



**Tadley Primary School**  
*Learning for Life*

## Administration of Medicines Policy

**Head Teacher: Joanne Bruce-Carter**

**Chair of Governors: David Lovelock**

**Date: Spring 2026**


**Review Date: Spring 2027**

### Our Vision

At Tadley Primary School, we are passionate about equipping our children with the personal characteristics and educational outcomes for their successful futures. Our vision for each child is to develop an active curiosity of their world, discover their own interests and talents, and grow in their own confidence and love of learning. We do this by providing children with an irresistible invitation to learn through our knowledge-rich and diverse curriculum.

**Learning for Life the Tadley Way!**  
**Pride, Kindness, Community, Diversity**

*The purpose of this policy is to ensure that there is a plan in place for how medicines are administered, and to ensure that employees are aware of their responsibilities and that they understand all administration of medicine arrangements.*

<b>Name of Unit/Premises/Centre/School</b>	TADLEY COMMUNITY PRIMARY SCHOOL
<b>Date of Policy Issue/Review</b>	Spring 2026 Review Spring 2027
<b>Name of Responsible Manager/Headteacher</b>	Mrs Joanne Bruce-Carter
<b>Signature of Responsible Manager/Headteacher</b>	

### Policy Statement

TADLEY COMMUNITY PRIMARY SCHOOL will undertake to ensure compliance with the relevant legislation and guidance in *Health Guidance for Schools* with regard to procedures for supporting children with medical requirements, including managing medicines. Responsibility for all administration of medicines at TADLEY COMMUNITY PRIMARY SCHOOL is held by the Head Teacher who is the responsible manager.

It is our policy to ensure that all medical information will be treated confidentially by the responsible manager and staff. All administration of medicines is arranged and managed in accordance with the *Health Guidance for Schools* document. All staff has a duty of care to follow and co-operate with the requirements of this policy.

In line with the duty, which came into force on 1st September 2014, to support pupils at school with medical conditions, we are committed to ensuring that all children with medical conditions, in terms of both physical and mental health, are properly supported at TADLEY COMMUNITY PRIMARY SCHOOL so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

## **CHILDREN'S SERVICES HEALTH & SAFETY**

No child with a medical condition will be denied admission or prevented from taking up a place in our school because arrangements for their medical condition have not been made.

We will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases, therefore we will not accept a child in school at times where it would be detrimental to the health of that child or others to do so.

This policy will be reviewed regularly and it is readily accessible to parents and school staff.

### **Aims & Objectives**

Our administration of medicine requirements will be achieved by:

- Establishing principles for safe practice in the management and administration of:
  - prescribed medicines
  - non-prescribed medicines
  - maintenance drugs
  - emergency medicine
- Providing clear guidance to all staff on the administration of medicines
- Ensuring that there are sufficient numbers of appropriately trained staff to manage and administer medicines
- Ensuring that there are suitable and sufficient facilities and equipment available to aid the safe management and administration of medicines
- Ensuring the above provisions are clear and shared with all who may require them
- Ensuring the policy is reviewed periodically or following any significant change which may affect the management or administration of medicines

### **Policy implementation**

The named person, who has overall responsibility for policy implementation is Joanne Bruce-Carter as Headteacher, supported by Amelia Mohain, Gail Thompson and Sue Hatton.

They will

- ensure that sufficient staff are suitably trained
- ensure processes are in place so that all relevant staff will be made aware of the child's condition
- monitor individual healthcare plans.

Procedure to be followed when notification is received that a pupil has a medical condition

When our school is notified that a pupil has a medical condition we will:

- make arrangements for any staff training or support
- make every effort to ensure that arrangements are put in place within two weeks
- not wait for a formal diagnosis before providing support to pupils

### **Administration**

The administration of medicines is the overall responsibility of the parents. The TADLEY COMMUNITY PRIMARY SCHOOL is responsible for ensuring children are supported with their medical needs whilst on site, and this may include managing medicines where appropriate and agreed with parents.

### **Routine Administration**

Managing medicines on school premises

At our school:

- medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- no child will be given prescription or non-prescription medicines without their parent's consent
- we will never give medicine containing aspirin unless prescribed by a doctor.
- medication, e.g. for pain relief will never be administered without first checking maximum dosages and when the previous dose was given by the parent/carer.

## CHILDREN'S SERVICES HEALTH & SAFETY

- where clinically possible, we will expect that medicines will be prescribed in dose frequencies which enable them to be taken outside school hours. Antibiotics can be given in school if they are prescribed for 4 times a day.
- we will only accept prescribed medicines if they:
  - o are in-date
  - o are labelled
  - o are provided in the original container as dispensed by a pharmacist
  - o include instructions for administration, dosage and storage. (NB The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container)
- all medicines will be stored safely and under the correct conditions, e.g. in a fridge.
- children will know where their medicines are at all times and will be able to access them immediately. Where relevant, they will know who holds the key to the storage facility.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children and not locked away, including when pupils are outside the school premises, e.g. on school trips
- when no longer required or out of date, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps or returned to parents for disposal
- we will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held.
- school staff will administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions.
- we will keep a record of all medicines administered to individual children, stating what and how much was administered, when and by whom. These are counter signed by a second member of staff. Any side effects of the medication to be administered at school will be noted in school.

