

Three Counties Academy Trust



Administering Medication Policy

#SG20

Last amended 13th August 2026 (v1.0)

Policy lifespan 3 years. Subject to annual review. To be reviewed no later than 31st August 2029

Version history

Date	Version	Details	Actioned by	PDF to Websites	Word to Governor Hub
13.08.26	1.0	Formatted to house style and checked against model for updates	MF	✓	✓

Contents:

Version history

Policy abbreviations and acronyms

Statement of intent

Member, Trustee, Local Governor and Staff Summary

Parent and Pupil Summary

1. Legal framework
2. Roles and responsibilities
3. Training staff
4. Receiving, storing and disposing of medication
5. Administering medication
6. Medical devices
7. IHPs
8. Educational trips and visits
9. Medical emergencies

Monitoring and review

Appendices

- A Administering medication parental consent form
- B Administering medication risk assessment

Trust Glossary

Policy Abbreviations and Acronyms

AAI	Adrenaline Auto-Injector
AED	Automated External Defibrillator
CEO	Chief Executive Officer
DfE	Department for Education
EYFS	Early Years Foundation Stage
IHP	Individual Healthcare Plan
MAR	Medication Administration Record
MIS	Management Information System
NHS	National Health Service
PPE	Personal Protective Equipment
SENCO	Special Educational Needs Coordinator
SLT	Senior Leadership Team
TCAT	Three Counties Academy Trust

NB. Where the term “parent” or “parents” is used this includes those who act as carers or have parental responsibility.

Statement of intent

Three Counties Academy Trust (TCAT) and our schools will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy. This includes the safe storage and administration of pupils' medication.

TCAT is committed to ensuring that parents feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

For the purposes of this policy, "**medication**" is defined as any prescribed or over the counter medicine, including devices such as asthma inhalers and adrenaline auto-injectors (AAIs). "**Prescription medication**" is defined as any drug or device prescribed by a doctor. "**Controlled drug**" is defined as a drug around which there are strict legal controls due to the risk of dependence or addiction, e.g., morphine.

Member, Trustee, Local Governor and Staff Summary

Purpose of the Policy

- Ensures pupils with medical conditions receive safe and appropriate support in school
- Provides a framework for the safe storage, handling, administration and disposal of medication
- Supports pupils to access education whilst safeguarding their health and wellbeing

Governance and Leadership Responsibilities

- Trust Board and Local Governing Bodies oversee implementation and compliance
- Senior leaders ensure staff are trained and appropriate procedures are in place
- Risk assessments must be completed where medication administration creates additional risk
- Complaints are managed in line with TCAT procedures

Staff Training and Competence

- Appropriate numbers of staff must be trained to administer medication
- Administration of medication is generally voluntary unless it forms a core part of a role
- Specialist training is provided where medication requires technical knowledge or emergency intervention
- All staff receive awareness training regarding emergency medication including adrenaline auto-injectors

Receiving, Storing and Disposing of Medication

- Parental consent must normally be obtained before medication is administered to pupils under 16
- Medication should normally be supplied in original packaging with clear instructions
- Emergency medication must be readily accessible and never locked away
- Medicines must be stored securely and disposed of through appropriate routes

Administering Medication

- Medication is only administered where failure to do so would be detrimental to the pupil
- Staff must usually verify consent, identity, dosage, instructions and expiry dates before administration
- Accurate records of all medication administered must be maintained
- Pupils may self-administer where agreed and appropriate

Medical Devices and Individual Healthcare Plans

- Asthma inhalers and adrenaline auto-injectors must be readily available
- Individual Healthcare Plans are created for pupils with significant or long-term medical needs
- Plans are developed with parents, pupils and relevant professionals
- Plans are reviewed regularly and at least annually

Educational Visits and Emergencies

- Medication and medical devices must remain accessible during visits and trips
- Suitable trained staff must accompany visits involving pupils with medical needs
- Emergency procedures must be understood by staff and reflected within healthcare plans
- Medical emergencies are managed in line with the First Aid Policy

Key Assurance for Members and Governors

- The policy aligns with relevant legislation and Department for Education guidance
- The Trust has defined responsibilities, training requirements and record keeping expectations
- Systems are in place to support inclusion, safety and effective management of medical conditions
- Monitoring and review arrangements provide ongoing oversight and accountability

Parent and Pupil Summary

What Parents Need to Do

- Inform the school of any medical condition, allergy or change in their child's health needs
- Complete and sign the medication consent form before medication is administered in school
- Provide medicines in their original container with clear instructions for administration with the exception of insulin
- Ensure medication is in date and suitable for use
- Discuss medication arrangements with their child where appropriate
- Collect out of date, discontinued or surplus medication when requested by the school

What Pupils Need to Do

- Inform a member of staff if they feel unwell or need medication
- Know where their medication is stored and how to access it when agreed
- Use medication responsibly and never give medication to another pupil
- Follow agreed healthcare plans and staff instructions
- Report any concerns, side effects or problems immediately

