



Inspire. Believe. Achieve.

Managing Medicines in School Policy

Approved by: Chair of Governors	Stephen Prudence	Adopted by Hollywater School
Headteacher:	Sarah Kitching	Date:
Last reviewed on:	March 2026	
Next review due by:	March 2028	

Introduction:

Hollywater School has a number of pupils with complex medical needs. Our pupil's health and well-being is of paramount importance and needs to be managed safely and efficiently in order to achieve this.

A wide range of different medications are managed within the school setting on a daily basis, it is therefore vital that everyone involved in medicine management and administration understands their individual responsibilities. This includes school staff, parents and visiting professionals.

Section 100 of The Children and Families Act 2014 places a duty on the governing body of this school to plan for supporting children at their premise with medical conditions. The Department of Education have produced statutory guidance 'Supporting Pupils with Medical Conditions' and we will have regard to this guidance when meeting this requirement.

We will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. The aim is to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

It is our policy to ensure that all medical information will be treated confidentially by the Headteacher and staff. All administration of medicines is arranged and managed in accordance with the Supporting Pupils with Medical Needs document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

- Where children have a disability, the requirement of the Equality Act 2010 will apply.
- Where children have an identified special need, the SEN Code of Practice will also apply.
- We recognise that medical conditions may impact on social and emotional development as well as having educational implications.

Roles and responsibilities

The **Governing Body** must plan to support pupils with medical conditions in school, including making sure that a policy is developed and implemented.

They should ensure that children /young people with medical conditions are supported to enable the fullest participation possible in all aspects of school life.

The Governing body should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and support as needed.

Roles and responsibilities are set out in the following policy and should be read and adhered to by all involved.

Headteacher supported by SLT

- Has a responsibility to ensure that the school's policy is developed and effectively implemented with partners.
- This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- The Headteacher supported by SLT ensures that all staff who need to know are aware of the pupil's condition.
- The Headteacher also ensures that sufficient numbers of trained staff are available to implement the policy and deliver against all individual healthcare plans, including contingency and emergency situations.
- The Headteacher supported by SLT also ensures that all pupils who need them have individual healthcare plans.
- The Headteacher and the SENCo liaises with the School Nurse with regards to the development and implementation of all Health Care Plans.

School staff

- Have a responsibility to support pupils with medical conditions, including the administering of medicines.
- Although administering medicines is not part of teachers' professional duties, they should consider the needs of pupils with medical conditions that they teach.
- School staff will receive training to fulfil this role. There is support in place to ensure that staff achieve the necessary level of competency before they take on responsibility to support children with medical conditions.
- Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Nursing Team

- Is responsible for notifying the school when a child has been identified as having a medical condition which will require support in school.
- Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.
- The nursing team can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school.
- Community nursing teams will also be a valuable potential resource for a school seeking and support in relation to children with a medical condition. See also paragraphs below about training for school staff.

Identifying Children with Health Conditions/Individual Health Care Plans

- We will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers. We will have support from the School Nurse and the Community Nursing Team.
- Health care professional will be asked to provide information regarding a pupils care, this may be a care plan that they have written or one that the nursing team have compiled the information on.
- Hollywater will then have the information to ensure that we have appropriate arrangements in place prior to the child commencing at the school to support them accordingly.
- We also use EHC Plans, Multi-Agency meetings and visits to feeder schools to ensure that we have all relevant information to best meet pupils' needs.
- Where a formal diagnosis is awaited or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition. We will ensure that every effort is made to involve some formal medical evidence and consultation with the parents.
- Each healthcare plan will be monitored at SLT level and referred forward to the relevant healthcare professional for further details as required.
- Our healthcare plans will be reviewed as per detailed on the individual plan. This will usually be done by the nursing team in liaison with other healthcare professionals involved in the child's care.
- The child's healthcare plans will be put in classrooms within their care plan record folders, all staff who work with the pupil need to read and sign the form with the plan to say that they have read and understood the plan. The plans are also stored in the SENCo office, on the school computer system, the NHS system and are uploaded to provision map and CPOMs.

