



North London Grammar School

Administration of Medicine

Date last reviewed	September 2024
Reviewed by	Mr Akbas, Business Manager
Approved by	Mr Adak, Headteacher
Next review due by	September 2026



1. Introduction

North London Grammar and Prep School is committed to providing inclusive support for pupils with various medical conditions. In line with this commitment, there may be occasions when students require medication to ensure they have equal opportunities. The school has a duty of care to facilitate the safe administration of medicine to all pupils during school hours or on out-of-school activities.

This policy also incorporates statutory responsibilities for children in the EYFS and Key Stage 1 (Years 1 and 2), who may not be able to communicate medical needs clearly or self-administer medication. Special consideration is given to parental consent, staff supervision, and documentation for this age group.

1.1 Aims

This policy aims to ensure that:

- Pupils, staff and parents/carers understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)



2. Roles and Responsibilities

2.1 Parents/Guardians

2.1.1 Parents/guardians hold the primary responsibility for administering medicines to their children. While school staff are not legally obligated to administer medication, it may be done when essential for a child's health or school attendance.

2.1.2 Medications, including those prescribed by healthcare professionals, will be administered, following written instructions on the original packaging. Over-the-counter medications such as Calpol will only be given as per prescribed guidelines.

2.1.3 Parents/guardians must submit a written request for medication administration, and no medication will be administered without written consent. School staff do not make judgments about medication suitability.

2.1.4 For pupils in EYFS, Year 1 and Year 2, a parent or carer must speak directly with the school office or First Aid Lead to explain the condition and routine of administration. Verbal clarification may be requested in addition to written consent to ensure all needs are understood clearly for non-verbal or younger children.

2.2 School Staff

2.2.1 The Headteacher has the overall responsibility for designating staff members capable of administering or supervising the self-administration of medicines, ensuring appropriate training.

2.2.2 Records regarding staff authorised to administer medication should be maintained in the school office.

2.2.3 The Headteacher or First Aid Lead, currently Mr G. Ibis, will consider all written requests for medication administration.

2.3 Healthcare Professionals

2.3.1 Training for specific conditions, including the use of EpiPens and administration of Insulin, will be undertaken as needed, with collaboration with healthcare professionals when required.



2.4 Emergency Protocols and 999 Guidance

In a medical emergency (e.g. severe allergic reaction, asthma attack, seizure, or anaphylaxis), staff will:

- Call 999 immediately
- Administer emergency medication such as EpiPens or inhalers, where prescribed and authorised
- Inform the parent or carer without delay
- Accompany the pupil to hospital if necessary until a parent or carer arrives

All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

2.5 The governing board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

2.6 The headteacher

The headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way



- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

2.7 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

3. Statutory Guidance and Policy Implementation

3.1 Administration of Prescribed Medication in School

3.1.1 Medicines should primarily be administered at home, only in school when essential for a child's health or attendance.

3.1.2 No medication will be administered without written consent from a parent/guardian.

3.1.3 Staff may administer or supervise self-administration with Headteacher's agreement, and the right to decline is retained. Medications with aspirin or ibuprofen must be prescribed.

3.1.4 Alternative medications, including homeopathic and herbal remedies, will not be administered.

3.1.5 Only medication supplied by the parent/carer will be administered.

3.1.6 Staff must not administer medications without appropriate information or training. Training records will be maintained and reviewed annually.

3.1.7 Medication must be provided in the original container, labelled with administration instructions.



3.1.8 Liquid medications must be measured accurately.

3.1.9 School staff will keep detailed records of medicines administered, noting side effects, stored in the School Office.

3.1.10 If a child refuses medication, reasons will be documented, and parents/guardians may be contacted.

3.1.10.1 For EYFS and KS1 pupils, all medication must be administered by trained staff. Self-administration is not permitted in this age group under any circumstances. All doses given must be recorded and parents informed on the same day.

3.1.10.2 A member of staff should monitor the child for 20 minutes after administration where appropriate (e.g. antihistamines, antibiotics or pain relief), particularly in first-time use cases.

3.1.10.3 Pupils in Year 3 and above may be permitted to carry their own medication (e.g. inhalers, insulin, EpiPens) if deemed appropriate by parents and the school. This will be documented in their IHP and must be accompanied by a completed self-carry consent form. Staff retain the right to revoke this privilege if concerns about safety arise.

3.1.11 All medication will be stored in a locked cabinet or refrigerator (where applicable) in the School Office or Boarding House. A medication log will be maintained, including expiry dates. Expired or unused medication will be returned to parents for disposal and signed off by a staff member.

3.1.12 The School Office will inform parents if their child has received medicine or been unwell at school

3.1.13 Emergency Salbutamol Inhalers and Adrenaline Auto-Injectors:

In accordance with the Human Medicines (Amendment) (No. 2) Regulations 2014 and subsequent DfE guidance, the school holds a stock of emergency salbutamol inhalers and adrenaline auto-injectors (AAIs) for use in emergencies. These may only be administered:

- To pupils who are known to have asthma or a prescribed reliever inhaler
- To pupils who have been prescribed an AAI and for whom parental consent has been received



Staff authorised to use these emergency supplies are trained in their administration. A record will be kept of each use, and parents will be notified immediately.

3.1.14 Over-the-Counter (OTC) Medication Administration

Over-the-counter medicines such as paracetamol, ibuprofen, or antihistamines may be administered where prior written consent has been given by the parent/carer via the general medical consent form at enrolment.

These medications will only be given under the direction of a First Aid trained member of staff and in accordance with recommended dosages.

Parents will be informed on the same day of administration.

