



MEDICINES POLICY

Date: September 2026

Review date: September 2029

Policy approved by: Governing Body

1. OVERVIEW

St Mary's R.C. Primary School recognises that some pupils have medical conditions or require medication during the school day in order to remain healthy, safe and able to access education.

The school is committed to supporting pupils with medical conditions and ensuring that pupils who require medication receive appropriate support in school. No pupil should be prevented from participating in school life because they have a medical condition or require medication.

The school will make reasonable and practical arrangements for the safe storage, administration and supervision of medication where this is required.

This policy should be read alongside the school's arrangements for supporting pupils with medical conditions and the school's separate **Allergy Safety Policy**.

The school will have regard to the Department for Education statutory guidance **Supporting pupils with medical conditions at school**. This guidance remains in force while the Department for Education develops revised guidance.

From September 2026, the school will also comply with the statutory requirements relating to allergy safety and will maintain and publish an Allergy Safety Policy.

2. AIMS AND OBJECTIVES

The aims of this policy are to:

1. Ensure pupils who require medication during the school day are supported safely and appropriately.
 2. Ensure that medication is stored, administered, recorded and disposed of safely.
 3. Ensure that the school works in partnership with parents/carers, pupils and relevant healthcare professionals.
 4. Ensure that appropriate Individual Healthcare Plans (IHPs) are developed where required.
 5. Ensure that staff who administer medication have appropriate information, instruction and training.
 6. Ensure that pupils are supported to manage and, where appropriate, self-administer their medication safely.
 7. Ensure that emergency medication is readily accessible and available when required.
 8. Ensure that pupils with medical conditions can participate as fully as possible in school activities, including educational visits and residential activities.
 9. Ensure that appropriate arrangements are in place for pupils with allergies, including emergency treatment for anaphylaxis.
 10. Ensure that medication incidents, errors and significant near misses are appropriately recorded, reported and reviewed.
 11. Ensure that the dignity, privacy and confidentiality of pupils are respected.
 12. Ensure that arrangements comply with relevant legislation and statutory guidance.
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3. LEGAL AND GUIDANCE FRAMEWORK

This policy has regard to relevant legislation and statutory guidance, including:

- Children and Families Act 2014, particularly Section 100;
- Equality Act 2010;
- SEND Code of Practice;
- Department for Education: **Supporting pupils with medical conditions at school**;
- Department for Education: **Allergy safety in schools** statutory guidance;
- Department of Health and Social Care guidance on emergency adrenaline auto-injectors in schools;
- Health and Safety at Work etc. Act 1974;
- Health and Safety Executive guidance where relevant;
- UK General Data Protection Regulation (UK GDPR);
- Data Protection Act 2018;
- relevant safeguarding guidance.

The school will keep this policy under review as statutory guidance is updated.

The Department for Education has confirmed that the existing medical conditions statutory guidance remains in force while revised guidance is developed.

The new **Allergy Safety in Schools** guidance was published on 6 July 2026 and is statutory guidance for maintained schools and academies in England.

4. RESPONSIBILITIES

4.1 The Governing Body

The Governing Body will:

- ensure that arrangements are in place to support pupils with medical conditions;
 - ensure that this policy is reviewed regularly;
 - ensure that the school has an appropriate Allergy Safety Policy;
 - ensure that the school complies with relevant statutory requirements;
 - ensure that sufficient resources are available to implement the policy;
 - monitor the effectiveness of the school's arrangements.
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4.2 The Headteacher

The Headteacher has overall responsibility for implementing this policy.

The Headteacher will:

- ensure appropriate procedures are established;
- ensure that staff understand their responsibilities;
- ensure appropriate training is provided;
- ensure medication is stored safely;
- ensure appropriate records are maintained;

- ensure Individual Healthcare Plans are developed where required;
- ensure appropriate arrangements are made for educational visits;
- ensure medication incidents are investigated and reviewed;
- ensure appropriate arrangements are in place for emergency medication;
- ensure the school's Allergy Safety Policy is implemented.

The Headteacher may delegate operational responsibilities to an appropriately trained member of staff.

4.3 Staff

Staff will:

- follow this policy and any relevant Individual Healthcare Plan;
- only administer medication where they have agreed to undertake this responsibility and have received appropriate information/training where necessary;
- follow the prescribed instructions carefully;
- record medication administration accurately;
- report concerns, errors, omissions or incidents immediately;
- maintain confidentiality;
- ensure medication is returned to its appropriate storage location after use;
- ensure emergency medication remains accessible.

