




Richmond Hill School

Administration of Medicines in Schools Policy

Policy



Author:	Hannah Cameron
Issue date:	February 2026
Review date:	February 2027
FGB ratified date	April 2026
This is a Local authority adopted policy	
This is school policy	

Richmond Hill School		Administration of Medicines in Schools Policy		
Date	Review Date	Author	Nominated Governors	
February 26	Jan 2027	Hannah Cameron	Quality of Education Committee	

1. Introduction

The Children and Families Act 2014 places a duty on the Governing Body and Senior Leadership Team to make arrangements for supporting pupils at the school with medical conditions. Pupils with medical conditions cannot be denied admission or excluded from school on medical grounds alone unless accepting a child in school would be detrimental to the health of that child or others.

The aim of this document is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so they can play a full and active role and achieve their potential.

2. Scope of the Procedure

The procedure applies to all employees.

This procedure should be read in conjunction with the relevant statutory guidance; Supporting pupils at school with medical conditions, DfE, which provides greater detail regarding notification and individual healthcare plans and with the school's Intimate Care Policy.

All staff will be expected to have an awareness of those children with medical conditions and how to respond in an emergency, if staff are in doubt they should call 999 and ensure the pupil is not left unattended. This policy will form part of the schools induction arrangements.

3. Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Collaborative working arrangements and working in partnership will ensure that the needs of pupils with medical conditions are met effectively.

The **governing body** will ensure that:

- Suitable accommodation for the care of pupils with medical conditions is available.
- Sufficient staff have received suitable training and are competent before they take on the responsibility to support children with medical conditions.

- Appropriate levels of insurance is in place to cover staff providing support to pupils with medical conditions.

The **Head Teacher** will ensure that:

- The school's policy is effectively implemented.
- All staff are aware of the policy and understand their role in its implementation.
- Sufficient numbers of staff are available to implement and deliver against all individual Healthcare Plans, including in emergency and contingency situations. The Special Needs nursing team have overall responsibility for the development of Individual Healthcare Plans.
- School staff are appropriately insured and are aware that they are ensured to support pupils in this way.

School staff may be asked to provide support to pupils with medical conditions, including the administration of medication. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. Any member of staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. Training will be provided to all staff. A pupil taken by ambulance to hospital will be accompanied by a member of staff who will stay with the child until a parent or carer arrives.

Appropriately trained staff (those trained by a member of the medical profession) can use EpiPens and defibrillators, administer injections, dispense prescribed oral medicines and apply splints and topical medicines and other medical support covered, for example, within a First Aid certificate or where appropriate training has been provided. All medication must be administered as prescribed by a medical professional. School staff may also be asked to provide assistance with feeding, including enteral feeds, or toileting, including changing colostomy bags and catheterisation.

School nurses are responsible for notifying the school when a child has been identified as having a medical condition that will require support at school. School nurses may support staff on implementing a child's Individual Healthcare Plan and provide training, advice and liaison.

Other healthcare professionals, including GPs and paediatricians notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.

Where appropriate, **pupils** will be involved, as much as possible, in discussions about their medical support needs and will contribute as much as possible to the development of their individual healthcare plan since they know best how their condition affects them. Other pupils in the school will be encouraged to be sensitive to the needs of those with medical conditions.

Parents/carers will provide school with up-to-date information about their child's medical needs. They will be involved in the development and review of their child's individual healthcare plan. They will carry out any action they have agreed to as part of its implementation and will ensure that they or another nominated adult are contactable at all times. Where possible parents/carers should be encouraged to request that medication is prescribed in dose frequencies which enable it to be taken outside of school hours. Where possible parents/carers should be encouraged to support their child in learning, for example, to monitor own blood sugar level, administer insulin. The list is not exhaustive.

Local authorities should work with schools to support pupils with medical conditions to attend full time.

Clinical Commissioning Groups (CCGs) should ensure that commissioning is responsive to children's needs and that health services are able to co-operate with schools supporting children with medical needs. Ofsted inspectors consider the needs of pupils with chronic or long term medical conditions. The school will demonstrate that the policy dealing with medical needs is implemented effectively.

