Administration of Medicines School Policy

Melbourne Infant & Nursery School

Reviewed by	Resources Committee
Review period	Annual
Last reviewed	Resources Committee, Summer 2025
Approved at	Resources Committee, Autumn 2026
Next review	Resources Committee, Autumn 2027

2026.08 V3

What's Changed – Version 03 (July 2026)

This version of the Administration of Medicines Model School Policy has been substantially revised to align with the Derbyshire County Council Supporting Pupils with Medical Needs Guidance and the new Allergy and Anaphylaxis Model School Policy. It has been streamlined and restructured to improve clarity, consistency and ease of implementation, while reducing duplication across the Supporting Pupils with Medical Needs school document suite.

Key changes include:

- Index added, updated responsibilities for governing bodies, headteachers, staff and parents/carers, including clearer confirmation that staff participation in administering medicines is voluntary unless included within their contract, role or job description.
- Clearer links to Individual Healthcare Plans, Allergy Action Plans, Asthma Action Plans, emergency medication and the school's Allergy and Anaphylaxis Policy.
- Removal of duplicate forms and supporting information, with signposting to the Supporting Pupils with Medical Needs Guidance as the central source for templates, records and supporting links.
- Strengthened requirements for receiving, checking, storing, administering and recording medication, including parental consent, labelling, expiry dates, written instructions and access to emergency medicines.
- Clearer procedures for medication changes, refusals, errors, incomplete doses and concerns, including when advice should be sought.
- Strengthened safeguards for non-prescription medication, including checks of previous doses, dosage limits and intervals, recorded administration and parental communication. Schools will not normally hold general stocks unless formally approved and supported by a written procedure.
- Clearer requirements for complex or higher-risk health needs, including healthcare plans, specialist training, competency confirmation and healthcare professional advice where required.
- Updated controlled drugs arrangements, including clearer storage, administration, witnessing, balance and audit requirements, and the use of a suitable bound or compliant computerised Controlled Drugs Register.
- Updated terminology, references and local editing fields throughout to support consistent implementation by schools.

Administration of Medicines

Model School Policy

1. Statement of Intent

It is the policy of Melbourne Infant and Nursery School that the school will administer medication where this is required during the school day to support a pupil's health, attendance or access to education. This applies to prescription medicines only, where taking the medicine during school time is necessary.

Where a pupil is too unwell to attend school, parents and carers should make appropriate arrangements for the pupil to remain at home and seek medical advice where necessary. Medicines should not be used as a reason for a pupil to attend school when they are not well enough to do so.

The school will put appropriate and proportionate arrangements in place for the administration of medicines. Staff involvement in administering medicines is voluntary, unless this forms part of the staff member's contract, role or job description. Staff will not be required or pressured to administer medicines where this has not been agreed. Individual decisions on involvement will be respected. Punitive action will not be taken against staff who choose not to consent.

The school will only accept medicines that are in the original container or packaging, clearly labelled where prescribed, in date, and accompanied by a completed parental agreement form. Parents and carers are responsible for supplying medicines that meet these requirements and for collecting or arranging the safe disposal of medicines that are no longer required or have expired.

This policy should be read alongside the Derbyshire County Council Supporting Pupils with Medical Needs Guidance and, where relevant, the school's Allergy and Anaphylaxis Policy. Allergy-specific arrangements, including Allergy Action Plans, Individual Allergy Risk Assessments, prescribed and spare adrenaline auto-injectors, anaphylaxis emergency response and allergy-related incident review, are set out in the Allergy and Anaphylaxis Policy.

The Derbyshire County Council Supporting Pupils with Medical Needs Guidance explains the status of legal requirements, statutory guidance, recommended practice and local discretion. It also contains or signposts the forms, templates, records and supporting links referenced in this policy.

Contents

Sections	Page
1. Statement of Intent	2
2. Scope	4
3. Roles and Responsibilities	4
3.1 Governing body	4
3.2 Headteacher	4
3.3 Staff who volunteer to administer	5
4. Arrangements for Administering Medication	5
4.1 Receipt of Medication	5
4.2 Storage of Medication	7
4.3 Storage and Administration of Controlled Drugs	8
4.4 Administration of Medicines	8
4.5 Changes to Medication	10
4.6 Non-Prescription Medicines	10
4.7 Complex Health Needs	11
4.8 Specialist Training	12
5. Appendix 1 - Controlled Drugs	13
5.1 Lone working	14
5.2 Off-site and in the Community	14
5.3 THE CONTROLLED DRUGS REGISTER – SPECIFIC REQUIREMENTS FOR SAFE STORAGE & ADMINISTRATION OF CONTROLLED DRUGS	15
5.4 Storage:	15
5.5 Recording:	15

2. Scope

This policy applies to the receipt, storage, administration, recording, return and disposal of medication for pupils during the school day and school-arranged activities. It covers prescription medication and, where adopted within the school's Statement of Intent, non-prescription medication.

