



## **Guidelines on the process of prescribing, storage and administration of medication within special school settings**

Initiated by:	SLT
Approved by:	Governors/SLT
Date Approved:	15 <sup>th</sup> May 2026
Operational Date:	15 <sup>th</sup> May 2026
Date of Review:	Summer 202
Distribution:	SLT/TLR's/All relevant staff

Signed: Bob Harris                      Chair of Governors

Signed:                       Executive Headteacher



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Bwrdd Iechyd Prifysgol  
Cwm Taf Morgannwg  
University Health Board

Ref:MM190

**Guidelines on the process of prescribing, storage and administration of medication within special school settings**

<b>INITIATED BY:</b>	Children and Young Person Directorate
<b>APPROVED BY:</b>	Medicines Management and Expenditure Committee
<b>DATE APPROVED:</b>	29.11.2019
<b>VERSION:</b>	1.0
<b>OPERATIONAL DATE:</b>	29.11.2019
<b>DATE FOR REVIEW:</b>	3 years from date of approval or if any legislative or operational changes require
<b>DISTRIBUTION:</b>	Share Point, Primary Care Portal- Medicines Management, Community Nursing Team
<b>FREEDOM OF INFORMATION STATUS:</b>	Open

**Please note - where this document states the term "parent" it refers to any such person(s) or body that has legal responsibility.**

**Guidelines Definition**

Clinical guidelines are systemically developed statements that assist clinicians and patients in making decisions about appropriate treatments for specific conditions.

They allow deviation from a prescribed pathway according to the individual circumstances and where reasons can be clearly demonstrated and documented.

**Minor Amendments**

If a minor change is required to the document, which does not require a full review please identify the change below and update the version number.

Type of change	Why change made	Page number	Date of change	Version 1 to 1.1	Name of responsible person

## **1. Introduction**

This guideline will provide a framework for the safe prescription, administration and storage of medication within special school settings. It also supports good partnership working with staff employed by the local education authority to safeguard the wellbeing of children and young people requiring medication during the school day.

Special schools differ from mainstream schools in that they provide education to a concentration of children with identified additional health care needs. This includes children and young people with learning difficulties, emotional and behavioural difficulties and physical difficulties which includes children and young people with sensory and/or complex healthcare needs.

This document should be read in conjunction with Supporting Learners with Health Care Needs (2017).

## **2. Scope**

This guideline is relevant to all employees of Cwm Taf Morgannwg University Health Board (CTMUHB) and the Local Education Authority (LEA) within the Rhondda, Cynon/Taff and Merthyr boundaries who are involved in the prescription, supply, storage and administration of medication within a special school setting. Bridgend area will implement within the near future.

It applies to children and young people (C&YP) up to and including 19 years of age attending special school who are prescribed either routine medication or as needed/emergency medication that may need to be administered during the school day.

## **3. Responsibilities**

### **CTMUHB Responsibilities**

CTMUHB staff will be responsible for adhering to the guideline and raising any concern or issues that are experienced relating to it.

Assurance will be provided by annual audit undertaken by the team leader for Special Schools.  
Training for key staff in the administration of medication under the direction of the school nurse.

### **School Responsibilities**

Schools personal liability insurance will cover school-based staff for any liability in respect of administering prescribed medicines/treatment, providing staff are working under the direction of the Executive Headteacher and within the parameters of this document.

Executive Headteachers will support CTMUHB staff and allow delegated responsibilities for key staff in the administration of medication under the direction of the school nurse.

The school will support consent being obtained for C&YP requiring medicines administration within the school setting from parents or persons with parental responsibility (Appendix A). This will be completed at the start of a new school year, for all new medication, any short-term courses of treatment and for any changes in dosing. This will be recorded in the child's and young person's health care plan.

To highlight to the parent or person with responsibility any medication that is becoming low or close to out of date

## **Parents Responsibilities**

To administer any routine morning and evening medication at home.

To provide a supply of medicines for use in school that are clearly labelled and in date.

To notify the school/school nurse of any medication changes.

To be aware that any unlabelled or out of date medication will not be administered.

To ensure that expiry dates are noted and replacement medications are in place in school in a timely manner.

## **4. Prescribing Medication**

All medication to be administered to children and young people attending special schools should be prescribed by a registered doctor or non-medical prescriber.

Evidence of the prescription can be obtained from:

- The dispensing label on the medication packaging.
- Written letters from the GP or Consultant Paediatrician and team or from CAHMS service consultant led team.