### Prescribed medicines

- It is our policy to manage prescribed medicines (eg. antibiotics, inhalers) where appropriate following consultation and agreement with, and written consent from the parents

### Non-prescribed medicines

- On occasions when children require paracetamol it is our policy to administer providing that consent from the parents has been received in advance and administration is in accordance with guidance provided in the *Health Guidance for Schools* document. Parents will be called in order to gain verbal permission to administer Calpol or Piriton if doing so from medicine owned by the school.
- Children under 16 years old are never to be administered aspirin or medicines containing Ibuprofen unless prescribed by a doctor
- Responsibility for decision-making about the administration of all non-prescribed medicines will always be at the discretion of the responsible manager who may decide to administer under certain miscellaneous or exceptional circumstances

### Maintenance drugs

- It is our policy to manage the administration of maintenance drugs (eg. Insulin) as appropriate following consultation and agreement with, and written consent from the parents. On such occasions, a health care plan will be written for the child concerned

## Non-Routine Administration

### Emergency medicine

- It is our policy (where appropriate) to manage the administration of emergency medicines such as (for example):
  - o Injections of adrenaline for acute allergic reactions
  - o Rectal diazepam for major fits
  - o Injections of Glucagon for diabetic hypoglycaemia

## CHILDREN'S SERVICES HEALTH & SAFETY

- In all cases, professional training and guidance from a competent source will be received before commitment to such administration is accepted

### Procedure for Administration

When deciding upon the administration of medicine needs for children we will discuss this with the parents concerned and make reasonable decisions about the level of care required.

Any child required to have medicines will have a 'Parental Agreement for Setting to Administer Medicine' form completed by the parent and kept on file in the Medical Room.

Individual health care plans will be completed for children where required and reviewed periodically in discussion with the parents to ensure their continuous suitability.

For any child receiving medicines, a 'record of prescribed medicines' sheet will be completed each time the medicine is administered and this will be kept on file. After receiving the medicine, the child will be asked to sign a form acknowledging receipt of the dosage. The adult administering the medicine will also sign the form.

It is the duty of the individual member of staff to ensure a pupil takes their medicine. Staff must ensure every effort is made to administer the medicine and if it is not possible, the class teacher must be informed. If medicine has not been successfully administered, a parent must be informed. If a child refuses to take medication the parents will be informed at the earliest available opportunity.

### Contacting Emergency Services

When a medical condition causes the child to become ill and/or requires emergency administration of medicines, then an ambulance will be summoned at the earliest opportunity. The parents will then be informed.

### Individual healthcare plans

Parents give information to our office who will then upload medical and dietary information onto Arbor and parents are required to keep us updated with any changes. Any parent reporting that their child has an ongoing medical condition such as severe/chronic asthma, epilepsy, diabetes or more complex medical condition, as confirmed in writing by a healthcare professional, will be asked to complete an Individual Healthcare Plan (IHP). It is a legal requirement that this is updated annually. At our school we will ensure that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. We will assess and manage risks to the child's education, health and social wellbeing, and minimises disruption.

Our IHP requires information about:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed (NB If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring)
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable
- who in the school needs to be aware of the child's condition and the support required
- arrangements for written permission from parents for medication to be administered by a member of staff, or self-administered by the pupil during school hours

## **CHILDREN'S SERVICES HEALTH & SAFETY**

- arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

### **Emergency procedures**

Our school's policy sets out what should happen in an emergency situation.

In the event of an evacuation, the red medical box containing asthma pumps, Epi-Pens (or equivalent), epilepsy medication or diabetes medication, will be taken to the assembly point.

### **Day trips, residential visits and sporting activities**

We always actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

As a school we believe it to be unacceptable 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 the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged)
- send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans
- if the child becomes ill, send them 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 to in order to manage their medical condition effectively
- require parents, or otherwise 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, e.g. by requiring parents to accompany the child

### **Medical Accommodation**

The MEDICAL ROOM will be used for medicine administration/treatment purposes. The room will be made available when required. It is locked throughout the day and a key is used to ensure children do not have access to the room without an adult supervising.

### **Training**

Where staff are required to carry out non-routine or more specialised administration of medicines or emergency treatment to children, appropriate professional training and guidance from a competent source will be sought before commitment to such administration is accepted. Such instances are if there is a diabetic child requiring insulin or a child with an epi-pen.

A 'staff training record' sheet will be completed to document the level of training undertaken. Such training will form part of the overall training plan and refresher training will be scheduled at appropriate intervals.

### **Storage**

The storage of medicines is the overall responsibility of the TADLEY COMMUNITY PRIMARY SCHOOL who will ensure that arrangements are in place to store medicines safely. The medical room will be locked when a member of staff is not present in the room.

## **CHILDREN'S SERVICES HEALTH & SAFETY**

The storage of medicines will be undertaken in accordance with product instructions and in the original container in which the medicine was dispensed.

It is the responsibility of all staff to ensure that the received medicine container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration.

It is the responsibility of the parents to provide medicine that is in date. This should be agreed with the parents at the time of acceptance of on-site administration responsibilities.

### **Disposal**

It is not the TADLEY COMMUNITY PRIMARY SCHOOL's responsibility to dispose of medicines. It is the responsibility of the parents to ensure that all medicines no longer required including those which have date-expired are returned to a pharmacy for safe disposal. Sharps boxes will always be used for the disposal of needles. Collection and disposal of the boxes will be locally arranged as appropriate.

### **Liability and indemnity**

Maintained schools and academies with a SLA with HCC will be insured as long as all appropriate training and risk assessment has taken place.

### **Complaints**

If you have a complaint about how your child's medical condition is being supported in school, please contact the Headteacher and the Chair of Governors in the first instance.

#### **Emergency Asthma Inhalers and Epi-Pens**

Since 2015 schools may hold asthma inhalers and epi-pens for emergency use. This is entirely voluntary, and the Department of Health has published a protocol which provides further information. As a school we have agreed to purchase and keep emergency inhalers and Epi-Pens. These will only be used for those children who are already prescribed asthma inhalers or Epi-Pens. They will only be used in an emergency and at all times the school will seek to use the child's prescribed medication if possible.