Staff should never administer medication if they are unsure of the correct procedure. They should seek advice from the Office, who will liaise with parents/carers.

4.4 Parents/Carers

Parents/carers are responsible for:

- providing the school with accurate and up-to-date information about their child's medical needs;
- informing the school of changes to medication or dosage;
- providing medication in the original container and with appropriate labelling;
- completing the school's medication consent documentation;
- ensuring medication is within its expiry date;
- replacing medication before it expires;
- collecting medication when it is no longer required;
- working with the school and healthcare professionals when an Individual Healthcare Plan is required.

Parents/carers should not send medication into school without first agreeing arrangements with the school.

4.5 Pupils

Pupils will be encouraged, according to their age, understanding and individual circumstances, to take responsibility for managing their own medication.

Where appropriate, pupils may self-administer medication following discussion with parents/carers and the school and where this is considered safe.

A pupil's ability to self-administer will be reviewed where necessary.

5. INDIVIDUAL HEALTHCARE PLANS

Where a pupil has a significant or long-term medical condition, the school will consider whether an **Individual Healthcare Plan (IHP)** is appropriate.

An IHP may be appropriate where:

- a pupil has a long-term medical condition;
- medication may need to be administered in an emergency;
- a pupil requires significant adjustments to the school day;
- staff require specific instructions about managing the condition;
- a pupil's condition may deteriorate rapidly;
- emergency medication is required;
- there is a significant risk to the pupil without an agreed plan.

The IHP should normally be developed in partnership with:

- the pupil, where appropriate;
- parents/carers;
- school staff;
- relevant healthcare professionals.

The IHP will identify, where appropriate:

- the pupil's medical condition;
- medication required;
- dosage;
- timing;
- method of administration;
- possible side effects;
- emergency procedures;
- triggers;
- what constitutes an emergency;
- who should administer medication;
- where medication will be stored;
- arrangements for educational visits;
- arrangements for self-administration;
- arrangements for staff absence or cover.

The plan will be reviewed when the pupil's needs change and, where appropriate, at least annually.

6. CONSENT TO ADMINISTER MEDICATION

The school will normally require written parental/carers consent before administering medication.

Consent should include:

- pupil's name;
- name of medication;
- reason for medication;
- dosage;
- method of administration;
- frequency;
- times medication should be administered;
- date medication should commence;
- date medication should cease, where applicable;
- any relevant instructions;
- known side effects or precautions;
- parent/carers contact details.

Consent will be reviewed when medication or dosage changes.

7. PRESCRIBED MEDICATION

Where medication is prescribed for a pupil and needs to be administered during the school day, the school will make reasonable arrangements to support the pupil.

Medication should normally:

- be prescribed for the individual pupil;
- be supplied in the original container;
- have the pupil's name clearly stated;
- have clear dosage and administration instructions;
- be within its expiry date.

The school will not normally administer medication where the instructions are unclear or where the medication is not appropriately labelled.

Parents/carers should discuss any unusual or complex medication requirements with the school before the medication is brought onto the premises.

8. NON-PRESCRIPTION MEDICATION

The school will generally only administer non-prescription medication where there is a clear reason to do so and where appropriate parental consent has been obtained.

Parents/carers must provide information about:

- why the medication is required;
- dosage;
- frequency;
- duration;
- any relevant precautions.

The medication must be supplied in its original packaging and must not be administered contrary to the manufacturer's instructions.

The school reserves the right to seek advice from a healthcare professional where there is uncertainty about the appropriateness of administering non-prescription medication.

Medication containing aspirin will not normally be administered unless specifically prescribed or authorised by an appropriate healthcare professional.

9. STAFF ADMINISTRATION OF MEDICATION

The administration of medication is not normally part of a first aider's general first-aid responsibilities.

The school will identify staff who are willing to administer or supervise medication. At St Mary's this is the Office staff.

Staff will receive appropriate training where administration requires medical or technical knowledge.

Staff will not be required to administer medication where they have not agreed to undertake the responsibility or where they do not have appropriate training.

Where specialist medication requires specific training, the school will seek advice or training from an appropriate healthcare professional.

10. SAFE STORAGE OF MEDICATION

All medication will be stored safely and securely in accordance with the manufacturer's instructions and the pupil's individual needs.

The school will ensure that:

- medication is clearly labelled;
- medication is accessible to authorised staff;
- medication is stored at the appropriate temperature;
- refrigerated medication is stored appropriately;

- medication is protected from unauthorised access;
- emergency medication is readily accessible and is not unnecessarily locked away.

