Donegall Road Primary School Administration of Medications Policy



Date Ratified by Governors	Date of Review	Staff Member Responsible
December 2025	September 2028	Mr. P. Massey (Principal)

1. Policy Statement

This policy is written to reflect to following guidance:

- Supporting Pupils with Medication Needs (DENI, 2008)
- Recording SEN & Medical Categories, Guidance for Schools (DENI, 2019)
- Manual for Principals and Governors (EA, accessed August 2025)

The Board of Governors and staff of Donegall Road Primary School wish to ensure that children with medication needs receive appropriate care and support at school. The Principal will accept responsibility in principle for members of school staff administering prescribed medication, or supervising children self-administering, during the school day *where those members of staff have volunteered to do so*.

There is no legal duty that requires school staff to administer medication. This is a voluntary role.

Parents/guardians should keep their children at home if acutely unwell or infectious.

Administration of medication is the responsibility of parents/guardians and any help given by school is on a voluntary basis.

2. Summary of Procedure for Administering Medications

- Only essential medication with a dosage that cannot be taken outside school hours should be sent to school. These are likely to fall within three areas:
 - Short-term or acute, such as a chest infection;
 - o Long-term such as asthma or ADHD; and
 - o Medical emergency which is unexpected or related to some known condition.
- Parents/guardians are responsible for providing the Principal with comprehensive
 information regarding the child's condition and treatment. This should be provided on the
 annual Consent Form. If regular medication is required, *Form 1* should be obtained from the
 School Office for completion and returned to the Office (see Appendices).
- School does not keep a stock of painkillers, nor will it diagnose, prescribe and administer painkillers to children who become unwell.
- Prescribed medication will not be accepted by school without specific written and signed
 instructions from the parent/guardian. (Form 2). This form should also be obtained from and
 returned to the School Office.

- Neither aspirin nor ibuprofen should be sent to school. Staff cannot administer a non-prescribed medicine (e.g. Calpol in the event of a headache) to a child unless there is specific written permission from the parent/guardian.
- Only reasonable quantities of medication should be supplied to the school supply at any one time.
- Each item of medication must be delivered to the Principal or the Secretary, in normal circumstances by the parent/guardian, <u>in a secure and labelled container as originally</u>
 <u>dispensed</u>. Each item of medication must be clearly labelled with the following information:
 - Child's name;
 - Name of medication;
 - Dosage;
 - Frequency of administration;
 - Date of dispensing;
 - Storage requirements (if important); and
 - Expiry date

A properly completed **Form 2** provides all this information and should be provided with the medication.

We will not accept items of medication in unlabelled packaging and without the correct paperwork as above.

- Medication will be kept in a secure place, out of the reach of children. Unless otherwise indicated, all medication to be administered in school will be kept in a locked cabinet in the school office.
- The school will keep records which they will have available for parents.
- Staff will not force children to take medicines and will inform the parent/guardian of the refusal, as a matter of urgency. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

3. Protection of Staff

If a member of staff administers medication to a pupil, or undertakes a medical procedure to support a pupil and, as a result, expenses, liability, loss, claim or proceedings arise, the employer will indemnify the member of staff provided all the following conditions apply:

- 1. The member of staff is a direct employee.
- 2. The medication/procedure is administered by the member of staff in the course of, or ancillary to, their employment.
- 3. The member of staff follows the procedures set out in DENI guidance and this policy together with the procedures outlined in the individual pupil's Medication Plan, or written permission from parents and directions received through training in the appropriate procedures.
- 4. Except as set out in the Note below*, the expenses, liability, loss, claim or proceedings are not directly or indirectly caused by and do not arise from fraud, dishonesty or a criminal offence committed by the member of staff.

*This does not apply in the case of a criminal offence under Health and Safety legislation." (DENI & HSSPS, 2008, p.2-3).

4. Procedures for Parents/Guardians

A parent/guardian seeking support with a child's medication in school should speak to the Principal and provide signed permission, details and instructions. The Principal will then ask a willing and appropriate member of staff to take responsibility for administering the correct dosage at the correct time, for monitoring any response, for recording the details and for the addition of signatures by an adult witness and self.

5. Record Keeping

Donegall Road Primary School will keep records of medicines given to pupils. Records offer protection to staff and proof that they have followed agreed procedures. Staff involved should complete and sign a record each time they give medication to a pupil. See Appendix for appropriate documentation.

5.1 SHORT TERM MEDICATION NEEDS

Short term medication needs may be managed as the administration of medication by others or as self-administration of medication; but both categories will require the completion of consent forms. No pupil should be given short term medication by school staff without his or her parent's <u>written</u> consent. Appropriate forms (see Appendix) should be used for this purpose.