4. Staff training and support

Any member of staff providing support to a pupil with medical needs will receive suitable training. Staff must not give prescriptions medicines or undertake healthcare procedures without appropriate training. Training is provided for dealing with epilepsy, allergy (epi-pen) and administering oral medication.

Pupils competent in managing their own health needs will be allowed to carry their own medicines and devices if that does not pose a risk to other pupils.

Healthcare professionals, including the school nurse, can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

The school will make arrangements for whole school awareness training so that all staff, including new staff, are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy. This training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs. Parents can also contribute by providing specific advice.

Luton Borough Council's Public Liability cover explicitly provides insurance for appropriately trained staff (those trained by a member of the medical profession) to use EpiPens, defibrillators, injections, dispensing prescribed medicines, application of appliances such as splints and oral and topical medicine. All such medication must be administered as prescribed by a medical professional. In other situations staff are covered, provided that they have followed the Care Plan in place and have had relevant training.

5. Managing medicines on the school premises

Medicines will only be administered at school when it would be detrimental to a child's health or attendance not to do so.

No child under 16 will be given prescription or non-prescription medicines without their parents' written consent.

A child under 16 should never be given medicines containing aspirin unless prescribed by a doctor.

The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and includes instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pump, rather than its original container. **See Appendix 1 – Medication for Pupils on a daily basis and Medical Room Procedure for giving medication**

All medicines will be stored safely in school. Children and staff should know where their medicines are at all times and be able to access them immediately. The school will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access. Controlled drugs should be easily accessible in an emergency. (A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, however, passing it on to another child for use is an offence. Monitoring arrangements may be necessary in such cases.) A book is used to sign in and out any controlled drug brought into and leaving the school premises.

Staff administering a controlled drug must do so in accordance with the prescriber's instructions. The school will keep a written record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects should also be noted. **See Appendix 2 – Administration of medicines – Pupil forms**

Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be readily available to children as appropriate. For all pupils these will be stored appropriately and where the class teacher, class TAs and other appropriate staff and the child know how to access them.

During school trips, the member of staff in charge of first aid on the trip will carry all medical devices and medicines required.

If a pupil refuses to take medication or carry out a necessary procedure they should not be forced by staff. The procedure agreed in the individual healthcare plan should be followed and the parent/carer informed.

Sharp boxes should always be used for the disposal of needles and other sharps. When no longer required, medicines should be returned to the parent or pharmacist to arrange for safe disposal. Medicine no longer required, or out of date should not be allowed to accumulate.

6. Unacceptable Practices

Each child's case will be judged on its own merit and with reference to the child's Individual Healthcare Plan, however it is **not** generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment
- Ignore medical evidence or opinion (although this may be challenged) or ignore the views of the child or their parents.
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in the Individual Healthcare Plan.
- If the child becomes ill, to send the child to the school office or medical room unaccompanied or with someone unsuitable.
- Penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need in order to manage their medical condition effectively.
- Require parents or make them feel obliged to attend school to administer medication or provide medical support to their child, including with toileting issues. (No parent should have to give up working because the school is failing to support their child's medical needs).
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, by requiring parents to accompany the child.

Appendix 1 – Medication for pupils on a daily basis and Medical Room Procedure for giving medication

MEDICATION FOR PUPILS ON A DAILY BASIS

Medication files are kept in the medical room at the relevant site.

At the front of the folder there will be a copy of the Medical Room Procedure for giving medication.

The folder will have a section for each pupil. Each section will contain the following:

- Basic Information about the pupil including name, date of birth and allergies.
- Request to administer Medication sheet
- Medication Form (these are collated/updated annually)
- Other forms as relevant e.g. Insulin or Finger Prick Medication Form

