ADMINISTRATION OF MEDICINES LOCAL POLICY

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Policy Statement (1)

1) The school recognises that pupils will at some time need to take medication during the school day.
2) Although parents retain responsibility for their child's medication, the school has a duty of care to pupils while at school, and the school aims to do all that is reasonably practicable to safeguard and promote children's welfare.
3) The school takes all reasonable precautions to ensure that medication is neither accessible nor available to pupils, without appropriate supervision and guidance. For example, pupils are not permitted to enter the Medical Room without direct staff supervision.
4) The school takes responsibility for the administration of medicines during school time in accordance with the government's guidelines.
5) All staff are expected to maintain professional standards of care but have no contractual or legal duty to administer medication. The school does not require staff to administer medication.
6) However, some specified staff (e.g. PE and games staff, or staff taking educational visits) who volunteer their services, will be given training to administer first aid and/or medication to pupils.
7) This policy applies during all school-related trips and visits.

Policy Statement (2)

1) This policy applies to all members of the AKS school community, including those in our EYFS setting.
2) AKS implements this policy through adherence to the procedures set out in the rest of this document.
3) This policy is made available to all interested parties in accordance with our *Provision of Information* policy. It should be read in conjunction with the school's *First Aid* policy.
4) The school is fully committed to ensuring that the application of this policy is non-discriminatory in line with the UK Equality Act (2010). Further details are available in the school's *Equal Opportunity* policy document.
5) This policy is reviewed at least annually, or as events or legislation changes require, by Matron, the Whole School Leadership Team, and the Local Governing Body. The deadline for the next review is no later than 12 months after the most recent review date indicated above.

Key Personnel (1)

1) Helen Hotchkiss: Matron
2) Annie Millard: Director of Finance, c/o Health & Safety Co-ordinator
3) Phil Hayden: Deputy Head (Pastoral)

4) Amanda Ilhan: Head of the Nursery and Preparatory School

Key Personnel (2)

1) In the Senior School, medication is normally administered by the School Matron, or in her absence, by specially trained staff *(ref. First Aid policy).*
2) The School Matron visits the Prep School office as part of her normal daily routine to establish the needs for that day/week and subsequently attends as and when necessary.
3) If Matron is not available in the Medical Room, a sign is posted on the door to this effect and includes her location if she needs to be contacted.
4) In her absence, a designated First Aider takes responsibility for First Aid.
5) In the Nursery, medication is administered by a designated First Aider.

Staff Indemnity

The school fully indemnifies all staff against claims for any alleged negligence, providing they are acting within their conditions of service and following appropriate guidelines.

Pupil Medical Details

On admission of the pupil to the school, all parents are required to provide information on the Form of Agreement giving full details of:

1) medical conditions
2) allergies
3) regular medication
4) emergency contact numbers
5) name of family doctor/consultants

All parents are required to update the medical form as they are required to inform the school of any changes to existing pupil data. The school also carries out regular data checks, to ensure that current data is correct.

Storage and Disposal

All medication in the Senior department is kept in a locked cupboard in the Medical Room and in the Prep department securely in the Medical Room. Medication is returned to parents when appropriate. Any medication that is not collected or returned to parents is disposed of by a pharmacist. All medication coming into school is signed in by a member of staff stating:

a) Date
b) Amount
c) Expiry
d) Date of Disposal/Returned

Administration of Medication (1) - Introduction

1) The school expects that, normally, parents will administer medication to their children.
2) Medicines should only be taken to school when essential, i.e. where it would be detrimental to a child's health if medicine were not administered during the school day.
3) Normally the administration of medication is only done in school at the following times:
    a) immediately before school
    b) breaks and lunchtime
    c) exceptionally, immediately after the end of the school day
4) Staff complete the 'signing-in' form (Appendix 4)

Administration of Medication (2) – Prescription Medicines

1) The school only accepts medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.
2) The medicines must be in their original container as dispensed by a pharmacist, with the child's name on the label and including instructions for administration and dosage.
3) Medicines are only administered prior to the expiry date.
4) The school does not deal with any requests to renew the supply of the medication. This is entirely a matter for parents/guardians.
5) Medication that is classified under the 'misuse of drugs act' will only be administered after a risk assessment has been completed by an appropriately qualified person (Matron) and signed by the Headmaster. This medication is signed in by Matron and audited daily.