The policy applies where pupils self-administer medication, self-administer under supervision or receive medication from an appropriately authorised member of staff. It also applies to emergency and rescue medication, controlled drugs and medication required by pupils with complex or higher-risk health needs.

The policy should be applied during educational visits, sporting activities, clubs and other school-arranged provision where medication may be required. Allergy-specific medication and anaphylaxis arrangements must also be managed in accordance with the school's Allergy and Anaphylaxis Policy.

3. Roles and Responsibilities

3.1 The governing body will:

- review this policy periodically to ensure it remains relevant and up to date
- support the headteacher and staff in putting appropriate and proportionate medicines arrangements in place
- make suitable resources available, where required, to support the safe administration and storage of medicines
- ensure key information about parents' and carers' responsibilities is communicated in a suitable way, for example through the school website, prospectus, newsletters or other parent communications
- ensure suitable facilities are available for the administration and storage of medicines
- ensure this policy is implemented alongside the Derbyshire County Council Supporting Pupils with Medical Needs Guidance and the school's Allergy and Anaphylaxis Policy.

3.2 The Headteacher will:

- be responsible for the day-to-day implementation of this policy
- ensure Individual Healthcare Plans, Allergy Action Plans, Asthma Action Plans and associated risk assessments are considered where required
- ensure staff who agree to administer medicines are competent, confident and clear about their responsibilities
- arrange suitable training where required and ensure this is kept under review
- ensure medicine administration and recording arrangements are monitored in line with this policy
- ensure allergy-related medication and anaphylaxis arrangements are managed in line with the school's Allergy and Anaphylaxis Policy where relevant
- report any significant issues arising from the implementation of this policy to the governing body
- ensure the policy is applied consistently and fairly across the school

- resolve concerns or disputes about the application of this policy where they arise
- ensure medicines are only administered where the appropriate written permission has been obtained.

3.3 Staff who volunteer to administer medication will:

- only administer medicines that they are competent, confident and, where necessary, trained to administer
- check that the correct medicine is being given to the correct pupil, in line with the prescription label, parental agreement form, Individual Healthcare Plan, Allergy Action Plan, Asthma Action Plan or other agreed written instructions where relevant
- record all medicines administered using the agreed medicine administration record
- report any medicine error, refusal, concern or near miss to the headteacher or named responsible person as soon as possible
- follow the school's Allergy and Anaphylaxis Policy where allergy medication, adrenaline auto-injectors or suspected anaphylaxis are involved
- attend any required refresher training identified by the school, training provider or relevant healthcare professional
- know who to contact for advice or support if they are unsure about any aspect of medicine administration.

4. Arrangements for Administering Medication

The following arrangements set out how medicines will be received, stored, administered and recorded at Melbourne Infant School. These arrangements should be applied alongside the Derbyshire County Council Supporting Pupils with Medical Needs Guidance and, where allergy medication or anaphylaxis arrangements are involved, the school's Allergy and Anaphylaxis Policy.

4.1 Receipt of Medication

No prescription or non-prescription medicine will be accepted into school unless it is accompanied by a completed parental agreement form. The relevant parental agreement template is available in the Derbyshire County Council Supporting Pupils with Medical Needs Guidance.

The completed parental agreement form and medicine should be brought to the School Office.

The following job roles are authorised to receive medicines into school:

- School Business Assistant
- School Business Officer
- Deputy Headteacher
- Headteacher

Medicines should only be handed to authorised staff at the agreed location. Parents/carers should be informed that medicines must not be handed to class

teachers, teaching assistants or other staff at the start of the school day unless those staff are named and authorised to receive medicines under this policy. Where a medicine is handed to a member of staff who is not authorised to receive it, they must take prompt steps to pass it to an authorised member of staff without checking or administering it, and the school should remind parents/carers of the agreed process.