Self-Administration of Medication

- Some pupils may be allowed to carry and use their own medication such as inhalers or adrenaline auto injectors
- Self-administration will only take place when parents and the school agree it is appropriate
- Pupils must use medication safely and as instructed

School Trips and Visits

- Parents should ensure relevant medication is provided before educational visits
- Pupils must take medication and medical devices with them where agreed
- Parents should provide any additional medical information needed for the visit

Paracetamol and Non-Prescription Medication

- Parental consent is required before paracetamol can be administered
- The school will normally contact parents before administering paracetamol
- Non-prescription medicines can only be given when appropriate permissions and information have been provided

Medical Emergencies

- Pupils should seek help from a member of staff immediately if they experience a medical emergency
- Parents should ensure emergency contact details are accurate and up to date
- The school will act quickly to protect pupil health and safety during emergencies

What You Can Expect From the School

- Medication will be stored and administered safely
- Trained staff will support pupils with medical needs
- Healthcare information will be treated appropriately
- The school will work closely with parents to support pupil wellbeing and attendance

1. Legal framework

This policy has due regard to all relevant legislation and statutory guidance and good practice including, but not limited to, the following:

- [Health and Safety at Work etc. Act 1974](#)
- [Equality Act 2010](#)
- [Children and Families Act 2014](#)
- [DfE 'Supporting children and young people with medical conditions and allergy'](#)
- [DfE 'Early years foundation stage \(EYFS\) statutory framework'](#)
- [DfE 'Automated external defibrillators \(AEDs\): a guide for maintained schools and academies'](#)

Where legislation has been passed or updated during the shelf life of this policy, we will always apply the latest version available irrespective of the version quoted here.

This policy operates in conjunction with the following policies:

- Early Years Policy
- Records Management Policy (FI2)
- Complaints Policy and Procedure (GN9)
- Health and Safety Policy (HS1)
- First Aid Policy (HS2)
- Child Protection and Safeguarding Policy and Procedures (SG1)
- Supporting Pupils with Medical Conditions Policy (SG4)
- Allergen and Anaphylaxis Policy (SG17)
- Infection Control Policy (SG32)
- Sharps Policy (SG53)

Central TCAT policies have the policy number identified, e.g. "SG1". Where no policy number is identified this indicates the policy is a school specific policy available from an individual TCAT school's website.

2. Roles and responsibilities

The Trust Board and where delegated, Local Governing Bodies will be responsible for:

- The implementation of this policy and procedures
- Ensuring that this policy, as written, does not discriminate on any grounds, including the protected characteristics as defined by the Equality Act 2010
- Ensuring the correct level of insurance is in place for the administration of medication
- Ensuring that members of staff who administer medication to pupils, or help pupils self-administer, are suitably trained, and have access to information needed.
- Ensuring that relevant health and social care professionals are consulted in order to guarantee that pupils taking medication are properly supported
- Managing any complaints or concerns regarding this policy, the support provided to pupils, or the administration of medication in line with the TCAT's Complaints Policy and Procedures

The CEO is responsible for:

- The day-to-day implementation and management of this policy and relevant procedures across TCAT

Executive Headteachers, Headteachers and where delegated, Heads of School are responsible for:

- The day-to-day implementation and management of this policy and relevant procedures within their schools
- Ensuring that appropriate training is undertaken by staff members administering medication within their schools
- Ensuring that their staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system
- Organising another appropriately trained individual to take over the role of administering medication in case of staff absence
- Ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities

All staff are responsible for:

- Adhering to this policy and supporting pupils to do so
- Carrying out their duties that arise from this policy fairly and consistently

Parents are responsible for:

- Keeping TCAT and schools informed about any changes to their child's health
- Completing an administering medication parental consent form prior to them or their child bringing any medication onto TCAT premises
- Discussing medication with their child prior to requesting that a staff member administers the medication

It is both staff members' and pupils' responsibility to understand what action to take during a medical emergency, such as raising the alarm with the school nurse or other members of staff. This may include staff administering medication to the pupil involved.

3. Training staff

The CEO in collaboration with the TCAT Central Team, Executive Headteachers, Headteachers and Heads of School, will ensure that a sufficient number of staff are suitably trained in administering medication. All staff will undergo basic training on the administering of medication to ensure that, if exceptional circumstances arise where there is no designated administrator of medication available, pupils can still receive their medication from a trained member of staff. The CEO in collaboration with the TCAT Central Team, Executive Headteachers, Headteachers and Heads of School will also ensure that a sufficient number of staff have been trained in administering medication in an emergency by a healthcare professional.

Where it is a necessary or vital component of their job role, staff will undertake training on administering medication in line with this policy as part of their new starter induction. Staff will be advised not to agree to taking on the responsibility of administering medication until they have received appropriate training and can make an informed choice. TCAT will ensure that, as part of their training, staff members are informed that they cannot be required to administer medication to pupils, and that this is entirely voluntary, unless the supporting of pupils with medical conditions is central to their role within TCAT and their school, e.g., the school nurse.