Emergency medication must be immediately accessible when required.

In particular, inhalers, blood glucose equipment and adrenaline auto-injectors should be readily available to pupils when needed.

Medication should not be stored in a location where access would be delayed during an emergency.

11. ADMINISTRATION PROCEDURE

Before administering medication, the authorised member of staff should check:

1. The identity of the pupil.
2. The medication.
3. The dosage.
4. The method of administration.
5. The time it is due.
6. The expiry date.
7. The instructions on the container and/or IHP.
8. Any relevant precautions.

The member of staff should administer the medication in accordance with the agreed instructions.

The administration should then be recorded and counter signed by another member of staff.

If a pupil refuses medication, this should be recorded and reported to the appropriate member of staff and parent/carers where necessary.

Medication must never be forced upon a pupil. If a child is refusing to take medication the parent/carers must be informed.

12. RECORDING THE ADMINISTRATION OF MEDICATION

The school will maintain an appropriate record of medication administered.

Records should include:

- pupil's name;
- date;
- time;
- medication;
- dosage;
- route/method of administration;
- name/signature or electronic identification of the member of staff administering the medication;
- any relevant comments, including refusal or difficulties.

The school will retain records in accordance with its records management and Data Protection Policy.

13. MISSED DOSES, REFUSED MEDICATION AND MEDICATION ERRORS

If a pupil:

- refuses medication;
- spits out or vomits medication;
- receives an incorrect dose;
- receives medication at the wrong time;
- receives medication intended for another pupil; or
- experiences an unexpected reaction,

the incident must be reported immediately to the parent/carer.

Appropriate medical advice should be sought where necessary.

All significant medication errors and serious incidents will be recorded and reviewed to identify whether procedures need to be changed.

Serious incidents and significant near misses relating to allergies will be managed in accordance with the school's Allergy Safety Policy and statutory allergy guidance.

14. SELF-ADMINISTRATION

The school recognises that some pupils may be able to manage their own medication.

Where appropriate, a pupil may self-administer medication following an assessment of their ability to do so safely.

This may apply, for example, to:

- asthma inhalers;
- diabetes medication;
- allergy medication;
- other medication identified within an IHP.

The school will ensure that self-administered medication remains appropriately controlled and that emergency medication is accessible.

Arrangements will take account of the pupil's age, maturity, medical condition and ability to understand the medication requirements.

15. ASTHMA INHALERS

Pupils who have been prescribed inhalers must be able to access them promptly when required.

The school will ensure that:

- prescribed inhalers are appropriately labelled;
- inhalers are readily accessible;
- staff know which pupils require inhalers;
- relevant staff understand the pupil's individual arrangements;
- inhalers accompany pupils on educational visits;
- emergency arrangements are included in the pupil's IHP where appropriate.

The school will also maintain arrangements for its emergency/spare inhaler where applicable.

16. ALLERGIES AND ANAPHYLAXIS

The school recognises that anaphylaxis is a potentially life-threatening emergency.

The school will maintain a separate **Allergy Safety Policy**, as required by the statutory allergy safety guidance introduced for schools in 2026.

The school will ensure that pupils with allergies are identified and that appropriate Individual Healthcare Plans are developed where required.

All staff will receive appropriate allergy awareness training covering:

- recognising symptoms of an allergic reaction;
- recognising anaphylaxis;
- emergency response;
- use of adrenaline auto-injectors;
- the school's allergy procedures.

The statutory allergy guidance specifically requires schools to have allergy safety training arrangements for staff and procedures for recording and learning from serious incidents and near misses.

17. ADRENALINE AUTO-INJECTORS

Pupils who have been prescribed an adrenaline auto-injector (AAI), such as an EpiPen or Jext, must have their own prescribed device available in school in accordance with their individual arrangements.

The school will ensure that:

- the pupil's prescribed AAI is readily accessible;
- staff know where it is kept;
- it accompanies the pupil on educational visits;

- expiry dates are checked;
- parents/carers are informed when replacement devices are required;
- relevant staff receive appropriate training.

The school will also maintain spare emergency adrenaline auto-injectors in accordance with current statutory allergy safety requirements and associated guidance.

Schools in England have been able to purchase spare emergency AAI's without a prescription since 2017.

A spare AAI is an emergency device and **does not replace a pupil's own prescribed medication**.

Where anaphylaxis is suspected, the school's emergency allergy procedure must be followed immediately.

