



# St Peter's Primary School

# **Administration of Medicine on School Premises Procedure**

St Peter's Primary School is part of the Greenshaw Learning Trust.

The Greenshaw Learning Trust is a charitable company limited by guarantee registered in England and Wales, company number 7633694, registered at Greenshaw Learning Trust, ORU Sutton, Throwley Way, Sutton, SM1 4AF.

# St Peters Primary School

## Administration of Medicine on School Premises Procedure

This procedure describes St Peter's Primary School's procedures for administration of prescription and non-prescription medicines on school premises. This procedure applies to St Peter's Primary School and all governors and staff of the school must abide by this procedure, which has been adopted in accordance with and pursuant to the Student Welfare Statement of the Greenshaw Learning Trust.

It is the responsibility of the Headteacher of the school to ensure that their school and its staff adhere to this procedure. In implementing this procedure school staff must take account of any advice given to them by the GLT CEO and/or Board of Trustees.

This procedure is subject to the GLT Student Welfare Statement and the Scheme of Delegation approved for the school. If there is any ambiguity or conflict then the GLT Student Welfare Policy and the Scheme of Delegation and any specific Scheme or alteration or restriction to the Scheme approved by the Board of Trustees takes precedence. If there is any question or doubt about the interpretation of this, the GLT CEO should be consulted.

### Approval and review

- Maintenance of the Procedure is the responsibility of the GLT Directors of Education (model) and the Headteacher (school version)
- The model procedure was approved by the GLT Board of Trustees on 20 December 2024.
- This school procedure was approved by the School Governing Body in: January 2026
- The Model Procedure may be updated where necessary by the GLT Directors of Education in line with statutory guidance.

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# Administration of Medicine on School Premises Procedure

## General Principles

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so and
- Where the school has received parents'/carers' written consent.

The school will consider requests made by Parent/ Carer in respect of the administration of medicines when:

- A child suffers from chronic long-term illnesses / complaints such as asthma, diabetes or epilepsy.
- A child is recovering from a short-term illness but requires a course of antibiotics, cough medicines etc.
- The school has received a written request from a Parent / Carer giving the instructions regarding the required dosage (see request form).

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed. In all cases of the administration of medication, parents / carers should be informed at the end of the day either in person or by phone call.

The school will only accept prescribed medicines that are:

- In-date.
- Labelled.
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

No member of staff has a legal or contractual duty to administer medicines or provide health treatment.

## Notes for Parents / Carers

The school holds confidential information on pupils' health. This needs to be updated regularly. The provision of this information remains the responsibility of the Parent / Carer.

The child's own doctor or healthcare practitioner is the person best placed to advise whether a child should or should not be in school.

Please note:

The request form See Appendix a and B must be used whenever a Parent / Carer wishes medication to be administered.

The medicine must be brought to school by the Parent / Carer (under no circumstances by the child) and must be delivered personally to the school office. Medicines will be either self-administered by the child or by a member of the school staff according to the instruction provided by the Parent / Carer.

- The school will not be held responsible for failure to administer medication.

- All medicines must be clearly labelled with the child's name, dosage and contents.
- If the school has concerns about the nature of the medication, it reserves the right to refuse its administration. Parents / Carers will be advised of this immediately and will be consulted on alternative arrangements.
- If your child requires medication 3 or 4 times per 24 hours then it is vital that you inform staff of the time your child would require medication. You will also need to inform them of the time you last gave the medication on the consent form.

It is also important that parents/carers inform the school office if they have given their child any medication before arrival on Health & Safety grounds.

Please be advised that medicine that has been prescribed for use twice a day should be given at home unless the family practitioner has prescribed particular times for it to be administered.

### **Storage of Medication**

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing metres and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

### **Controlled drugs**

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

For medical conditions where the child requires medication in school at all times (for example asthma and anaphylaxis), please also refer to the 'Supporting Pupils at School with Medical Conditions' procedure.

It is the parents'/carers' responsibility to provide the school with the necessary medication and/or equipment and to ensure that the medication held in school is not out of date.