Many pupils will need to take medication (or be given it) at school at some time in their school life. Mostly this will be for a short period only, e.g. to finish a course of antibiotics or apply a

lotion. This may also be the case if a pupil suffers regularly from acute pain, such as migraine. To allow pupils to take medication in school will minimise the time they need to be off school but medicines should only be taken to school or settings when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. The appropriate consent forms must be completed – refer to the Appendix.

It is good practice, where possible, to have the dosage and administration witnessed by a second adult.

5.2 PUPILS REQUESTION NON-PRESCRIPTION MEDICATION

Pupils sometimes ask for painkillers (analgesics) at school such as paracetamol. As set out on the DENI Guidance, 'Supporting Pupils with Medical Needs', "School staff should <u>never</u> give non-prescribed medication to pupils unless there is specific prior written permission from the parents." (DENI, 2008).

Over the counter medicine e.g. cough mixture or hay fever remedies, should only be accepted in exceptional circumstances, and be treated in the same way as prescribed medication. Parents must clearly label the original container with the child's name, date of birth, dose and time to be taken and complete *Form 2*.

5.3 MEDICATION PLANNING FOR A PUPIL WITH A LONG-TERM CONDITION

Long term medication needs may be managed as the supervised administration of medication or as the administration of medication by others, but both categories will require the completion of a Medication Plan.

It is important for the school to have sufficient information about the medical condition of any pupil with long term medical needs and a procedure drawn up for this. If a pupil's medical needs are inadequately supported, this can have a significant impact on a pupil's academic attainments and/or lead to emotional and behavioural problems. The school therefore needs to know about any medical needs before a child starts school, or when a pupil develops a condition. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. Some pupils may have serious medical conditions, such as diabetes, epilepsy, severe allergies or asthma and may very rarely require a drug to be given in an emergency: e.g. epilepsy (rectal diazepam), anaphylaxis (adrenaline), acute asthma (inhaler). These drugs may be lifesaving. Other pupils may need regular prescribed medication, for example Ritalin®. In these cases, there needs to be agreement with teachers as to who will administer them. An individual Medication Plan should be drawn up, involving the parents and relevant health professionals and the child, should he/she have sufficient understanding.

For those who do require a Plan the purpose is to ensure that school staff have sufficient

information to understand and support a pupil with long term medical needs. It should be overseen by the school nurse or doctor and should be drawn up in conjunction with the parents and, where appropriate, the child and the child's medical carers. It should set out in detail the measures needed to support a pupil in school, including preparing for an emergency.

6. Storage of Medication in School

Reasonable quantities of medication should be supplied to the school (for example, a maximum of four weeks supply at any one time). Each item of medication must be delivered by the parent/guardian to the teacher or other willing member of staff, in the original secure container and labelled as dispensed. Information should include:

- Child's name;
- Name of medication;
- Dosage;
- Frequency of administration;
- Date of dispensing;
- o Storage requirements (if important); and
- Expiry date

Medication will be kept in a secure place, out of the reach of children. Unless otherwise indicated, all medication to be administered in school will be kept in a locked cabinet in the school office.

With some forms of medication, such as "EpiPens" or inhalers, it may be appropriate to keep one lot of medication in a secure place in the child's classroom and a second lot in a central cabinet. Copies of medication plans and related forms will be taken on educational visits as appropriate, and always on residential trips. The school will keep records, which they will make available for parents/guardians upon request.

7. Administration of Medication

Where it is appropriate to do so, children will be encouraged to administer their own medication (e.g. asthma inhaler), under staff supervision if necessary. For inhalers, *Form 2* must be completed properly.

Where a child uses an inhaler, one clearly labelled with the pupil's name and class must be kept with the class teacher. Parents of pupils in P4-P7 classes, who wish their child to carry an additional inhaler on their person and to self-administer will be asked to compete the Self Administration section of the school's Parental Request for the Administration of Medication Form (*Form 2*). Only in this instance will children be permitted to carry their own medication.

Staff will give due attention to hygiene, washing hands and wearing gloves as appropriate. Children whose parents/guardians wish them to administer their own medication will be encouraged to do likewise.

The school will not make changes to prescribed dosages on instructions from parents/guardians. If a child refuses to take medicines, staff will not force them to do so, but will inform the parents/guardians of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines result in an emergency; the school's emergency procedures will be followed.

Where training is required, members of staff who volunteer to assist in the administration of medication will receive any necessary training/guidance through appropriate regulated bodies qualified to deliver recognised training.