Training will also cover the appropriate procedures and courses of action with regard to the following exceptional situations:

- The timing of the medication's administration is crucial to the health of the child
- Some technical or medical knowledge is required to administer the medication
- Intimate contact with the pupil is necessary

Staff members will be made aware that if they administer medication to a pupil, they take on a legal responsibility to do so correctly; therefore, staff will be encouraged not to administer medication in the above situations if they do not feel comfortable and confident in doing so, even if they have received training.

Training for administering AAI's

TCAT will arrange training for staff on an annual basis with refresher courses, as required, for staff on allergens and anaphylaxis. In line with statutory requirements, all staff will be required to be trained in the use of AAIs. As part of their training, all staff members will be made aware of:

- How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis
- Where to find AAIs in the case of an emergency
- The dosage correlates with the age of the pupil
- How to respond appropriately to a request for help from another member of staff
- How to recognise when emergency action is necessary
- How to administer an AAI safely and effectively
- How to make appropriate records of allergic reactions

4. Receiving, storing and disposing of medication

Receiving prescribed medication from parents

The parents of pupils who need medication administered at school will be sent an administering medication parental consent form to complete and sign; the signed consent form will be returned to the school and appropriately filed before staff can administer medication to pupils under the age of 16. A signed copy of the parental consent form will be kept with the pupil's medication, and no medication will be administered (except in an anaphylactic reaction emergency) if this consent form is not present. Consent obtained from parents will be renewed for any new medication, change in dosage or other significant change in the medication regime.

In exceptional circumstances, where a medicine has been prescribed to a pupil without the knowledge of the parents, TCAT schools will work with healthcare professionals to determine appropriate action.

TCAT schools will store a reasonable quantity of medication, e.g. a maximum of four weeks' supply at any one time. Aspirin will not be administered unless the school has evidence that a doctor has prescribed it.

Parents will be advised to keep medication provided to the school in the original packaging, complete with instructions, as far as possible, particularly for liquid medications where transfer from the original bottle would result in the loss of some of the medication on the inside of the bottle. This does not apply to insulin, which can be stored in an insulin pen.

Storing pupils' medication

TCAT schools will ensure that all medications are kept appropriately, according to the product instructions, and are securely stored. Medication that may be required in emergency circumstances, e.g. asthma inhalers and AAls, will be stored in a way that allows it to be readily accessible to pupils who may need it and can self-administer, and staff members who will need to administer them in emergency situations. All other medication will be stored in a place inaccessible to pupils, e.g. a locked cupboard.

TCAT schools will ensure that pupils know where their medication is at all times and are able to access them immediately, e.g. by ensuring that the identities of any key holders to the storage facilities are known by these pupils.

Medication will be:

- Stored safely and in accordance with the manufacturer's instructions
- Stored in a location that is known to pupils at all times and is immediately accessible, including when outside the premises
- Carried by pupils for self-administration if deemed suitable by a healthcare professional or required due to their condition

Medicines and devices which may be required in an emergency situation will always be readily available. They will never be locked away.

Medication will not be kept in a first aid container.

Disposing of pupils' medication

TCAT schools will not store surplus or out-of-date medication. Where medication and/or its containers need to be returned to the pupils' doctor or pharmacist, parents will be asked to collect these for this purpose.

Needles and other sharps will be disposed of safely and securely, e.g. using a sharps disposal box.

TCAT schools will ensure that medicines are disposed of in accordance with relevant waste and environmental legislation. Medicines will be separated from general waste and disposed of via appropriate routes:

- Non-prescription medicines may be returned to a pharmacy
- Prescription medicines will be disposed of via licensed waste facilities
- Controlled drugs will be rendered irretrievable before disposal

Medicines awaiting disposal will be stored securely in a tamper-proof container.

TCAT schools will comply with relevant legislation including the Environmental Protection Act 1990, Controlled Waste Regulations 2012, and Hazardous Waste Regulations 2005.

TCAT schools will ensure they are registered as a lower-tier waste carrier where required to support the safe disposal of pharmaceutical waste.

5. Administering medication

Medication will only be administered at school if it would be detrimental to the pupil not to do so. Only suitably qualified members of staff will administer controlled drugs. The administration of controlled drugs is permitted under the Misuse of Drugs Regulations 2001 where they have been prescribed for a pupil. Staff will check the expiry date and maximum dosage of the medication being administered to the pupil each time it is administered, as well as when the previous dose was taken.

Medication will be administered in a private, comfortable environment and as far as possible, in the same room as the medication is stored; this will normally be the school nurse's office. The room will be equipped with the following provisions:

- Arrangements for increased privacy where intimate contact is necessary

- Facilities to enable staff members to wash their hands before and after administering medication, and to clean any equipment before and after use if necessary
- Available PPE for use where necessary

Pupils will not be prevented from accessing and taking their prescribed or non-prescribed medication where this is necessary for their health and wellbeing.

Before administering medication, the responsible member of staff should check:

- The pupil's identity
- That the school possesses written consent from a parent
- That the medication name, dosage and instructions for use match the details on the consent form
- That the name on the medication label is the name of the pupil being given the medication
- That the medication to be given is within its expiry date
- That the pupil has not already been given the medication within the accepted frequency of dosage

Any member of staff may be asked to administer medication; however, no member of staff will be required to do so unless this forms part of their role with the exception of the administering of an AAI in an emergency situation.

