

Sandy Lane Nursery and Forest School  
 "Nurturing curiosity and inspiring imagination"



**2026**

# Administration of Medicines Policy

## DOCUMENT STATUS

Produced By	Version	Date	Description
Sandy Lane Nursery and Forest School with acknowledgement to Evelyn Street C P School	1 - 2011	Autumn 2014	Adopted by school's Premises, Health and Safety Committee
Sandy Lane Nursery and Forest School	2	01.10.19	Approved by school's Resources Committee
	3	01.10.24	Approved by school's Resources Committee
	4	12.03.25	Approved by full governing body
	5	12.05.26	Approved by school's Resources Committee

**L**

## **Legislation**

- Children and Families Act 2014
- Statutory Framework for the Early Years Foundation Stage
- Equality Act 2010
- SEN Code of Practice
- Statutory Guidance – Supporting Pupils at School with Medical Conditions, April 2014 (including Templates)

This policy should be read with due regard to the UK Data Protection Act 2018 and the EU General Data Protection Regulation (GDPR) 2018

## **Writing and Reviewing Administration of Medicines Policy**

Medication and medical care administration relates to other policies including:

- Inclusion policies
- Safeguarding policies
- Risk assessments
- Supporting Children with a Medical Condition

Compliant with Warrington local authority (LA) guidance

## **Amendments**

### **v3**

- Section 4, p4, now includes appropriately trained long-term supply staff (ie, those who have worked at the school for six months or more) and competent apprentices to administer medication

### **v4**

- Inclusion that medicines must be appropriately labelled to be administered in school (p7) and log to sign medication in and out if sent home daily (p8 and appendix 5)

### **v5**

- Link to Supporting Children with a Medical Condition Policy

# **Sandy Lane Nursery and Forest School Administration of Medicines Policy**

## **Rationale**

To ensure that all children are able to attend school regularly and that the administration of medication or medical care does not present a barrier to this.

This policy will sit alongside the health and safety policy and sets out how the school will plan to ensure that all children who require the administration of medication or medical care, will be supported.

## **Purpose**

- To ensure the health and safety of pupils
- To ensure appropriate safeguarding protocols have been agreed and adhered to for the safety of pupils and adults
- To agree appropriate safe working practices
- To give clarity to individuals and their responsibilities and role to ensure safe medication and medical care
- To ensure appropriate accountabilities are clearly understood by all

## **Broad Guidelines**

School will inform the various people of their roles and responsibilities (see DfE guidance, pages 11-14 for definitions). These are listed below.

### **1. Parent/carers with parental responsibility:**

- Must take responsibility for making sure that their child is well enough to attend school and take part in all learning activities. This includes group, class-based activities, organised trips and visits
- Should ensure their child's school has contact numbers and arrangements are in place should a child become unwell
- Should be aware that one parent is required to agree to, or request in writing, that medicines be administered
- Should provide the headteacher with sufficient information about their child's medical condition, medication and treatment or special care needed (use template A (appendix 1))
- Will reach an agreement with the headteacher on the school role in helping with their child's medical needs (use template A)
- Should ascertain whether prescribed medication can be taken outside the school day. Parents should ask the prescribing doctor or dentist about this
- Will confirm their agreement to the sharing of information with other staff to ensure the best care for their child
- Should be aware of those infectious diseases which should result in not sending their child to school

- Parents and carers should be aware, there is no contractual obligation for teachers or headteacher to administer medication

## 2. The governing body:

- Will ensure that the health and safety policy is in place and regularly reviewed
- Will, where necessary, ensure that risk assessments are carried out
- Will also ensure this policy is up to date and compliant with relevant legislation and guidance
- Will ensure that staff training needs are identified and appropriate training sourced
- Will be aware that giving medication does **not** form part of the contractual duties of Headteacher or teachers

*It is recommended that, where possible, staff administering medication are subject to an enhanced DBS check.*

