Bishop Luffa School

Managing Medicines in School Policy

Approved by:	Chair of Governors	**Date:** 30th October 2026
Last reviewed on:	October 2026	
Next review due by:	October 2028	

Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. The Governors of Bishop Luffa School will ensure that these arrangements fulfil their statutory duties and follow guidance outlined in 'Supporting pupils at school with medical conditions' August 2017'.

Establishment staff do not have a statutory duty to give medicines or medical treatment. However medicines will be administered to enable the inclusion of students with medical needs, promote regular attendance and minimise the impact on a student's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

Organisation

The Board of Governors will develop policies and procedures to ensure the medical needs of students at Bishop Luffa School are managed appropriately. They will be supported with the implementation of these arrangements by the Head Teacher and school staff.

The lead for the management of medicines at Bishop Luffa School is Mrs Monique Langley, School Nurse or in their absence the Reception team. In their duties staff will be guided by their training, this policy and related procedures.

Implementation monitoring and review

All staff, Governors, parents/carers and members of the Bishop Luffa School community will be made aware of and have access to this policy. This policy will be reviewed bi-annually.

Insurance

Staff who follow the procedures outlined in this policy and who undertake tasks are covered under Bishop Luffa insurance.

Prescription Medicines

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime.

Occasionally a GP may prescribe a medicine to be taken during the school day. Parents and carers may call into the school and administer medicine to their child, or they may request that a member of school staff administers the medicine. When school staff administer medicines, the parent or carer must supply the medicine in the original pharmacist's container clearly labelled, including details of possible side effects, to the school office and must complete a 'Bishop Luffa parental request for school to administer medicine' form (Appendix 1).

Non-prescription Medicines

Occasionally paracetamol will be administered to students age 10 and over suffering acute pain from

things like migraine and period pain. The school keeps its own supply of standard paracetamol for administration to pupils over the age of 10.

- Parents/carers must give written consent for the school staff to administer medication at the start of the school year or when their child joins the school.

- Staff will check that the medicine has been administered without adverse effect to the child in the past and parents/carers must certify this is the case – a note to this effect should be recorded on the consent form.

- Only 1 standard dose (appropriate to age and weight of the student) can be administered in school per day.

- Verbal parental consent must be gained during the day to administer paracetamol. If parents/carers cannot be contacted then paracetamol cannot be administered.

- If paracetamol is administered at any time during the school day parents/carers will be informed of the time of administration and dosage.

- The school will keep records of the administration of paracetamol as for prescribed medication.

- Students must not bring paracetamol (or other types of painkillers) to school for self-administration.

All non-prescription medication will not be administered at school and students should not bring them to school for self-administration. The majority of medication lasts 4-6 hours, therefore non-prescription medication can be administered at home prior to the start of the school day and it will last the duration of the school day. A parent or carer may attend school to administer additional doses if necessary.

Antihistamine can only be administered where a GP/Consultant has recommended or prescribed antihistamine for the treatment of a mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes,) The school can administer 1 standard dose of antihistamine (appropriate to age and weight of the student) and it is very important that symptoms are monitored for signs of further allergic reaction. During this time students must never be left alone and should be observed at all times. ***If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms then an adrenaline auto injector should be administered without delay and an ambulance called***. Piriton can cause drowsiness and therefore the school will consider if it is necessary for students to avoid any contact with equipment that might cause harm i.e. P.E. Science, Design and Technology.

Mild Allergic Reaction
Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the school population. Antihistamine will be administered for mild reactions as detailed above.

Severe Allergic Reaction
An adrenaline auto injector should be used immediately in a severe reaction (see Pupils Individual Health Care Plan for details). If in doubt about the severity of an allergy reaction, the member of staff should administer the adrenaline auto injector and call an ambulance immediately

Hay fever - Piriton antihistamine (for the treatment of hay fever) should administered by the parent/carer before the student starts school. It is not necessary for the school to administer antihistamine for the treatment of hay fever.

These non-prescription medications will be administered by staff providing they are supplied in the original packaging and accompanied by a 'Bishop Luffa parental request for school to administer medicine' form (Appendix 1). Medication must be suitable for the student's age, supplied by the parent/carer (not the school) and in its original packaging, with manufacturer's instructions. The use of antihistamine will be detailed on the student's Individual Health Care Plan. The medication will be stored and administration recorded as for prescription medicines. The school will inform the parent / carer the time and dose of the non-prescription medication that has been administered.

Controlled Drugs

The school does not deem a student prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves. Controlled drugs will be stored securely in a non-portable container and only named staff will have access. Controlled drugs for emergency use must also be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug held in school.

Students with Long-term or Complex Medical Needs

Parents or carers should provide the Head Teacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents/carers, Head Teacher, Healthcare Manager and other relevant health professionals to ensure that the student's medical needs are managed well during their time in school. For students with significant needs, arrangements will be documented in an Individual Healthcare Plan (IHP) or Educational Health and Care Plan (EHCP). These plans will be reviewed by the school annually or following a significant change in a pupil's medical condition.

Admissions

When the school is notified of the admission of a student with medical needs the Lead for Managing Medicines will complete an assessment of the support required. This might include the development of an IHP and additional staff training. The school will endeavour to put arrangements in place to support that student as quickly as possible. However the school may decide (based on risk assessment) to delay the admission of a student until sufficient arrangements can be put in place.

