

# **Riverstone Academy**

# **Administering Medicines**

# **Policy**

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Signed: K Bowe

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## Statement of intent

Riverstone Academy will ensure that pupils with medical conditions receive appropriate care and support at school, for them to have full access to Academy and remain healthy. This includes the safe storage and administration of pupils' medication.

The school is committed to ensuring that parents feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

For the purposes of this policy, "**medication**" is defined as any prescribed or over the counter medicine, including devices such as asthma inhalers and adrenaline auto-injectors (AAs). "**Prescription medication**" is defined as any drug or device prescribed by a doctor. "**Controlled drug**" is defined as a drug around which there are strict legal controls due to the risk of dependence or addiction, e.g., morphine.

### 1. Legal Framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Equality Act 2010
- Children and Families Act 2014
- DfE 'Supporting pupils at school with medical conditions' (used by Riverstone Academy as relevant good-practice guidance)
- DfE/DHSC 'Guidance on the use of adrenaline auto-injectors in schools'

This policy operates in conjunction with the following school policies:

- First Aid Policy
- Complaints Procedures Policy
- Supporting Pupils with Medical Conditions Policy
- Allergy safety Policy
- Educational Visits Policy
- Records Management Policy

### 2. Roles and Responsibilities

The Directors are responsible for:

- The implementation of this policy and procedures.
- Ensuring that this policy, as written, does not discriminate on any grounds, including the protected characteristics as defined by the Equality Act 2010.
- Ensuring the correct level of insurance is in place for the administration of medication.
- Ensuring that members of staff who administer medication to pupils, or help pupils self-administer, are suitably trained and have access to information needed.
- Ensuring that relevant health and social care professionals are consulted to guarantee that pupils taking medication are properly supported.
- Managing any complaints or concerns regarding this policy, the support provided to pupils, or the administration of medication in line with the school's Complaints Procedures Policy.

- Receiving appropriate assurance that medication systems are safe and effective, including oversight of significant medication errors, adverse incidents, training and competency, and actions arising from audits or reviews.

The Headteacher is responsible for:

- The day-to-day implementation and management of this policy and relevant procedures.
- Ensuring that appropriate training is undertaken by staff members administering medication.
- Ensuring that staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system.
- Organising another appropriately trained individual to take over the role of administering medication in case of staff absence.
- Ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.

All staff are responsible for:

- Adhering to this policy and supporting pupils to do so.
- Carrying out their duties that arise from this policy fairly and consistently.

Parents are responsible for:

- Keeping the school informed about any changes to their child's health.
- Completing an administering medication parental consent form prior to them or their child bringing any medication into school. It should be noted that this will form part of the admissions paperwork unless new medication is issued during the duration of the pupil's time at the school.
- Discussing medication with their child prior to requesting that a staff member administer the medication.

It is both staff members' and pupils' responsibility to understand what action to take during a medical emergency, such as raising the alarm with members of staff. This may include staff administering medication to the pupil/s involved.

### **3. Training staff**

The Headteacher will ensure that enough staff are suitably trained in administering medication. All staff will undergo basic training on the administering of medication to ensure that, if exceptional circumstances arise where there is no designated administrator of medication available, pupils can still receive their medication from a trained member of staff. The Headteacher will also ensure that enough staff have been trained in administering medication in an emergency by a healthcare professional.

Where it is a necessary or vital component of their job role, staff will undertake training on administering medication in line with this policy as part of their new starter induction.

Staff will be advised not to agree to take on the responsibility of administering medication until they have received appropriate training and can make an informed choice. The school will ensure that, as part of their training, staff members are informed that they cannot be required to administer medication to pupils, and that this is entirely voluntary, unless the supporting of pupils with medical conditions is central to their role within the school, e.g., the school nurse.

Training will also cover the appropriate procedures and courses of action regarding the following exceptional situations:

- The timing of the medication's administration is crucial to the health of the child.
- Some technical or medical knowledge is required to administer the medication.
- Intimate contact with the pupil is necessary.

Staff who administer medication must act in accordance with their training, the pupil's individual healthcare plan where applicable, the medication instructions and school procedures. Staff will only undertake tasks for which they have received appropriate training and feel competent to carry out. Where a specialist clinical procedure is required, competence will be confirmed by an appropriate healthcare professional where necessary.