## 3. The headteacher:

- Is responsible for implementing the agreed policy and ensuring that medical needs of children are correctly planned and policy and procedures followed
- Should ensure that all staff are aware of the health and safety policy and the policy relating to medication in school
- Will agree with the parents/carers, exactly how the school will support the child (use template A)
- Will seek further advice when required, from the school health adviser, the school paediatrician, other medical advisers or the LA
- Will identify staff who are trained and supported to administer medication. These persons will sign template C after medication has been administered and counter-signed by the parent/carer on collection of the child
- Will ensure parents/carers are aware of the policy and procedures for dealing with medical needs

## 4. Teachers/staff, including those on long-term supply (ie, who have worked at the school for six months or more) and competent apprentices\*:

- Who work regularly with children with significant or complex health care needs, should understand the nature of the condition and when and where the child may need extra attention
- Should be aware of the likelihood of an emergency arising and must know what action to take should one occur (this applies to all staff, including supply)
- Who work regularly with children, as above, and have undertaken specialist training with health care professionals, may administer medication with parental consent and under the direction of the class teacher

*Staff have a common law duty of care to children in the school. They are 'in loco-parentis' and should therefore take the steps that a reasonable parent would take to promote or maintain the health of a child in their care and this might, in exceptional circumstances, extend to administering medicine and/or taking action in an emergency.*

\* Only the headteacher and/or deputy headteacher will decide whether or not an apprentice is competent for these purposes

## 5. **Support staff:**

- May have the administration of medication as part of their contractual duties
- Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child should have appropriate training and guidance. They should also be aware of possible side effects of the medicines and what to do if they occur. The type of training necessary will depend on the individual case
- Whose duties include this role, must ensure that each and every intermittent or regular medication given is in accordance with the policy and procedures set out
- Who administer medication must be named. The named person will assist in drawing up an **individual health care plan** (use template A) for those children who require it. (See DfE guidance on drawing up an **individual health care plan**.)

## **Procedures**

*It is recommended that school draws up a flowchart detailing key points, where things are stored and the members of staff responsible.*

### Short-term health care needs

- Where children are well enough to attend school but are required to take prescribed medication, parents should ascertain whether dosages could be prescribed outside the school day. Parents should ask the prescribing doctor or dentist about this. **It is recommended that in cases of recovery from short-term illness, only two days of medication should be taken at school**
- Parents must complete a request form and undertake delivery and collection of medicines, (ie, themselves or their adult representatives) (use template B (appendix 2))
- Short-term health care documentation, eg, template C (appendix 3), will be shredded after medication has been completed

### Long-term health care needs

- The school will endeavour to ensure information, including all relevant aspects of a child's medical history, is collected when they enrol or their circumstances change
- For children with long-term health care needs, an **individual health care plan** will be drawn up in consultation with parents/carers, support staff and health care professionals. This will detail procedures for taking prescribed medication and emergency procedures (use template A)
- The school will emphasise, in writing, the need for parents/carers to share information relating to changes to medical needs with staff
- Long-term medication documentation will be held on the child's personal file

### Non-prescribed medication

- Staff should **never** give a non-prescribed medicine to a child unless there is specific prior written permission from the parents. Where the head agrees to the administration of a non-prescribed medicine, it must be in accordance with procedures outlined in this policy
- No child under 16 should be given medication without his or her parents'/carers' written consent. A pupil under 16 should never be given aspirin or medicines containing ibuprofen, unless prescribed by a doctor

*Generally, staff should not take children to hospital in their own car. An ambulance should be called.*

### Intimate or invasive treatment

- Some staff are understandably reluctant to administer intimate or invasive treatment because of the nature of the treatment or fears about accusations of abuse
- Parents/carers and the headteacher should respect such concerns and should not put any pressure on staff to assist treatment, unless they are entirely willing
- The headteacher and governing body will arrange for appropriate training for staff with the appropriate health professional
- The school should arrange for two adults, **preferably one of the same gender as the child**, to be present for the administration of intimate or invasive treatment. Two adults will also often ease practical administration of treatment (see Intimate Care Policy)
- Staff should protect the dignity of the child as far as possible, even in emergencies