### **Asthma Inhalers**

- All inhalers will be held in the Child's classroom. Where a child has more severe asthma and requires their inhaler on them at all times, arrangements will be outlined on the child's individual care plan and will be made in accordance with medical advice and the child's age and stage of development.
- Inhalers will only be allowed in school once parents / carers have completed the administration of medicines form or a care plan depending on the level of need.
- Inhalers are only to be used by / for the pupil for whom they are prescribed.

The school also has emergency inhalers on site that can be used by any child in an emergency following the appropriate guidelines. Parents/carers of children who suffer from asthma will be informed of the emergency inhaler and their consent for its use in an emergency will be sought. See Appendix C [for](#)

Emergency permission form. School staff will consider professional advice and the safety of the child first and foremost when deciding whether to administer the medication in an emergency.

## **Nebulisers**

Some children need to use an electric device called a nebuliser. In such cases, they will only be allowed following liaison with parents / carers and the school's health adviser. A care plan will be put in place in partnership with the school.

## **Adrenaline Auto-Injectors**

Some pupils may suffer anaphylactic shock through a severe and sudden reaction to insect bites, nut allergy etc.

In the case of a child being identified by a doctor as being at risk of anaphylaxis:

- Two adrenaline auto-injectors (such as Epi Pen etc) must be provided to the school. These must be clearly labelled with the child's name.
- These will be held in a medical bag in class and will accompany the child when leaving the classroom. At break times or lunchtimes, the medical bag will be kept in the medical shed.
- Adrenaline auto-injectors will only be allowed in school once healthcare professionals in partnership with parents/carers have completed a care plan depending on the level of need.
- School staff will administer adrenaline auto-injectors in extreme circumstances and only if they have been trained in the use.
- School staff will understand that adrenaline auto-injectors are a risk-free treatment and a one-shot injection which can do no harm but may relieve a potentially high-risk medical condition.
- Adrenaline auto-injectors are only to be used by/for the pupil for whom they are prescribed.

The school also has emergency adrenaline auto-injectors on site that can be used by a child in an emergency following the appropriate guidelines. Parents/carers of children who may need this are informed of the emergency adrenaline auto-injectors and their consent for its use in an emergency is sought. See Appendix C for emergency permission form. School staff will consider professional advice and the safety of the child first and foremost when deciding whether to administer the medication in an emergency.

## **First Aid Guidelines**

The schools maintain, at any given time, qualified first aid personnel.

If a child has had an injury to their face or head or other significant injury requiring monitoring, the parent/carer will be called before the end of the school day.

In more serious cases, parents / carers should be contacted immediately and advised of the need to seek advice from a medical professional.

Where additional advice is required (but not in an emergency where 999 would be called) to manage the situation on school premises prior to the parent's/carer's arrival, 111 will be called for additional advice. In this case, one member of staff will call 111 and another member of staff will make contact with the parents/carers. If advised by 111 and agreed with parents/carers verbally in response to the situation, the school can act in loco parentis to administer over-the-counter medication such as paracetamol. This should only take place on very rare occasions where not administering this medication would leave the child in significant discomfort prior to the parents/carer's arrival for collection. In this case it is the school's responsibility to check the medication is in date and does not contain anything the child is allergic to. Strict hygiene measures will be taken to administer the correct dosage.

In emergency cases, an ambulance will be called and the parents/ carers informed immediately. In such cases, the schools' order of care is entrusted to the NHS ambulance personnel.

A member of staff cannot give permission for any treatment at casualty (blood transfusions etc).

### **Excursions and Residential Trips**

When school staff are in loco parentis on a residential trip, medication will be stored and administered in accordance with this protocol. Emergency medication will be available at all times. If specific arrangements are required with regards to medication on residential trips, it is the responsibility of the parents / carers to communicate this with school staff at the time of trip registration. Staff will then work in partnership with parents / carers and healthcare professionals to make appropriate arrangements.

The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate safety measures and supervision cannot be guaranteed.



**Appendix A: Parental Agreement to Administer Medicines Form – Long Term**

**Medical Information & Parental Agreement to Administer Long Term Medication**

Name of Child: \_\_\_\_\_ Class: \_\_\_\_\_

Medical condition(s) and action to be taken if occurring in school and off-site visits including symptoms & any triggers – please include any allergies your child may have.