### **Training for administering AAls**

The school will arrange specialist training for staff on a termly basis where a pupil in the school has been diagnosed as being at risk of anaphylaxis. Designated staff members with suitable training and confidence in their ability to use AAls will be appointed to administer this medication. As part of their training, all staff members will be made aware of:

- How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
- Where to find AAls in case of an emergency.
- How the dosage correlates with the age of the pupil.
- How to respond appropriately to a request for help from another member of staff.
- How to recognise when emergency action is necessary.
- Who the designated staff members for administering AAls are.
- How to administer an AAI safely and effectively if there is a delay in response from the designated staff members.
- How to make appropriate records of allergic reactions.

There will be enough staff who are trained in and consent to administering AAls on site at all times.

## **4. Receiving, storing, and disposing of medication**

### **Receiving prescribed medication from parents**

The parents of pupils who need medication administered at school will be sent an administering medication parental consent form to complete and sign; the signed consent form will be returned to the school and appropriately filed before staff can administer medication to pupils under the age of 16. A signed copy of the parental consent form will be kept with, or be readily accessible alongside, the pupil's medication. Consent arrangements will be reviewed at least annually and whenever the medication, dosage, frequency or administration arrangements change.

The school will administer prescribed medicines and approved non-prescription medicines in accordance with the Supporting Pupils with Medical Conditions Policy, written parental consent procedures in accordance with healthcare plans and statutory guidance.

The school will store a reasonable quantity of medication, e.g., a maximum of four weeks' supply at any one time. Aspirin will not be administered unless the school has evidence that it has been prescribed by a doctor.

Parents will be advised to keep medication provided to the school in the original packaging, complete with instructions, as far as possible, particularly for liquid medications where transfer from the original bottle would result in the loss of some of the medication on the inside of the bottle. This does not apply to insulin, which can be stored in an insulin pen.

### **Storing pupils' medication**

The school will ensure that all medications are kept appropriately, according to the product instructions, and are securely stored. Medication that may be required in emergency circumstances, e.g., asthma inhalers and AAls, will be stored in a way that allows it to be readily accessible to pupils who may need it and can self-administer, and staff members who will need to administer them in emergency situations. All other medication will be stored in a place inaccessible to pupils, e.g., a locked cupboard.

Controlled drugs will be stored securely in a non-portable container or cupboard with access restricted to authorised staff, while remaining accessible when needed. A record will be maintained of controlled drugs received, held, administered and returned or disposed of, including the quantity remaining where appropriate.

The school will ensure that pupils know where their medication is at all times and are able to access them immediately, e.g., by ensuring that the identities of any key holders to the storage facilities are known by these pupils.

Medication stored in the school will be:

- Kept in the original container alongside the instructions for use.
- Clearly labelled with:
  - The pupil's name.
  - The name of the medication.
  - The correct dosage.
  - The frequency of administration.
  - Any likely side effects.
  - The expiry date.
- Stored alongside the accompanying administering medication parental consent form.

Medication that does not meet the above criteria will not be administered.

### **Disposing of pupils' medication**

The school will not store surplus or out-of-date medication. Where medication and/or its containers need to be returned to the pupils' doctor or pharmacist, parents will be asked to collect these for this purpose.

Needles and other sharps will be disposed of safely and securely, e.g., using a sharps disposal box.

## **5. Administering medication**

Medication will only be administered at school if it would be detrimental to the pupil's health or attendance not to do so. Controlled drugs will only be administered by staff who have received appropriate training and are competent to do so, in accordance with the prescriber's instructions and the pupil's individual healthcare plan where applicable. Staff will check the expiry date and maximum dosage of the medication each time it is administered, as well as when the previous dose was taken.

Medication will be administered in a private, comfortable environment and as far as possible, in the same room as the medication is stored; this will normally be the school office. The room will be equipped with the following provisions (or the following provisions will be made in another room):

- Arrangements for increased privacy where intimate contact is necessary.
- Facilities to enable staff members to wash their hands before and after administering medication, and to clean any equipment before and after use if necessary.
- Available PPE for use where necessary.

