

HARLOW FIELDS SCHOOL & COLLEGE

Working Together To Succeed



POLICY TITLE:

**SAFE HANDLING OF
MEDICATION AND MEDICAL
POLICY** (to be used in line with the supporting
pupils at school with medical conditions policy)

ADOPTED:

SEPTEMBER 2025

COMMITTEE:

FGB

DATE FOR REVIEW:


SEPTEMBER 2026

AUTHOR:

KATHLEEN M FAHERTY

POLICY NUMBER:

HFP-42.1

This policy was updated, to take effect from:	November 2025
School staff were consulted on this document and it was accepted by the personnel committee on:	N/A
It was ratified by the governing board on:	November 19th.2025
Signed by Chair of C&PR:	

To be used in line with the Supporting Pupils at School with Medical Conditions Policy.

Rationale for Review / Update

This policy has been reviewed and updated to:

- Strengthen alignment with statutory guidance on supporting pupils with medical conditions in schools.
- Clarify procedures around the safe administration of emergency medication (specifically Buccal Midazolam) in line with best practice and healthcare plans.
- Add specific protocols for situations where a second dose cannot be administered, ensuring safety, emergency response, and accurate documentation.
- Introduce clear requirements for parental/carers notification if Buccal Midazolam is administered outside of school, to ensure that staff can apply 24-hour restrictions consistently and keep pupils safe.
- Reaffirm safeguarding principles, inclusion, and the importance of working in partnership with families and health professionals.

Links to Statutory Guidance and Good Practice

This policy is based on and should be read in conjunction with:

- DfE: Supporting Pupils at School with Medical Conditions (Statutory Guidance, December 2015)
<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions>
- Children and Families Act 2014, Section 100 (duty to support pupils with medical conditions).
- SEND Code of Practice (2015) (where a medical condition also amounts to a special educational need or disability).
- Administration of Medicines in Schools and Early Years Settings (DfE/DoH guidance).
- Epilepsy Society / Epilepsy Action clinical guidance on emergency medication, including Buccal Midazolam use.

Recommendation for Approval

This policy is recommended for approval by the Governing Body. It ensures compliance with statutory duties and reflects best practice for the care and safeguarding of pupils with medical conditions.



Signed (Chair of Governors):

Date: 19th November 2025

1. Introduction

Harlow Fields School and College is committed to ensuring that all pupils with medical conditions are properly supported so that they can play a full and active role in school life, remain healthy and achieve their academic potential. This policy sets out the arrangements to support pupils at school with medical conditions, in line with statutory requirements.

2. Legal Framework

This policy has due regard to statutory guidance issued by the Department for Education (DfE) – *Supporting Pupils at School with Medical Conditions* (2015) – and Section 100 of the Children and Families Act 2014.

3. Roles and Responsibilities

- Governing Body: Ensures arrangements are in place to support pupils with medical conditions and that they are implemented effectively.
- Headteacher: Ensures this policy is implemented, staff are trained, and appropriate resources are available.
- Staff: Any member of staff may be asked to provide support to pupils with medical conditions, including administering medicines, although they cannot be required to do so.
- School Nurse/Healthcare Professionals: Provide support, training and advice.
- Parents/Carers: Must provide the school with sufficient and up-to-date information about their child's medical needs.

4. Procedures

- Pupils with medical conditions will have a care plan, developed in partnership with the school, parents, healthcare professionals, and where appropriate, the pupil.
- The care plan will detail the child's medical needs, triggers, signs, symptoms, treatments, the level of support needed, and what constitutes an emergency.

5. Administration of Medication

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- The school will only accept medicines prescribed by a doctor, dentist, nurse prescriber, or pharmacist prescriber.
- Medicines must be in-date, labelled, provided in the original container, and include dosage instructions.
- Written consent from parents must be obtained before medicines are administered.
- A record will be kept of all medicines administered to pupils.

5.1 Buccal Midazolam – Procedure if Second Dose Cannot Be Administered

In accordance with the pupil's care plan and the school's Administration of Medication Policy, Buccal Midazolam may be administered in the event of a prolonged or clustered seizure, as prescribed by a medical professional.

