

# *Administering Medication in School Policy*



Queen's Park C.E./U.R.C.  
Primary School

*September 2026*

*To be reviewed September  
2027*

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Our vision for Queen's Park C.E./U.R.C. Primary School  
With God, everything is possible (Matthew 19:26) #everythingispossible

Through our continued service to our community and rooted in our Christian Values, the opportunities we provide inspire our children and adults at our school to learn, to grow and to flourish. We are committed to developing our children into confident individuals who make a positive difference through developing a respect for themselves, each other and the world around them. For with God, everything is possible. (Matthew 19:26)

Our Core Christian Values

*Love*

*Forgiveness*

*Trust*

*Respect*

*Honesty*

*Hope*

**Intent**

Queen's Park C.E./U.R.C Primary School will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy. This includes the safe storage and administration of pupils' medication.

For the purposes of this policy, **"non-prescription medication"** is defined as any non prescribed or over the counter medicine. Medication which hasn't been prescribed by a doctor from the chemist requires a "care of the chemist" sticker to enable school staff to administer the medication. **"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.

**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
- DfE (2015) 'Supporting pupils at school with medical conditions'

- DfE (2017) 'Using emergency adrenaline auto-injectors in schools'
- DfE (2024) 'Early years foundation stage (EYFS) statutory framework'
- DfE (2025) 'Automated external defibrillators (AEDs): a guide for maintained schools and academies'
- Health and Safety at Work etc. Act 1974
- DfE 'Supporting children and young people with medical conditions and allergy'
- Keeping Children Safe in Education 2026

This policy operates in conjunction with the following school policies:

- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Allergen and Anaphylaxis Policy
- Asthma Policy
- Complaints Procedures Policy
- Early Years Policy
- Child Protection and Safeguarding Policy
- Health and Safety Policy

### **Roles and responsibilities**

The governing board is responsible for:

- The monitoring of 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 in order 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.

### **Safeguarding**

Failure to provide necessary medication, repeated failure to provide prescribed medication, or concerns regarding a child's medical care may constitute a safeguarding concern and will be reported to the Designated Safeguarding Lead in line with the Child Protection and Safeguarding Policy.

### **Training staff**

The headteacher will ensure that a sufficient number of staff are suitably trained in administering medication. All learning assistants will undergo basic training on the administering of medication to ensure that, if exceptional circumstances arise where there is no designated administrator of medication available in a class, pupils can still receive their medication from a trained member of staff.

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.

Staff will be advised not to agree to taking on the responsibility of administering medication until they have received appropriate training.

Training will also cover the appropriate procedures and courses of action with regard to the following exceptional situations for individual children with specific medical conditions:

- 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

### **Training for administering AAls**

All school staff will receive annual training on allergies and anaphylaxis, including the administration of AAls (e.g. epi pens). As part of their training, all staff members will be made aware of:

- How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
- Where to find AAI in the case of an emergency.
- 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 AAI are.
- How to administer an AAI safely and effectively
- How to make appropriate records of allergic reactions.

### **Medical Devices**

#### **Asthma inhalers**

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

Spare AAI are not located more than five minutes away from where they may be required.

There will be access to AAI, which are replenished when used, within locations where there is a greater risk of anaphylaxis occurring, e.g. the dining hall. The school will ensure that risk assessments regarding the use and storage of AAI on the premises are conducted and 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 AAI in emergency situations. The spare AAI will not be used on pupils who are not at risk of anaphylaxis or where there is no parental consent. Where consent and authorisation have been obtained, this will be recorded in the pupil's IHCP.

### **Receiving, storing and disposing of medication**

Where possible medicine should be given at home, however, we also realise that occasionally this is not possible. In the event that this is not possible, the procedures below will be adopted.

#### **Receiving prescribed medication from parents**

The parent/carers of pupils who need medication administered at school will be required to complete and sign an administering medication parental consent form at the school office. A signed copy of the parental

consent form will be kept with the pupil's medication, and no medication will be administered if this consent form is not present. Consent obtained from parents will be renewed on receipt of new medication.

Trained staff will administer non-prescribed medicines as long as it has the child's name and dosage on a dispensing label on the medication.