18. EMERGENCY ANAPHYLAXIS PROCEDURE

If a pupil develops symptoms indicating anaphylaxis:

1. **Call 999 immediately** and state that anaphylaxis is suspected.
2. Follow the pupil's Individual Healthcare Plan where available.
3. Administer the pupil's prescribed adrenaline auto-injector without delay where indicated and where an appropriately trained person is available.
4. If the pupil's own device is unavailable or unusable, an appropriate spare emergency AAI may be used in accordance with the school's allergy procedures and statutory guidance.
5. The pupil should normally remain lying down. If breathing is difficult, they may sit up with legs extended. They should not be allowed to stand or walk unnecessarily.
6. A second adrenaline auto-injector may be administered after 5 minutes if the pupil has not improved and a second device is available, in accordance with current emergency guidance.
7. A member of staff should remain with the pupil until emergency services arrive.
8. Parents/carers should be contacted as soon as practicable.
9. The incident must be recorded and reviewed.

The school will follow current NHS/DfE/DHSC guidance rather than relying solely on a printed list of symptoms or instructions within this policy.

19. SPARE EMERGENCY MEDICATION

Where the school holds spare emergency medication, including spare AAI's or emergency asthma inhalers, it will ensure that:

- medication is stored securely but is immediately accessible;
- appropriate staff know where it is located;
- expiry dates are checked;

- stock is replaced before expiry;
 - usage is recorded;
 - medication is replaced promptly following use;
 - appropriate training is provided;
 - arrangements are included in relevant emergency procedures.
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20. MEDICATION REQUIRING SPECIALIST TRAINING

Some medication may require specialist knowledge or technical skills.

Examples may include medication for:

- epilepsy/seizures;
- diabetes;
- severe allergic reactions;
- complex neurological conditions;
- other conditions where emergency intervention is required.

Where specialist training is required, the school will seek appropriate advice and training from healthcare professionals.

No member of staff will administer specialist medication unless they have received appropriate instruction and are confident in carrying out the procedure.

21. EDUCATIONAL VISITS AND OFF-SITE ACTIVITIES

The school will make reasonable arrangements to enable pupils requiring medication to participate in educational visits and activities.

Medication required during a visit must:

- accompany the pupil;
- be appropriately labelled;
- be stored safely;
- be accessible when required;
- be administered by an appropriately trained/authorised member of staff where necessary.

Educational visit risk assessments will consider the pupil's medical needs.

The school will not routinely require a parent/carers to accompany a pupil solely because the pupil has a medical condition.

Any decision to request parental attendance will be based on the individual circumstances and the school's ability to provide appropriate support.

The school's arrangements for supporting pupils with medical conditions apply to relevant off-site educational activities as well as activities on school premises.

22. MEDICATION DURING RESIDENTIAL VISITS

For residential visits, the school will ensure that appropriate arrangements are made in advance for:

- storage;
- administration;
- self-administration;
- emergency medication;
- access to healthcare;
- staff responsibilities;
- overnight medication;
- communication with parents/carers.

The visit leader must have access to relevant medical information and emergency procedures.

23. EXPIRY DATES

The school will monitor the expiry dates of medication held on school premises.

Parents/carers are responsible for replacing their child's medication before it expires.

The school will notify parents/carers where medication is approaching its expiry date.

Emergency medication held by the school will be checked regularly and replaced before expiry.

24. DISPOSAL OF MEDICATION

Medication that:

- has expired;
- is no longer required;
- is damaged;
- is incorrectly labelled; or
- is otherwise unsuitable for use

will not be administered.

Parents/carers will normally be asked to collect and dispose of medication appropriately.

The school will not dispose of medication through normal household/school waste where this would be inappropriate.

25. CONFIDENTIALITY AND INFORMATION SHARING

Information about a pupil's medical condition and medication will be treated sensitively and confidentially.

Information will be shared with staff on a need-to-know basis where this is necessary to keep the pupil safe and support their education.

Relevant information may need to be shared with:

- teachers;
- teaching assistants;
- lunchtime staff;
- first aiders;
- educational visit staff;
- supply staff;
- catering staff where allergy information is relevant;
- other appropriate staff.

Information will be handled in accordance with the school's **Data Protection Policy** and safeguarding procedures.

26. INCLUSION AND EQUALITY

The school recognises its responsibilities under the Equality Act 2010.

Pupils with medical conditions should not be disadvantaged in their access to education or school activities.

The school will consider reasonable adjustments and appropriate support to enable pupils with medical conditions to participate as fully as possible.