Medical Condition(s) 1)	2)
List Symptoms(s) 1)	2)
Allergies:	
Any triggers?	
Action to Take:	

Medication to be kept in school? Yes or No

Allergy Action Plan Required? Yes or No

Suffers from Asthma? Yes or No      Pump kept in school      Yes or No

Asthma Plan completed ? Yes or No

Consent for use of Emergency Salbutamol Inhaler signed? Yes or No

Individual Healthcare Plan in place? Yes or No

Name of Medication: 1 \_\_\_\_\_

Dose & Instructions: \_\_\_\_\_

Expiry date: \_\_\_\_\_

Name of Medication: 2 \_\_\_\_\_

Dose & Instructions: \_\_\_\_\_

Expiry date: \_\_\_\_\_

(Please note all medication must be in date and in the original container and the child's name and dosage clearly labelled)

Name and daytime number of parent/carers:

Contact 1: \_\_\_\_\_

Contact 2: \_\_\_\_\_

Emergency contact name and phone number:

\_\_\_\_\_

Name and phone number of GP:

\_\_\_\_\_

The information provided is, to the best of my knowledge, accurate at the time of writing and I give my consent to school staff to administer the medication in accordance with the school policy. I have the responsibility to ensure that I inform the school immediately, in writing of any changes to my child's medication and to replace it when out of date.

I will hand the medication in to the school office and if it is required to be left in the school on an ongoing basis, I give my permission for it to be stored and administered in a safe manner.

Parent's signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Address: \_\_\_\_\_

Agreed review date (if necessary): \_\_\_\_\_

Head Teacher's signature: \_\_\_\_\_



## Appendix B: Parental Agreement to Administer Medicine Form – Short Term

### Parental agreement to administer medicine – short term

The school will not give your child medicine unless you complete and sign this form.

Child's name: \_\_\_\_\_

Class: \_\_\_\_\_

Condition for which medicine has been prescribed: \_\_\_\_\_

Name and strength of medicine: \_\_\_\_\_

Expiry date: \_\_\_\_\_

Dose to be given: \_\_\_\_\_

When to give: \_\_\_\_\_

First day and date: \_\_\_\_\_ Last day and date: \_\_\_\_\_

Any other instructions (e.g., keep in fridge): \_\_\_\_\_

**Note: Medicines must be in the original container with child's name and dosage clearly labelled**

Daytime phone no of parent or

adult contact: \_\_\_\_\_

Name and phone no of GP: \_\_\_\_\_

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if it is stopped. **I will hand the medicine in to the school office at the beginning of the day and arrange for its collection at the end of the day.**

Parent's signature: \_\_\_\_\_ Print name: \_\_\_\_\_

Agreed review date (if necessary): \_\_\_\_\_ Staff Initials: \_\_\_\_\_

Head Teacher's (or Deputy Head's) signature

**Record of administration of medication**

Name	
Class	
Consent to administer medication	Y / N
Medication 1 Dosage and instructions Expiry date	
Medication 2 Dosage and instruction Expiry date	
Medical condition	1
	2

**PLEASE CONFIRM CHILD'S NAME BEFORE ADMINISTERING ANY MEDICATION**

Date	Time	Name of child confirmed Y/N	Medication	Dosage given	Any side effects ? Y/N	Administered by (initials)

## Appendix C: Emergency Permission Form

ST. PETER'S  
PRIMARY  
SCHOOL



### PARENTAL CONSENT FORM FOR USE OF EMERGENCY SALBUTAMOL INHALER

Please tick as many as apply:

- I can confirm that my child has been diagnosed with asthma
  - I can confirm that my child has been prescribed an inhaler
  - I would like the school to hold/currently holds my child's prescribed inhaler
- or**
- My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
  - In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive Salbutamol from an emergency inhaler held by the school for such emergencies, using a single-use spacer with a one-way valve to prevent cross-infection.

Name of inhaler prescribed: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Parents name (print): \_\_\_\_\_

Child's name (print): \_\_\_\_\_

Class: \_\_\_\_\_

Parents address: \_\_\_\_\_

Emergency contact telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_