It is essential that any changes to medication doses are communicated by the prescriber in writing to the parents and the special school nurse.

A care plan will be available for all children and young people requiring emergency medication identifying:

- The child's or young person's diagnosis
- Parameters of emergency and actions
- Detail of the name of medication, dose, route, strength, formulation and frequency.

Medication times should avoid the need for administration during school times wherever possible.

Any medication required to be given 2 or 3 times per day can be adjusted to be administered outside of school times.

If administration of medication 2 or 3 times per day is required to be given in school time this is to be discussed with the wider school/MDT team prior to agreement.

All prescriptions and school health care plans to be reviewed annually by the special needs school nurse.

Staff will not give medication unless the consent form is complete (Appendix A) and the appropriate training has been provided.

## **5. Medication Storage**

All routine medication brought in to school must be stored in a locked cupboard.

Any medication that needs to be stored in a refrigerator should be stored in a locked refrigerator dedicated to medicines storage. It is suggested that daily (Monday - Friday) refrigerator temperature monitoring and recording is carried out<sup>5</sup>.

Only designated staff should have access to the medicine's cupboard and refrigerator. This will be the special school nurse and designated school staff as identified by the Executive Headteacher.

Inhalers should be stored in a safe accessible place agreed with the school staff and documented in the child's or young person's care plan. This may be in the child's or young person's bag if it is agreed and safe for the individual child or young persons and those around them.

Children and young people should have their own labelled reliever inhaler at school to treat acute symptoms and for use in the event of an asthma attack. If they are able to manage their asthma themselves they should keep their inhaler with them, and if not, it should always be easily accessible to them, including during physical education (PE), sports activities and educational visits.

Spacer devices are to be clearly labelled with the child' or young person's name to minimise cross infection.

All emergency medication must be readily accessible by all staff at all times during the day or at off-site activities.

Controlled drugs will be stored in a locked cupboard, separate from other medicines and securely fixed to an inside wall. Misuse of Drugs Act (1968).

All controlled drugs in school will be recorded in the controlled drugs register.

Storage check of all controlled drugs in school must be carried out weekly by the special school nurse. (Appendix B)

Guidance for taking controlled drugs on trips is covered in section 9.

## **6. Medication Administration**

Staff involved in the administration of medication will need to be familiar with how learners' consent to treatment<sup>7</sup>.

The identity of the child or young person must be confirmed prior to administration with a photograph attached to medication chart.

When administering a medicine, the staff member must check the right patient, right dose, right route, right medicine and right time as well as the child's or young person's allergy status and expiry date of the medication.

Medication must be administered in the school nurse's room. This is to ensure privacy and minimise interruption.

Certain medications may require administration rectally e.g. PR paraldehyde. Therefore, the education setting should have an intimate care policy, and this should be reflected and agreed in the learner's risk assessments and individual health plan (IHP).

Only child or young person's specific prescribed oxygen will be administered. Emergency oxygen will be obtained via 999 emergency call.

Medication must be checked against the drug administration document and the prescription label on original packaging. If document and pack do not match, then the prescriber or the dispensing pharmacist must be contacted to clarify the correct dosage.

Prescribed medicines must only be administered in line with precise directions on the medication chart and prescribing label. If there are any discrepancies with the chart or label the administrator must refer back to the prescriber or pharmacist who dispensed the medication.

Medication can be administered by a single nurse check. A risk assessment can be completed to identify medications and situations where two-person checks are required. Royal Pharmaceutical Society (RPS) and Royal College of Nursing (RCN) Professional Guidance on the Administration of Medicines in Healthcare Settings

For controlled drugs a two person check and signatures will be required.

The school nurse should administer medication. However, if not present two members of staff should be present when medication is drawn up and administered to counter check doses.

The school nurse or both members of staff to sign the medication chart following witness of medication being taken.  
**Initials are not sufficient.**

Staff should not sign the medication chart unless they have personally administered, assisted or witnessed the administration of medication.

If a learner refuses medication the staff should document the refusal and inform, in writing, the parent/carer.

If a learner requires rescue medication during the school day the staff should document and inform, in writing, the parent/carer of the medication, amount and time given. (See Appendix C)

## **7. Non-prescription Medication**

Staff should not give a non-prescribed medicine to a learner unless there is a specific prior written consent from parent/GP/Consultant.