For each child with long-term or complex medication needs, the Principal will ensure that an Individual Care Plan is drawn up in conjunction with the appropriate health professionals. All staff will be made aware of the procedures to be followed in the event of an emergency.

8. The Role of Parents/Guardians

Medication is the responsibility of parents/guardians. They should renew the medication when supplies are running low and ensure that the medication supplied is within its expiry date. Parents/guardians should also notify the school in writing if the child's need for medication has ceased. The disposal of medicines is the responsibility of parents/guardians. Medicines, which are in use and in date, should be collected at the end of each term. Date-expired medicines or those no longer required for treatment should be collected by the parent/guardian for transfer to a community pharmacist for safe disposal.

9. Medical Register

Unlike identifying learning difficulties in school, neither teachers nor educational psychologists are qualified or responsible for diagnosing a pupil's medical or physical condition. Therefore, school will only record a pupil's medical or physical condition on the Medical Register when evidence has been provided by the parent; or forwarded to school by the EA (where it may be included in a statement); or directly from a Health & Social Care Trust (HSCT) practitioner who will have parental consent to share the information.

There may be occasions when a school may need to record a pupil on the Medical Register when evidence has not been received. Some of these instances include:

- Recording information for Health & Safety reasons until more concrete evidence is received.
- Cases where parental responsibility is shared, and the other parent has the relevant

evidence.

- The family are asylum seekers and have no formal documentation.
- The parents have misplaced the paperwork.

The SENCo is responsible for maintaining the Medical Register.

Appendix & Forms



DONEGALL ROAD PRIMARY SCHOOL HEALTHCARE PLAN FOR A PUPIL WITH MEDICAL NEEDS

Name of Pup	oil:			
Date of Birth	n:/	_/	Class:	
Medical Dia	gnosis:			
			Review Date:	
Contact Info	ormation_			
1. Family C	ontact 1			
Name:				
Phone No	(Home/Mobile):			
	(Work):			
Relationship				
2. Family C	ontact 2			
Name:				
Phone No	(Home/Mobile):			
	(Work):			
Relationship	:			
3. GP				
Name:				
Phone No: _				
4. Clinic/Ho	ospital Contact			
Name:				
Phone No: _				
Plan prepare	ed by:			
Name:				
Designation.	:		Date:	_

Describe condition and give	details of pupil's individual symptoms.
Daily care requirements (e.g	g. before sport, dietary, therapy, nursing needs)
Describe what constitutes a	n emergency for the child, and the action to take if this occurs:
Follow up care:	
Who is responsible in an em	nergency (State if different on off-site activities):
I agree that the medical info	ormation contained in this form may be shared with individuals
involved with the care and e	education of
	(Name of child)
Signed:(Parent/Guardian)	Date:
Distribution	
	School Nurse
	Other



DONEGALL ROAD PRIMARY SCHOOL REQUEST BY PARENT FOR SCHOOL TO ADMINISTER MEDICATION

The school will not give your child medicine unless you complete and sign this form, and the Principal has agreed that school staff can administer the medicine.

<u>Details of Pupil</u>			
Surname:	Forename(s):		
Date of Birth://		Male □	Female □
Class:			
Condition or illness:			
<u>Medication</u>			
Parents must ensure that in-date, properly la	belled medication	is supplied.	
Name/Type of Medication (as described on th	e container):		
How long will your child take this medication	for?		
Date dispensed:			
<u>Full Directions for Use</u>			
Dosage and method:			
N.B. Dosage can only be changed on Doctor's	instructions.		
Timing:			
Special precautions:			
Are there any side effects that the school nee	ds to know about?		
Self-Administration? Y	es/No (delete as ap	ppropriate)	

<u>Procedures</u>	to take in an Emergency	<u></u>	
Contact Det	ails :		
Name:			
Phone No	(Home/Mobile):		
	(Work):		
Relationship	to pupil:		
of staff in th	neir absence) and accept	-	ne Principal (or a Senior member ch the school is not obliged to changes in writing.
Signature: _		Date:	
(F	Parent/Guardian)		
Agreement	of Principal		
I agree that		(name of ch	ild) will receive
		(quantity and name of n	nedication) every day at
		(time(s) medicine to be	administered e.g. lunchtime or
afternoon b	reak).		
The child wi	ll be given medication/su	upervised whilst he/she ta	kes their medication by
		(name of staff member)	
This arrange	ement will continue until		(either end date of
course of me	edicine or until instructed	d by parents).	
Signed:	ipal/Senior Member of Staff)	Date:	
(Princi	ipal/Senior Member of Staff)		

The original should be retained on the school file and a copy sent to the parents/guardians to confirm the school's agreement to administer medication to the named pupil.