MEDICAL ROOM PROCEDURE FOR GIVING MEDICATION

- **Two members of staff should be present *at all times* when checking and administering medicines**
 - The pharmacy label on the container should be cross checked against the instructions from the medication form. Any discrepancy should be queried with parents. **Parents should confirm any changes of dose and the reason for it in writing and where possible provide a repeat prescription list.**
 - For liquid medicines, a 5ml spoon or an oral/ threaded syringe should be available depending on pupil and route.
- A. Confirm the identity of the pupil – name and date of birth
 - B. Check the name of the medicine on the container against the name on the medication chart and the route (orally/ via gastrostomy).
 - C. Check the expiry date/use by date on the medication
 - D. Check the dose e.g. 1 or 2 tablets, 5 or 10 mls, or 2 puffs.
 - E. Check the time the dose is to be administered
 - F. Measure the dose requested on the medication form using appropriate equipment without handling the medicine. If it is soluble or a dispersible tablet, add a small quantity of water and wait for it to dissolve or disperse. Put the medication away.
 - G. Once all of the above has been second checked, check you have the correct pupil again before giving the medicine to the pupil and watch him/her take it. Give the pupil a glass of water to 'wash' the medicine into the stomach if required. Check mouth is clear and medication has been swallowed if needed.
 - H. Document medication given including dose given, time given, and sign to say medication given by and witnessed by.
 - I. Wash the spoon or oral dose dispenser, if used, with hot soapy water and return to Medical cupboard with pupils Medication. (Label syringe/ spoon with pupils name).

- J. Repeat steps A-I again if another medication/procedure is required.
- K. Check the storage area is locked.
- L. Check all medication weekly . Where possible ensure there is 7 days' notice for parents to obtain and send in a further supply of medication. All expired medication will be taken to the pharmacy to be disposed of correctly.

Use of Medical Tracker for Recording Medication Administration

Richmond Hill School utilises the Medical Tracker system as the primary tool for recording the administration of medication to pupils. This digital system supports accurate, timely, and secure documentation, ensuring compliance with safeguarding and health care protocols.

1. Accurate Record-Keeping

All medication administered to pupils must be recorded immediately in Medical Tracker. This includes the date, time, dosage, and the name of the staff member administering the medication. This ensures a clear and auditable record is maintained.

2. Access and Training

Only authorised staff members who have received appropriate training in both medication administration and the use of Medical Tracker are permitted to enter information into the system. Training will be regularly reviewed to maintain competency.

3. Real-Time Updates

Medication administration must be logged in real-time or as soon as possible after administration to maintain up-to-date records. This helps prevent errors, duplication, or missed doses.

Confidentiality and Data Protection

Information recorded in Medical Tracker is confidential and must be treated in accordance with data protection policies and GDPR. Access to the system is limited to authorised personnel only.

5. Audit and Monitoring

The use of Medical Tracker enables regular audits of medication records to ensure compliance with the school's medication policy and identify any trends or issues requiring action.

By integrating Medical Tracker into our medication administration procedures, Richmond Hill School strengthens its commitment to pupil safety, accuracy, and accountability.

Refusal of medicines

If pupils refuse to take medicines, school staff should NOT force them to do so. The school should inform the child's parents as a matter of urgency. If necessary, the school should call the emergency services.

Administration of Medicines Errors

If for any reason the medication is given to the wrong child or an incorrect dose is given, then medical advice should be sought, from NHS Direct or the nearest Accident and Emergency department. Parents should also be informed.

A report should be written as soon as possible after the event and should detail the sequence of events.



RICHMOND HILL SCHOOL

Headteacher: Hannah Cameron

E-Mail: rhsadmin@richmondhill.luton.sch.uk

Web: Richmondhillschool.co.uk

West Site:
Sunridge Avenue,
Luton, LU2 7JL
Tel: 01582 721019

East Site:
Crawley Green Road
Luton, LU2 9TL
Tel: 01582 346171

Request for School to Administer Medication

Child's Name _____

Date of Birth _____

Class/Year Group _____

Name of Medication _____

Expiry of Medication _____

Strength of Medicine _____
(If appropriate)

How much to give (i.e. dose) _____

Reason for Giving _____

When to be given _____

Any other instructions
(Include details for inhalers if any) _____

Tick appropriate box

Medicine to be left at school	<input type="checkbox"/>
Medicine to be taken home each day, e.g. antibiotics	<input type="checkbox"/>

If more than one medicine is to be given a separate form should be completed for each.

Parent's Signature _____ Date _____

Telephone Number (Parent/Adult contact) _____

