staff who administer medication.

The child’s parent(s) or guardian must be informed of any medicine incident relating to the child.

8. Complaints Procedure

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the Esteem MAT complaints procedure.

Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted. In the case of academies, it will be relevant to consider whether the academy has breached the terms of its Funding Agreement (the contractual relationship between the academy and the Department for Education) or failed to comply with any other legal obligation placed on it. Ultimately, parents (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

9. Additional Information

9.1 School trips, visits and sporting events

Medication required during a school trip is held by a trained member of staff or the parent/carer should they be present, either of whom can carry and administer the medication as necessary.

Medication provided by the parent must be accompanied with written directions for its use. All responsible persons should have access to this information prior to the visit to enable sound judgements should a medical emergency arise. Team leaders should be comfortable with the administration of parental instructions when agreeing to accept young people as participants on a visit.

9.2 Home to School Transport

The large majority of our children use Home to School Transport i.e., Taxis and Community Transport provided by the Local Authority. It is their responsibility to ensure that our children are safe during this time. Drivers and Escorts know what to do in the case of an emergency and will supervise any requirements during the journey. Children are not to carry their own medication it must be given to the transport escort. Escorts receive a basic level of First Aid during their Passenger Assistance Training, steps to be taken to support the normal care of the pupil as well as the appropriate responses to emergency situations.



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1. Appendix 1

(TEMPLATE) Parental Consent for School to Administer Medicine

The School will not give your child medicine unless you complete and sign this form, and has a policy that staff can administer medicine, and staff consent to do this.

Note: Medicines must be in the original container as dispensed by the pharmacy

Name of School

Date

Childs name

Date of birth

Group/Class/Form

Medical condition or illness

Medicine

Name/type of medicine/strength
(as described on the container)

Date dispensed

Expiry date

Agreed review date to be initiated by
(name of member of staff) (LONG TERM
MEDICATION ONLY)

Dosage and method

Timing – when to be given

Special precautions

Any other instructions

Number of tablets/quantity to be given to
School/Setting



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Are there any side effects that the School/Setting needs to know about?

Self administration

Yes / No (*delete as appropriate*)

Procedures to take in an emergency

Contact Details – First Contact

Name

Daytime telephone number

Relationship to child

Address

I understand that I must deliver the medicine personally to (agreed member of staff)

Contact Details – Second Contact

Name

Daytime telephone number

Relationship to child

Address

I understand that I must deliver the medicine personally to (agreed member of staff)

Name and phone number of G.P.

The above information is, to be the best of my knowledge, accurate at the time of writing and I give consent to School/Setting staff administering medicine in accordance with the Stanton Vale School policy. I will inform the School immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

I accept that this is a service that the School is not obliged to undertake.



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I understand that I must notify the School of any changes in writing

Date _____ Signature(s) _____

Parent's signature _____

Print name _____

Date _____

If more than one medicine is to be given a separate form should be completed for each one.

For School Use Only

Checked by	Date	Signature	Print Name

To be reviewed annually or if dose changes (LONG TERM MEDICATION ONLY)



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2. Appendix 2



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4. Appendix 4 - List of related information and codes of practice

1. Allergy/Anaphylaxis

2. [Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder \(ADD/ADHD\) in school and other settings](#)
3. [Asthma](#)
4. [The asthma attack – What to do](#)
5. [Children with Diabetes needing insulin](#)
6. [Epilepsy - Treatment of Prolonged Seizures](#)
7. [Controlled Drugs](#)
8. [Safe handling and storage of medical gas cylinders](#)
9. [First Aid](#)



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5. Appendix 5

(TEMPLATE) Refrigeration Temperature Check List .

Fridge Location: (secure location)

Month:

Year: 202.....

Date	Max Temp C	Min Temp C	Action taken if outside range 2-8° C	Checked by: (initials)	Thermometer check (☑)

Please record, when the fridge was cleaned / fridge/freezer defrosted:

Review: Has the fridge temperature been checked every day? Yes No

Has any necessary action been taken? Yes No

If YES, what was the action?

If No, what are the reasons?

Reviewed by:

Date:

If the fridge temperature is outside of the stated range (+2°C and +8°C) then assess the integrity of the stock in the fridge seeking manufacturers advice, where appropriate. If stock is likely to have been compromised the child's parents should be informed.