Special Partnership Trust

MANAGING MEDICINES IN SCHOOL

Date Last Reviewed: April 2026
Review Date: April 2027

This policy is to be read in conjunction with the "Medical Conditions Policy" and aims to ensure the safe and effective administration of medication to pupils, promoting inclusion, safety and wellbeing in accordance with the Children and Families Act 2014, Department for Education (DfE) guidance and health and safety legislation.

This policy applies to all staff of schools within the Special Partnership Trust and covers prescribed and non-prescribed medication administered during school hours or on school activities.

Medication will only be administered in school:

- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- When written consent from parents/carers has been provided.

It is the responsibility of the parents/carers of any pupil requiring administration of medication within school time to notify the school in writing of any additions or changes to medication routines. If information is not provided or is unclear medicines will not be administered by school staff.

The school will only accept prescribed medications that are:

- In date
- Labelled correctly
- In the original container as dispensed by the pharmacy
- Include clear instructions for administration, dosage and storage
- Match the prescription.

The exception would be insulin which must be within date but can be inside an insulin pump rather than its original container.

There will always be two trained staff checking the administration of medication.

The policy is to be used alongside other Trust policies and aligns with the following frameworks:

- Equality Act 2010
- Children and Families Act 2014
- Department for Education (DfE) 'Supporting pupils at school with medical conditions' 2015

- DfE 'Using emergency adrenaline auto-injectors in schools' 2017
- Royal College of Nursing Guidance: Managing Medicines in Schools and Early Years Settings.

Training

- Schools will access online medicines administration training. Additional practical workshops will be provided by the CFT Training team – this team do not sign off competencies. Staff will be asked to sign to say they have accessed the training. SPT will carry out termly medicine administration process audit in line with agreed good practice proforma.
- Staff will be expected to attend refresher courses when offered and when deemed necessary (annually or sooner) to meet their competency
- If a member of staff does not feel confident in administration, they will inform their line manager who will organise further training
- The staff will have access to regular supervision by a Named School Nurse/equivalent
- Annual training on Anaphylaxis will be undertaken annually by all staff from September 2026.

Schools will administer medication that is prescribed to the pupil – following the direct instructions on the prescription. If school has a question about if they should be administering a particular medicine, they should contact parents or Pharmacy support.

Storage of Medication

- Medication will be stored securely in a locked cupboard, out of direct sunlight, in an accessible location.
- Storage will be strictly in accordance to product instructions, paying particular note to the required temperature and refrigerated if necessary.
- Refrigerated medications should generally be kept between 2°C and 8°C. Fridge temperature should be checked daily and recorded when storing medication.
- Medicines requiring ambient storage should generally be maintained between 15°C and 25°C.
- Ideally, for good practice, all schedules of Controlled Drugs to be stored in a locked cupboard, secured to the wall with the keys kept in a key safe. This should be within a locked room. Schedules 1 and 2 *must* be stored in this way. Schedules can be confirmed by the Pharmacist.

- Inhalers and other emergency medication should be readily accessible for immediate use.
- Keys to medication cupboards should be held by designated staff members and not left in areas easily accessible to pupils. We have key locks next to medication cupboards so that all trained staff can access the medication when needed

Transport

- Passenger assistants should follow the protocols and guidance issued by the Local Authority on the safe transportation of medication. This should be followed should an adverse incident occur, for example, medication lost in transit.
- All medication travelling between home, school and school trips must be in a secure, clearly labelled bag with the child's name.
- This bag must be handed directly to the passenger assistant by the parent/carer/school staff.
- On arrival to school, the passenger assistant must hand the bag to the school staff.
- Medication is to be signed in/out on receipt by school staff.
- It is not the responsibility of the passenger assistant to check contents or to sign.
- If Controlled Drugs (CD), these need to be checked in and signed for by two trained members of staff and stored appropriately in a timely manner.

