



**PONTEFRACT**  
ACADEMIES TRUST

# Administering Medication Policy



**Summary:**

To ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy.

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## 1. Aims

Pontefract Academies Trust aims to ensure that all children, staff and parents/carers understand how we will support children with medical conditions and require medication to be administered during the school day.

## 2. Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty to make arrangements for supporting children at their school with medical conditions. It is also based on the Department for Education's statutory guidance on supporting children with medical conditions at school.

## 3. Roles and responsibilities

### The SPRB

The Trust Board has ultimate responsibility to make arrangements to support children with medical conditions. The Trust Board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

### The Headteacher

The Headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support children in this way
- Contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nursing team
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

### Parents and carers

Parents and carers will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

## Health care professionals – Including School Nursing

The SENCO will ensure that the school nursing service, or other relevant health professionals, will submit notification to the school when a child has been identified as having a medical condition that will require support in school. This will be before the child starts school, wherever possible. They may also support staff to implement a child's IHP.

## 4. Legal framework

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

- Section 100 of the Children and Families Act 2014. [Children and Families Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk)
- DfE (2015) 'Supporting pupils at school with medical conditions.' [Supporting pupils with medical conditions at school - GOV.UK \(www.gov.uk\)](https://www.gov.uk)
- DfE (2017) 'Using emergency adrenaline auto-injectors in schools.' [Using emergency adrenaline auto-injectors in schools - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

## 5. Related policies

- Health and Safety Policy
- Allergies and Anaphylaxis Policy
- Safeguarding and Child Protection Policy
- Special Educational Needs Policy
- Intimate Care Policy

## 6. Training of staff

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.

The Headteacher will ensure that a sufficient number of staff are suitably trained in administering medication, including how to administer Adrenaline auto-injectors (AAI) and the management of anaphylaxis.

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 school.

Training will cover the appropriate procedures and courses of action with regard to the following exceptional situations which would be completed as part of a Health Care Plan:

- 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 members will be made aware that if they administer medication to a pupil, they take on a legal responsibility to do so correctly; hence, staff members will be encouraged not to administer medication in the above situations if they do not feel comfortable and confident in doing so, even if they have received training.

## 7. Receiving and storing medication

The parents/carers of pupils who need medication administered at school will be sent a medication administration 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 the pupil's medication, and no medication will be administered if the consent form is not present. This is reviewed annually.

The school will not, under any circumstances, administer aspirin unless there is evidence that it has been prescribed by a doctor.

The school will allow prescribed medication, and only a maximum of 10 days supply, to be stored in the school (unless emergency medication such as Epi Pens / Inhalers).

The school will allow over the counter medication such as pain and fever relief can be administered, however written permission from parents/carers must be obtained beforehand and state the duration.

The school will ensure that all medications, with the exception of those outlined, are kept appropriately, according to the product instructions, and are securely stored in a place inaccessible - locked cupboards.

Medication will be stored according to the following stipulations:

- In the original container alongside the instructions - *This does not apply to insulin, which can be stored in an insulin pen.*
- Clearly labelled with the name of the pupils and the name and correct dosage of the drug.
- Clearly labelled with the frequency of administration, any likely side effects and the expiry date.
- Alongside the parental consent form.

Medication that does not meet criteria will not be administered.

Medication that may be required in emergency circumstances, e.g. asthma inhalers and EpiPen's, will not be kept in locked cupboards. Such medication will be stored in such a way that they are readily accessible to pupils who may need them and can self-administer, and staff members who will need to administer them in emergency situations.

The school will allow pupils who are capable of carrying their own inhalers to do so, provided parental consent has been obtained.

The school will ensure that spare inhalers for pupils are kept safe and secure in preparation for the event that the original is misplaced.

The school will ensure that spare AAIs are stored as part of an emergency anaphylaxis kit. The headteacher is responsible for overseeing the protocol for the use of spare AAIs, its monitoring and implementation.

The school will not store surplus or out-of-date medication, and parents will be asked to collect containers for delivery back to the chemist.

Needles and sharp objects will always be disposed of in a safe manner, e.g. the use of 'sharp boxes'.

## **8. Administering medication**

Medication will only be administered at school if it would be detrimental to the pupil not to do so. Staff will check the expiry date of each medication being administered to the pupil each time it is administered.

Prior to administering medication, staff members will check the maximum dosage and when the previous dose was taken.

Only suitably qualified members of staff will administer a controlled drug.

Medication will be administered in a private and comfortable environment and, as far as possible, in the same room as the medication is stored.

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, strength and dose instructions match the details on the consent form.
- That the name on the medication label is the name of the pupil who is being given the medication.
- That the medication to be given is within its expiry date.
- That the child has not already been given the medication within the accepted timeframe.

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/carer or 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 pupils' parent/carer, following advice from a healthcare professional.

Where appropriate, pupils will be encouraged to take their own medication 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 IHP's and parents will be informed so that alternative options can be considered.