If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken, again with the exception of administering an AAI in an emergency situation.

If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.

Where appropriate, pupils will be encouraged to self-administer under the supervision of a staff member, provided that parental consent for this has been obtained. If a pupil refuses to take their medication, staff will not force them to do so but will follow the procedure agreed upon in their IHPs, and parents will be informed so that alternative options can be considered.

TCAT schools will not be held responsible for any side effects that occur when medication is taken correctly.

Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible. Records will be stored in accordance with TCAT's Records Management Policy.

Non-prescription medicines

TCAT schools are aware that pupils may, at some point, suffer from minor illnesses and ailments of a short-term nature, and that, in these circumstances, health professionals are likely to advise parents to purchase over-the-counter medicines, for example, paracetamol and antihistamines.

Our schools will work on the premise that parents have the prime responsibility for their child's health and should provide schools and settings with detailed information about their child's medical condition as and when any illness or ailment arises.

TCAT schools will permit the administration of non-prescription medication either by staff or pupils themselves, following written permission by parents. The school will not seek the authorisation of a GP for this purpose.

Pupils and parents will not be expected to obtain a prescription for over-the-counter medicines as this could impact on their attendance and adversely affect the availability of appointments with local health services due to the imposition of non-urgent appointments being made.

If a pupil is deemed too unwell to be in school, they will be advised to stay at home, or parents will be contacted and asked to take them home.

When making arrangements for the administration of non-prescription medicines TCAT schools will exercise the same level of care and caution, following the same processes, protocols and procedures as those in place for the administration of prescription medicines.

TCAT schools will also ensure that the following requirements are met when agreeing to administer non-prescription medicines.

- Non-prescription medicines will not be administered for longer than is recommended. For example, most pain relief medicines, such as ibuprofen and paracetamol, will be recommended for three days use before medical advice should be sought. Aspirin will not be administered unless prescribed
- Parents will be asked to bring the medicine in, on at least the first occasion, to enable the appropriate paperwork to be signed by the parent and for a check to be made of the medication details
- Non-prescription medicines must be supplied in their original container, have instructions for administration, dosage and storage, and be in date. The name of the child can be written on the container by an adult if this helps with identification

- Only authorised staff who are sufficiently trained will be able to administer non-prescription medicines with the exception of the use of AAls in emergency situations

Paracetamol

TCAT recognises that paracetamol is a commonly used painkiller and may be appropriate for the short-term relief of mild to moderate pain or fever. Paracetamol can, however, cause serious harm if the recommended dose is exceeded or if it is taken alongside another medicine containing paracetamol.

Paracetamol is available in different formulations and strengths, and the appropriate dose depends upon factors including the pupil's age and, in some circumstances, weight. Staff will therefore follow the manufacturer's instructions and any relevant medical advice when administering paracetamol and will not exceed the recommended dose.

In secondary settings, to reduce the need for pupils to carry non-prescription medication and to provide consistency in its administration, schools may hold a stock of standard 500mg paracetamol tablets. Paracetamol held by the school will be stored securely in accordance with the requirements for the storage of medication set out elsewhere in this policy.

Written parental consent must be in place before paracetamol can be administered. This may be obtained through the relevant section of the Pupil Information Form completed as part of the admission process and updated annually. The consent will be retained by the school or recorded on the school's Management Information System (MIS).

During the normal school day, TCAT schools will administer no more than one dose of paracetamol to an individual pupil. The dose administered must be appropriate for the pupil and the formulation being used and must not exceed the manufacturer's recommended dose.

Before administering paracetamol, an authorised member of staff will:

- Check that written parental consent is in place
- Contact the pupil's parent to obtain verbal consent on the day and establish whether the pupil has taken paracetamol, or any other medicine containing paracetamol, before attending school
- Check when any previous dose of paracetamol or paracetamol-containing medicine was taken
- Check that sufficient time has elapsed since any previous dose in accordance with the manufacturer's instructions
- Check that the proposed dose is appropriate for the pupil's age and, where relevant, weight

- Check that the pupil has no known reason why paracetamol should not be administered
- Where appropriate, encourage the pupil first to have a drink, something to eat and/or some fresh air and assess whether these measures alleviate the symptoms

Paracetamol will not be administered if the school is unable to establish when a previous dose was taken, where the minimum interval between doses has not elapsed, or where there is any uncertainty about whether it is safe or appropriate to administer it. Where there is uncertainty, advice will be sought from the pupil's parent and, where necessary, an appropriate healthcare professional.

Paracetamol may be administered for the short-term relief of mild to moderate pain, including headache, toothache and period pain, or for fever where appropriate. Only standard paracetamol will be administered under these arrangements; combination medicines containing paracetamol together with other active ingredients will not be administered from the school's general stock.