External Activities, Therapies and School Trips

- Medication administration will have been addressed in the risk assessment undertaken by the teaching staff and School EVC lead / in line with procedures in place in school and agreed by parents. prior to leaving the school classroom/premises.
- Staff to be aware of any pupils who will need, or potentially need, medication during external activities or on school trips and for appropriately trained staff to attend.
- The same competencies, policies and protocols will apply as in school
- Medication, to include emergency medication, will remain available and carried by a designated member of staff.
- The nominated member of staff will be responsible for the safe transportation and storage in a secure, clearly labelled bag throughout the visit.
- Additional written consent from parents will be required should medication need to be given outside of school hours.

- If a new medication is to be given, for example as out of school hours, this must be assessed prior to the trip to ensure staff are competent and available. This must be agreed and signed by parent.

Administration of Medication

Before administering, two staff members must be involved and medication MUST be:

- Clearly and legibly labelled.
- In its original container.
- Within date.
- Have the dose, timings and route clearly stated.
- If prescribed, it must named with the original pharmacy dispensary label in place and only used for the pupil it is prescribed for.
- The staff must identify the pupil correctly.
- The staff should know what the medication is intended for, for example, to help the pupil breathe more easily and any special precautions, for example, give after food.
- Checked the pharmacy dispensing label matches the container.
- Checked against any allergies the child may have, the allergy should be documented on the medication chart as well as in their IHP.
- Checked against the written prescription chart each time.
- Checked against the time it was last given and withheld if this was too close to the next dose until advice has been sought from the Community Pharmacist. If unavailable, the parents/carers should be informed.
- If a parent/carer has stated a medication is to be omitted, this must be in writing and signed.
- Statutory Framework recommends that children under 16 years should never be given medicines containing aspirin unless a doctor has prescribed that medication for that child.
- If there are any queries over administering the medication or discrepancies in the prescription/labelling, advice must be sought first from the Community Pharmacist. If unavailable, parents/carer's advice is to be sought. If there are discrepancies in information the medicine cannot be administered. This must be clearly recorded and parent informed.

The staff will only administer if they feel confident, are deemed competent and have signed, current certification to prove this. This certification will confirm they have completed the online "Administering Medication" Training.

Staff should be aware of how to recognise an adverse drug reaction, which will be comprehensively covered in their training. They will be able to demonstrate an awareness of how to respond, when to call for medical assistance, next steps to take including informing the parents/carer and the documentation of adverse events.

A pupil must not be forced to take the medication. If they refuse to take it, this must be clearly documented on the medication chart and the parent/carer informed immediately.

Parents/carer will be informed if a medication has been omitted or given at a different time to the one planned.

Without all of the above being in place, staff will not administer the medication and parents/carer will be notified immediately to discuss next safe steps. This may include the parent/carer being asked to come into school.

Documentation
Documentation should include the time, date with the two staff members who are administering and checking the medication's full names and job titles.

This should only be documented AFTER it has been administered.

Non-Prescribed and Ad-Hoc medications
Non-prescription medication will not be accepted and administered with exception to:

- Paracetamol – in an appropriate form for the pupil, for short-term pain relief.
- Topical cream like Sudocrem or Aveeno.

Controlled Drugs (CDs)
Please also refer to Cornwall Foundation Trust Special Schools standard operating procedures (CD SOPs)

- Two trained staff members are required to check and sign the CDs in and out of the CD cupboard.
- Administration is to be documented in the CD register by both and stock level adjusted accordingly. This is in addition to being documented digitally on MediTracker.
- The CD register is to be a book locked separately to the CDs.

- Where documentation only requires a signature or initials, the staff member must ensure their details to include full name, job title and a sample of their signature and initials is kept on file.
- During all school holidays, any CDs will be signed out and returned home. This will be documented and signed on being handed over and signed by the person receiving.
- Stock levels of CDs will be checked and this documented daily by two nominated, trained persons. Any discrepancies will be reported immediately to the Head or Deputy Head Teacher.

