

This policy applies to primary school and nursery

Policy on the Administration of Medicines

At TGS we believe that the health and wellbeing of our children is paramount. Medicine (both prescription and non-prescription) must only be administered to a child where prior written permission for that particular medicine has been obtained from the child's parent and/or carer or the person with parental or medical responsibility for the child. Additionally, information about why the child needs medication must be obtained. Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist. Prescription medication must be clearly marked with the child's name, the name of the medicine, the times or frequency, the dosage and the issue date and the expiry date. Non-prescription medicines can include those that can be purchased from pharmacies (including some over the counter medicines which can only be purchased from a pharmacy), health shops and supermarkets. Before administering non-prescription medication, check the dosage, frequency to be administered and the expiry date. In the case of life saving treatment/medication a letter from the child's health professional, such as GP, nurse or Consultant must be obtained stating the child's condition and details of any treatment/medication that TGS may be required to administer. **All instructions must be in English.**

NHS guidance states that some medicines should not be given to children – for example, children under 16 should not take aspirin. Also, some antacid medicines, which relieve heartburn, are only recommended for children aged 12 and over. Furthermore, some types of ibuprofen that you buy without a prescription are only suitable for children aged 7 years and over. Other types, including tablets, are only suitable for children aged 12 years and over. We will not administer such medication, unless prescribed by a doctor or medical professional.

Medication which comes in with incorrect information and/or without instructions cannot be accepted and the parents and/or carers must be informed immediately. Information must be available before medication can be given. Staff must never make assumptions about children's medication and administer any drug without the relevant and specific information. If medication is expected and has not arrived with the child or appears to be missing, an initial search should be undertaken. Parents and/or carers, transport and/or other locations the child has arrived from, must be contacted to ascertain where the medication might be. If medication is found to be missing, lost or has not been sent in, arrangements must be made to ensure the child has access to replacement supply and this is reported to the Principal/ Head of Nursery. The parent and/or carer remains responsible for ensuring medication is correctly sent in from home and that there is an adequate supply.

At primary school the parent must bring the medicine to the office and sign the medication consent form, which will then be scanned onto Medical Tracker. Medication must be stored away from children or if necessary, in the locked fridge in the office.

At nursery, the parent/carer must bring the medicine to the child's room and sign the medication consent form, which will then be scanned/uploaded onto Medical Tracker. Medication must be stored away from children or if necessary, in the appropriate fridges away from children.

As a matter of good practice and to safeguard the children, parents must be telephoned prior to administering ibuprofen/paracetamol if not authorised in writing on that day. This is to ensure that children do not have more than the required dose within the required timeframe. If a phone call is made this is recorded on Medical Tracker at school and at nursery in the office diary. Where a child is taking medication regularly for a specific length of time, a medical plan will be completed in conjunction with parents and/or carers. TGS will provide training for staff where the administration of medicine requires medical or technical knowledge.

At nursery, only senior members of staff are permitted to administer medication to the children, which must be witnessed by another member of staff. At school, in addition to senior and office staff, first aiders can administer medicines to children, all of which must be witnessed by another member of staff. First aid training is not necessarily required to be able to administer medication. The role of the witness is important; they must carry out the same checks as the person administering medication to ensure the correct medication is administered to the child. The person administering the medication must record the details on Medical Tracker and either Miss Haigh, Miss Jones, Miss Chitoi or Miss Valentine will send the notification email to the parents.

Prescribed Emergency Medication

In addition to the above procedures, where long term needs for emergency medication exist, TGS require specific guidance on the nature of the likely emergency and how to cope with it while awaiting paramedical assistance. Detailed written instructions should be obtained, and the parent/guardian should liaise with their child's teacher or in the case of nursery, with a senior member of staff. If the emergency is likely to be of a serious nature, emergency contact numbers must be given where an adult is available at all times.

The parents or child's doctor are requested to fill a Health Care Plan. The Health Care plan is filed in the child's file, a copy will be given to the child's teacher or practitioner, and a copy is held in the office and in the child's classroom. Any emergency medication (for example: Inhalers, auto-injector, seizure medication and diabetic medication) are to be kept in a bag specific for the child which is to be kept in the first aid bag or emergency bags at nursery and must always accompany the child, including on outings.

Auto-injectors

Parents of children who are prescribed with auto-injectors are asked to provide two auto-injectors for their child. TGS may administer their "spare" adrenaline auto-injector, obtained, without prescription, for use in emergencies, if available, but only to a child at risk of anaphylaxis, where both medical authorisation and written parental consent for use of the spare auto-injector has been provided. TGS spare auto-injector can be administered to a child whose own prescribed auto-injector cannot be administered correctly without delay. We ensure that auto-injectors are always accessible and available for use, once an auto-injector has been used it cannot be reused and must be disposed of according to manufacturer's guidelines. Used auto-injectors can be given to the ambulance paramedics on arrival or can be disposed of in a pre-ordered sharps bin for collection by the local council. TGS will complete a risk assessment for children on school trips, including sporting activities, for any child at risk of anaphylaxis Children at risk of anaphylaxis will have their own auto-injector with them, and there will be staff trained to administer it in an emergency. We would consider whether it may be appropriate, under some circumstances, to take spare auto-injectors obtained for emergency use on some trips. (Guidance on the use of auto-injectors in school: Department for Health 2017). TGS has spare auto-injectors which are kept in the office across all sites.

Safe storage

All medication must be stored in the designated secure cupboard. Those requiring refrigeration are kept in a secure fridge. If the child is going out or away from the school (e.g. organised offsite activity) and medication needs to be given out whilst they are out, then the medication should be taken out in a labelled container with a strictly measured dose and specific instructions. At all times it must remain secure under the supervision of a permanent member of staff.

Problems in administering medication and errors

The following steps should be taken:

If a child refuses medication, then this should be clearly recorded in the appropriate medication records. Every encouragement should be given to ensure the medication is taken; however, a child must not be forced to take medication. If a child refuses medication, parents are to be contacted and informed. If liquid medication is spat out by the child and it is unclear if some of the initial dose has been swallowed, parents must be informed and no further medication given. If a tablet is dropped, liquid spilled or spoiled prior to administration, then re-administer using a fresh dose.

This must be recorded using the appropriate methods for nursery and school. When a dose is re-administered from medication sent from home a check must be made that there are sufficient doses for the remainder of the child's stay. If there are not enough doses to re-administer, then the parents must be contacted to bring in more. If a child vomits within 30 minutes of taking their medication, parents are to be contacted and informed. If the vomiting occurs after 30 minutes the medication should not be re-administered, and advice should be sought at the earliest opportunity. Do not re-administer inhalers where they appear not to have worked properly. Some of the medication may have been administered.

The senior management team must be informed immediately of any instances of a missed dose or error in the medication process and medical advice must be sought. Medication records must be maintained by the person involved. The parents must be informed immediately about any errors in the administering of medicine.

Use of homeopathic or herbal remedies

Homeopathic or herbal remedies must be treated in the same way as any other medication and recorded as such.

Safe transfer of medication sent to or from school

Any missing medication or inconsistent information must be checked immediately with those responsible. We maintain a regular liaison with parents and/or carers in order to ensure good communication and to resolve any difficulties.

Disposal

All discontinued, expired or unused medication, creams etc. should be returned to the parent and/or carer for disposal at the earliest opportunity.

Signed:



Date reviewed: May 2026

Date of next review: May 2027

Miss Emma Gowers
Principal and Proprietor