Medicines will only be accepted where they are:

- in the original container or packaging
- clearly labelled with the pupil's name
- in date
- accompanied by clear written instructions
- consistent with the parental agreement form and, where relevant, the pupil's Individual Healthcare Plan, Allergy Action Plan, Asthma Action Plan or other agreed written care plan.

Prescription medicines must include the original dispensing label. This should clearly state the pupil's name, the name of the medicine, dosage, frequency, route of administration, date of dispensing, and any relevant cautions or warning messages.

Non-prescription medicines must be in the original container or packaging, clearly labelled with the pupil's name, in date, and accompanied by written parental consent.

Where instructions are unclear, incomplete, or do not match the prescription label, parental agreement form, IHP or agreed care plan, the medicine will not be administered until the issue has been resolved. The parent/carer will be informed as soon as possible so that alternative arrangements can be made if required.

Where practicable, parents/carers should provide only the amount of medicine required during the school day. For longer-term medication, the school may agree suitable storage arrangements with parents/carers, provided the medicine remains in date, correctly labelled and safely stored.

The quantity of medicine received should be checked and recorded. Where appropriate, this should be agreed and signed by the receiving member of staff and the parent/carer.

The school will make parents and carers aware of these requirements through the school website.

On receipt of the medicine and completed parental agreement form, the school will create or update the relevant medicine administration record. ***Medicine administration record templates are signposted in the Derbyshire County Council Supporting Pupils with Medical Needs Guidance.***

Medicine administration records should be checked for accuracy before use. Where practicable, this should involve two members of staff checking that the information from the prescription label, parental agreement form and any IHP is accurate, consistent and complete.

4.2 Storage of Medication

All medicines should be brought to the School Office.

The school will store medicines as follows:

Medicines which are not emergency or rescue medicines, such as antibiotics or pain relief, will be stored in a secure location in the School Office

Medicines requiring refrigeration will be stored in a labelled container within a fridge accessible only to authorised staff in the staff room. Where long-term medication is stored in a refrigerator, the school will ensure appropriate arrangements are in place to monitor storage conditions and maintain the medicine in accordance with the manufacturer's instructions.

Emergency or rescue medication, such as asthma inhalers, adrenaline auto-injectors (AAIs) and other emergency medicines, will be readily accessible when required and must not be locked away where this could delay treatment. Where a pupil has an allergy or is at risk of anaphylaxis, the school will follow the arrangements set out in its Allergy and Anaphylaxis Policy.

Where a pupil is considered competent to carry and administer their own emergency medication, the school will support them to do so in accordance with their IHP or other agreed arrangements.

Where self-carry arrangements are not in place, the school will ensure emergency medication is stored in an agreed location that allows prompt access by relevant staff, while remaining available only for the pupil for whom it has been prescribed.

In this school, emergency medication will be stored in the First Aid Cupboard in the Accessible Toilet.

Adrenaline auto-injectors and other prescribed adrenaline devices must be stored in line with the manufacturer's instructions and the school's Allergy and Anaphylaxis Policy.

The school will ensure suitable arrangements are in place for emergency medication during breaktimes, lunchtimes, PE lessons, educational visits and other activities where pupils may be away from their usual classroom or learning area.

NB: ALL MEDICATIONS WILL BE STORED IN THEIR ORIGINAL LABELLED/NAMED CONTAINERS IRRESPECTIVE OF WHERE THEY ARE STORED.

4.3 Storage and Administration of Controlled Drugs

The school will ensure controlled drugs are stored securely, access is restricted to authorised staff, and appropriate records are maintained for their receipt, administration, return, disposal and remaining balance.

4.4 Administration of Medicines

There are 3 levels of administration of medicines in schools:

A. The child self-administers their own medicine of which the school/ service is aware

B. The child self-administers the medication under supervision
C. A named and trained consenting staff member administers the medicine

Further information relating to self-administration, supervision arrangements, Individual Healthcare Plans and supporting pupils with medical conditions is contained within the Derbyshire County Council Supporting Pupils with Medical Needs Guidance.

Administering medication is voluntary unless it forms part of a staff member's contract, role or job description. Staff will not be required or pressured to administer medicines where this has not been agreed. The school will seek to put appropriate and proportionate arrangements in place so that pupils can access education safely.

- Individual decisions on involvement will be respected.
- Punitive action will not be taken against staff who choose not to consent where administration of medicines is not part of their agreed role.

In this school, medicines will only be administered by staff who have agreed to do so and who have received appropriate information, instruction or training where required.