Training of Staff

- All school staff providing support to a child with medical needs should have received suitable training.
- All staff will receive awareness training about this policy annually through whole staff training (e.g. Anaphylaxis', Epilepsy, Asthma). This training is also part of the School's Induction Programme. Records of all training are stored by the Training Manager.
- All staff will sign a record of attendance at the training.
- Designated staff will receive training in the administration of medication which will be updated at the start of each academic year. The Nursing Team will be responsible for ensuring that designated staff receive the training required
- The Nursing team will maintain a register of training with the competency date recorded.
- In addition, all nominated staff (those identified as working with pupils with medical needs) will be provided with additional training to support children with medical conditions which will include what their role is in implementing the policy. In particular, nominated staff will receive training from either the school nurse or the relevant children's specialist health care professionals with regards to individual pupils.

- 'Nutricia' training will be done by those staff who work with children who have gastrostomy buttons and they are fed by feed pump, after which they will be checked they are competent by a nurse.
- Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions.
- The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.
- Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

Procedures for Managing Prescription Medication

- The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours.
- The Headteacher with support from SLT is responsible, for ensuring children are supported with their medical needs whilst on site. This may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.
- Parents /Carers of pupils requiring regular medication during school hours will have discussed the procedure with the school nurse or associate practitioner.
- All regular medication **requires a signed consent form** from parents/ carers to be maintained by the School Nursing Team and a copy placed on Pupil's individual digital file.
- This form is supplied by the School Nursing Team and **must** be signed in the last 12 months to be valid.
- Medicine coming into school must be passed to the School Nursing Team **immediately** for secure keeping and administration. If they are not on site they will be secured in the medical room which remains locked if unoccupied.
- For regular administration it is important that parents/carers obtain a supply of medication that can be kept in school. The School Nursing Team will inform parents when further supplies are required.
- **In the case of short-term medication**, such as antibiotics, it will be necessary for the medication to travel to and from school each day. This must be done via transport escorts or by Parents /Carers.
- The medication must be sent to school in the original container bearing the pharmacists label clearly stating the pupil's name, the medication, expiry date, strength and dosage.
- We will never administer aspirin or medicine containing Ibuprofen to any child under 16 years old unless prescribed by a doctor.
- Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the Headteacher.

Short Term Medication

- We will not give prescription or non-prescription medicines to a child under 16 without their parent's/carers consent. An Administration of Medicines/Treatment Consent Form will be used to record this.
- A documented tracking system to record all medicines received in and out of the premises is in place.
- On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.
- We 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, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Controlled Drugs

- Controlled drugs will be securely stored in a non-portable container lockable storage cupboard which only named staff will have access to.
- We will ensure that the drugs are easily accessible in an emergency situation.
- Controlled Drugs book is used for recording the amount of medication that is held in school and when it is administered.

Paracetamol

- It is our practice to give age appropriate doses of paracetamol to children /young people secondary age children as described on the packet, if consent from the parents has been received in advance of administration. We will check that they have not previously taken any medication containing paracetamol within the preceding 4 hours.
- All other pain relief medicine will not be administered without first checking maximum dosages and when previously taken. We will always inform parents.
- Parents / carers can provide consent for the nursing team to administer paracetamol which is held as a generic supply securely in the nurses' room.
- We will never administer aspirin or medicine containing Ibuprofen to any child under 16 years old unless prescribed by a doctor.

“Over the counter” medications

- There may be some occasions where over the counter medications need to be administered in school. This needs to be discussed with the School nursing team.
- “Nappy creams” can be used by staff in classes as long as parents send them in from home, named, in date and unopened. These need to be kept out the reach of pupils in bathrooms / classes and only used for the named pupil.

Kitt Medical Auto injectors for Anaphylaxis

- Hollywater staff are trained to use the Auto injectors in the Kitt Medical Kit, for anyone who appears to be having an anaphylactic shock.
- The SENCo is responsible for checking the kit when prompted by Kitt Medical.

- The training co-ordinator is responsible for ensuring all Hollywater staff have completed the required training.

Storage of Medications

- Medication must be stored safely. They must be kept in the locked medicine cabinets or drug fridge where appropriate.
- All bags and medication are stored in the medical room when a pupil is attending respite.
- Individual pupil asthma inhalers are kept in the medical room.