If a Second Dose Is Indicated but Cannot Be Administered due to 24 hour administration policy: In situations where a second dose is clinically indicated but cannot be administered safely or practically, due to following the health/epilepsy care plan, or due to factors such as the pupil's physical positioning, risk to staff or the pupil, or refusal—the following steps must be taken:

1. Call Emergency Services (999) Immediately

- Clearly state that the pupil has an active care plan requiring Buccal Midazolam and that the second dose could not be administered.
- 2. Inform Parents/Carers
 - Notify the pupil's parents or carers as soon as possible.
- 3. Monitor and Ensure Safety
 - The pupil must be continuously monitored and kept in a safe, stable position until emergency medical personnel arrive.
- 4. Document the Incident
 - Record all relevant details, including:
 - Time and nature of seizure onset
 - Timing of any medication administered
 - Clear explanation of why the second dose was not given

Important Note: Second Dose Restrictions

- **Single-Dose Limitation:** If a pupil has been administered Buccal Midazolam, a second dose may not be prescribed or permitted within a 24-hour period, depending on the epilepsy care plan.
- **Emergency Protocol for Subsequent Seizures:** If further seizure activity occurs during this 24-hour period, an ambulance must be called immediately, even if the pupil is still at school.
- **Recommendation to Stay at Home:** It is strongly advised that the pupil remains at home during the 24-hour post-medication period to avoid potential medical emergencies and reduce the need for emergency interventions at school.
- **Restrictions if Attending School:** If the pupil does attend school within this 24-hour period, they must not participate in:
 - Physical Education (PE)
 - Swimming lessons
 - Off-site visits or tripsThese restrictions are in place to minimise the risk of seizures occurring in situations where immediate emergency support may not be readily available.

5.2 Parental Responsibility – Notification of Buccal Midazolam Use Outside School

Parents and carers must inform the school immediately if Buccal Midazolam has been administered at home or in any setting outside of school. This is essential to ensure:

- The safety of the pupil during the 24-hour period following administration.
- That staff are aware of any medication restrictions in place.
- That appropriate support and emergency protocols are followed while the pupil is at school.

Failure to notify the school may result in a delay in emergency response or put the pupil at risk due to lack of accurate medical information.

- All medication provided to the school must be in its original container with the pharmacy-issued prescription label attached (this includes any medication that is not available over the counter).
- The prescription label must include:
 - The child's full name

- The date of issue
- Exact dosage instructions (including how and when to administer)
- Method of administration (e.g. orally, crushed, via gastrostomy, jejunostomy [JEG], etc.)
- Any additional relevant instructions provided by the prescriber
- All medication must be within its expiry date for the entire period it is held in school.
- Parents/carers must inform the school immediately if there are any changes to the medication, dosage, or administration method.
- Medication must be handed directly to a member of staff authorised to receive it — pupils must not transport medication themselves.

5.3 Controlled Medication

Some medicines are regulated under the Misuse of Drugs Act 1971 and the Misuse of Drugs Regulations 2001 because of the potential for misuse, dependence, or harm. These are known as controlled medications (controlled drugs, CDs).

Examples include (but are not limited to):

- ADHD medication (e.g. methylphenidate, dexamfetamine, lisdexamfetamine)
- Strong painkillers (e.g. morphine, oxycodone, fentanyl)
- Certain anti-anxiety or sleep medicines (e.g. diazepam, lorazepam, temazepam)
- Some anti-epileptic and seizure rescue medication (e.g. midazolam, clobazam, clonazepam)

5.4 Additional Requirements for Controlled Medication:

- Controlled medication must be delivered directly to a designated, authorised staff member. This is a member of staff who has had medication training including checking and administering.
- The school will store all controlled medication in a locked, non-portable cabinet with access restricted to authorised staff.
- A bound logbook (or secure electronic record) will be maintained to record:
 - Date and time medication is received
 - Quantity received
 - Date, time, and quantity administered
 - Signatures of two staff members for each administration
 - Quantity returned to the parent/carer or disposed of
- Quantities will be counted and reconciled daily when in use.
- Any unused controlled medication will be returned to the parent/carer for disposal via a pharmacy, with a record kept.

