



# **Administration of Medicines Policy**

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## Version History

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September 2023	JMc / MR	1	First issue
December 2024	SG		Reference to paracetamol added under section 5 and 6 in relation to it not being a prescribed medication

## 1. Introduction

The administration of medicines to children requires careful attention and adherence to established policies to ensure their safety and well-being. This policy outlines the procedures and guidelines for administering medicines to children in a safe and effective manner.

## 2. Purpose

The purpose of this policy is to ensure that children receive the correct medication, at the correct time, and in the correct dosage. This policy will also ensure that all staff involved in the administration of medicines to children are trained and competent to do so.

## 3. Scope

This policy applies to all staff members who are involved in the administration of medicines to children within the academy.

## 4. Responsibilities

Parents or guardians must provide written consent for medication to be administered to their child. Parents are responsible for providing in date medication before the current medication expiry date.

All staff involved in the administration of medicines to children must be trained and competent to do so.

Medications must be stored securely and according to manufacturer instructions.

All medications must be properly labelled with the child's name, medication name, dosage, and administration instructions.

All staff involved in the administration of medicines to children must keep accurate and up-to-date medication records.

All employees are responsible for following this policy and complying with all relevant legislation. They must take reasonable care of their own health and safety, and that of others who may be affected by their actions.

All employees must report any unsafe practices or hazards to their line manager.

## 5. Authorisation and documentation

Parents/guardians are responsible for providing written authorisation for the administration of medication to their child. The authorisation form should include the name of the medication, dosage, frequency, and any special instructions. The authorisation form should be signed and dated by the parent/guardian.

All medications must be prescribed by a qualified medical practitioner and properly labelled with the child's name, medication name, dosage, and administration instructions, except for paracetamol. Why not ibuprofen and antihistamines too?

## 6. Storage and labelling

All medication must be stored in a secure, locked cabinet that is inaccessible to children. Medication must be kept in its original container with the label intact, and must include the child's name, the name of the medication, dosage, and expiration date. This is except for paracetamol whereby at least the child's name must be referenced.

All medications must be stored securely and according to the manufacturer's instructions.

Emergency medication (inhalers, EpiPens, allergy medication) **MUST NOT** be locked away and must always be available.

Considerations around the following procedures need to be documented.

Disposal/Collection  
Controlled Drugs  
School trips and residentials

## 7. Administration

Medication will be administered by trained staff members who have received specific instructions from the parent/guardian or the child's healthcare provider. Medication will only be given to the child for whom it is prescribed, and only according to the dosage and frequency specified on the authorisation form.

Self-administration

Where parents have attended school to administer medication to their child the medication/prescription/dose/expiry date and the reason for giving it, will be checked by a member of staff and recorded on the children's record on CPOMS.

## 8. Record Keeping

Each time medication is administered, the staff member administering it will complete a medication log that includes the date and time of administration, the name of the medication, dosage, and any adverse reactions or side effects observed. The log will be signed and dated by the staff member.

## 9. Emergency Procedure

In the event of an adverse reaction or overdose, staff will immediately contact emergency medical services and the child's parent/guardian. The child will be closely monitored until emergency services arrive.

## 10. Communication

Parents/guardians will be informed of any medication administered to their child, as well as any observed adverse reactions or side effects. Any changes to the child's medication regimen must be communicated to the staff by the parent/guardian or the child's healthcare provider in writing.

## 11. Training

All staff members who administer medication must receive training in medication administration, including dosage calculations, storage, and emergency procedures. Staff members will be required to renew their training on a regular basis to ensure that they are up to date on the latest medication administration practices.

## 12. Review

This policy will be reviewed periodically to ensure that it remains relevant and up to date. The effectiveness of the policy will be monitored and through feedback from employees.