A spare AAI can be administered as a substitute for a pupils own prescribed AAI, if this cannot be administered correctly without delay. Spare AAIs are only accessible to pupils for whom medical authorisation and written parental consent has been provided as part of a pupils' IHP.

The school will not be held responsible for any side effects that occur when medication is taken correctly.

Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible.

Such records are stored in accordance with the records management section of the Trust Information Policy.

The school will arrange specialist training for staff on a regular basis, in line with individual care plans, including training for the administration of AAls.

## **9. Over the counter medication**

Written permission for any over the counter medication such as pain and fever relief can be administered, however written permission from parents/carers must be obtained beforehand and state the duration. The same recording procedures must be followed for prescribed medication.

Over the counter medication must only be given when asked to do so by a parent and if there is an accepted health reason to do so.

Pupils under 16 should never be given medicines containing aspirin unless a doctor has prescribed the medicine for the child.

## **10. Out of school activities and trips**

In the event of a school trip or activity which involves leaving the school premises, medication and devices such as insulin pens and asthma inhalers, will be readily available to staff and pupils.

If possible and appropriate, pupils will carry certain medications themselves, e.g. asthma inhalers.

If the medication is not one that should be carried by pupils, e.g. capsules, or if pupils are very young or have complex needs that mean they need assistance with taking the medication, the medication will be carried by a designated staff member for the duration of the trip or activity.

There will be at least two staff members who are trained to administer medication on every out-of-school trip or activity which pupils with medical conditions will attend.

Staff members will ensure that they are aware of any pupil who will need medication administered during the trip or activity and will make certain that they are aware of the correct timings that medication will need to be administered.

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

All staff members, volunteer and other adults present on out-of-school trips or activities will be made aware what should be done in the case of a medical emergency with regard to the specific medical needs and conditions of the pupil e.g. what to do if an epileptic pupil has a seizure.

## **11. Individual healthcare plans (IHPs)**

For chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the pupil, their parents, a designated member of staff at the school, SENCO and any relevant medical professionals.



When deciding what information should be recorded on an IHP, the following information will consider the following:

- The medical condition, as well as its triggers, signs, symptoms and treatments;
- The pupil's resulting needs, such as medication, including the correct dosage and possible side effects, equipment and dietary requirements;
- The specific support needed for the pupils educational, social and emotional needs;
- The level of support that is 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 named first aider in the school or SENCO will ensure that IHP's are reviewed at least annually.

## **12. Medical emergencies**

Medical emergencies will be handled in line with the health and safety policy. The school will ensure that emergency medication is always readily accessible and never locked away, whilst remaining secure and out of reach of other pupils.

The Headteacher will ensure that there is a sufficient number of staff who have been trained in administering emergency medication by an appropriate healthcare professional.

For all emergency and lifesaving medication that is to be kept in the possession of a pupil e.g. EpiPens or prescribed AAI's, the school will ensure that pupils are told to keep the appropriate instructions with the medication at all times, and a spare copy of these instructions will be kept by the school.

## **13. Notification of a medical condition procedure**

For pupils that are new to starting school, arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort should be made to ensure that arrangements are put in place within two weeks.

Schools do not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place.

#### **14. Monitoring and review**

This policy will be reviewed annually by the Director(s) of School Improvement and/or Director of Safeguarding & Inclusion, the Audit & Risk Committee and the Trust Board.

Records of medication which have been administered on school grounds will be monitored.

Staff members who are trained to administer medication will routinely recommend any improvements to the procedure.