Named staff	Role
Charlotte Gibbs	Headteacher
Verity Howell	Deputy Headteacher
Jo Polovina	Lead First Aider
Michelle Galloway	School Business Assistant
Rhian Webb	School Business Assistant
Kathryn Fletcher	School Business Officer

For most routine administration of medicines, knowledge of this policy and the guidance contained within it will be sufficient as staff will not be expected to do more than a parent/carer who gives medication to a child.

All staff who administer medicines will receive sufficient information, instruction and, where necessary, training to undertake this task.

For administration involving a specialised technique, rescue medication or higher-risk support, training must be provided or confirmed by an appropriate healthcare professional, competent training provider or other suitably competent person or organisation.

Staff undertaking this training must be confirmed as competent before administering the medicine and any refresher training or reassessment requirements needed to maintain competence must be specified and recorded.

Examples may include, but are not limited to, diabetes support, epilepsy rescue medication, gastrostomy-related medicine administration and rectal medication.

For all administration of medicines the following procedures will be adopted:

1. Wherever possible, two staff will be involved in the process to ensure that the correct dose of the correct medicine is given to the correct pupil and, once the medicine has been administered, both will sign the Medicines Administration Record. The relevant medicine administration record templates are signposted in the Derbyshire County Council Supporting Pupils with Medical Needs Guidance.

   (NB: FOR CONTROLLED DRUGS THERE MUST BE 2 PEOPLE IN ATTENDANCE).

2. Before the medicine is given each time, staff will ensure they have checked the following

   1. right pupil
   2. right medicine
   3. right dose
   4. right time
   5. right route
   6. right date
   7. expiry date
   8. written consent
   9. prescription label or written instructions
   10. Individual Healthcare Plan, Allergy Action Plan, Asthma Action Plan or agreed care plan where relevant
   11. whether the medicine has already been administered
   12. whether any required equipment is available
   13. whether there are any concerns about the pupil's condition, the medicine or the instructions provided.

3. Medication will only be given to 1 pupil at a time and the Medicines Administration Record Sheet will be completed before any medication is given to the next pupil.

4. Only the medication for that pupil will be taken out of the storage and this will be returned to storage before starting the process for the next pupil

If there is any doubt whether a medicine should be administered for any reason, the medicine will not be given. Further advice should be sought from health professionals and/or parents/carers, and the concern should be recorded and reported to the member of staff's line manager.

5. If a pupil refuses to take their medication, or it is suspected that they have not taken a full dose, staff will record this on the Medicines Administration Record and seek advice from parents/carers and/or an appropriate health professional as soon as possible. This should also be reported to the named responsible person. **Staff must not force the pupil to take the medicine or attempt to give another dose unless advised to do so by an appropriate health professional or emergency services.**

4.5 Changes to Medication

The school will not change the medicine, dose, strength, frequency, route or timing of a prescribed medication without written authorisation from the prescriber or another appropriate health professional.

Where a medicine, dose, strength, frequency, route or timing changes, parents/carers must provide updated written information and complete a new parental agreement form where required. Verbal messages from parents/carers are not sufficient to alter prescribed medication instructions.

Where the change relates to allergy medication, adrenaline auto-injectors or anaphylaxis arrangements, the school will review the pupil's Allergy Action Plan, Individual Healthcare Plan and relevant arrangements under the Allergy and Anaphylaxis Policy before the updated arrangements are implemented, unless emergency action is required to preserve life or prevent serious harm.

4.6 Non-Prescription Medicines

The position selected below must be consistent with the school's Statement of Intent.

The school will not accept non-prescription medications.

Where an antihistamine or other non-prescription medication forms part of a pupil's allergy arrangements, the school will follow the pupil's Allergy Action Plan, Individual Healthcare Plan where required, and the school's Allergy and Anaphylaxis Policy.

The school will not normally hold a general stock of non-prescription medication for administration to pupils. Exceptionally, the school may decide to hold specified non-prescription medication where this has been formally approved through its local governance arrangements and is supported by a written procedure. The procedure must address the circumstances in which the medication may be administered, written parental consent, checks of maximum dosage and any previous dose, safe storage, authorised staff, administration records, stock and expiry checks, dosage limits, and recorded communication with parents/carers following administration.

The school will not administer any medication containing aspirin to a pupil under 16 unless it has been prescribed by a qualified prescriber.

