

Invested Education

Administering Medicines Policy

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Next review: September 2027

Signed: C Fleming-Smith

Head Teacher

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Statement of intent

Invested Education will ensure that pupils with medical conditions receive appropriate care and support at school, for them to have full access to education 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
- The Education (Independent School Standards) Regulations 2014, particularly Part 3 and Part 5
- DfE (2026) 'Independent School Standards Guidance'
- DfE (2026) 'Keeping Children Safe in Education'
- DfE 'Supporting pupils with medical conditions at school' – used as relevant good-practice guidance
- DfE guidance on emergency adrenaline auto-injectors in schools – used as relevant good-practice guidance

This policy operates in conjunction with the following school policies:

- Supporting Pupils with Medical Conditions Policy
 - First Aid Policy
 - Records Management Policy
 - Allergy Safety Policy
 - Complaints Procedures Policy
- Where concerns about a pupil's medication, medical presentation or parental arrangements give rise to a safeguarding concern, staff will follow the Child Protection and Safeguarding Policy and inform the DSL without delay.

2. Roles and Responsibilities

The Proprietor, acting through the Directors, is 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.

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.
- Discussing medication with their child prior to requesting that a staff member administers the medication.

Staff and pupils will be made aware of the action to take during a medical emergency, including how to summon a designated trained member of staff or emergency assistance. This may include trained staff administering emergency medication in accordance with this policy, the First Aid Policy and the pupil's individual healthcare arrangements.

3. Training staff

The headteacher will ensure that enough staff are suitably trained and competent to administer or supervise medication. All staff will receive sufficient awareness training to understand the school's medication procedures, how to summon assistance and what to do in an emergency. Staff who administer or supervise medication will receive role-specific training appropriate to the medication, device and pupil needs involved.

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.

No member of staff will be asked to administer medication without appropriate information, training and competence. Where medication support forms part of an employee's agreed duties, the school will ensure that those duties are clearly defined and that appropriate training, supervision and support are provided.

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 follow their training, the pupil's documented instructions and this policy. Staff should not administer medication where they are not competent or where the required information is unclear; advice must be sought from the headteacher, parent/carer or an appropriate healthcare professional as necessary.

Training for administering AAls

Where a pupil is at risk of anaphylaxis, relevant staff will receive appropriate AAI awareness and practical training at induction, refreshed periodically and whenever pupil need, guidance, medication/device or staff competence requires it. 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, staff 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.
- The correct device and dose for each pupil, in accordance with medical authorisation, labelling and the pupil's IHP or emergency plan.
- 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

Parents/carers of pupils who need routine medication administered at school will complete and sign an administering medication parental consent form. The signed consent will be returned to the school and appropriately filed before routine medication is administered. Consent and medication information will be reviewed at least annually and whenever arrangements change. Routine medication will not be administered without the required written consent and authorisation. This does not prevent staff from taking appropriate emergency action in accordance with the First Aid Policy, a pupil's IHP, emergency medication arrangements or instructions from emergency healthcare professionals.

The school will only store and administer prescribed medication unless another arrangement has been specifically authorised under school procedures. The school will normally hold only a reasonable quantity of medication required for the pupil's anticipated school needs, taking account of expiry dates, storage requirements and parental arrangements. 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.

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 where this is necessary to support the pupil's health and access to education. Controlled drugs will only be administered by appropriately trained and competent staff. Staff will check the expiry date and maximum dosage of the medication being administered each time, as well as when the previous dose was taken.

Controlled drugs will be stored securely in accordance with applicable legal requirements while remaining readily accessible where clinically necessary. Administration, stock and disposal will be accurately recorded. Any discrepancy will be reported immediately to the headteacher and investigated; a second check or witness will be used where required by the pupil's healthcare plan or local procedure.

Medication will be administered in an appropriate, private and comfortable environment, normally the medical room or another suitable area. The area will have access to the following provisions as required:

- 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.

The method of administration will not be altered, for example by crushing tablets or opening capsules, unless this is supported by appropriate healthcare or pharmacy advice and documented accordingly.

Where appropriate, pupils will be encouraged to self-administer, with supervision where required, provided that appropriate consent and healthcare arrangements are in place. Decisions about self-administration will consider the pupil's understanding, competence, communication needs, impulsivity, risk of misuse and ability to recognise when medication is required. Medication will never be forced. Refusal will be recorded, parents/carers informed where appropriate, and the pupil's IHP followed. Where refusal creates an immediate risk to life or serious health, emergency medical advice will be sought without delay.

Known side effects and relevant precautions will be recorded where appropriate and staff will monitor pupils in accordance with the medication instructions, IHP and training provided. Any unexpected or serious reaction will be treated as a medical emergency where necessary.

Written records will be kept of medication administered to pupils, including the medication name, dose, date and time, the name of the staff member responsible, and any refusal, omission, reaction or other relevant information. Controlled-drug records will include stock information where required. Records will be stored in accordance with the Records Management Policy.

Any medication error or near miss, including a wrong medication, wrong dose, duplicate dose, missed dose or administration to the wrong pupil, will be reported immediately to the headteacher or designated senior member of staff. Medical advice will be sought promptly where necessary, parents/carers will be informed, the incident will be recorded, and safeguarding or health-and-safety procedures followed where appropriate. The incident will be reviewed to reduce the risk of recurrence.

6. Medical devices

Asthma inhalers

The school will allow pupils who can carry their own inhalers to do so, provided that parental consent for this 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, unavailable or not working.

AAIs

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

Where the school lawfully holds spare AAIs, these will be obtained, stored, replenished and used in accordance with applicable legislation, current DfE guidance and the school's Allergy Safety Policy. Risk assessments regarding the use and storage of AAIs on the premises will be kept up to date.

Medical authorisation and parental consent will be obtained from all pupils believed to be at risk of anaphylaxis for the use of spare AAIs in emergency situations. The spare AAIs will not be used on pupils who are not at risk of anaphylaxis or where there is no parental consent. Where consent and authorisation has been obtained, this will be recorded in the pupil's IHP.

Pupils' and any lawfully held spare AAIs will be obtained, stored and administered in line with the school's Allergy Safety 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 SENCO 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 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 Proprietor, acting through the Directors, will ensure that IHPs are reviewed at least annually and sooner following a significant medical incident, a change in medication or dosage, a change in the pupil's condition, a relevant hospital admission, or where existing arrangements are shown not to be effective. IHPs will be routinely monitored throughout the year by a designated staff member.

8. Education 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.

No pupil will be prevented from participating in an educational visit solely because they require medication or medical support, unless the risk cannot be reduced to an acceptable level after reasonable adjustments and appropriate planning.

9. Medical emergencies

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

Emergency medication will be immediately accessible to trained staff and, where appropriate, the pupil, while being stored in a manner that appropriately manages any foreseeable risk of misuse or unauthorised access. Where emergency medication is carried by a pupil, the pupil will be supported to keep any required instructions with it. A spare copy of relevant instructions will be held by the school in an appropriate secure location.

10. Monitoring and review

This policy will be reviewed annually by the Proprietor, acting through the Directors, and the headteacher.

Records of medication administered on the school premises, or on school trips and visits, will be monitored, and the information recorded will be used to improve school procedures.

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

Invested Education requires this form to be completed and signed before routine medication is administered at school. Emergency action will not be delayed where immediate treatment is required in accordance with the pupil's healthcare plan, emergency procedures or professional medical advice.

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		
Reason medication is required during school hours		
Emergency instructions / action required		
Prescriber / pharmacy details (where relevant)		
Parent/carer name, signature and date		
School acceptance / staff signature and date		