Administration of Medication (3) – Non-Prescription Medicines

1) The school does not allow the administration of non-prescription medicines in school unless a GP considers it necessary. This should be confirmed by a pupil's GP, Nurse Practitioner, or Pharmacist. This includes cough sweets and lozenges, and painkillers.
2) No pupils should ever be given a medicine containing aspirin unless a doctor has prescribed it.
3) Any requests for medicines to be administered must come from a parent in writing on the school's 'Request to Administer Medication Form', and each request is considered on an individual basis (See Appendix 1).

Early Years and Foundation Stage

When young children become unwell their temperature can raise very quickly, this can be extremely serious and, in some cases, leading to febrile convulsions.

In the event of a child having a temperature of 38 ^{o}C or above (pyrexia) and showing signs of pain or fever with distress (*NICE guidance cg47*) a dose of paracetamol will be administered while awaiting parental collection. Before administration, parents of Nursery aged children will have given written permission for the administration of this dose via their admissions forms for Nursery. The Nursery staff will also complete a FLACC assessment to determine if paracetamol is appropriate (see Appendix 5).

Administration is under strict guidance by trained staff who have completed a paediatric first aid and administration of medication course. Paracetamol kept in school for this purpose is overseen and audited by Matron weekly.

Administration of Medication (4) – Request to Administer Medication Form

A separate form must be completed for each medicine to be administered. The form records:

1) name of parent and contact number
2) name of child and class
3) name of medicine
4) name of doctor who prescribed it, and contact details
5) how much to give
6) how it should be kept and stored
7) how it is to be administered
8) when to be given
9) does your child need to self-administer his/her medication e.g. asthma inhalers?

The form ends with the following consent statement: 'I give consent to the school to administer the medication described above in accordance with school policy. I will inform the school in writing if there are any changes to the information contained in this request.' It is signed and dated by a parent or someone with parental responsibility.

Parents will be expected to notify any requests for the administration of medicines at the earliest opportunity. The Headmaster and respective Heads of each AKS section are always available to discuss any matter relating to the administration of medicines.

The Headmaster or person authorised by the Headmaster (i.e. School Matron) will decide whether any medication will be administered in school. In appropriate cases, the Headmaster and parents in consultation with the medical advice will draw up a healthcare plan or protocol.

Administration of Medication (5) – Self-Medication

Pupils are not permitted to carry any medication around school without prior consent. If the Senior pupil is required and able to administer his/her own medicine (eg. inhaler for asthma or Epi Pens) the school Matron will check that the Senior pupil fully understands what has to be done. Normally medication will be kept under the control of the school Matron unless other arrangements are made with the parent. In cases such as asthma and anaphylactic reactions the Senior pupil will keep their own medication/inhaler with at all times. Each pupil in Senior School with prescribed epi pen has a spare which is kept in an individual named box in sick bay.

In the Prep School, medication such as Inhalers, Epi- Pens are stored in the class medical box and taken with the child wherever they go. Annual briefings are given by Matron to the Whole School with regards to those pupils, who are anaphylactic. Medication is administered under the supervision of the class teacher/teaching assistant. First Aid training is provided by Matron and/ or an outside provider(see the *First Aid Policy* for a full list of qualifications and training) and any medication that is self-administered must have the child's name on it.

Emergency medication

Emergency Inhalers are available for children who have a diagnosis of asthma and have written consent from parent/carer. They are to be used in the event of the child's normal inhaler being lost or broken. Emergency inhalers can be located in Senior and Prep Medical Rooms and also in Nursery.

This can also be used in the event of a severe reaction when told to do so by a NWAS call handler

In both dining rooms emergency, Epi Pens are to be used in the event of an anaphylaxis attack. These are for the use of anyone who shows severe symptoms of anaphylaxis in accordance with the Allergy and Anaphylaxis policy

Intimate or Invasive Treatment

The school does not normally allow these to take place in school, but in exceptional circumstances the Headmaster is authorised to agree to it. Two adults must be present when these take place, at least one of whom must be of the same gender as the pupil. Training and appropriate care plan would be given by a lead health professional prior to the commencement of any treatment.

Long-Term Medical Needs

The Local Governing Body and Headmaster/Head of the Nursery and Prep School/Nursery Manager will do all they reasonably can to assist pupils with long-term needs. Each case will be determined after discussion with the parents, and in most cases the family doctor. The Local Governing Body also reserves the right to discuss the matter with the school's medical adviser.