The member of staff administering paracetamol will witness the pupil taking it and record the administration in accordance with this policy. The record will include the pupil's name, the medicine and dose administered, the date and time of administration, and the name or signature of the member of staff responsible.

If the pupil's symptoms do not improve, worsen or otherwise cause concern following the administration of paracetamol, the pupil's parent will be contacted and appropriate action taken. Where a pupil regularly requires pain relief during the school day, the school will discuss this with their parent and consider whether further medical advice or an individual arrangement is required.

Paracetamol will not routinely be administered following a head injury. Pupils who sustain a head injury will be assessed and managed in accordance with TCAT's First Aid Policy and relevant head injury procedures.

Where a pupil sustains another minor injury whilst at school, their condition will be assessed by an appropriately trained member of staff. Paracetamol may subsequently be administered by an authorised member of staff where it is considered appropriate, subject to the consent and administration requirements above.

Educational visits and residential activities

The restriction to one dose applies to administration during the normal school day. Where pupils remain in TCAT's care for an extended period, including during residential visits, additional doses of paracetamol may be administered where necessary and appropriately authorised.

In these circumstances, staff must follow the manufacturer's instructions for the particular formulation and strength being administered. The required minimum interval between doses must be observed and the maximum recommended dose for the individual pupil must not be exceeded in any 24-hour period. A complete record of all doses administered during the visit will be maintained by the designated member of staff.

Any arrangements for a pupil to carry or self-administer paracetamol during an educational visit or residential activity must be specifically agreed in advance and appropriately risk assessed. The same requirements concerning dosage, intervals between doses and the maximum permitted dose in any 24-hour period will apply.

6. Medical devices

Asthma inhalers

Each TCAT school will allow pupils who are capable of carrying their own inhalers to do so, provided that parental consent for this has been obtained. Each school will ensure that spare inhalers for pupils are kept safe and secure in preparation for the event that the original is misplaced, unavailable or not working.

AAI's

Each TCAT school will allow pupils who are capable of carrying their own AAI's to do so, provided that parental consent for this has been obtained. Each school will ensure that spare AAI's for pupils are kept safe and secure in preparation for the event that the original is misplaced, unavailable or not working.

Spare AAI's are not located more than five minutes away from where they may be required. The Executive Headteacher, Headteacher or Head of School will decide on the most appropriate location for their school to store spare AAI's and communicate this to all staff.

There will be a stock of AAI's, which are replenished when used, and they will be stored in pairs to mitigate potential failure of the first device. Each TCAT school will ensure that risk assessments regarding the use and storage of AAI's on the premises are conducted and up to date.

Medical authorisation and parental consent will be obtained from all pupils believed to be at risk of anaphylaxis for the use of spare AAI's in emergency situations. AAI's may be used without consent where there is a clear risk to life or belief of anaphylaxis, in line with current statutory requirements. Where consent and authorisation has been obtained, this will be recorded in the pupil's IHP. 'Pupils' and spare AAI's will be obtained, stored, and administered in line with TCAT's Allergen and Anaphylaxis Policy.

7. IHPs

For pupils with chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the pupil, their parent, the Executive Headteacher, Headteacher or Head of School, the SENCO, TCATs Assistant SENCO and Inclusion Support Officer and any relevant medical professionals. When deciding what information should be recorded on an IHP, the following will be considered:

- The medical condition and its triggers, signs, symptoms, and treatments
- The pupil's resulting needs, such as medication, including the correct dosage and possible side effects, medical equipment, and dietary requirements
- The specific support needed for the pupil's educational, social, and emotional needs
- The level of support needed and whether the pupil will be able to take responsibility for their own health needs
- The type of provision and training that is required, including whether staff can be expected to fulfil the support necessary as part of their role
- Which staff members need to be aware of the pupil's condition
- Arrangements for receiving parental consent to administer medication
- Separate arrangements which may be required for out-of-school trips and external activities
- Which staff member can fulfil the role of being a designated, entrusted individual to whom confidentiality issues are raised
- What to do in an emergency, including whom to contact and contingency arrangements
- What is defined as an emergency, including the signs and symptoms that staff members should look out for

The Trust Board will ensure that IHPs are reviewed at least annually. IHPs will be routinely monitored throughout the year by TCAT's Assistant SENCO and Inclusion Support Officer.

8. Educational trips and visits

In the event of educational trips and visits which involve leaving TCAT premises, medication and medical devices will continue to be readily available to staff and pupils. This may include pupils carrying their medication themselves, where possible and appropriate, e.g., for asthma inhalers.

If the medication is of a type that should not be carried by pupils, e.g., capsules, or if pupils are very young or have complex needs that mean they cannot self-administer, the medication will be carried by a designated staff member for the duration of the trip or activity.

There will be at least one staff member who is trained to administer medication on every out-of-school trip or visit which pupils with medical conditions will attend. Staff members will ensure that they are aware of any pupils who will need medication administered during the trip or visit, and will ensure that they know the correct procedure, e.g., timing and dosage, for administering their medication.