4.7 Complex Health Needs

Pupils with complex or higher-risk health needs will have an Individual Healthcare Plan or agreed care plan where this is required. The plan will be developed in partnership with parents/carers, the pupil where appropriate, school staff and relevant healthcare professionals, particularly where clinical input, emergency actions, specialist medication or competency-based training are required.

The plan will set out how and when medicines should be administered, any emergency arrangements, and any information, instruction, training or competency confirmation required for staff supporting the pupil.

Where relevant, the school will also take account of Allergy Action Plans, Asthma Action Plans and other healthcare professional advice relating to the pupil's condition.

Where a pupil has an allergy or is at risk of anaphylaxis, allergy-specific arrangements will be managed in line with the school's Allergy and Anaphylaxis Policy.

Further information relating to specific medical conditions, emergency arrangements, forms, templates and supporting guidance is contained within the Derbyshire County Council Supporting Pupils with Medical Needs Guidance.

4.8 Specialist Training

Some medical conditions, medicines or emergency arrangements require staff to receive specific information, instruction or training before supporting a pupil or administering medicine in accordance with an Individual Healthcare Plan or agreed care plan.

Where a pupil requires medicine administration involving a specialised technique, rescue medication or higher-risk support, the school will seek advice from the relevant healthcare professional and, where required, Derbyshire County Council Health, Safety and Wellbeing before agreeing arrangements.

The arrangement must be supported by written parental consent, healthcare professional instruction, an Individual Healthcare Plan or equivalent written plan, appropriate training, competency confirmation and any required insurance or indemnity approval.

Staff will not administer medicine involving a specialised technique, rescue medication or higher-risk support unless they have received the required information, instruction, training and competency confirmation.

5. **Appendix 1** - Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act 1971 and its associated regulations. Some may be prescribed as medication for use by children. Controlled drugs likely to be prescribed to children which may need to be administered in school are, for example, Methylphenidate and Dexamfetamine for ADHD or possibly Morphine/Fentanyl for pain relief.

There are legal requirements for the storage, administration, records and disposal of controlled drugs. These are set out in the Misuse of Drugs Act Regulations 2001 (as amended). They do not apply when a person looks after and takes their own medicines.

Any trained member of staff may administer a controlled drug to the pupil for whom it has been prescribed. Staff volunteering to administer medicine should do so in accordance with the prescriber's instructions and these guidelines.

- A child who has been prescribed a controlled drug may legally have it in their possession to bring to school/setting.
- Once the controlled drug comes into school (in accordance with previous instructions on receipt of medication) it should be stored securely in a locked container within a locked cabinet to which only named staff should have access.
    - A record of the number of tablets/doses received, should be kept for audit and safety purposes.
- When administering a controlled drug, two people will be present - unless it has been agreed that the child may administer the drugs him or herself.
- The administration of **controlled drugs requires 2 people**. One should administer the drug, the other witness the administration. Both should complete the administration record.
- In some circumstances a non-controlled drug should also be treated in the same way where a higher standard is considered necessary. For example, the administration of rectal diazepam or buccal midazolam – these may be requirements imposed by insurers as a condition of cover
- On each occasion the drug is administered, the remaining balance of the drug should be checked and recorded by the person(s) administering the drugs.
- A controlled drug, as with all medicines, will be safely disposed of by returning it directly to the parent/carer when no longer required to arrange for safe disposal
- If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label).
- Misuse of a controlled drug, such as passing it to another pupil for use, is an offence and will be managed through the school's behaviour or disciplinary procedures. The police may be involved where appropriate.
- The school will minimise the storage of controlled drugs on site whilst recognising the need to avoid daily receipt and logging arrangements. As a

result, the school will not normally store more than one week's supply of a controlled drug at any one time.

5.1 Lone working

In exceptional circumstances, where it is not possible to ensure that two staff are available and strict adherence to the two-person requirement could lead to a pupil being denied access to education or the safety of the pupil or staff being compromised, the school will put suitable alternative arrangements in place.

These arrangements must be discussed and agreed by the Headteacher and Governing Body, taking advice from the employer, Derbyshire County Council Health, Safety and Wellbeing, the relevant healthcare professional and insurers where required.

The arrangements must be recorded in writing and agreed by the parents/carers and the member of staff who has agreed to administer the medicine.

For Community and Voluntary Controlled schools, the arrangements must also be agreed by the Local Authority.

If staff are concerned that a medicine that is not a controlled drug should be managed to the same standard, it may be treated as a controlled drug.