Records of Medicine Administration

The school form 'Administration of Medication Record' must be completed in every instance (see Appendix 3) along with the record on the back of the 'Request to Administer Medication' form.

The form records:

1) date
2) pupil's name
3) time of the administration
4) name of medicine
5) dosage
6) a note of any reactions/side-effects
7) staff signature and name

The medical record form is filled in by the school Matron or designated First Aider and checked regularly.

Training

The Local Governing Body is committed to providing appropriate training for staff who volunteer to participate in the administration of medicines.

Updated	7th July 2026
Reason for changes	Annual review and update
Name of the owner	Helen Hotchkiss: Matron, Annie Millard: DFO and c/oHealth & Safety Co-ordinator
Audience	Staff and School Community
Location	Whole School Team and School website
Review date	July 2027

APPENDIX 1 - Request to Administer Medication Form

Name of parent and contact number	
Name of child and class	
Name of medicine	
Name of doctor who prescribed the medication, and contact details	
How much medication should be given?	
How should the medication be stored?	
How should the medication be administered?	
When should the medication be given?	
Does your child need to self-administer his/her medication e.g. asthma inhalers?	

I give consent to the school to administer the medication described above in accordance with school policy. I will inform the school in writing if there are any changes to the information contained in this request.

Signed……

Date……

Date		
Time given		
Dose given		
Member of staff		
Initials		

Date		
Time given		
Dose given		
Member of staff		
Initials		

Date		
Time given		
Dose given		
Member of staff		
Initials		

Date		
Time given		
Dose given		
Member of staff		
Initials		

Date		
Time given		
Dose given		
Member of staff		
Initials		

APPENDIX 2 - Infectious Diseases Timescale for Absence

Disease/Illness	Minimal Exclusion Period
Chicken pox	At least 7 days from appearance of rash or until last spot has scabbed over
Conjunctivitis	Minimum of 1 day - longer if eyes are still weeping
COVID-19	See separate guidance document for staff/parents & pupils
Diarrhoea	48 hours or until diarrhoea has totally stopped
Gastroenteritis/Food Poisoning, Salmonella and Dysentery	48 hours or, for notifiable diseases, until advised by public health official
Head Lice	Until appropriate treatment has been administered
Infected Hepatitis	7 days from the onset of jaundice
Influenza/Swine Flu	7-10 days after the onset of symptoms, depending on the severity
Impetigo	48 hour after stating antibiotic treatment or until the skin is healed and sores are no longer weeping
Measles	7 days from appearance of rash
Meningococcal Infections	Until complete recovery from illness and on advice from health professional
Mumps	Until swelling has subsided and in no case less than 7 days from onset
Pertussis (Whooping Cough)	21 days from the onset of the cough
Plantar Warts	No Exclusion period - warts must be covered at all times
Poliomyelitis (polio)	Until declared free from infection by appropriate health professional
Ringworm	No exclusion period, if affected area is covered with appropriate dressing
Scabies	Until appropriate treatment has been administered
Scarlet Fever and Streptococcal Infection of the throat	Until appropriate medical treatment has been given and in no case less than 3 days from onset of treatment
Tuberculosis	Until declared free from infection by appropriate health professional
Typhoid Fever	Until declared free from infection by appropriate health profession

APPENDIX 3 - Administration of Medication Record

Date	Child's name	Time	Name of Medicine	Dose given	Any reactions	Signature of staff	Print name

APPENDIX 4 – Signing-in of medication

Medication must be signed in by a member of staff and expiry date checked. Surplus medication should be returned to parents for disposal.

Date	Name	Medication	Quantity	Signed In	Signed Out	Returned Date

APPENDIX 5- FLACC Pain Scale

The FLACC Pain Scale

It can be difficult to assess pain in small children or who are unable to verbalise

0	Relaxed and comfortable
1-3	Mild discomfort
4-6	Moderate Pain
7-10	Severe discomfort

Categories	Score Zero	Score one	Score two
Face	No particular expression	Occasional grimace or frown, withdrawn disinterested	Frequent to constant quivering chin clenched jaw
Legs	Normal position	Uneasy, restless, tense	Kicking legs up and down
Activity	Lying quietly normal position moves easily. Interested in normal activities	Squirming shifting backwards and forth tense	Arched ridged jerking, pulling at ears or one particular part of the body
Cry	No crying	Intermittent crying whimpering	Crying steadily screaming or sobbing
Console	Content and relaxed	Reassured by occasional touch or hugging	Difficult to console or comfort even with trusted adult