This includes consideration of:

- physical activities;
 - school trips;
 - residential visits;
 - clubs;
 - sporting activities;
 - school performances;
 - examinations and assessments;
 - lunchtimes;
 - playtimes;
 - attendance arrangements.
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27. STAFF ABSENCE AND COVER

The school will make reasonable arrangements to ensure that a pupil does not lose access to essential medication because the usual member of staff is absent.

Where medication requires trained staff, the school will ensure that sufficient appropriately trained staff are available wherever reasonably practicable.

Emergency medication arrangements must not depend on only one individual being present.

28. MEDICATION AND SAFEGUARDING

Any concerns arising from medication, including:

- deliberate withholding of essential medication;
- inappropriate administration;
- suspected misuse;
- medication being brought into school without appropriate authorisation;
- unexplained medication;
- concerns about a parent/carer's ability to meet a child's medical needs,

will be considered in accordance with the school's safeguarding procedures.

Where appropriate, advice will be sought from relevant health, social care or safeguarding professionals.

29. ILLEGAL AND UNAUTHORISED DRUGS

Illegal drugs and unauthorised substances are not permitted on the school premises.

Any concerns regarding illegal drugs or unauthorised substances will be dealt with in accordance with the school's behaviour, safeguarding and/or drug education procedures.

Prescribed medication is not considered an illegal or unauthorised drug where it has been appropriately prescribed and is being used in accordance with the relevant arrangements.

30. MEDICATION INCIDENTS AND NEAR MISSES

The school will maintain appropriate records of significant medication incidents.

Following a serious incident or significant near miss, the school will:

- ensure the pupil receives appropriate medical attention;
- inform parents/carers;
- record the incident;
- notify relevant professionals where necessary;

- review what happened;
- identify whether procedures need to change;
- ensure staff receive any additional training required.

All allergy-related serious incidents and near misses will be managed in accordance with the statutory Allergy Safety in Schools guidance.

31. TRAINING

The school will ensure that staff receive appropriate information and training where medication administration requires specific knowledge or skills.

Training may include:

- medication administration;
- asthma awareness;
- diabetes awareness;
- epilepsy and emergency medication;
- allergy awareness;
- adrenaline auto-injector use;
- condition-specific training.

Training will be refreshed when necessary and in accordance with the requirements of the relevant medical condition and current statutory guidance.

The school will maintain appropriate records of staff training.

The DfE's existing statutory guidance provides a specific template for recording staff training in the administration of medicines.

32. FIRST AID

This policy should be read alongside the school's First Aid Policy.

First aid and medication administration are separate responsibilities.

A person being a qualified first aider does not automatically mean that they are trained or authorised to administer medication.

Where emergency medication is required, the relevant Individual Healthcare Plan and emergency procedure must be followed.

33. PARENTAL COMMUNICATION

Parents/carers will be informed where:

- medication is administered;
- a dose is missed or refused where this is significant;
- a medication error occurs;
- a pupil experiences an adverse reaction;
- medication needs replacing;
- medication is approaching its expiry date;
- a pupil's medical arrangements need review.

Parents/carers should inform school promptly of any changes to their child's medication or medical needs.

34. PUPIL PARTICIPATION

The school will involve pupils in discussions about their medical needs wherever appropriate.

The level of involvement will depend on the pupil's:

- age;
- maturity;
- understanding;
- medical condition;
- ability to communicate their needs.

Pupils should be encouraged to understand their condition and medication and to develop independence wherever it is safe and appropriate.

35. REVIEW OF MEDICAL ARRANGEMENTS

The school will review a pupil's medication arrangements where:

- medication changes;
- dosage changes;
- the pupil's condition changes;
- an incident occurs;
- a near miss occurs;
- new medical advice is received;
- the pupil's ability to self-administer changes;
- there is a significant change in school circumstances.

Parents/carers and healthcare professionals will be involved where appropriate.

36. POLICY REVIEW

This policy will be reviewed annually and sooner where:

- legislation changes;
 - statutory guidance is updated;
 - DfE guidance changes;
 - local health guidance changes;
 - significant incidents indicate that procedures should be revised.
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37. RELATED DOCUMENTS

This policy should be read in conjunction with:

- **Allergy Safety Policy**
- **Supporting Pupils with Medical Conditions / Individual Healthcare Plans**
- **First Aid Policy**
- **Health and Safety Policy**
- **SEND Policy**
- **Safeguarding and Child Protection Policy**
- **Educational Visits Policy**
- **Behaviour Policy**
- **Data Protection Policy**
- **Emergency Procedures**
- **Asthma/Respiratory Conditions arrangements**, where applicable.