Students taking their own medication

For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the pupil's individual health care plan and parents/carers should complete the relevant section of Bishop Luffa parental request for school to administer medicine' form (Appendix 1).

Staff Training

The school will ensure that the staff who administer medicine to control specific chronic conditions are trained to administer those specific medicines, for example, Anaphylaxis (adrenaline auto

injector), Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the healthcare manager. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

The school will also ensure that other staff who may occasionally need to administer a prescribed medicine supplied by the parent with a valid consent form and, or an IHP, are trained in the procedure adopted by the school by the person who has completed the Managing Medicines course. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

The school will ensure that a record is made of every dose of medicine administered in school. This record is completed by the person that administers the medicine.

Storage and Access to Medicines

All medicines apart from emergency medicines (inhalers, epipens, etc.) are kept in a locked store cupboard. Medicines are always stored in the original pharmacist's container. Students are told where their medication is stored and who holds the key and staff will be fully briefed on the procedures for obtaining the medication in an emergency.

Emergency medicines such as inhalers and adrenaline auto injector are either held by the student or kept in a clearly identified container in Reception. The school will make an assessment as to the competency of each individual pupil to carry their own medication. Parents/carers will be asked to supply a second adrenaline auto injector for each child and they will be kept in the Reception. Staff must ensure that emergency medication is readily available at all times i.e. during outside PE lessons, educational visits and in the event of an unforeseen emergency like a fire.

Medicines that require refrigeration are kept in the medical room fridge, clearly labelled in an airtight container.

Emergency Medication Bought and Administered by the School.

In accordance with the Human Medicines (Amendment No 2) Regulations 2014 the school will keep a small supply of salbutamol inhalers for emergency use. Parental consent will be gained to administer the emergency school inhaler.

Following the publication of the Children's Well-being and Schools Act 2026, the school will keep a supply of Adrenaline Devices (AD). These will be used if there is a student in school who is unable to keep an AD with them or if the student's own ADs fail.

Adrenaline Devices will be kept:

In the Nurse's Office
In the Science Technician's Office between S7 and S9
In the SENDCOs office in the Support Department
In the Canteen
In the Head of Art's classroom
In the Sports Hall, and staff will have a mobile kit if a student who is prescribed an AD is taking part in activities on the Sports Field.

The use of ADs is covered fully in the school's Allergy Safety Policy.

Record Keeping

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. A parent or carer will be informed if their child has been unwell during the school day.

Emergency Procedures

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a student who has an IHP, the emergency procedures detailed on the plan are followed, and a copy of the IHP is given to the ambulance crew. IHP's will also be given to those companies and staff providing transportation of students to and from school, in order that the IHP can be passed to the ambulance crew in the event of an emergency.

Medicines on Educational Visits

Staff will administer prescription medicines to students when required during educational visits. Parents/carers should ensure they complete a consent form (Appendix 1) and to supply a sufficient supply of medication in its pharmacist's container. Non-prescription medicines (apart from travel sickness medication and antihistamine for mild allergic reaction) cannot be administered by staff and pupils must not carry them for self-administration.

Students with medical needs shall be included in educational visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals in suitable time so that extra measures (if appropriate) can be put in place for the visit.

All staff will be briefed about any emergency procedures needed with reference to students where needs are known and copies of care plans will be taken by the responsible person.

Medicines on Residential Visits

The school acknowledges the common law 'duty of care' to act like any prudent parent/carer. This extends to the administration of medicines and taking action in an emergency, according to the care plan.

Occasionally it may be necessary to administer non-prescription medicines i.e. paracetamol, anti-histamine or travel sickness tablets to students suffering acute pain from things like migraine, period pain, toothache. Parents/carers must give written consent prior to the residential visit before non-prescription medication can be given. Staff will check that the medicine has been administered without adverse effect to the child in the past and parents/carers must certify this is the case – a note to this effect should be recorded on the consent form.

The school will keep its own supply of standard paracetamol tablets and liquid suspension for administration to students during a residential visit and parental consent will be required in order for the school to administer the supply. The medication will be stored and administration recorded as for prescription medicines. Students should not bring paracetamol (or other types of painkillers) on the residential visit for self-administration.

Travelling Abroad

Children with medical needs will be encouraged to take part in visits. The responsible member of staff will carry out a specific and additional risk assessment and a care plan will be drawn up considering parental and medical advice. Best practice would be to translate these documents to the language of the country being visited. The international emergency number should be included on the care plan. United Kingdom Global Health Insurance Cards (GHIC) should be applied for by parents and supplied to the school prior to travel for all students that travel abroad.

Unacceptable Practice

Although school staff will use their discretion and judge each case on its merits with reference to the pupil's IHP, they will keep in mind that it is not generally acceptable practice to:

- Prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every student with the same condition requires the same treatment
- Ignore the views of the pupil or their parents/carers
- Ignore medical evidence or opinion
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- Send an ill student to the school office or medical room unaccompanied or with someone unsuitable (e.g. a fellow student who is not old or responsible enough)
- Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their student, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs
- Prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child
- Administer, or ask students to administer, medicine in school toilets.

Complaints

Issuing arising from the medical treatment of a student whilst in school should in the first instance be directed to the Head Teacher. If the issue cannot easily be resolved the Head Teacher will inform the Board of Governors who will seek resolution.