Administering Medication

- Check the pupil's name.
- Refer to the written instructions of the medication regarding the pupil.
- Check the expiry date.
- Check the prescribed dose.
- Check the prescribed frequency of the medication.
- Measure out or observe the measuring out of the prescribed dose
- Check the pupil's name again.
- Once the medication has been given, complete and sign the record sheet.
- If uncertain do not give the medication and check with the pupil's parents.

Non-Routine Administrations

- Specially appointed staff will be available to carry the administration of Buccal Midazolam, Rectal Diazepam or Autoinjectors containing epinephrine. In all cases professional guidance via the school nursing team will be obtained with regular annual training.

Administration of Buccal Midazolam or Rectal Diazepam

- Pupils who have been prescribed Buccal Midazolam or rectal diazepam will have their own supply which is stored and locked in the medical room.
- Consent for administration will be on a drug chart signed within the last 12 months to be valid. The school nurse or associate practitioner will have discussed a written protocol with parents and a copy of specific instructions regarding administration will be kept with the supply.
- The school nursing team will ensure that supplies are adequate and in date.

Indemnity of Staff

- Hampshire County Council fully indemnifies its staff against claims for alleged negligence providing they are acting within the scope of their employment.
- For the purposes of indemnity, the administration of medicines falls within this definition and hence staff can be reassured about the protection their employer provides.

Off Site Visits Procedures:

- It is the responsibility of the visit lead to that any emergency medication or routine medication which needs to be given whilst off site is taken on the trip.

- The visit lead needs to appoint a confident member of staff to take responsibility for the medication, they will need to go and watch any medication being drawn up by the nursing team and collect any emergency medication and care plans.
- The responsible member of staff is then responsible for the medication bag, which must be kept on them or locked away at all times. They are also responsible for giving medication and signing the administration sheet.

Residential Trips

- The designated Lead Teacher will need to ensure that administration of medication is recorded on the drug chart at the time of administration.
- The designated Lead Teacher will ensure that the nursing team know about the trip in good time and medication comes into school prior to the trips in order for medication administration charts to be drawn up.
- The designated Lead teacher will ensure that there are enough staff on the trip to confidently administer both routine and emergency medication.
- If emergency medication is given the school nursing team, home contact and parents should be informed as quickly as reasonably possible.

Young people on work experience

- The headteacher and supported by SLT, will ensure that the placement is suitable for a young person with a particular medical condition and that relevant medical information is shared with employers.

Medic alert – bracelets/necklaces

- Medic alert bracelets/necklaces are worn to alert others of a specific medical condition in case of an emergency. As these items can be a source of potential injury in games or practical activities, consideration should be given, in appropriate circumstances, to their temporary removal and safe keeping by the person in charge of the activity. In such cases staff will need to be alerted to the significance of these bracelets/necklaces and be clear whom they belong to when taking charge of them.
- Discussion should be had with parents /carers in this respect.

Emergency Procedures

Transfer to Hospital via parents / carer

- Health professionals are responsible for any decisions on medical treatment when parents/ carers are not available.
- Normally when a child / young person becomes unwell at school, (other than minor cuts or bruises), arrangements will be made for them to be supported in the recovery room.
- The Admin team will arrange for the parent/ carer to collect them as soon as possible.
- It will then be the responsibility of the parent / carer to accompany the child / young person to their GP surgery or to a hospital outpatient department as appropriate.

Transfer to Hospital via ambulance

- In some situations, it may be necessary for professional medical care to be sought immediately, e.g. suspected fractures, all eye injuries, serious head injuries, acute illness or other serious medical conditions (anaphylaxis' after using preloaded adrenaline autoinjector) that will not respond to first aid treatment.