If the out-of-school trip or visit will be over an extended period of time, e.g., an overnight stay, a record will be kept of the frequency at which pupils need to take their medication, and any other information that may be relevant. This record will be kept by a designated trained staff member who is present on the trip and can manage the administration of medication.

All staff members, volunteers, and other adults present on out-of-school trips and visits will be made aware of the actions to take in a medical emergency related to the specific medical needs and conditions of the pupil, e.g., what to do if an epileptic pupil has a seizure.

9. Medical emergencies

Medical emergencies will be handled in line with the First Aid Policy.

For all emergency medication stored by a TCAT school, the school will ensure it is readily accessible to staff and the pupil who requires it. For all emergency medication kept in the possession of a pupil, e.g., AAI's, the school will ensure that pupils are told to keep the appropriate instructions with the medication at all times. A spare copy of these instructions will be kept by the school in the same location as medication is stored.

Monitoring and review

Lifespan of Policy: 3 Years

At any point this policy is updated or fully reviewed, it will be updated on the main TCAT website and will automatically update on all TCAT school websites simultaneously.

Where an annual check or other check results in minor changes, the Version History will be reviewed and updated with a change in the number following the decimal point, for example, v1.1 ⇒ v1.2. Where the policy is reviewed in full, then the number before the decimal point will change and reset, for example v1.4 ⇒ v2.0.

Any changes made by the CEO in collaboration with the Board Appointed Trustee will be passed to the Trust Board for ratification and subsequently be notified to Clerks to Local Governing Bodies and Headteachers/Heads of School.

The next scheduled full review date for this policy is 31st August 2029.

Date approved by the Board Appointed Trustee: 13th August 2026.

To be ratified and recorded in the minutes at the first Trust Board Meeting after 13th August 2026.

Appendix A: Administering medication parental consent form



As a Three Counties Academy Trust School, we will not give your child medication unless you complete and sign this form, except administering of an AAI in an emergency situation.

Name of pupil and D.O.B.	
School	
Class or Form group	
Medical condition or illness	
Prescribed medication	

Name and/or type of medication as described on the container			
Date dispensed			
Expiry date			
Agreed review date			
Review to be initiated by			
Dosage, timing, and method of administration			
Special precautions			
Likely side effects			
Self-administration	Yes	No	Other information:
Additional details			
Parent/Carer Signature			
Date			

Appendix B: Administering Medication Risk Assessment

Important note: *This risk assessment identifies typical examples and controls to illustrate how schools may manage certain risks. These can be used as a guide to think about hazards in your school and the steps needed to manage those risks. In order to be compliant with the law and protect your community, you must consider the specific hazards and controls your school needs and **must not** use this template without assessing your school's risks.*

Name of school

Assessment conducted by:	Job title:	School:
Date of assessment:	Review interval:	Date of next review:

Risk rating		Likelihood of occurrence		
		Probable	Possible	Remote
Likely impact	Major: Causes major physical injury, harm or ill health.	High (H)	H	Medium (M)
	Severe: Causes physical injury or illness requiring first aid.	H	M	Low (L)
	Minor: Causes physical or emotional discomfort.	M	L	L

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
Awareness of policies and procedures		- The school has due regard to, and meets its duties outlined in, legislation and statutory guidance, including, but not limited to the following: - Equality Act 2010 - Children and Families Act 2014 - The Human Medicines (Amendment) Regulations 2017 - DfE (2015) 'Supporting pupils at school with medical conditions' - DfE (2017) 'Using emergency adrenaline auto-injectors in schools' - The school and all relevant staff members have due regard to the following policies and procedures: - Administering Medication Policy - Supporting Pupils with Medical Conditions Policy - First Aid Policy - Records Management Policy - Allergen and Anaphylaxis Policy - Complaints Policy and Procedures - Behaviour Policy	<u>Y</u>	<u>Executive Headteacher/Headteacher/Head of School</u>	<u>XX.XX.XX</u>	<u>M</u>

