Fylde Coast Academy Trust

Medical Policy
Supporting Children with Medical Needs
Administering Medicines
Policy 2026-2028

Issue Date	June 2026
Electronic copies of this plan are available from	FCAT Central
Copies of this policy and referenced policies are available from	All FCAT Academies
Date of next review	June 2028 / As required
Person responsible for Policy / review	FCAT H&S Lead
Approved by	FCAT COO
Approval Date	16.06.26

The overarching purpose of this policy is to make sure that all pupils can go on to lead happy and successful lives. This policy sets out specific guidance on the principles that should apply to the management of medical conditions, including the administration of medications.

1 Aims

This policy aims to ensure that:

- pupils, staff and parents understand how FCAT will support pupils with medical conditions
- pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including academy trips and sporting activities.
- FCAT will ensure that sufficient work is provided for pupils whose attendance is significantly disrupted, to enable them to maintain access to the curriculum.

FCAT and each academy will implement this policy by:

- making sure sufficient staff are suitably trained
- making staff aware of student's condition, where appropriate
- making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- providing supply teachers with appropriate information about the policy and relevant pupils
- developing and monitoring individual healthcare plans (IHPs)

2 Legislation and statutory responsibilities

The Trust Board has ultimate responsibility to make arrangements to support pupils with medical conditions. The Trust Board may delegate their responsibilities to the CEO and/or their representatives. They will ensure that this policy is implemented effectively, including through the safeguarding quality assurance procedures and annual Health and Safety audit scheduled for each academy.

3 Roles and Responsibilities

3.1 **FCAT** will ensure that arrangements are in place so that:

- pupils with medical conditions are properly supported
- can play a full and active role in academy life
- can remain healthy and achieve their academic potential
- staff are properly trained and competent to provide the support that pupils need in line with their safeguarding duties

3.2 The **Headteacher** has ultimate practical responsibility for the implementation of the policy across the school and ensuring staff are adequately trained and will appoint an appropriate Senior Leader to have overall responsibility for the implementation of this policy within each FCAT academy

3.3 The **SENDCo** will be responsible for supporting staff in implementing the policy for individual children.Helping develop and monitor Individual Healthcare Plans (IHCPs).Liaising with healthcare professionals regarding necessary staff training.Ensuring pupils with medical needs are not excluded from school trips, physical education, or other activities

3.4 **Staff** supporting pupils with medical conditions during academy hours is not the sole responsibility of one person. Any member of staff may be asked to provide

support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so. Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

3.5 **pupils**

- Where appropriate pupils with medical conditions will be consulted to provide information about how their condition affects them.
- Where appropriate, pupils with medical conditions will be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan.

Pupils with medical conditions will often be best placed to provide information about how their condition affects them.

3.6 **Parents** have the prime responsibility for their child's health.
Parents include any person who is not a parent of a child but has parental responsibility for or care of a child.

Parents will:

- provide the academy with sufficient and up to date information about their child's medical needs.
- tell the academy of any change in prescription which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional.
- be involved in the development and review of their child's IHP and may be involved in its drafting.
- carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment.

Parents should:

- bring their child's medication and any equipment into the academy at the beginning of the academic year
- replace the medication before the expiry date
- as good practice, take into the academy the new asthma reliever inhaler when prescribed
- dispose of expired items to a pharmacy for safe disposal
- during periods of high pollen count, encourage their children, who have been prescribed anti-histamines, to take their medication before school so that their condition can be better controlled during the academy day
- keep their children at home when they are acutely unwell
- ensure that they or another nominated adult are contactable at all times

4 Staff training and support

- Each academy within FCAT will ensure that all staff are aware of the FCAT Medical Policy for supporting pupils with medical conditions and their role in implementing the policy.
- Any member of staff who agrees to accept responsibility for administering medicines to a child does so voluntarily and will have appropriate training and guidance.There is no legal requirement upon staff to administer medication.
- Training needs will be identified during the development or review of individual healthcare plans and will be reviewed annually.
- The family of a child will often be key in providing relevant information to academy staff about how their child's needs can be met, and parents will be asked for their views but will not be the sole trainer. Training will be provided for staff to ensure that they are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. Training for new staff will be provided on induction
- Information will be provided by an appropriate healthcare professional so that staff have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative and emergency measures so that they can recognise and act quickly if a problem occurs.
- Only staff with appropriate training will give medicines or undertake healthcare procedures. (A first-aid certificate does not constitute appropriate training in supporting children with medical conditions).

