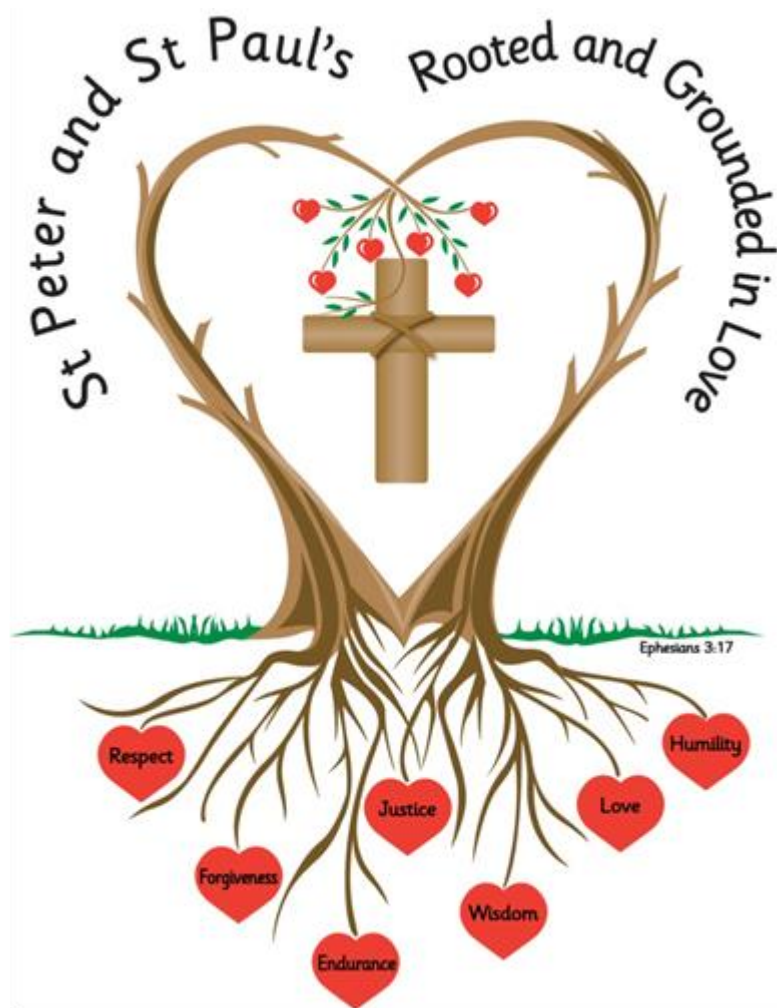




Administration of Medicines Policy

Rooted and grounded in the love of God, St. Peter & St. Paul's Church of England Primary School is a vibrant, inclusive community, where every person is empowered to reach their full potential. Guided by our Christian values and the teachings of Jesus, together, we aim to grow into good citizens of heaven and earth. We strive to cultivate a nurturing environment that inspires everyone to develop a lifelong love of learning, grow in character, and make a positive impact on the world around us, working together to be a good neighbour to all.

1. Introduction

Parents have the prime responsibility for ensuring a child's health and for deciding whether they are fit to attend school. Parents should also provide all necessary information about their child's medical needs to the school.

2. DfE April 2014 – Supporting Pupils at School with Medical Conditions,

Key points are:

- Pupils at school with medical conditions should be properly supported so that they can have full access to education, including school trips and physical education.
- Governing Bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Governing Bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

3. This policy covers the following areas:

- Procedures for managing medicines that need to be taken during the school day.
- Procedures for managing medicines on trips and outings.
- Roles and responsibilities of staff managing and supervising the administration of medication.
- Responsibilities of parents in respect of their child's medical needs.
- The need for prior written agreement from parents before medicines can be administered.
- The circumstances in which non-prescription medicines can be administered.
- Record keeping.
- Handing over of medication and safe storage.
- Asthma Management in school.

This policy may be superseded by a child's EHC plan or Individual Care Plan, or may be used in conjunction with them.

4. Staff Duties

School teachers have no legal obligation to administer medicines to pupils nor supervise them while they take medicine, unless contracted to do so. Staff may volunteer to assist in the administration of medicines but must be given appropriate training and guidance. As a school, all class teachers and support staff have the authority to administer medicine although we have a specific named staff member for the purpose of the administration of medicines; Miss E Bury and Mrs E Bassett are the designated medicine administrators.