### Hygiene and infection control

- All staff should be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment

### Special arrangements for children with medical needs

- All children should participate on trips and managed outings, wherever safety permits
- Additional staff arrangements may need to be made and if necessary, a risk assessment carried out
- Arrangements for taking medication on outside trips may involve additional staff being advised of any medical needs and relevant emergency procedures
- A copy of the **individual health care plan** should be taken on visits
- If staff are concerned about whether they can provide for a child's safety or the safety of other children on a visit, they should seek parental views and consent to their visit and medical advice from the school's health service or the child's GP or make contact with the CDC (Child Development Centre). See Warrington Borough Council guidance on planning educational visits and the school's Educational Visits and Learning Outside the Classroom Policy

## Record Keeping

*Records set out how medicines are managed, recorded and administered. This establishes a clear audit trail (use template D (appendix 4)).*

- Parents/carers must supply information about medication that needs to be administered in the school
- Parents/carers should let the school know of any changes to the prescription
- School should ensure pro-formas are used to provide clarity and consistency
- All early years' settings **must** keep written records of all medicines administered to children and make sure their parents/carers sign the record book to acknowledge the entry
- Where possible in schools, medical information will be recorded in SIMs STAR, background tab. It is recommended that this field is only updated for long-term illnesses or conditions
- The school will ensure that information is transferred to any receiving school/setting and brought to the attention of the appropriate member of staff

## Storing Medication (including Controlled Drugs)

**ONLY MEDICATION WITH THE APPROPRIATE PHARMACY LABELS WILL BE ADMINISTERED IN SCHOOL**

- School should not store large volumes of medication
- The headteacher may request that the parent brings the required dose each day or uses a weekly dispenser, such as a dosset box, which is clearly labelled with the child's name and contains the dose to be administered for each day of the week
- When the school stores medicines, staff should ensure that the supplied medication is labelled with:
  - the name of the child
  - the name and dose of the medication
  - the frequency of administration
  - the date of issue

and a measuring spoon or dropper must be supplied if appropriate

- Where the child requires more than one medication, each should be separately labelled, but should be stored together in one labelled container (use template B)
- The headteacher is responsible for making sure that medication is stored safely

*It is not safe practice to follow re-labelled/re-written instructions or to receive and use re-packaged medicines, other than as originally dispensed.*

- A few medications, such as asthma inhalers, must not be locked away and should be readily available to the child
- Other medications should generally be kept in a secure place, not accessible to children. A locked drawer or cabinet will be appropriate in such circumstances
- The use of controlled drugs in school is sometimes essential. School should keep controlled drugs in a locked, non-portable container and only named staff should have access. A record should be kept for audit and safety purposes

- Any named member of staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions
- A child who has been prescribed a controlled drug may legally have it in their possession. It is permissible for schools and settings to look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed
- A controlled drug, as with all medicines, should be returned to the parent/carer when no longer required, to arrange for safe disposal
- Some medications need to be refrigerated. Medication can be kept in a refrigerator containing food but should be kept in an airtight container and clearly labelled. The school should restrict access to a refrigerator containing medicines
- For medication that goes between home and school daily, the school maintain a log. Parents will be asked to sign to confirm medication has been passed over to them and returned the following day

### **Access to Medication**

- Pupils must have access to their medication when required
- The school may want to make special arrangements for emergency medication that it keeps for certain children
- It is also important to make sure that medication is only accessible to those for whom it is prescribed

### **Disposal of Medicines**

- Parents/carers will collect medicines at the end of the dosage period
- Parents/carers are responsible for the safe disposal of date-expired medication (by returning to the local pharmacy or dispensing pharmacist). Expiry dates on medicines will be checked on a half termly basis by a named member of staff