5 Liability

Fylde Coast Academy Trust will indemnify employees who volunteer to administer medication to pupils. The Trust will likewise indemnify any member of staff acting in good faith for the benefit of a student in an emergency situation.

Fylde Coast Academy Trust will seek indemnity from parents in respect of any liability arising from the administration of medicines.

Where staff have been trained and act in accordance with training and medical advice, no question of individual liability will arise.

6 Individual Healthcare Plan

A Healthcare Plan clarifies for staff, parents and the student the support that can be provided. Individual Healthcare Plans for pupils with medical conditions, (e.g. asthma, anaphylaxis, diabetes, epilepsy) will be drafted with parents/pupils and other healthcare professionals where appropriate. The plan will include:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupils 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 pupils 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 (some pupils will be able to take responsibility for their own health needs) including in emergencies. If a student is self-managing their medication, then this will be 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 pupils medical condition from a healthcare professional; and cover arrangements for when they are unavailable
- who in the academy needs to be aware of the pupils condition and the support required
- arrangements for written permission from parents and the academy for medication to be administered by a member of staff, or self-administered by the student during academy hours
- separate arrangements or procedures required for academy trips or other academy activities outside of the normal academy timetable that will ensure the
  student can participate, e.g. risk assessments
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements

Some pupils may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Healthcare Plans will be reviewed at least annually but some may need to be reviewed more frequently. Where appropriate the Healthcare Plan will be reviewed at the student's Annual Review.

7 The pupils role in managing their own medical needs

- After discussion with parents, pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. Parents will be asked to sign to acknowledge that their child is mature and responsible to manage their own medication. This information will be recorded in the Healthcare Plan.
- If it is not appropriate for a child to self- manage, then relevant staff will help to administer medicines and manage procedures for them.
- Parents should be aware that if their child holds their own medication then academy staff will not be recording the doses self-administered
- If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them; a record of administration will be made.
- If a student refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but will contact the parent and follow the procedure agreed in the individual healthcare plan.
- Parents will be contacted where a student is seen to be using their asthma inhaler more frequently than usual as this may indicate their condition is not well controlled.

8 Administering and Managing medicines

Pupils will only be given prescription or non-prescription medicines after parents have completed a consent form.

When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will be used for the disposal of needles and other sharps. The return of such medicines to parents will be recorded.

Staff members are prohibited from using personal mobile devices, SMS, or private messaging applications to discuss medical requirements with parents. All communication must go through official academy channels, regardless of any pre-existing family relationships or domestic links outside of school hours

8.1 **Prescribed medication** the academy will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a doctor, dentist, nurse or pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will be available inside an insulin pen or a pump, rather than in its original container

- Parents should note the expiry date so that they can provide a new prescription as and when required.
- Medicines will only be administered at academy when it would be detrimental to a child's health or academy attendance not to do so.

Where possible, medicines should be prescribed in dose frequencies which enable them to be taken outside academy hours.

Over the counter (OTC)
The Medicines & Healthcare products Regulatory Agency licences all medicines and classifies them as OTC when it considers it safe and appropriate that they may be used without prescription. FCAT academies only accept OTC medicines that are in-date, labelled, covering advice information leaflets present and provided in the original container by the Parent.

Pupils will not be given medicine containing aspirin unless prescribed by a doctor.

In both cases (Prescribed / OTC) consent forms and quantity forms must be completed for each medicine. Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent.

Prescription (and non-prescription) medicines will only be administered at academy:

- When it would be detrimental to the student's health or academy attendance not to do so and
- Where we have parents' written consent

Short-Term Medical Needs

Many children will need to take medicine during the day at some time during their time in the academy. This will usually be for a short period only, perhaps to finish a course of antibiotics, which will minimise the time that they need to be absent.