As a school, we have a duty to plan how administering medicines can be accommodated in school and on educational visits to allow children who have medical needs to attend.

5. Process for the Administration of Medicines in School – short term medical needs

Medicines should normally be administered at home and only taken into school when absolutely necessary e.g. where it would be detrimental to the child's health, or would greatly impact on a child's school attendance, if the medicine were not taken during the school day.

The school will only accept:

- Medicines prescribed by a medical practitioner
- Medicines that are in date
- Medicines that need to be administered in excess of 3 times per day
- Medicines in their original container, as dispensed by a pharmacist
- Containers with labelling identifying the child by name and with original instructions for administration, dosage and storage
- Other medication (such as Calpol) may be administered for occasional illness but will not usually be kept in school as a precaution for a child becoming ill unless there is a good reason for this.
- Medicine such as Piriton which may be required to be on hand for a minor allergic reaction which the child is prone to.
- School have purchased Calpol (or another alternative) for emergency use where parental consent is gained before administration.

The school will not usually accept or administer:

- Medicines that are to be administered 3 times per day (unless the child is attending after school club and will not return home immediately after 3:20pm, or attending a residential visit) as the medicine can be administered before/after school and before bedtime.

Medication must be handed over and collected by a parent or adult guardian to/from a member of school staff. This will then be handed over to Miss Bury /Mrs Bassett in the school office to be stored securely away. Under no circumstances are children to have access to any medication brought into school without an adult being present.

The parent/adult guardian must sign a form disclosing all details and giving permission for the medication to be administered by a named person (usually Miss Bury or Mrs Bassett), or a staff member in the case of educational visits).

School Administrator has responsibility for receiving medication directly from parents or a member of staff / logging /storing / administering / checking parental consent for medicines. In the event she is not available this duty falls to the headteacher/SLT

The medicine must be kept in a locked cupboard (except where storage in a fridge is required) and only accessed by named adults, or with the permission of the headteacher/SLT.

When administering, the named adult must complete a record showing the date and time and details/dosage of the medication.

Under no circumstances should a parent send a child to school with any medicines, eg throat sweets/tablets, without informing the school. These could cause a hazard to the child or to another child if found and swallowed. If these are required in school these must be given to the class teacher to ensure that they are taken at appropriate times of the day.

Parents are welcome to come into school to administer medicines themselves that the school refuse to administer, for reasons given above.

6. Process for the Administration of Medicines in School – long term medical needs

Where a child has long-term medical needs, a care plan must be written with the assistance of the school nurse and in the presence of the parent/guardian of the named child. This may also result in an individual risk assessment also being required. The care plan must be followed and reviewed at least annually.

It is the parent's responsibility to inform the school of any changes to the child's condition that may require the details of the care plan to be altered.

The headteacher must ensure that named staff are trained to administer or give the level of care required by the details of the care plan.

As a school, we try to ensure that we have sufficient information about the medical condition of any child with long-term medical needs and will request meetings with parents and recognised medical practitioners regularly to provide the correct level of training. Training should be specific to the individual child concerned.

There will also be regular training for all staff on more generalised needs e.g. asthma awareness and epi-pen training, diabetes and epilepsy.

The school is well supported by the school nurse who provides staff with advice and any relevant training on request.

7. Process for the Administration of Medicines during residential visits – all medical needs.

For the purpose of residential visits, there will be a named person with responsibility for the administration of medicines and care of children as above. Parents will be asked to complete a form and may be required to meet with the named staff to ensure that staff are aware of all medical requirements.

In the case of higher levels of care eg intimate care, the named member of staff will also meet with the school nurse, or other recognised medical advisor to ensure that they are trained in dealing with the level of care required.

8. Process for the administration of Asthma Inhalers in school.

Asthma inhalers should be brought into school with a care plan from the doctor, given at the time of prescribing.

Parent/Guardian will complete a blue form giving information regarding permission and dosage.

Inhalers should be in their original box with child's name on and where possible a spacer is provided.

- School to check date on inhalers and record on sheet.

Inhalers to be kept in the classroom in a safe visible place and always be available.

- Inhalers to be sent home at the end of each academic year (summer holidays.)

It is the parent's responsibility to inform school of any changes to the child's condition.

9. Complaints procedure.

Should parents 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 school's complaints procedure.

Policy Reviewed: September 2026