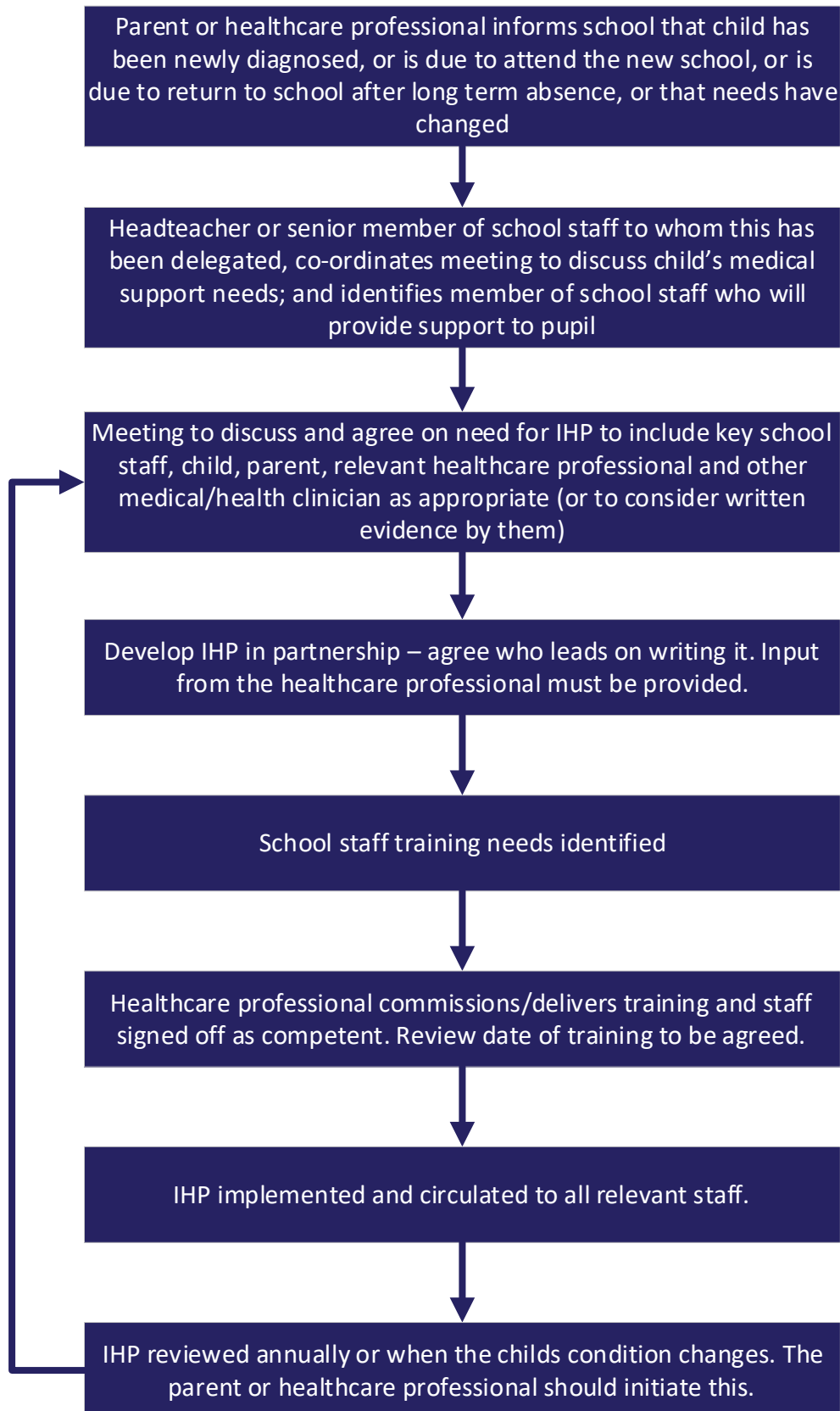
The school will seek advice from any relevant healthcare professionals as deemed necessary.

**Appendix A – Medicine Administration Form**

<b>Medicine Administration Form – Pontefract Academies Trust</b>	
<b>The school will not give your child medicine unless you complete and sign this form.</b>	
Pupil name:	
Date of birth:	
Group/class/form:	
Medical condition/illness:	
Medicine/s required:	
Name/type of medication as described on the container:	
Date medication dispensed:	
Expiry date of medication:	
Agreed review date:	
Review to be initiated by:	
Dosage, method and timings:	
Special precautions:	
Are there any side effects the school need to be aware of?:	
Can the pupil self-administer?	

<b>Signing this form is consent to allow school to administer the medication detailed above.</b>	
Parent/carer name:	
Parent/carer signature:	
Date:	
Staff name:	
Staff signature:	
Date:	

## Appendix B - Model process for developing Individual Healthcare Plans (IHP's)



## Appendix C - Individual Healthcare Plan Template

Individual Healthcare Plan		
Pupil name:		<b>PHOTO</b>
Address:		
Date of birth:		
Class/Form:		
Details of medical condition:		
Date plan drawn up:		
Review date:		

Contact Information	
<b>Family contact one</b>	
Name:	
Relationship to pupil:	
Address:	
Work number:	
Home number:	
Mobile number:	
<b>Family contact two</b>	
Name:	
Relationship to pupil:	
Address:	
Work number:	
Home number:	
Mobile number:	
<b>GP</b>	
Name:	
Address:	
Phone number:	
<b>Clinic/hospital contact</b>	
Name:	
Phone number:	

**Describe the medical condition and give details of the pupils individual symptoms:**

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**Describe daily care requirements, e.g. before sport or at lunchtime:**

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**Describe what constitutes an emergency for the pupil, and the action to be taken if an emergency occurs:**

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**Follow up care:**

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**Who is responsible in an emergency (state if different for off-site activities):**

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<b>Signatures</b>	<b>Dated</b>
Parent:	
Pupil (if appropriate):	
Headteacher:	
SENCo:	
Health Professional (if appropriate):	

### Appendix D - Parental agreement to administer non-prescription medication

I agree to the school administering the following non-prescription medications, which may be reasonably required to be administered to my child for health reasons from time to time.

No.	Medication name	Reason required
1.		
2.		
3.		
4.		
5.		

I confirm that my child has not suffered an adverse reaction to the above-mentioned medications in the past.

The above information is, to the best of my knowledge, accurate at the time of writing, and I give consent to the school staff administering medicine in accordance with the school's policy. I will inform that school immediately, in writing, of there is any change:

<b>Childs name:</b>	
<b>Year/form/group</b>	
<b>Parents name:</b>	
<b>Parents signature:</b>	
<b>Date of agreement:</b>	