In exceptional circumstances, where a medicine has been prescribed to a pupil without the knowledge of the parents, the school will work with healthcare professionals to determine appropriate action.

The school will only store and administer prescribed medication. The school will store a reasonable quantity of medication, e.g. a maximum of four weeks' supply at any one time.

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 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. Certain medications (e.g. ADHD medication) will be stored in the school safe in the office, which will be locked at all times.

Medication stored in the school will be:

- Stored safely and in accordance with the manufacturer's instructions.
- Stored in a location that is known to pupils at all times and is immediately accessible, including when outside the premises.
- Carried by pupils for self-administration if deemed suitable by a healthcare professional or required due to their condition.
- Medicines and devices which may be required in an emergency situation will always be readily available. They will never be locked away.
- Medication will not be kept in a first aid container.
- 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.

The school will ensure that medicines are disposed of in accordance with relevant waste and environmental legislation. Medicines will be separated from general waste and disposed of via appropriate routes:

- Non-prescription medicines may be returned to a pharmacy.
- Prescription medicines will be disposed of via licensed waste facilities.
- Controlled drugs will be rendered irretrievable before disposal.

Medicines awaiting disposal will be stored securely in a tamper-proof container.

The school will comply with relevant legislation including the Environmental Protection Act 1990, Controlled Waste Regulations 2012, and Hazardous Waste Regulations 2005.

The school will ensure it is registered as a lower-tier waste carrier where required to support the safe disposal of pharmaceutical waste.

### **Administering medication**

Medication will only be administered at school if it would be detrimental to the pupil not to do so. Where medication is to be administered three times per day, school will encourage parent/carers to administer this outside of school hours. In exceptional cases, it may be agreed with a member of the senior management team that this can be administered in school.

Only suitably qualified members of staff will administer controlled drugs. Staff will check the expiry date and maximum dosage of the medication being administered to the pupil each time it is administered, as well as when the previous dose was taken.

Medication will be administered in a private, comfortable environment and, as far as possible, in the same room as the medication is stored; this will normally be the staffroom, classroom or the school office.

The room will be equipped with the following provisions:

- 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.

Pupils will not be prevented from accessing and taking their prescribed or non-prescribed medication where this is necessary for their health and wellbeing.

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.

Any member of staff may be asked to administer medication; however, no member of staff will be required to do so unless this forms part of their role.

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. School will not administer the first dose of any course of medication; this will need to be completed by parent/carer.

If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.

Where appropriate, pupils will be encouraged to self-administer under the supervision of a staff member, provided that parental consent for this has been obtained. If a pupil refuses to take their medication, staff will not force them to do so, but will inform parent/carers so that alternative options can be considered. The school will not be held responsible for any side effects that occur when medication is taken correctly. Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible. Records will be stored electronically on CPOMS by the member of staff who has administered the medicine.

### **Non-Prescription Medication**

The school is aware that pupils may, at some point, suffer from minor illnesses and ailments of a short-term nature, and that, in these circumstances, health professionals are likely to advise parents to purchase over the counter medicines, for example, paracetamol and antihistamines.

The school will work on the premise that parents have the prime responsibility for their child's health and should provide schools and settings with detailed information about their child's medical condition as and when any illness or ailment arises.

To support full attendance, the school will consider making arrangements to facilitate the administration of non-prescription medicines following parental request and consent. The school will permit the administration of non-prescription medication either by staff or pupils themselves, following written permission by parents. The school will not seek the authorisation of a GP for this purpose.

Pupils and parents will not be expected to obtain a prescription for over-the-counter medicines as this could impact on their attendance and adversely affect the availability of appointments with local health services due to the imposition of non-urgent appointments being made.

If a pupil is deemed too unwell to be in school, they will be advised to stay at home or parents will be contacted and asked to take them home.

When making arrangements for the administration of non-prescription medicines the school will exercise the same level of care and caution, following the same processes, protocols and procedures as those in place for the administration of prescription medicines.

The school will also ensure that the following requirements are met when agreeing to administer non-prescription medicines.