- Although the decision to call an ambulance for a child will usually lie with the school nursing team or SLT, anyone can call an ambulance if it is needed. Especially in response to suspected cardiac arrest and some children's care plans state to call an ambulance prior to being attended to by the School Nursing Team. The call should be made by a member of staff with the pupil, who should be ready to answer specific questions on the condition of the child and pre-existing medical conditions. Care record plan books should be referred to at this time.
- A member of staff should always accompany a child/young person taken to hospital by ambulance and should stay until the parent / carer arrives.
- The member of staff accompanying the child/young person cannot give consent for any medical treatment, as he/she does not have parental responsibility for the child/young person.
- Consent is not required for any lifesaving emergency treatment. However, awareness is required for any religious/cultural wishes i.e. blood transfusions, which should be communicated to the medical staff. In the absence of the parents /carers to give their expressed consent for any other non-life threatening (but nevertheless urgent) medical treatment, the medical staff will carry out any procedures as they deem appropriate.
- If ambulance response times are long and direction is given by the ambulance control the child /young person should be transport by staff in their own vehicles, the School Nursing team and SLT will ensure they have given clear guidance for staff should this necessary

Staff Wellbeing

- The Governors and Headteacher of Hollywater school recognise that medical emergencies, whether illness or injury, make significant emotional demands upon those involved. It is important that support is available to them.
- This support might include a sympathetic listener and time to compose themselves or counselling arranged through Education Support, The Local Authority Educational Psychology Service, Occupational Health or the School Designated Mental Health Lead.

Concerns around whether or not Hollywater can meet Medical Needs.

- Where there is concern about whether the setting at Hollywater can meet a child/young person's needs, or the expectations of the parents /carers appear unreasonable, the Headteacher and School nursing team will seek further advice from the health care professionals, our Lead Learning Partner (LLP) or SEN Case Worker where applicable.
- All staff should know how to call the emergency services and who is responsible for carrying out emergency procedures in the event of need.
- Medical information should be shared with school transport providers for home-to-school-transport arranged by the local authority, especially in respect of emergency situations and pupils with life-threatening conditions.
- Some children/young people at Hollywater suffer from chronic medical conditions, which may require urgent action to prevent a possible life-threatening situation from developing.
- Specially appointed support and experienced support staff may not be available to carry out these tasks. This may be though absence due to illness, a critical incident etc; Where there are other staff willing to exercise their duty of care they may support the child / young persons under the direction of the School Nursing Team.

- This information should be included in the individual healthcare plan for the child / young person and is likely to include calling for an ambulance.

The Child's Role

- Where possible and in discussion with parents /carers, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan.
- The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity).
- Where possible we will endeavour to ensure that such children/ young people have easy access to allow for quick self-medication. We will agree with relevant healthcare professionals/parents/ carers the appropriate level of supervision required and document this in their healthcare plan.
- Many pupils at Hollywater School are unable to administer their own medication. A robust procedure is in place for the administration of all medication (see below).

Unacceptable practice

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, it is unacceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence or opinion.
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.
- Penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues.
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips.

Breaches in the procedures outlined in this policy will be considered unacceptable practice and be dealt with in line with the schools Disciplinary Procedures.

Complaints.

- Any Parental / Carer or student concerns can be immediately raised with the Headteacher and Lead Nurse from the Hampshire Hospitals Nursing team.
- If the concerns raised are about the Headteacher then they should be raised with the Chair of Governors in line with Hollywater Schools Complaints Policy.

Links to other Policies:

Accessibility Policy

Attendance Policy

Children who Cannot Attend School due to Medical Conditions

Child Protection and Safeguarding Policies

Health and Safety Policy

Further guidance and information

Supporting pupils with medical conditions at school (GOV.UK) Department for Education statutory guidance, templates and links to other departmental guidance and advice.

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Supporting pupils with medical conditions: links to other useful resources - GOV.UK (www.gov.uk)

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3/supporting-pupils-with-medical-conditions-links-to-other-useful-resources--2>

Health Conditions in Schools Alliance (medicalconditionsatschool.org.uk) includes an example school medical conditions policy, a guide and template for an individual healthcare plan, other forms for record keeping, and information on specific health conditions.

Health protection in schools and other childcare facilities (GOV.UK) UK

First aid in schools – (GOV.UK) <https://www.gov.uk/government/publications/first-aid-in-schools>

Health Security Agency guide for staff on managing cases of infectious diseases in education and childcare settings.

Early years foundation stage statutory framework (EYFS) (GOV.UK)

Department for Education Graduated response early years |

Education for children with health needs who cannot attend school - GOV.UK (www.gov.uk) <https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school>