DONEGALL ROAD PRIMARY SCHOOL RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL CHILD

Surname				
Forename(s)				
Date of Birth				
Class				
Condition of Illness				
Date medicine provided	d by parent			
Name and strength of r	nedicine			
Quantity received				
Expiry date				
Quantity and date retu	rned			
Dose and frequency of	medicine			
Staff signature:		Sig	nature of parent:	
Date				
Time given				
Dose given				
Any reactions				
Name of staff member				
Staff initials				
Date				
Time given				
Dose given				
Any reactions				
Name of staff member				
Staff initials				

Date		
Time given		
Dose given		
Any reactions		
Name of staff member		
Staff initials		
Date		
Time given		
Dose given		
Any reactions		
Name of staff member		
Staff initials		
Date		
Time given		
Dose given		
Any reactions		
Name of staff member		
Staff initials		
Date		
Time given		
Dose given		
Any reactions		
Name of staff member		
Staff initials		



Print Name Signature of staff Any reactions DONEGALL ROAD PRIMARY SCHOOL RECORD OF MEDICINES ADMINISTERED TO ALL CHILDREN Dose given Name of Medicine Time Child's Name Date



DONEGALL ROAD PRIMARY SCHOOL MEDICAL TRAINING FOR STAFF

Name:	
Type of training received:	
Name(s) of condition/medication involved:	
Data to the control of	
Date training completed:	
Training provided by:	
I confirm thattraining detailed above and is competent to administer the	has received the medication described.
Trainer's signature:	Date:
I confirm that I have received the training detailed above.	
Trainee's signature:	Date:
Proposed Retraining Date:	
Refresher Training Completed:	
Trainer's signature:	Date:
Trainee's signature:	Date:

EMERGENCY PROCEDURES – INFORMATION FOR ALL STAFF

Emergency Medication

All staff should be informed annually of pupils with a medical condition and/or Medication Plan.

Any individual can take action to preserve life provided that the action is carried out with the best of intentions and is performed in good faith. Teachers and other staff are expected to use their best endeavours at all times in emergencies. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

These are mainly related to four conditions:

- 1. Acute asthmatic attack requiring more inhalers/attention than usual routine does.
- 2. Diabetic hypoglycaemic attack requiring Glucose (glucose tablets or hypostop).
- 3. Anaphylactic reaction requiring Adrenaline (e.g. EpiPen® or Anapen®).
- 4. **Prolonged epileptic seizures** requiring Rectal Diazepam.

The potential of an emergency to arise will be reflected in the pupil's Medication Plan which will incorporate a plan of action to take should an emergency occur.

Where a pupil experiences an emergency event with no relevant previous history, staff are expected to take all reasonable steps within their own competencies and experiences to assist the pupil and obtain the appropriate help.

Where a pupil with a known medical condition and who has a Medication Plan experiences a medical emergency, staff will be expected to follow the advice given in that Medication Plan. Temporary staff, who may be in attendance and may not have the level of awareness and understanding of permanent staff, are expected to act within their own competencies and experience and obtain appropriate help.

Emergency Procedures

All staff should know how to call the emergency services and who is responsible for carrying out emergency procedures in the event of need. Other children should know what to do in the event of an emergency, such as telling a member of staff.

Parents must be immediately alerted. A pupil taken to hospital by ambulance should be accompanied by a member of staff who should remain until the pupil's parents arrives. Where possible, the member of staff should have details of any health care needs and medication of the pupil and/or a copy of the Medication Plan. Health professionals are responsible for any decisions on medical treatment when parents are not available.

Staff should never take children to hospital in their own car; it is safer to call an ambulance.

Individual Care of Medication Plans should include instructions as to how to manage a child in an emergency and identify who has the responsibility in an emergency (e.g. if there is an incident in the playground, a lunchtime supervisor would need to very clear of their role).

The incident should be fully recorded.

Staff Handbooks should detail the school's emergency procedures.

In all emergency situations, a teacher or other member of school staff will be expected to act as a responsible adult or parent in the best interests of the child in recognition of their duty of care.

If in doubt, phone for the emergency services.

EMERGENCY PLANNING

Request for an Ambulance:

- 1. School telephone number: 028 9032 3018
- 2. School name, address and postcode: Donegall Road Primary School Maldon Street, Belfast, BT12 6HE
- 3. Give exact location of the school
- 4. Give your name
- 5. Give brief description of pupil's symptoms
- 6. Inform Ambulance Control of the best entrance, and state that the crew will be met and taken to the pupil.