Antibiotics prescribed three times a day can be taken out of the academy day. The academy will support children who have been prescribed antibiotics that need to be taken **four** times a day.

8.2 **Controlled Drugs**

- Some medicines prescribed for pupils are controlled by the Misuse of Drugs Act, 1971. A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another student for use is an offence.
- The academy will keep controlled drugs in a locked non-portable container, to which only named staff have access but will ensure they are easily accessible in an emergency.
- Academy staff may administer a controlled drug to the child for whom it has been prescribed in accordance with the prescriber's instructions.
- Only trained staff will administer controlled drugs.
- A record of all medicines administered will be recorded and a record will be kept of any doses used and the amount of the controlled drug held in academy, i.e. total number of doses (tablets) provided to the academy, the dose given and the number of doses remaining.
- A controlled drug, as with all medicines, will be returned to the parent when no longer required to arrange for safe disposal. If this is not possible, it will be returned to the dispensing pharmacist.

9 Record keeping

Each academy will ensure that records are kept of all medicine administered to pupils. In addition, records will be kept for those pupils requiring regular monitoring for conditions such as Diabetes and Epilepsy. Parents will be informed if their student has been unwell and/or received first aid treatment during the academy day. IHPs are kept in a readily accessible place which all staff are aware of.

A record of administration of medicine will not be recorded where the student has taken responsibility for their own medication, e.g. asthma inhalers and take their medication, as and when it is required.

10 Safe storage of medication

- Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature and in the original container in which it was dispensed.
- pupils know where their medication is stored and are able to access them immediately or where relevant know who holds the key.
- A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled, and stored in the Medical Room refrigerator, which is not accessible to pupils. A temperature log of the refrigerator will be taken during the period of storage. (recommended temperature is between 2C &

8C) These medicines must be placed in a suitable additional sealed container, e.g. Tupperware box and clearly marked “medicines”. Under no circumstances should medicines be kept in first aid boxes.

- Medication will never be prepared ahead of time and left ready for staff to administer.
- An audit of student’s medication will be undertaken every half term disposing of any medication that is no longer required.
- It is the parent’s responsibility to ensure their child’s medication remains in date.
- The academy will remind parents when their child’s medication is due to expire.

11 Arrangements for common conditions

11.1 **Asthma (FCAT Asthma Policy)**

- An inventory of all pupils with asthma will be compiled
- An Individual Healthcare Plan will be developed
- Staff will be trained annually to recognise the symptoms of an asthma attack and know how to respond in an emergency
- pupils who have been prescribed reliever inhalers have them with them at all times for those pupils who need them the academy has emergency salbutamol inhalers
- Emergency salbutamol inhalers and spacers are kept In the Medical room within each academy
- Emergency salbutamol inhalers will only be given to pupils previously diagnosed with asthma whose reliever inhaler is not in academy or whose inhaler has run out, who are on the register and whose parents have signed the consent form
- All trained staff will know how and when to use the emergency salbutamol inhaler
- Parents will be asked to give consent on diagnosis of asthma .Parents will be informed of any emergency dosages given.

11.2 **Anaphylaxis (FCAT Anaphylaxis Policy and associated documents)**

FCAT takes a whole-trust approach to allergy management.
FCAT are responsible for coordinating staff anaphylaxis training within each academy via The National College annually and for all new starters. Each Academy will delegate a Designated Allergy Lead.

12 Academy procedure for managing medicines

Medicines should be brought by parents at the beginning of the academy day. A designated member of staff will ask the parent to complete and sign consent form A, B and or C. **2 members of staff must sign forms B and or C.**

Staff will check that the:

- medicine is in its original container as dispensed by a chemist and details match those on the form
- the label clearly states the child’s first and last name
- name of medicine

- dose required
- method of administration
- time/frequency of administration
- patient information leaflet is present to identify any side effects;
- medication is in date

The designated person will log the medicine in the record book and store the medicine appropriately.

The designated person will administer medication at the appropriate time.