5.2 Off-site and in the Community

This will cover a range of circumstances for which appropriate arrangements will need to be made. They will cover, for example, a range from a short off-site 1:1 activity to a longer, perhaps overnight, activity with a group of young people. The minimum requirements are:

- there must be a named person responsible for safe storage and administration of the medicine;
- a second person will witness the administration;
- during short duration or day visits off site if the controlled drug is required to be administered the named person should carry the medicine with him/her at all times and a lockable/portable device such as a cash box will be used to prevent ready access by an unauthorised person.
- only the amount of medicine needed whilst off-site should be taken. It should be stored in a duplicate labelled container or package, where this can be provided by the pharmacist, and must have a duplicate of the original dispensing label attached.
- where a paper Controlled Drugs Register is used, the register may also be taken where this is appropriate, for example during a long absence where the register is not required elsewhere. Alternatively, a temporary record may be kept during the visit and transferred into the Controlled Drugs Register on return to school. Where a compliant computerised Controlled Drugs Register system is used, the school must ensure the required record can be made or accessed in line with the system’s procedures.

- For residential visits on arrival the controlled drug will be transferred from its portable storage and be stored in accordance with the guidance for storage in school wherever possible.

5.3 THE CONTROLLED DRUGS REGISTER – SPECIFIC REQUIREMENTS FOR SAFE STORAGE & ADMINISTRATION OF CONTROLLED DRUGS

5.4 Storage:

- The controlled drug must be stored in a lockable cupboard/cabinet - *this may be the safe cupboard used for all medicines, in which case there should be a separate, labelled container for the drugs and, where a paper Controlled Drugs Register is used, the register.*
- Staff responsible for the administration of the controlled drug must be aware of its location and have access
- The controlled drug must only be given by a member of staff who has received instruction in its administration
- The dosage must be witnessed by a second member of staff, wherever possible - *where this is not possible, for example in 1-1 situations, a manager/supervisor should countersign the record at agreed intervals*
- Any discrepancies must be reported and investigated immediately.

NB – Emergency medicines

Where a controlled drug, or a medicine being managed to the same standard, is required for emergency use, such as buccal midazolam, the need for ready access will override the usual locked storage arrangements where delay could place the pupil at risk. The medicine must still be stored securely and must not be accessible to pupils unless self-administration has been agreed.

5.5 Recording:

The receipt, administration, return and disposal of controlled drugs will be recorded in a Controlled Drugs Register. The Controlled Drugs Register must be kept either in a bound book with numbered pages, which must not be a loose-leaf register or card index, or in a compliant computerised system where each entry is attributable, auditable and maintained in accordance with relevant legal and best practice requirements. Loose printed sheets must not be used as the Controlled Drugs Register.

Schools should obtain a bound Controlled Drugs Register book with numbered pages from a reputable medical, pharmacy, school medical or care-sector supplier, or use a compliant computerised Controlled Drugs Register system. A compliant computerised system is one that records who made each entry, when the entry was made, what was recorded, and provides an audit trail so entries cannot be deleted, altered or replaced without trace.

- A separate page or section must be maintained for each pupil, each controlled drug that is stored, and each strength and form of that drug.
- The prescriber's instructions and any additional guidelines will be followed.

- The controlled drug register replaces the Medicines Administration Record (MAR) for the specific drug only. The health and medicine information sheet will also be completed.
- Entries must not be deleted, overwritten or altered in a way that removes the original entry. Where a paper register is used, pages must not be removed. Where a compliant computerised system is used, the system must retain an audit trail of entries and corrections.
- If a recording error is made in a paper register, a corrective entry should be made that preserves the original entry and clearly directs the reader to the corrected record. If a recording error is made in a compliant computerised system, it must be corrected in accordance with the system's procedure so that the original entry and correction remain auditable.
- If it is an administration error, the school's medication error reporting arrangements and the Derbyshire County Council Supporting Pupils with Medical Needs Guidance will be followed.

Controlled Drugs Register requirements are set out in the Derbyshire County Council Supporting Pupils with Medical Needs Guidance. Schools must ensure that any register used meets the required format and record-keeping standards. Further guidance, forms, templates, records and national reference links relating to medicines, Individual Healthcare Plans (IHPs), emergency medicines, controlled drugs, medical conditions, allergy and anaphylaxis are contained within the Derbyshire County Council Supporting Pupils with Medical Needs Guidance.