Before administering medication, the responsible member of staff should check:

- The pupil's identity.
- That the school possesses written consent from a parent.
- That the medication name, dosage and instructions for use match the details on the consent form.
- That the name on the medication label is the name of the pupil being given the medication.
- That the medication to be given is within its expiry date.
- That the pupil has not already been given the medication within the accepted frequency of dosage.

If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.

If a pupil cannot receive medication in the method supplied, e.g., a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.

Where appropriate, pupils will be encouraged to self-administer under the supervision of a staff member, provided that parental consent for this has been obtained. If a pupil refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their IHPs, and parents will be informed so that alternative options can be considered.

Where a pupil has SEND or communication difficulties, staff will ensure that information about medication and procedures is communicated in a way the pupil can understand. This may include visual supports, symbols, communication aids, social stories or other appropriate methods. Staff will take account of the pupil's EHC plan, sensory profile, cognition, communication needs and individual healthcare plan.

Any unexpected side effect or adverse reaction will be treated appropriately, recorded and reported to the pupil's parent or carer and, where necessary, advice will be sought from a healthcare professional or the emergency services.

Written records will be kept of all medication administered to pupils. Records will include, as appropriate, the pupil's name, medicine, dose, date, time, route of administration, the member of staff administering or supervising, any refusal or omission, and any adverse reaction or other relevant observation. Records will be stored in accordance with the Records Management Policy.

#### Medication errors and near misses

Any medication error or near miss, including an incorrect dose, missed dose, administration to the wrong pupil or administration at the wrong time, will be acted upon immediately. The member of staff will seek appropriate medical advice where necessary, inform the headteacher and the pupil's parent or carer, and record the incident. Emergency services will be contacted where there is an immediate risk to the pupil. The incident will be reviewed to identify learning and any changes required to procedures, training or risk controls.

### **Allergy and Anaphylaxis**

Riverstone Academy recognises the potentially life-threatening nature of severe allergic reactions and anaphylaxis. The school will have regard to the Department for Education's 'Allergy Safety in Schools' guidance (2026) and will adopt its principles as good practice, including staff awareness, appropriate individual healthcare planning, ready access to emergency medication, and learning from allergic incidents and near misses. Allergy and anaphylaxis arrangements will also be implemented in accordance with the school's Allergen and Anaphylaxis Policy.

Pupils with known severe allergies will have an appropriate Individual Healthcare Plan and/or allergy action plan. Relevant staff will receive appropriate allergy and anaphylaxis awareness training, including recognising the signs of anaphylaxis and the emergency administration of adrenaline auto-injectors (AAIs).

Emergency medication will be readily accessible, appropriately stored and regularly checked to ensure that it remains in date.

Allergic incidents and near misses will be recorded and reviewed so that lessons are identified and appropriate actions are taken to reduce the risk of recurrence.

## **6. Medical devices**

### **Asthma inhalers**

The school will allow pupils who are able to carry and self-administer their own inhalers to do so where this is appropriate and agreed with parents and healthcare professionals. Pupils' own inhalers and any spare

inhalers supplied for them will be kept safe and readily accessible. Where the school holds an emergency salbutamol inhaler, it will be obtained, stored, administered and recorded in accordance with current national guidance and the school's Asthma Policy.

## **AAls**

The school will allow pupils who can carry their own AAls to do so, provided that parental consent for this has been obtained. The school will ensure that spare AAls for pupils are kept safe and secure in preparation for the event that the original is misplaced, unavailable or not working.

Where the school chooses to hold spare adrenaline auto-injectors (AAls) for emergency use, these will be obtained, stored, checked, administered and replenished in accordance with current guidance and the school's Allergen and Anaphylaxis Policy. Their location will be determined through risk assessment so that they can be accessed quickly in an emergency.

Use of any school-held spare AAI will follow the authorisation and consent arrangements required by current guidance and the school's Allergen and Anaphylaxis Policy. Relevant information will be recorded in the pupil's IHP and/or allergy action plan where applicable.

Pupils' and spare AAls will be obtained, stored and administered in line with the school's Allergen and Anaphylaxis Policy.