The following procedure will be followed:
● The student will be asked to state their name – this is checked against the label on the bottle, authorisation form and record sheet and Bromcom. A picture of the pupil should be pasted onto the Consent form and administration table.
● The name of the medicine will be checked against the authorisation form and record sheet.
● The time, dosage and method of administration will be checked against the authorisation form and record sheet.
● The expiry date will be checked and read out.
● The medicine is administered.
● The administration of medicine is recorded by the designated person. (Controlled mediation must be witnessed by a second adult). Any possible side effects will be noted.
● The medicine is returned to appropriate storage.

If a child refuses to take their medicine, staff will not force them to do so. Staff will record the incident and follow agreed procedures (which are set out in the pupils Healthcare Plan) and contact parents.

If a refusal results in an emergency, the emergency procedures detailed in the Healthcare Plan will be followed.

If the designated person has concerns about a procedure or a medication that they are being asked to administer they will not administer the medicine, but check with the parents or a health professional before taking further action.

13 Off-Site and Extended Academy Activities

- Pupils with medical conditions will be actively supported in accessing all activities on offer including academy trips, sporting activities, clubs and residentials/holidays.
- Preparation and forward planning for all off-site and extended academy activities will take place in good time to ensure that arrangements can be put in place to support a child with a medical condition to participate fully.
- The academy will consider what reasonable adjustments need to be put in place to enable children with medical conditions to participate safely and fully.
- Arrangements will be in place to ensure that an IHCP can be implemented fully and safely when out of academy.

- Individual Risk assessments utilising the MIPRA documentation will identify how IHCPs will be implemented effectively off-site and where additional supervision or resources are required.
- The MIPRA for each child must be completed when taking children with IHCPs off site.
- Risk assessment will involve consultation with the child, parents/carers and relevant healthcare professionals to ensure the pupil can participate safely. Please refer to the Health and Safety Executive (HSE) Guidance on academy Trips. This will be signed off by a member of SLT.
- In some circumstances evidence from a clinician, such as a hospital consultant, may state that participation in some aspects offered is not possible. Where this happens, the academy will make alternative arrangements for the child.

14 Managing Emergencies and Emergency Procedures

- The designated SLT member will ensure that all staff are aware of the academy's general risk management processes and planned emergency procedures.
- Where a child has an IHCP this will clearly define what constitutes an emergency and describes what to do. This may include:
- An Emergency Medical Protocol that details the actions to be taken by staff and supported by specialist training where relevant e.g. seizure management and administration of rescue medication.
- A Personal Emergency Evacuation Plan (PEEP) that details the actions to be taken by staff to support the child's evacuation from the building, supported by specialist training where relevant e.g. use of an Evac chair. The PEEP should also detail the actions to be taken by staff to support how staff will manage the child's medical needs during the evacuation e.g. ensuring appropriate medication is taken outside and is available whilst at the assembly point.
- The academy must have a procedure for contacting emergency services which is displayed in the appropriate places e.g. office, staff room etc and is in the staff are aware of these procedures

15 Medical near misses

A medical near miss can be defined as an error that has the potential to cause harm but fails to do so because of chance, or because it is intercepted.

Examples could include:

- a staff member almost administered the wrong dosage or medication to a student, but this is caught in time and incorrect medication is not administered.
- A pupil's allergic reaction is noticed early, and they are quickly given their prescribed medication or other treatment before a serious reaction can occur.

It is important that near misses are reported and recorded using the online incident reporting system to identify potential risks and make proactive changes to prevent future harm.

16 Safeguarding considerations

If there are any concerns in relation to fabricated or induced illness, they should be shared with the Designated Safeguarding Lead following the academy and FCAT safeguarding procedures.

17 Associated FCAT Policies

- Accessibility plan
- Allergy and Anaphylaxis Policy
- Asthma Policy
- Equality Diversity Inclusion / Equality Scheme
- First aid Policy/Procedures
- Health and safety
- Safeguarding
- Special educational needs information report and policy
- Complaints

18 Further Information

Keeping children safe in education 2025 - GOV.UK

Supporting pupils with medical conditions at school - GOV.UK