Emergency Medication and Treatment

- A pupil must have their emergency medication with them in school or return home until available. If they have already arrived and been accepted in school without it, the parent/carer must bring it to school as soon as possible and emergency protocols followed if needed.
- Ensure emergency medication is checked weekly, within date, appropriately and safely stored in the same room as the pupil, easily and readily accessible.
- Their emergency medication should go with the supervising clinician when the pupils goes for therapy in a secure, named bag and stored safely. The therapist should be aware of the medical needs and how to summon help.
- An ambulance will be called as and when necessary and parents/carers will be informed promptly.
- Staff will accompany the pupil to the hospital if parents/carers are unavailable, following a dynamic risk assessment.
- Emergency protocols will be followed according to pupil's Individual Healthcare Plans where in place and documented when used.
- "An Individual Healthcare Plan will be put in place where a pupil's allergy requires planned management or specific arrangements to ensure safety and inclusion in school. This is not limited to pupils who have been prescribed an adrenaline auto-injector.
- Anyone prescribed an adrenaline auto-injector (AAI) device should have two devices available at all times and must come to school with these each day.
- A copy of the pupil's Allergy Action Plan from their Doctor/Consultant must be provided by the family, alongside any AAI devices. This will be added to their Individual Healthcare Plan.
- *The guidance from September 26 onwards, school requires an Individual Healthcare Plan to record specific arrangements for individuals like an allergy management plan.*

Medication Errors
Medication errors include any deviation from the prescribed or intended medication.

A medication error may include:

- Omission of a prescribed dose (accidentally missed, refusal by pupil or medication not available)
- Incorrect medication administered (wrong medication, wrong formulation)
- Wrong dose (too much, too little, wrong strength)
- Wrong time (too early, too late)
- Wrong route
- Medication given to the wrong pupil
- Failure to record administration accurately
- Administering expired medication
- Administering medication without documented parental consent

Immediate Actions
If a medication error occurs:

1. Ensure the safety of the pupil
    - Check and continue to observe for signs of an adverse reaction.
    - Do not give further doses until medical advice is sought.
    - Administer first aid or emergency treatment if needed.

2. Inform appropriate people immediately:
    - Contact emergency services if the pupil is very unwell.
    - Seek advice from the, NHS 111 or the pupil's GP.
    - Notify the Headteacher or senior staff.
    - Inform the parent/carer as soon as possible.

3. Record the error:
    - Complete the school's medication error reporting form and CPOMS.
    - Log the incident in the medication administration record (MAR)/Medical Tracker.

Reporting and Investigation

- The incident will be reviewed by the school's Senior Leadership Team.
- Report to the Local Authority as per safeguarding or health and safety procedures **if applicable.**

Learning and Prevention

- A review will be carried out to identify contributing factors.
- Policy, procedures or risk assessments may be updated.
- Staff to be encouraged to discuss and reflect with support.
- Staff will receive feedback and further training if necessary

Disposal of Medications

- The school will not store surplus or out-of-date medication, this will be returned to the parents/carer or taken to the local pharmacy by a member of staff. This includes CDs.
- Needles and other sharps, for example, AAI device, lancets, will be disposed of safely and securely in a sharps disposal box.
- Collection of the sharps disposal boxes should be arranged through a licensed service.
- Sharps disposal boxes should be assembled with care, signed by the person who assembles, not overfilled and, when full, signed when shut, again with care.
- Any individual dose or part dose which is prepared but not administered should be recorded and disposed of safely. They may be returned to the parent or taken to a pharmacy, but they must not be put in the general waste, down a sink or flushed in a toilet.

Monitoring and Review

- This policy is to be reviewed biannually.
- Audits of the administration of medication and its documentation will be carried out biannually.
- Staff administering medication to voice any concerns or suggestions for improvement to the Head Teacher, Deputy Head Teacher or Inclusive Education Health Lead.

Appendix 1

Staff Training Record – Administration of Medicines

Name of School/Setting	
Name of Staff Member	
Type of Training Received	
Date of Training Completed	
Training Provided by	
Profession and Title	

I confirm that *[name of member of staff]* has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated *[name of member of staff]*.

Trainer's Signature: _____

Date: _____

I confirm that I have received the training detailed above.

Staff Signature: _____

Date: _____

Review Date: _____