The school will not accept or administer any medication that does not meet the above labelling, storage, and expiry requirements.

5.5 Emergency and Short-Term Medication

- Individual healthcare plans will be agreed for pupils requiring emergency medication (e.g. epilepsy, allergies).
- Emergency medication may be administered by any trained staff member.
- For short-term prescriptions (e.g. antibiotics), parents must provide medication in the original container with clear instructions. Medications only due within the school day will be

administered. For example, if antibiotics are three times daily, then this can be administered at home.

5.6 Paracetamol and Over-the-Counter (OTC) Remedies

- Paracetamol may only be given with **written parental consent**. Consent forms are available at school on request.
- It will be administered **once only** during school hours.
- Parents will be contacted before giving paracetamol in the morning, and informed after administration in the afternoon.
- OTC remedies (e.g. creams) may only be used if:
 - Provided by parents,
 - Labelled with the child's name, and
 - Accompanied by written consent.

6. Prescription Medication Labelling

It is the responsibility of the parent/carer to ensure that any medication provided to the school, which is not available over the counter, is clearly labelled with a valid prescription label. The label must include:

- The child's full name
- The date of issue
- Clear dosage instructions (including how and when to administer)
- The method of administration (e.g. orally, crushed, via gastrostomy, jejunostomy [JEG], etc.)
- Any additional relevant instructions provided by the prescriber

Parents/carers must also ensure that all medication provided is within its expiry date for the duration it is held in school.

The school will not accept or administer any prescription medication that does not meet these labelling or expiry requirements.

7. Staff Training and school responsibilities

Staff who support pupils with medical needs will receive suitable and sufficient training to achieve competency. Training will be updated regularly.

- Only staff trained and competency-assessed by the school nurse may administer medication.
- All medication will be stored securely in a locked cabinet or fridge, either in the medical room or the classroom. Emergency medication will be securely located close to the pupil, ideally in their classroom or as close as possible.
- Accurate records will be kept of all medication received, administered, and returned.
- Staff administering medication must follow the **Medication Giver/Checker system**:
 - Medication Giver = trained staff member who administers medication
 - Medication Checker = trained staff member who witnesses and verifies administration
- Medication refusals will never be forced. Parents will be contacted, and the refusal recorded.
- Medication must be available and administered on school trips in line with this policy.

8. Record Keeping

The school will keep written records of all medicines administered to children. Parents will be informed if their child has been unwell at school.

Errors and Incidents

- Any medication error must be reported immediately to the Headteacher and School Nurse.
- Parents will be informed without delay.
- A Medication Error Record Form and incident report must be completed the same day.

9. Disposal of Medication

- Parents are responsible for renewing supplies and collecting unused or expired medication.
- If collection is not possible, the school may return it to a pharmacy for disposal.

10. Emergency Procedures

Pupils' care plans will clearly define what constitutes an emergency and explain what to do. All relevant staff will know what action to take, including who is responsible in an emergency.

11. Unacceptable Practice

The school will ensure that no child with a medical condition is denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, it is not acceptable to:

- Prevent children from easily accessing their medication.
- Ignore the views of the child or their parents.
- Send children home frequently, or prevent them from staying for normal school activities, unless specified in their care plan.

12. Complaints

Parents with concerns about the support their child receives should discuss these with the class teacher or headteacher in the first instance. If this does not resolve the issue, a formal complaint may be made via the school's Complaints Policy.

A copy of the following documents are below and available on request at school

- 1. REQUEST FOR SCHOOL TO ADMINISTER MEDICATION**
- 2. MEDICATION ADMINISTRATION CHART**
- 3. MEDICATION ERROR RECORD**
- 4. REQUEST FOR AN AMBULANCE**
- 5. INDIVIDUAL MEDICATION RECORD**

