



# Springfield Primary School



## School Policy

### Administration of Medicine

Updated: January 2026

Date for review: January 2028



## Springfield Primary School Administration of Medicines Policy

In accordance with "Supporting Pupils at School with Medical Conditions" DfE September 2014

### Introduction

Springfield Primary School is an inclusive community that welcomes and supports pupils with medical conditions but medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

Most children will at some time have short-term medical needs, while other children may have longer term medical needs and may require medicines on a long-term basis to keep them well. Other children may require medicines in particular circumstances, such as children with severe allergies.

The school is covered by Essex County Council's Public Liability Insurance, only for administering medication as agreed in this policy.

### Prescribed Medicines

Staff are allowed to administer medicines prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include prescriber's instructions for administration, dosage and storage.

We are unable to accept medicines that have been taken out of their original container or make changes to dosages on parental instructions.

### Non-Prescribed Medicines

Following advice from the BMA in March 2022, school staff are able to administer medicines that have not been prescribed by a doctor or medical professional. These may be given in school for a short period of time. Parents are required to provide the medication and complete the request form before any medication can be given to a child. These medications may include Calpol, hay fever medication or similar and should only be given after first checking maximum dosages and when the previous dose was taken.

In an emergency, one off situation, named school staff are able to administer Calpol to a child but only after telephone permission has been sought from a parent or carer.

Medications containing aspirin should never be given to a child unless prescribed by a doctor or medical practitioner.

Children in all years can manage, in class, their own asthma medication only, on completion of relevant form by parents. All other medication as agreed in this policy to be administered in the office.

Storage of Medicines: All medicines should be delivered to the school office by the parent or carer. In no circumstances should medicines be left in a child's possession. Teachers and teaching assistants should not take receipt of any medicines.

All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines will normally be kept in the school office or fridge and should not be kept in classrooms with the exception of asthma pumps.

All medicines must be clearly labelled with the name of the child; the name and dose of the medicine and the frequency of administration. All emergency medicines, such as asthma inhalers and adrenaline pens,



should be readily available to children and kept the medical bag in the classroom. The medical bags are checked on a half termly basis by the named staff.

Medication should always be provided by parents in an original container with the pharmacist's original label and the following, clearly shown:-

- Child's name, date of birth
- Name and strength of medication
- Dose
- Any additional requirements e.g. in relation to food, timing etc
- Expiry date whenever possible
- Dispensing date
- Storage instructions where relevant

**Controlled drugs:** which have been prescribed for a pupil are securely stored in a non-portable, locked container and only named staff have access. A record should be kept of any doses used and the amount of the controlled drug held in school. As above, the school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include prescriber's instructions for administration, dosage and storage.

School staff may administer a controlled drug to the child for whom it has been prescribed

**Disposal of Medicines:** Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. They should collect medicines at the end of the agreed administration time period.

**Trips and Outings:** Children with medical needs are given the same opportunities as other children. Staff will need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This may include carrying out a risk assessment for such children. Arrangements for taking any medicines on trips must be made. A copy of any health care plans should be taken on visits.

**Emergency Procedure:** in the event of an emergency the school will contact the Emergency Services (999) and contact parents/carers.

Emergency procedures are recorded on each child's individual health care plan.

## **Roles and Responsibilities**

### **The Governing Body must:**

- make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed, implemented and reviewed
- ensure sufficient staff receive and complete appropriate training to administer medication

### **Parent/Carers must:**

- provide the school with the correct dosage of all medication including tablets broken if prescribed
- give sufficient information to the school about their child's medical needs if treatment or special care is required
- be involved in the development and review of their child's individual health care plan, if required
- deliver all medicines to the school office in person
- complete and sign the parental agreement form/s
- keep staff informed of changes to prescribed medicines immediately
- ensure medication is in date and replace when required



- inform the school of changes to the use of asthma inhalers after checks with the asthma nurse or doctor

**The headteacher (who is also the Designated Safeguarding Lead) must:**

- ensure that the school's policy on the medicines is implemented and all stakeholders are made aware of the policy
- ensure that staff receive support and appropriate training to enable them to safely administer medication where necessary
- ensure that children who are have long-term medical needs, and those whose needs are such that prescribed medication regularly has to be given during the school day, have a health care plan written for them. A meeting should be arranged between the child's parents/carers within 7 days of new medication being prescribed so that a health care plan can be written. Where necessary, advice will be sought from key medical professionals (for example, diabetic nurse, epilepsy nurse, consultant etc)
- share information, as appropriate about a child's medical needs and condition and ensure a set of procedures are in place which enable safe administration of medication
- ensure cover staff are briefed of a child's medical needs and condition
- consult with other professionals as necessary e.g. the school
- ensure that medicines are stored correctly (as per instructions and this policy)
- ensure risk assessments for school visits are completed and medication requirements are included
- monitor individual health care plans and inform all staff about the children's needs on the health care plan (how often will these be reviewed)

**Relevant Staff**

Complete appropriate training to administer medication.

On receipt of medicines, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber should be checked including arrangements for storage.

Ensure that the parent/carer completes a consent form for the administration of medicines following the prescriber's instruction and for information to be shared with any relevant adults working with their child.

Complete the 'administration of medicines' record sheet each time medication is given.

Ensure that medicines are collected by parents for safe disposal.

**Refusal of Medicines:** If a child refuses to take medicines, staff should not force them to do so, but should note this in the records and inform parents immediately or as soon as is reasonably possible.

**Record Keeping**

Medicines should be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. Staff should check that written details include:

Name of the child; name of the medicine; dose; method of administration; time and frequency of administration; any side effects; expiry date.

A parental consent form must be completed and signed by the parent, before medicines can be administered.

At the time of administering medicines or inhalers, the member of staff must complete the medicines record sheet kept with the medication.



### **Medical Tracker**

Children's medical needs, care plans and information about medication are stored on Medical Tracker which is GDPR compliant.

When a member of staff administers first aid, they should record the details on Medical Tracker straight away. Medical Tracker is checked daily by a named member of the admin staff to determine if parents need to be informed about minor head bumps etc. She will then use the prepopulated letters to send to parents.

Medical Tracker is only to be accessed by staff on school devices.

### **Health Care Plans - Children with Long Term Medical Needs**

It is important that the school has sufficient information about the medical condition of any child with long term medical needs. A health care plan will be written for children with long term medical needs, involving the parents and relevant health professionals. Some of the key information will be - the medical condition, its triggers, signs, symptoms and treatments - the pupil's resulting needs, including medication - specific support for the pupil's educational, social, emotional needs - level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies - who will provide this support - arrangements for written permission from parents for medication to be administered - separate arrangements or procedures identified for school trips or other school activities.

**Confidentiality:** The head and staff should always treat medical information confidentially. The head should agree with the child/parent who else should have access to records and other information about a child.

Staff training needs and opportunities must be identified for staff with responsibilities for administering medicines as soon as is reasonably practicable.

**Monitoring:** This policy should be reviewed regularly in accordance with national guidance. As policies are reviewed and amended, we check that the principles listed above are properly considered, and are embedded in practice. Governors will ensure that due regard is given to the promotion of equality within each policy.

### **Staff medication**

Any staff who require medication to be on school site should ensure it is kept in a locked draw/cupboard or stored in the school office. Unless permission is granted otherwise by the headteacher.