## **7. IHPs**

For pupils with chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the pupil, their parent, the Headteacher, the SEND lead and any relevant medical professionals. When deciding what information should be recorded on an IHP, the following will be considered:

- The medical condition and its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, such as medication, including the correct dosage and possible side effects, medical equipment, and dietary requirements.
- The pupil's communication needs, sensory needs, cognition and any reasonable adjustments required to support safe administration and understanding.
- The specific support needed for the pupil's educational, social and emotional needs.
- The level of support needed and whether the pupil will be able to take responsibility for their own health needs.
- The type of provision and training that is required, including whether staff can be expected to fulfil the support necessary as part of their role.
- Which staff members need to be aware of the pupil's condition.
- Arrangements for receiving parental consent to administer medication.
- Separate arrangements which may be required for out-of-school trips and external activities.
- Which staff member can fulfil the role of being a designated, entrusted individual to whom confidentiality issues are raised.
- What to do in an emergency, including whom to contact and contingency arrangements.
- What is defined as an emergency, including the signs and symptoms that staff members should look out for.

The Directors will ensure that IHPs are reviewed at least annually. IHPs will be routinely monitored throughout the year by a designated staff member.

## **8. School trips and visits**

In the event of educational trips and visits which involve leaving the school premises, medication and medical devices will continue to be readily available to staff and pupils. This may include pupils carrying their medication themselves, where possible and appropriate, e.g., for asthma inhalers.

If the medication is of a type that should not be carried by pupils, e.g., capsules, or if pupils are very young or have complex needs that mean they cannot self-administer, the medication will be carried by a designated staff member for the duration of the trip or activity.

There will be at least one staff member who is trained to administer medication on every out-of-school trip or visit which pupils with medical conditions will attend. Staff members will ensure that they are aware of any pupils who will need medication administered during the trip or visit, and will ensure that they know the correct procedure, e.g., timing and dosage, for administering their medication.

If the out-of-school trip or visit is over an extended period of time, e.g. an overnight stay, a record will be kept of the frequency at which pupils need to take their medication, and any other information that may be relevant. This record will be kept by a designated trained staff member who is present on the trip and can manage the administration of medication.

All staff members, volunteers and other adults present on out-of-school trips and visits will be made aware of the actions to take in a medical emergency related to the specific medical needs and conditions of the pupil, e.g., what to do if an epileptic pupil has a seizure.

9. Medical emergencies

Medical emergencies will be handled in line with the First Aid Policy.

Emergency medication will be readily accessible to appropriately authorised staff and, where appropriate, to the pupil who requires it. Arrangements will balance prompt access with safe storage. Staff will know where emergency medication is kept and how to access it without delay. Instructions and the pupil’s emergency arrangements will be readily available.

10. Monitoring and review

This policy will be reviewed annually by the Directors and Headteacher, and sooner where there is a significant medication incident, a material change in provision, or relevant guidance or legislation changes.

Records of medication administered on the school premises, or on school trips and visits, will be monitored. Medication errors, near misses, adverse reactions, training and competency, and any recurring themes will be reviewed and used to improve school procedures. Significant issues and actions will be reported to the Directors as part of their oversight arrangements.

Staff members trained in administering medication will routinely recommend any improvements to the procedure. The school will also seek advice from any relevant healthcare professionals as deemed necessary. Any changes made to this policy will be communicated to the relevant stakeholders, including pupils whose medication is stored at school and their parents.

Administering medication parental consent form

Riverstone Academy will not give your child medication unless you complete and sign this form.

|                                                              |  |
|--------------------------------------------------------------|--|
| Name of pupil                                                |  |
| Date of birth                                                |  |
| Form group                                                   |  |
| Medical condition or illness                                 |  |
| Prescribed medication                                        |  |
| Name and/or type of medication as described on the container |  |

|                                              |     |    |
|----------------------------------------------|-----|----|
| Date dispensed                               |     |    |
| Expiry date                                  |     |    |
| Agreed review date                           |     |    |
| Review to be initiated by                    |     |    |
| Dosage, timing, and method of administration |     |    |
| Special precautions                          |     |    |
| Likely side effects                          |     |    |
| Self-administration                          | Yes | No |
| Additional details                           |     |    |