### **Refusing Medicines**

- If a child refuses to take medicine, staff should not force them to do so but should note this in the records and follow agreed procedures. The procedures may either be set out in the policy or in an **individual child's health care plan**
- Parents should be informed of the refusal on the same day
- If a refusal to take medicine results in an emergency, the school emergency procedures should be followed

### **Safety Management**

- All medicines may be harmful to anyone for whom they are not prescribed. Where a school agrees to administer medication, the employer has a duty to ensure that the risks to the health of others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations (COSHH - 2002)

### **Emergency Procedures**

*Generally, staff should not take children to hospitals in their own car. An ambulance should be called.*

- All staff must know emergency procedures, including how to call an ambulance (use template F (appendix 6))
- All staff must also know who is responsible for carrying out emergency procedures
- A member of staff should always accompany a child taken to hospital by ambulance and should stay until the parent/carer arrives. Health professionals are responsible for any decisions on medical treatment when parents are not available
- **Individual health care plans** should include instructions as to how to manage a child in an emergency and identify who has the responsibility in an emergency (use template A)

### **Staff Training**

- A health care plan may reveal the need for training. Training can be arranged in conjunction with the Primary Care Trust via the school's health adviser/paediatrician, or specialist nurse and is to be organised on a case by case basis by the employer

### **Confidentiality**

- All medical information held is confidential. It should be agreed between the headteacher and parent/carer, who else should have access to records and information about a child

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**Template A: individual healthcare plan**

Name of school	<b>Sandy Lane Nursery and Forest School</b>
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

**Family Contact Information**

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

**Clinic/Hospital Contact**

Name	
Phone no.	

**G.P.**

Name	
Phone no.	

Who is responsible for providing support in school	
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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

**Template B: parental agreement for school to administer medicine**

The school will not give your child medicine unless you complete and sign this form, and the school has a policy for staff to administer medicine.

Date for review to be initiated by	
Name of school	<b>Sandy Lane Nursery and Forest School</b>
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

**Medicine**

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – Y/N	
Procedures to take in an emergency	

**NB: Medicines must be in the original container as dispensed by the pharmacy**

**Contact Details**

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

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**Template C: record of medicine administered to an individual child**

Name of school	<b>Sandy Lane Nursery and Forest School</b>
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature \_\_\_\_\_

Signature of parent \_\_\_\_\_

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

**C: Record of medicine administered to an individual child (continued)**

Date  
Time given  
Dose given  
Name of member of staff  
Staff initials


Date  
Time given  
Dose given  
Name of member of staff  
Staff initials


Date  
Time given  
Dose given  
Name of member of staff  
Staff initials


Date  
Time given  
Dose given  
Name of member of staff  
Staff initials




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**Appendix 5**



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# Template E

## Record of authorised medicine in/out of school

### Details of Medicine and Parent's/Carer's Acknowledgement

Name of child	
D.O.B	

Staff signature ..... PRINT NAME .....

Parent/Carer signature ..... PRINT NAME .....

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Date			
Name of Medicine Received			
Staff signature			
Parent's signature			
Name of medicine returned			
Staff signature			
Parent's signature			

Date			
Name of Medicine Received			
Staff signature			
Parent's signature			
Name of medicine returned			
Staff signature			
Parent's signature			





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**Template F: contacting emergency services**

**Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.**

**Speak clearly and slowly and be ready to repeat information if asked. Please:**

1. Give your telephone number
2. Give your name
3. Give your location as follows  
*Sandy Lane Nursery and Forest School, Sandy Lane, Orford, Warrington*
4. State what the postcode is: **WA2 9HY** – please note that postcodes for satellite navigation systems may differ from the postal code
5. Provide the exact location of the patient within the school setting
6. Provide the name of the child and a brief description of their symptoms
7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. Put a completed copy of this form by the phone