3.2 Managing Medicines on School Trips or Residential Visits

3.2.1 Pupils with medical conditions are encouraged to participate in all school activities.

3.2.2 Parental consent must be obtained before pupils attend school trips or residential visits.

3.2.3 Staff supervising trips must have a detailed understanding of pupils' medical needs, including prescribed and emergency medication.

3.2.4 For pupils in EYFS, Year 1 and Year 2, a designated First Aid trained staff member must carry and administer any required medication. The child must not carry their own medication. Emergency medications (e.g. EpiPens or inhalers) must be immediately accessible and staff must be aware of their location.

3.3 EYFS and KS1-Specific Guidance

Children in EYFS, Year 1 and Year 2 cannot self-medicate. All medication must be handed directly to a member of staff by the parent or carer at the start of the day. Parents must not leave medication in school bags. All doses must be administered by trained staff, and any medication given will be recorded and reported to the parent the same day. Any suspected allergic reaction or side effect will result in parents being contacted immediately. Where possible, medication should be scheduled outside of school hours, unless essential.



3.4 Pupils with Long-Term or Complex Medical Needs

The school recognises that some pupils may have long-term or complex medical conditions such as asthma, diabetes, epilepsy, or severe allergies.

- These pupils will have an Individual Healthcare Plan (IHP) prepared in consultation with parents, school staff, and healthcare professionals. The IHP will outline:
- The medical condition and its impact on the child's education and daily life
- Details of medication required (name, dose, frequency)
- Emergency procedures and symptoms to watch for
- Roles and responsibilities of school staff
- Training needs and any special equipment required

IHPs will be reviewed at least annually or whenever there is a significant change in the pupil's needs or treatment.

3.5. Legislation and Statutory Responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on [supporting pupils with medical conditions at school](#).

3.6 Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equal Opportunities for Pupils
- First aid
- Health and Safety
- Safeguarding
- SEND

4. Individual healthcare plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Mr G Ibis.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

Administration of Medicine Policy



- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs (SEN) but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and Mr G. Ibis will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents/carers and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments



- Where confidentiality issues are raised by the parent/carer or pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact and contingency arrangements

5. Consent for Pupils Aged 16 and Above

Where a pupil is aged 16 or over, or is assessed as Gillick competent, they may provide their own consent for the administration, possession, or self-administration of medication. In such cases, the school will:

- Assess the pupil's understanding and capacity to make informed decisions regarding their medical treatment.
- Document this assessment and the pupil's consent in their Individual Healthcare Plan (IHP).
- Where appropriate, inform parents/carers of the arrangements, unless the pupil specifically requests that this information is not shared, in line with confidentiality obligations and safeguarding considerations.

For pupils under the age of 16 who are deemed Gillick competent, the same approach will apply. The decision to accept self-consent will be made on a case-by-case basis by the designated staff member, in consultation with relevant medical professionals if required.



Consent to administer an “over – the – counter” (OTC) medicine



North London
Grammar and Prep School

- All over the counter (OTC) medicines must be in the original container.
- A separate form is required for each medicine.
- The school is unable to supervise your child's medication unless you complete and sign this form.
- The school has a policy that only staff who hold a current first-aid certificate can administer medications.

Child's name.		Child's date of birth
Name & strength of medication		
Reason for medication		
Dosage to be given.		
Duration of medicine		
Expiry date		
Time to be given.		
Date & time of last dose.		



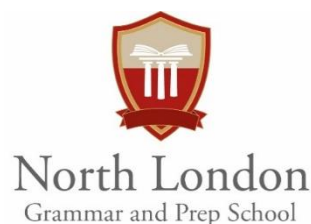
Any known side effects.	
Mobile number of parent / carer	
Daytime landline for parent / carer	
Alternative emergency contact name	
Alternative emergency contact number	
Name of child's GP practice	
Phone number of child's GP practice	

- I give my permission for the trained staff member to administer the prescribed medicine to my son/daughter during the time he/she is at school. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school if necessary.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent / carer name	
Date	
Signature	



Consent to administer prescribed medicine



- All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included in the pharmacy label.
- A separate form is required for each medicine.
- Students with Anaphylaxis must carry two EpiPen's at all times
- Students with Asthma should always keep a "spare" inhaler in the medical room, regardless of them carrying one on their person.
- The school is unable to supervise your child's medication unless you complete and sign this form.
- The school has a policy where only First Aid trained staff can administer prescribed medication.

Child's name.		Child's date of birth
Name & strength of medication		
Reason for medication		
Dosage to be given.		
Duration of medicine		
Expiry date		
Time to be given.		



Date & time of last dose.			
Any known side effects.			
I give permission for my son/daughter to carry their own Salbutamol Asthma inhaler/Adrenaline auto injector pen for anaphylaxis or Asthma	Yes	No	Not applicable
I give permission for my son/daughter to carry their own salbutamol asthma inhaler and use it themselves	Yes	No	Not applicable
I give permission for my son/daughter to carry their own medicine (stated above) and use it themselves	Yes	No	Not applicable
I give permission for my son/daughter to carry their own medicine (stated above) and administered by a member of staff	Yes	No	Not applicable
My child is in EYFS, Year 1 or Year 2, and I understand that school staff will administer the medicine directly, monitor them after administration, and notify me after each dose.	Yes	No	Not applicable
Mobile number of parent / carer			
Daytime landline for parent / carer			
Alternative emergency contact name			



Alternative emergency contact number	
Name of child's GP practice	
Phone number of child's GP practice	

- I give my permission for the trained staff member to administer the prescribed medicine to my son/daughter during the time he/she is at school. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school if necessary.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent / carer name	
Date	
Signature	