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		- Procedures are employed to ensure that individual pupils' medical records are kept up-to-date and filed correctly. - Individual risk assessments are undertaken for specific medical conditions. - The <u>Executive Headteacher/Headteacher/Head of School, SLT and Local Governing Body</u> ensure this risk assessment is communicated to, and understood by, all relevant staff members.				
Staff training		- The school ensures that sufficient numbers of staff are trained in the administration of medication and that there is always a sufficient number of trained staff available on site. - All responsible staff members undertake training on administering medication, including in emergency situations. - Staff are informed that they are under no obligation to administer medication and undertake relevant training and that this is a voluntary decision unless it is central to their role, e.g. the school nurse.				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		• Staff only administer medication if they are appropriately trained and feel comfortable and confident doing so. • Emergency services are contacted in situations where necessary, e.g. if lifesaving treatment is required. • Where necessary, responsible staff members receive training in the treatment of specific medical conditions and the procedures to follow in the event of the associated potential medical emergency. • Training is updated as required and at least <u>annually</u>. • Staff members appointed as first aiders are trained in the use of CPR and defibrillators. • Staff members are aware of and follow procedures where a dose may be delayed or missed.				
Storage and disposal of medication		• Medicines are stored alongside the following records: - Parental consent - Medical administration record (MAR) sheets				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		- Information relating to each medicine including how to administer it and how frequently • Medication is not administered if the records listed above are not present, except administering of an AAI in an emergency situation • Medication is stored appropriately according to the instructions, and in a secured location. • Emergency medications, e.g. inhalers, are kept with the pupil as long as they are able to self-administer. • Pupils, parents and relevant staff members are aware of where the medication is at all times and are able to access it immediately. • Out-of-date medication and containers are returned to the pupil's parents to be returned to the medical professional who prescribed them. • Needles and other sharps are disposed of safely. • The school only accepts prescribed medicines that are in-date, labelled, provided in the original container and include				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		instructions for administration, dosage and storage with the exception of insulin. Pupils who are prescribed controlled drugs are permitted to hold these in their possession if they are competent to do so.				
Administering medication		- Parental consent is obtained via a form sent out to all parents of pupils under 16 with medical conditions prior to the administration of any medicines except administering of an AAI in an emergency situation. - Medicines are only administered at school where it would be detrimental to a child's health or attendance not to do so. - Pupils under 16 are never given medication containing aspirin unless evidence of the prescription is provided by a doctor. - Medication is never administered before checking the maximum dosages and when the previous dose was taken. - Pupils who are able to do so are allowed to self-administer their medication; however, they must not pass this on to others. - Pupils who pass on medication to others are disciplined in line with the Behaviour Policy.				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		- Medication is always administered in accordance with the prescriber's instructions. - Personal protective equipment (PPE) is made available to staff members administering medication. - Facilities are available for staff members and pupils who are self-administering their own medication to wash their hands and clean any equipment before and after administering any medication. - Before administering medication, the responsible staff members check: - The pupil's identity. - That the relevant records are present. - That the medication name, dosage and instructions for use match the details on the consent form. - That the name on the medication label is the name of the pupil being given the medication. - That the pupil has not already been given the medication within the accepted frequency of dosage.				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		- Medication is not administered if the responsible staff member notices any concerns, e.g. side effects, and the pupil's parents are notified without delay. - If a pupil is unable, or refuses, to take medication, this is noted on the MAR sheet and the pupil's parents are notified without delay.				
Medical devices		- Medical devices such as inhalers, blood glucose testing meters and adrenaline pens are always readily available and kept with the pupil as long as they are able to self-administer and have consent from their parents if they are under 16. - Spare inhalers are kept safe and secure and made available immediately upon request; however, pupils are also permitted to carry spare inhalers. - Adrenaline pens are stored and administered in accordance with the school's Allergen and Anaphylaxis Policy and risk assessment. - Following the procurement of a defibrillator, the school notifies the local NHS ambulance service of its location.				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		The school maintains an Automated External Defibrillator (AED) Maintenance Record.				
IHPs		- The school's Administering Medication Policy covers the role of IHPs and who is responsible for their development. - IHPs clearly indicate what medication should be administered and by whom. - IHPs are created in collaboration with the pupil, their parents and relevant healthcare professionals and provide clear information on the management and administration of medicines.				
School trips		- Prior to departing for school trips, the school ensures the following: - Pupils have taken any medication required before departure - Pupils are in possession of required medicines and devices, e.g. inhalers, blood glucose testing meters and adrenaline pens - Other medication is held by a responsible member of staff				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		alongside the relevant records and documents, and the pupil is aware of who this is - Emergency contact details are readily available • The school ensures that safe arrangements are in place to actively support pupils with medical conditions to participate in school trips and visits and not prevent them from doing so. • Responsible staff members are aware of how a pupil's medical condition might impact their participation in school trips. • Adjustments are made as required unless evidence from a medical professional states that this is not possible. • Risk assessments are carried out in relation to pupils with medical conditions on school trips to implement planning arrangements that take account of any steps required to ensure that pupils with medical conditions are included safely, including taking into consideration the management of medication.				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
Emergencies		- The Trust Board ensures that the school's Administering Medication Policy sets out what should happen in emergency situations. - Arrangements are in place for dealing with emergencies and are communicated to all staff, pupils and parents. - Pupils' IHPs clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. - Pupils are aware of what to do in general terms, e.g. informing a teacher where help is needed. - Where a pupil needs to go to hospital, a responsible staff member stays with them until their parent arrives or accompanies them in the ambulance where necessary. - The school understands the local emergency services cover arrangements and ensures that the correct information is provided for navigation systems.				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
Record keeping and communication		- The school keeps MAR sheets for each pupil, stating what, how and how much medication was administered, when and by whom. - Records are kept of any side effects of the medication. - The Local Governing Body ensures written records are kept of all medicines administered to pupils. - Parents are informed if their child has been unwell at school. - The school ensures it communicates effectively with pupils, parents and relevant healthcare professionals regarding the management of medicines. - Emergency contact details of all pupils with medical conditions are readily available at all times. - The school also ensures the following documents are correctly maintained: - IHPs - Parental consent - Records of medicine administered to each pupil - Staff training records				