- Non-prescription medicines will not be administered for longer than is recommended. For example, most pain relief medicines, such as ibuprofen and paracetamol, will be recommended for three days use before medical advice should be sought. Aspirin will not be administered unless prescribed.
- Parents will be asked to bring the medicine in, on at least the first occasion, to enable the appropriate paperwork to be signed by the parent and for a check to be made of the medication details.
- Non-prescription medicines must be supplied in their original container, have instructions for administration, dosage and storage, and be in date. A care of the chemist label needs to be displayed on the medication box for school to administer.
- Only authorised staff who are sufficiently trained will be able to administer non-prescription medicines.

### **Paracetamol**

The school is aware that paracetamol is a common painkiller that is often used by adults and children to treat headaches, stomach ache, earache, cold symptoms, and to bring down a high temperature; however, it also understands that it can be dangerous if appropriate guidelines are not followed and recommended dosages are exceeded.

The school is aware that paracetamol for children is available as a syrup from the age of 2 months; and tablets (including soluble tablets) from the age of 6 years, both of which come in a range of strengths. The school understands that children need to take a lower dose than adults, depending on their age and sometimes, weight. The school will ensure that authorised staff are fully trained and aware of the [NHS advice](#) on how and when to give paracetamol to children, as well as the recommended dosages and strength.

Staff will always check instructions carefully every time they administer any medicine, whether prescribed or not, including paracetamol.

The school will ensure that they have sufficient members of staff who are appropriately trained to manage medicines and health needs as part of their duties.

The written consent of parents will be required in order to administer paracetamol to pupil and a care of the chemist label will be displayed.

**With God, everything is possible (Matthew 19:26)**

As well as storing your child's prescribed medicines, we do keep an emergency supply of liquid paracetamol and antihistamine. We will ask for your written or verbal consent to administer either of these only if this will alleviate any pain for your child until the end of the school day.

**Staff Trained in Administering Medicine 2026 - 2027**

|                                  |                                     |
|----------------------------------|-------------------------------------|
| Michelle Leadbetter (SLT Office) | Kirsty Thomas (Year 5)              |
| Mandy Hughes (SLT Office)        |                                     |
|                                  | Elaine Thelwell (Year 1)            |
| Kath Paton (EYFS)                | Kate Quilliam (Year 3)              |
| Lorraine Cafferty (Year 1)       | Tracy Bates (Year 3)                |
| Carly Holder (GEMS/Year 1)       | Jackie Harrison (Year 6)            |
| Clare Jackson (Year 2)           | Amber Monsvoll (HLTA)               |
| Katie Brookes (Year 4)           | Janet Cook (Year 6)                 |
| Kathryn Prescott (Year 1)        | Judith Edgerton (Midday Supervisor) |
| Tracy Unsworth (GEMS/Year 2)     | Georgie Trainer (Year 4)            |
| Becky Willmott (Year 4)          | Julie Haughey (Year 6)              |
| Hannah Rylance (EYFS)            | Amanda McDermott (GEMS/Year 2)      |
| Amber Costello (Year 2)          | Connor Brown (Year 6)               |
| Bryony Hopkinson (Year 5)        |                                     |

**Individual Health Care Plan**

For pupils with chronic or long-term conditions and disabilities, an IHCP will be developed in liaison with the pupil, their parent, the headteacher, the SENCO and any relevant medical professionals. The school nurse or relevant medical professional will provide school with the child's IHCP. The plan will typically outline:

- 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 headteacher and SENCo will ensure that IHCPs are reviewed at least annually. IHPs will be routinely monitored throughout the year by the SENCo in collaboration with the school nurse.

### **Educational trips and visits**

In the event of an 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.

All medication except asthma inhalers 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 will be 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.

### **Medical emergencies**

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

- Calling 999 where needed
- Contacting parents/carers
- Use of emergency medication
- Recording incidents
- Debrief and review following serious incidents

### **Medication Errors**

In exceptional circumstances, where a medicine has been administered to a pupil incorrectly the following will take place:

- Immediate medical advice when required
- Parent notification
- Reporting to Headteacher
- Recording on CPOMS
- Review of practice and staff retraining where necessary

### **Monitoring and review**

This policy will be reviewed annually by the governing board, SENCo and headteacher. The next scheduled review is September 2027.

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.

A copy of the parental consent form for administering medication: