

High Grange

Adaptive thinking, Communication, Emotional wellbeing, Independence

Promoting Wellbeing & Safety		
Medication Policy and Processes		
Last Update: September 2025	Responsible: Principal	Page: 1 of 19

This policy promotes ACE because;	
	This policy promotes Adaptive thinking by tailoring medication support to individual needs and encouraging safe, independent management; Communication through clear, consistent dialogue between pupils, parents, and staff; Emotional wellbeing and Independence by considering emotional impact, promoting understanding of medications, and empowering pupils to take increasing responsibility for their own health safely.

Aims

This policy follows the guidance in

Supporting pupils at school with medical conditions", published by the Department for Education, December 2015 and Professional Guidance on the safe and secure handling of medicines published by the Royal Pharmaceutical Society, December 2018. It supersedes all previous medication policies at High Grange. It will be reviewed annually.

It is a recommendation that all providers should have a medicines policy which includes written processes for:

- sharing information about a pupil's medicines
- ensuring that records are accurate and up to date
- identifying, reporting and reviewing medicines-related problems
- accurately listing a pupil's medicines (medicines reconciliation)
- reviewing medicines (medication review)
- ordering medicines
- receiving, storing and disposing of medicines.
- documentation of returns to the pharmacy.
- regular stock checks to ensure stock levels are appropriate and within expiry dates
- helping children and young people to look after and take their medicines themselves (self-administration)
- staff administering medicines to pupils, including staff training and competence requirements
- adhering to safe administration practices (the five R's)

- staff giving medicines to pupils without their knowledge (covert administration)
- staff giving non-prescription and over-the-counter products (homely remedies) to pupils, if appropriate.
- correctly documenting any medication discrepancies and informing parents/carers.

This policy will cover the above areas in the context of High Grange. Throughout this policy the term “parents or carers” will be used to indicate the person or persons with legal parental responsibility.

1. Informed consent

All staff at High Grange need to ensure that the pupils and their parents or carers, if appropriate, have the opportunity to be involved in making decisions where medication administration is involved.

The guidance recommends that **informed consent** is recorded before medication is given. This is confirmed by parents or carers in the parent pack which is completed before pupils start at the school.

Pupils may require changes of medication or short-term medication during the day: parents or carers will need to complete a consent form. Pupils aged over 16 who have been assessed as being capable of giving informed consent via the appropriate risk assessment may do this. The decision would be taken in line with the appropriate legislation, (for example the Mental Capacity Act 2005, Gillick competency and Fraser guidelines).

Pupils also have a right to refuse their medication. If this occurs the date, time and reason must be recorded. Parents or carers need to be informed. If more than one dose is refused parents or carers should inform the person who prescribed the medication. Some pupils may refuse medication on a regular basis (for example: eye drops for hayfever) without there being harmful effects. If this is the case parents or carers and the prescriber still need to know when it first occurs, but the action to be taken in the future can be written into the pupil's health care plan. A request may need to be made for the medication to be changed or stopped if it is regularly refused.

2. Sharing Information

When pupils leave High Grange, their medical information will need to be shared with the new provider as appropriate.

Information about health and medication is treated as confidential. Information is shared in a confidential manner and only between staff involved directly in each pupil's care.

Pupils with specific medical needs or allergies have a health care plan which is reviewed annually or more often if appropriate.

Each pupil who is prescribed medication will have a Medication Administration Record (MAR). This will identify each medication to be given including its full name, strength, route, times to be given and any special instructions. This must replicate the instructions on the pharmacy label and consent to administer form. The transcribing of the information onto

the MAR will be checked and signed by two members of staff who are both trained medication administrators to ensure accuracy.

Medical information such as letters, e-mails and transcribed phone messages are stored confidentially in each pupil's health files which are kept in the locked medical room. As a pupil leaves High Grange these are archived for the length of time advised by the NHS.

3. Medication responsibilities

Medication stored and used in High Grange is the responsibility of the school nurse. If he or she is unavailable this responsibility may be temporarily passed to staff who have medication administration training.

4. Medication errors and adverse reactions

Medication procedures at High Grange are regularly reviewed in order to reduce the risk of medication errors.

Medication errors are reported using medication discrepancy forms. These are kept in the medical room. Only staff who are trained in medication administration have a key for the medical room. This form is completed as soon as possible following the incident, but always within 24 hours.

The process will be followed as instructed. Any action taken will depend on the nature of the incident. Some minor discrepancies, such as a dropped tablet, may need no action if dealt with appropriately at the time. If an student's medication is not given because it has been forgotten or missed out, then parents must be notified straight away. Other discrepancies, including those which could potentially lead to harm to a pupil or staff member, will require a full investigation, identifying the root cause and the action taken. OFSTED and the local safeguarding board will be contacted if the error falls within the criteria to notify them. A medication error will meet a referral threshold if:

- any medication error that leads to actual harm or death
- any medication error that exposes the pupil at risk to unacceptable risk of harm
- any medication error requiring medical intervention e.g. GP consultation, attendance at A&E
- the medication error was a deliberate act
- medication is administered covertly without appropriate consultation/supervision
- the medication error is part of a pattern or culture. The pattern could be same drug, same administrator or same pupil. The duration and frequency must be considered.

If a pupil is suspected to be having an adverse reaction to medication this is reported to parents or carers, they should then report this to the person who prescribed the medication.

A record must be kept which details the adverse reaction, action taken by staff and the outcome of the situation.

Pupil's and their families need to know how to access advocacy and complaints services, in order to report suspected medication errors or concerns. Details of these are displayed on noticeboards in each class and are described in the pupil handbook.

The School Nurse and a senior member of staff will be notified of any discrepancies reported within the setting.

5. Medical information

When a Pupil starts at High Grange a parent pack is completed which includes a list of all their medication and times of administration. Other information in the parent pack includes:

- Full name, date of birth, NHS number, home address, height and weight
- GP details
- Details of other professionals involved in the pupil's care, for example CAMHS, dentist, optician, paediatrician
- Known allergies or reactions to any products
- Details of any support the pupil needs to take their medication, or routines that they have

6. Medication Reviews

Pupils who are prescribed medication should have regular reviews (at least annually) with the prescribing professional. Parents or carers are responsible for updating the school of any changes to their child's medication or dosage. High Grange staff may be asked to contribute information on how the pupil is presenting prior to a medication review or following a change of medication. Any information contributed should be treated as confidential and shared only with the knowledge and permission of the pupil's parents or carers. Any information shared should be documented in the pupil's health file.

7. Medication Changes

Parents or carers are responsible for informing school of any changes to their child's medication or dosage. When medication is prescribed on a PRN basis or for a short period such as with antibiotics, parents or carers should provide clear instruction on what the medication is for, its expected effect and when the medication should be administered. In all cases the pharmacy label must clearly state when the medication should be given and how much to give. This should be transcribed carefully onto the MAR sheet. When not needed any more the medication needs to be crossed through on the MAR sheet, dated and signed, and communicated to all staff who administer medications. There should be a completed consent form ~~completed~~ for all medications administered within school, parents or carers will need to complete a form for short term medications or for any changes in medications.

Medicines prescribed for one pupil must never be used for anybody else.

8. Medication: General

When medication is being ordered, received, administered or disposed of, this time needs to be protected so that the people involved in the process are not disturbed.

The processes of receipt, storage, administration, recording and disposal of controlled drugs must be robust, according to the NICE guidelines. At High Grange we follow the processes described in the Misuse of Drugs Act 1971.

The medical room is audited by the High Grange nurse and Health Care Assistant every month. During this time the level of stock is checked, along with best before dates, opening dates for liquids and creams, general cleanliness, storage and written records. Any medication to be disposed of is moved to a separate cabinet and either returned to parents/carers or taken to a pharmacy for disposal as soon as practicable.

9. Transporting medication to and from High Grange

At the end of each term medication should be returned to parents or carers, unless they have agreed to leave it at High Grange. All medication must be listed with quantities on the medication in/ out sheet to provide an audit trail. The process of transporting medication will be followed as per instructions. On arrival at High Grange the escort will give the wallet to a member of staff, to the nurse, or Health Care Assistant.

All medication must be signed into High Grange by completing a medication in/ out form. If the medication is a Controlled Drug, or is being treated as such, it must also be entered in the Controlled Drugs book. When medication is sent home, the form must be completed to show which medication is being sent and the quantity.

There is a separate Risk Assessment which has been completed for the transport of medication.

10. Controlled drugs

All Controlled Drugs (CDs) (as identified in the UK list to be found at <https://www.gov.uk/government/publications/controlled-drugs-list>) are to be signed in to High Grange in both the controlled drugs book in the medical room and the individual young person's signing in and out sheet. The due process will be followed as per instructions. Each time medication is administered or removed from the cabinet for any reason it must be counted, and the new total entered in the CD book. If CDs are sent home, they must be signed out in the CD book and on the MAR sheet. If controlled drugs need to be disposed of, this must be signed and the pharmacy receiving them must also sign the receipt book.

In all cases where controlled drugs are being managed; 2 signatures are to be recorded against the records in order to witness the safe handling and administration of them.

However, no one should be deprived of prescribed medicine because there is only one member of staff on duty when he/she needs it.

11. Ordering and storing medication

It is the responsibility of the parents or carers to ensure that school have enough stock of their child's medications, the school nurse, health care assistant or another named member of staff if the nurse is not available, will notify parents or carers when stock is running low giving them sufficient time to obtain more medication.

The keys for the medical cupboards in the medical room are stored in the key safe located on the wall of the medical room. This is secured by a four-digit code which is only known to those trained in medication administration.

Medications are stored in locked cupboards within the medical room in compliance with current RPS guidelines. Controlled drugs, or those identified by the school as such, must be stored in the designated CD cupboard.

There is a lockable medicines fridge at school which is located in the medical room. The fridge temperature needs to be recorded twice a day when in use and used ONLY for medication.

If medication needs to be taken out of school for trips out this needs to be recorded on a signing in and out sheet even if it is not likely to be used (examples: Adrenaline Auto Injectors e.g. EpiPens and Buccal Midazolam). This will allow the location of all medication to be tracked. A copy of the MAR chart will be taken offsite along with the medication so administration can be recorded effectively.

If it is necessary for a pupil to have medication available to them at all times such as Buccal Midazolam or Auto Injectors e.g. EpiPens. This should be detailed in the pupil's health care plan. This medication needs to be stored securely but easily accessible when needed. It is important to ensure that all staff who work with these pupils have training in these medication's administration and that one person is responsible for keeping it safe. It should only be looked after by the pupil themselves if a risk assessment has been completed which has concluded that the pupil has the mental capacity, skills and knowledge to look after and use it safely.

Student's who are able to carry inhalers on them should do so at all times during the school day, allowing them to use it when necessary. Student's in Lower School should have their inhalers stored in their form rooms or with form/support staff. It is important that these inhalers remain accessible to students at all times.

12. Types of medication and their storage

No medication can be used past its printed expiry date. Some medications have a shorter expiry date once opened, for example eye and ear drops often state that they must be disposed of after 28 days. Liquid preparations such as antibiotics which have been prepared by the pharmacist must be disposed of via a pharmacy when the course is finished. Each medication should have instructions about its storage and disposal, but as a rule at High Grange the following guidance should be used if it is not explicitly stated:

Type of medication	Length of time before discarding
Tubs of cream	1 month or shorter if cream looks dry or dirty
Tubes of cream	3 months
Tablets or capsules in MDS systems	2 months
Eye and ear drops	28 days
Inhalers	Until use by date
Tablets and capsules in original packaging	Until use by date
Bottles of liquid medication	6 months, or shorter if stated on label
Brown pharmacy bottles of tablets or capsules	6 months from date of dispensing

All bottles, tubes and tubs must be labelled with their opening date and expiry date. If a bottle of liquid oral antibiotics is to be used for a very short time (a week or two weeks) this will not need a label as it will be disposed of as soon as the course is completed.

Oral nutritional supplements such as Ensure will be stored in a fridge in the medical room, for pupils who may need them during the school day. Pupils who have supplements prescribed must have them written on a MAR sheet or PRN sheet, whichever is most appropriate, to ensure that they are accurately recorded.

13. Disposal of medication

Medication must be disposed of if:

- It has reached its expiry date
- It has been opened for the length of time specified on the label, or in the table above
- It is no longer prescribed to that pupil
- The packaging has been damaged, exposing the contents
- It has been dropped on the floor, dispensed and refused by the pupil, or spat out

Medications should be sent home for parents or carers to dispose of unless they request that school dispose of them. Medication for disposal must be recorded in the "disposal of medication" book. Single tablets, or anything difficult to identify needs to be sealed in a bag with a label identifying what it is, when it was put in the bag and who by. Pre-printed labels and small bags are kept with the record books.

Medication to be disposed of is stored in a separate medical cupboard until the nurse can take them to the nearest pharmacy for disposal. This should happen as soon as reasonably

possible, and the disposal of medications book should be signed by the receiving pharmacy to show that safe disposal of medications regulations has been followed.

14. Self-Administration of Medication

All pupils should be encouraged to self-administer their own medication if they are assessed as having the knowledge and skills necessary to do this and if any risk of self-harm using medication has been risk assessed and is subject to controls as needed. As a high proportion of pupils at High Grange are at risk of self-harm, or have fluctuating moods which may increase this risk, the process for assessing and monitoring pupils must be rigorous.

If staff and parents or carers are confident that the pupil would like to take some responsibility and has the capability of doing this, a self-administration assessment is completed. This is normally completed by the school nurse and staff who are most familiar with the pupil. The result of the assessment will help to determine if the pupil has the knowledge and skills needed to self-administer safely and reliably. Any pupil who is assessed as having the knowledge and skills to self-administer their medications will have a health care plan in place and an agreement that they will follow the plan, including the need to reassess if there are any changes to their medications or there is a concern raised about their ability to safely self-administer.

15. Medical files

Each pupil in the school has a medical file which is kept in a lockable filing cabinet in the school medical room. The medical files contain a copy of the parent pack, a chart for recording heights, weights, blood pressure and pulse and centile chart, letters and documents relating to health appointments and needs, a PRN medication record sheet, MAR sheets for pupil on regular prescribed medication and health continuation records.

Each pupil has a PRN chart which is used to record any PRN medication given, which is usually only Paracetamol, unless a parent or doctor has given written permission, and very short courses of medication, eg: antibiotics.

Pupils who take regular medication also have a MAR chart. If a mistake is made when recording on a MAR sheet or PRN sheet this must be crossed through with a single line and corrected with a signature, date and time: **correction fluid must not be used.**

All controlled drug (CD) administration must be recorded in the CD book with a second member of staff witnessing its administration and signing the book as a witness. This person must also sign the MAR sheet.

The patient information leaflets for each medication must be kept, either with the medication or in the pupil's medical folder. Further information can be found on www.patient.co.uk or NHS Choices.

16. The Medication Process

The medication process is displayed on the wall in medical room. It includes the 6 R's (adapted at High Grange to include 8). See appendix 1 for a copy. Further advice is as follows:

- There is no need to wear gloves and apron when administering medication unless it is indicated on the label or instructions.
- Never crush tablets or empty capsules to make them easier to take. Consult the child's parents or carer if they find taking tablets difficult. If a tablet needs to be broken in half a purpose- made tablet cutter needs to be used.
- Use single-use gloves if applying creams or lotions to the skin; latex free if needed.
- If a previous dose of medication has not been signed for it is important to investigate whether this dose has been given: staff are not to sign MAR sheets for other members of staff.

If a pupil is not available at the time of their medication being due ie being late to return from an offsite visit there may be a need to delay administering their medication. If this is the case, there must be at least 4 hours between doses of the same medication. If there is any doubt about whether a medication can be given late the staff should contact the pupil's parents or carer or NHS Direct on 111.

If a pupil refuses their medication despite several promptings, this needs to be recorded on the MAR sheet- there is a section for this on the reverse. The refusal of a medication dose should be reported to parents/carer as soon as possible, if continued refusal of medication this should also be reported to the prescriber.

Medication can only be given to the pupil for whom it has been prescribed: it must never be used for anyone else even if they take the same medication.

It is important to check expiry dates regularly, particularly on medication with short dates. All liquids and creams need to be labelled with their opening date as stated previously.

17. Homely Remedies

The only homely remedy given at High Grange is Paracetamol and antihistamine. They can only be given if written permission has been given by the parent or carer and after checking with parents/carer to ensure that a dose has not been administered earlier. Some pupils may have been prescribed Ibuprofen in the past and parents or carers may request that their child is given this. The parent or carer must have given written permission for this to be administered, and a pack supplied, this will be kept in the pupil's medication box. If a pupil needs Paracetamol during the school day this must be recorded in their health file in the medical room, on their MAR sheet in the PRN section. Parents or carers need to be informed of any medication which their child has needed and doesn't normally have. This is ideally

communicated over the telephone but can be communicated via email or text message or written in their home-school book.

Paracetamol given in school also needs to be recorded on the stock check form which is situated in the file kept in the medical room.

Staff who give medication or homely remedies must also have medication administration training and must be aware of the process and that they are accountable for their actions.

18. Trips out

If medication is needed during a trip out of High Grange, it must be signed out and back in. In the case of controlled drugs, it must also be signed out from the CD book. It must be looked after carefully by the trained member of staff who has signed it out, including during the journey. In order to identify the medication, it needs to be taken in its original container even if this means taking out more medication than is needed for the trip. Lockable cash boxes will be available if there is concern over inappropriate use by pupils. This will be detailed in the pupil's individual risk assessment. Most medication will be transported in a locked cash box.

Controlled drugs will need transporting in a lockable cash box in all cases and 2 signatories need to be obtained when handling or administering them.

If the medication is used while out from school, it must be recorded as soon as possible following return to High Grange with parents or carers informed as needed.

19. Covert administration

Staff at High Grange must never give a pupil medication without their knowing (covertly).

The only exception to this is if the pupil has had a mental capacity assessment completed and a best interest meeting between professionals, including a Social Worker, which has decided that this is necessary. If this is the case it must be monitored, and regular reviews held to make sure this is in the best interests of the pupil.

20. Medication training

Only staff who have completed medication training are able to administer medications, there are a small number of staff besides the school nurse who have completed the medication training and are able to administer medications in the absence of the school nurse or during offsite activities. Once staff have completed the medication training, they will be observed administering medication on several occasions by the school nurse to ensure that they show competence and confidence before an assessment is completed.

The assessment takes the form of a discussion between the employee and the nurse. The assessment form can be seen in appendix 2. Following the successful completion of this

assessment the document is signed by both the nurse and the member of staff, where they agree to abide by the policies and procedures of High Grange School.

If the member of staff is assessed as NOT having the knowledge, skills and confidence they are invited to repeat another period of witnessed medication administration, after which they will be re-assessed.

Members of High Grange staff can be trained to give specific medication to one pupil. This training includes an awareness of the reason the pupil needs the medication, its common side-effects, how to give it and what to do if something goes wrong. This training is used primarily for school staff who may take pupils off-site or who have trusting relationships with certain pupils and young people: this can increase the likelihood of a pupils agreeing to take their medication regularly. For pupils who require regular medication at specific times this may be more appropriate as their trusted Teaching Assistant is able to administer their medication as part of their normal routine.

All staff trained in administering medication will have their skills reviewed each year by their line manager or by the High Grange nurse.

Appendix 1: Administration of medication procedure

Wash hands

There is no need to wear gloves & apron unless it is indicated on the label or instructions. Use a medicine pot to tip or push the tablet into: this will keep it clean as it won't be touched.

Check you have the right pupil/young person!

Don't give medication to any child or young person you don't know-ask other staff to come with you who know the young person.

Check MAR sheet and medication label

Check for any changes or discrepancies

Make sure they haven't had this dose already

Check MAR sheet and ask child/young person

For controlled drugs - count and record number/ amount of medication

Check for discrepancies in recorded amounts

Check child/young person takes medication, offer a drink of water

If child/young person refuses to take medication record and report this

Record on MAR sheet and in CD book with counter signature if required

Record any concerns in health file and report to house manager

Remember...

1. **Right patient:** Check you have the correct pupil
2. **Right medication:** Check the medication label. Check the MAR sheet.
3. **Right dose:** Check the MAR sheet.
4. **Right route:** Is it a tablet? A topical cream?
5. **Right time:** Double-check that you are giving the ordered dose at the correct time. Confirm when the last dose was given.
6. **Right documentation :** Complete the MAR sheet when finished
7. **Right reason:** If it's a PRN drug does he or she need it?
8. **Right response:** Any side effects?

Appendix 2:**Administration of drugs and medicines assessment form**

Name of Employee		Employment Start Date	
Name of Lodge			
Assessor			
Position			
Assessment Date		Assessment Number	

The purpose of this assessment is for the Assessor to satisfy themselves that the person performing the Administration of Drugs and Medicine has practical ability and sound knowledge of pharmacology and applicable legislative requirements affecting this practice.

The Assessor must consider the following: -

Practical Management	Yes/No or Comment
Hands washed	
Preparation of equipment for the administration of medicines eg: medicine pots or spoons, measuring syringes, MAR charts, keys for cupboards, pen	
Understands the requirements of handling and administering controlled drugs Obvious and adequate checking of 7 rights: 1. Right person 2. Right drug 3. Right route 4. Right dose 5. Right time 6. Right procedure (state which demonstrated) 7. Right record keeping- checking of MAR chart, filling in chart and CD book if appropriate.	Obvious & adequate check of 10 rights:- 1. Right Person; 2. Right Medication/Drug; 3. Right Route; 4. Right Dose; 5. Right Time; 6. Right Service User Education (does the Service User understand what the medication is for; and that they will alert a member of staff if they experience side effects or reactions); 7. Right Documentation (Record keeping, MAR Chart, CD Book); 8. Right to Refuse; 9. Right Assessment (Does the Service needs the medication? Check for contradictions; undertake baseline obs if required); 10. Right Evaluation (Ensure Medication is working how it should, on-going obs if required; medication reviews).

Ensure all medication prescribed is given in an appropriate manner (or appropriate action taken)	
Recognises right for pupil/young person to express independence, rights and choices and provide consent	
Practitioner ensures medical room and cupboard is left clean and tidy, well stocked and safe when finished	
Practitioner ensures safety is maintained at all times for pupils/young people, staff and visitors	
Practitioner reports changes of requirements or concerns to the appropriate person or takes specific action themselves	

Drug and medicine management (Theoretical aspects)	
The practitioner is able to discuss how High Grange School: <ul style="list-style-type: none"> • Orders medication • Receives medication and records it • Disposes of medication and records it • Rotates stock • Checks stock levels 	
The practitioner is able to discuss how to manage drug administration errors	
The practitioner is able to discuss how to manage self-administration of medication	
The practitioner is able to discuss and demonstrate by use of CD book, general management of controlled drugs including: <ul style="list-style-type: none"> • Administration (if not covered during practical aspect) • Ordering • Receipt • Return/ disposal 	
The practitioner is able to discuss local and national legislative requirements made upon them, ie High Grange	

policies and procedures, OFSTED
requirements

Pharmacology- Please choose 6 different types of drugs			
Drug	Reason for use by individual young person	Side effects	What to do if dose is missed/overdose

Conclusion – General Comments by Assessor

Assessors Decision – In the Assessors Opinion: -

Is the Practitioner.....	Yes	No
Safe?		
Competent?		
Knowledgeable?		
Responsible and Accountable?		
Has the Practitioner Passed this Assessment?		

Please explain reasons if the answer is 'No' to any of the above

Date for Re-assessment following a negative response:-

Assessor's Signature	
Print Name	
Date	
Next Assessment Date	

The Practitioner is required to sign the declaration below

To meet the requirements of High Grange Medication Policies and Procedures, all staff administering medications are personally accountable for their individual practice and as such must always:

- 1. Act in such a manner to promote and safeguard the wellbeing of children and young people while respecting their dignity and privacy;**
- 2. Ensure no action or omission on the part of the individual practitioner is detrimental to the interests, condition or safety of the children and young people;**
- 3. Maintain and improve on professional knowledge or competence;**
- 4. Acknowledge any limitations on knowledge or competencies and so decline any duties or responsibilities unless able to perform them in a safe and skilled manner;**

5. Identify and record anything that may hinder a child/young person giving informed consent. This could include: - health issues i.e. vision or hearing problems, cultural differences, language problems with reading and understanding.
6. Carry out Drug and Medication Administration in line with High Grange School Policies and Procedures

I hereby agree to Points 1-6 listed above

Practitioner Signature	
Practitioner Printed name	
Date	

Policies must be reviewed when there are changes to legislation/ practices affecting this policy or at least annually.