Area for concern	Risk rating prior to action H/M/L	Recommended controls	In place? Yes/No	By whom?	Deadline	Risk rating following action H/M/L
		- Records of contacting emergency services				

Trust Glossary

AA	Admissions Authority	H&S	Health and Safety
AAI	Adrenaline Auto-Injector (Epi Pen)	HoS	Head of School
ACM	Asbestos Containing Materials	HSE	Health and Safety Executive
AHT	Assistant Headteacher	ICO	Information Commissioners Office
AIR	Attendance Intervention Reviews	IDSR	Inspection Data Summary Report
APDR	Assess Plan Do Review Cycle	IHP	Individual Healthcare Plan
APIs	Application Programming Interfaces	IRMS	Information and Records Management Society
ASC	Autistic Spectrum Condition	IWF	Internet Watch Foundation
ASP	Analyse School Performance	KCSIE	Keeping Children Safe in Education
ATH	Academy Trust Handbook	KS1/2/3/4	Key Stage 1/2/3/4
BAME	Black, Asian and Minority Ethnic Backgrounds	LAC	Looked After Child
BAT	Board Appointed Trustee	LADO	Local Authority Designated Officer
BCP	Business Continuity Plan	LGB	Local Governing Body
BFR	Budget Forecast Return	LLC	Low-Level Concerns
CEO	Chief Executive Officer	LSA	Learning Support Assistants
CFO	Chief Financial Officer	MASH	Multi-Agency Safeguarding Hub
CIF	Condition Improvement Fund	MAT	Multi-Academy Trust

CIN	Child in Need	MFA	Multi-Factor Authentication
CLA	Children Looked After	MFL	Modern Foreign Language
CMIE	Child Missing in Education	NCSC	National Cyber Security Centre
COO	Chief Operating Officer	NoV	Note of Visit
COSHH	Control of Substances Hazardous to Health	NPQ	National Professional Qualifications
CP	Child Protection	PA	Persistent Absence
CPD	Continuing Professional Development	PAN	Published Admission Number
CPOMS	Child Protection Online Management System	PECR	Privacy and Electronic Communications Regulations
CSCS	Children's Social Care Services	PEP	Personal Education Plan
CSE	Child Sexual Exploitation	PEEP	Personal Emergency Evacuation Plan
CTIRU	Counter-Terrorism Internet Referral Unit	PEx	Permanent Exclusion
CWD	Children with Disabilities	PP	Pupil Premium
CYPMHS	Children and Young People's Mental Health Services	PPG	Pupil Premium Grant
DBS	Disclosure and Barring Service	PSHE	Personal, Social and Health Education
DDSL	Deputy Designated Safeguarding Lead	PSED	Public Sector Equality Duty
DfE	Department for Education	PTFA	Parent, Teacher and Friends Association
DHT	Deputy Headteacher	QA	Quality Assurance

DSE	Display Screen Equipment	RIDDOR	Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
DSL	Designated Safeguarding Lead	RHE	Relationships and Health Education
DPO	Data Protection Officer	RPA	Risk Protection Arrangement
EAL	English as an Additional Language	RSHE	Relationships, Sex and Health Education
ECT	Early Career Teacher	SA	Severely Absent
EDIB	Equality, Diversity, Inclusion and Belonging	SALT	Speech and Language Therapist
EHA	Early Help Assessment	SARC	Sexual Assault Referral Centre
EHENA	Education, Health and Care Needs Assessment	SBM	School Business Manager
EHCP	Education, Health and Care Plan	SCC	Standard Contractual Clause
EHE	Elective Home Education	SCITT	School-Centred Initial Teacher Training
ELSA	Emotional Literacy Support Assistant	SCR	Single Central Record
ESFA	Education and Skills Funding Agency	SDP	School Development Plan
EVC	Educational Visit Coordinator	SDQ	Strengths and Difficulties Questionnaire
EWOSSE	Education Welfare and Safeguarding Support Officer	SEF	Self-Evaluation Form
EYFS	Early Years Foundation Stage	SEMH	Social, Emotional, and Mental Health
FBV	Fundamental British Values	SENCO	Special Educational Needs Coordinator
FFT	Fischer Family Trust	SEND	Special Educational Needs and Disabilities

FGM	Female Genital Mutilation	SIP	School Improvement Partner
FGMPO	FGM Protection Order	SLA	Service Level Agreement
FOI	Freedom of Information	SLCN	Speech, Language and Communication Needs
FSM	Free School Meals	SLT	Senior Leadership Team
FTS	Find a Tender Service	SPOC	Single Point of Contact
GAG	General Annual Grant	STEM	Science, Technology, Engineering and Maths
GDPR	General Data Protection Regulation	TA	Teaching Assistant
GIAS	Get Information about Schools	TAC	Team Around the Child
HASH	Herefordshire Association of Secondary Heads	TCAT	Three Counties Academy Trust
HBA	Honour Based Abuse	TUPE	Transfer of Undertakings (Protection of Employment)
HR	Human Resources	VSH	Virtual School Headteacher