Single dose medications (paracetamol) will only be administered by the school nurse and only if verbal consent has been gained by the parent/carer regarding dosage and time of last dose.

Parents will be informed verbally and in writing of the dose and time.

Non-prescription medications are to be recorded in the same way as prescription medication.

## **8. Medication Transcribing**

Medication must be transcribed on to approved medication charts.

Only the School nurse is permitted to transcribe medications on to the approved chart.

All special school nurses will be aware of RPS/RCN guidance on transcribing. Royal Pharmaceutical Society (RPS) and Royal College of Nursing (RCN) Professional Guidance on the Administration of Medicines in Healthcare Settings.

## **9. Off-site Medication**

A copy of the child's or young person's care plan and the medication chart should be taken with the child's or young person's medication. This will include emergency medications and relevant care plan.

Where possible medication should be transported in the original packaging with original labels with the exception of liquids.

Liquid medication can be transferred into single dose syringes with adequate labelling.

The transcription of this label can only be undertaken by the school nurse in line with the school policy. The label **must** include the child's or young person's name, medicine name, and medication dose, time and route due.

The liquid medication must be transferred into single dose syringes in the presence of a second person who will also be the person to administer this medication. Syringe caps are to be used to secure the medication.

When sending controlled drugs out for trips these must be kept as securely as possible. The controlled drugs and documentation should be kept by the staff member responsible for the child or young person.

The stock must be checked and recorded on the CD record in the presence of the person who will be administering the medication.

All medication and documentation should be stored safely by staff during the trip and returned to safe locked storage within the school on return. Where medications are required to be kept in a cold environment the cold chain must be kept as best possible. For information and advice on which medications require cold chain storage contact can be made with the medicine's information unit within Cwm Taf Morgannwg UHB.

When taking emergency medication off site, medication must be in a sealed container with the child or young person's emergency care plan. All emergency medication to be signed in and out of the cupboard. (Appendix C)

## **10. Residential Trips**

Arrangements and agreements will be made between education staff and parents with regard to administration of medicines for the duration of residential trips.

Advice from the special school nurse or children's or young person's consultant will be available if required.

## **11. Disposal of Medicines**

Part used, expired/out of date or no longer required medicines will be sent home for parents to dispose of or returned to the local pharmacy and receipt for controlled drugs obtained.

All medicines will be returned to parents at the end of the school year.

Any stock items that are out of date should be returned to pharmacy.

## **12. Record Keeping**

Approved medication chart (Appendix D) will be used to record all medication administration in special schools.

Omissions and refusal must be recorded and parent/carers informed.

Documentation supporting administration of medication in special schools should be reviewed annually.

RPS/RCN<sup>3</sup> and UHB<sup>4</sup> guidance on record keeping must be followed.

All medication should be counted and signed in immediately on a stock sheet when received in school. This is to be completed by school nurse plus second witness if controlled medication. (Appendix E)

## **13. Supply of Medication or Devices**

Education settings should not store surplus medication.

Parents should be asked to provide appropriate supplies of medication.

Education settings should only accept medications that are:

- In date
- Have contents correctly and clearly labelled

- Are labelled with the learner's name
- Are accompanied with written instructions for administrations, dosage and storage.
- Are in their original container/packaging as dispensed by the pharmacist(with the exception of insulin which is generally available via an insulin pen or pump)

#### **14. Training**

All registered nurses involved in medication administration will have completed medicines management training.

All nursing staff prescribing medication will have completed relevant training and be registered as a nurse prescribers with the NMC.

Registered healthcare professionals who delegate medicines administration to a school staff member retain the accountability for the delegations and the responsibility for the training provided (RCN 2017).

The team leader for special schools, will provide an annual update for school staff in relation to this guideline and keep a record of staff trained. (Appendix F)

Individuals who are not registered professionals i.e. teachers, learning support assistants and others will be responsible for ensuring their annual update is undertaken. The school-based nurse will monitor and feedback to Executive Headteacher.

#### **15. Monitoring Arrangements**

Monitoring implementation, compliance and effectiveness of this guideline will be carried out via observation in practice.

Any incidents relevant to this guideline will be recorded via CTMUHB approved incident recording systems. For school staff see Appendix G for recording of incidents.

Communication with Executive Headteachers and parent/carers will be paramount in the event of any drug error or incident affecting any children or young person within the school.

Compliance with documentation will be monitored as part of on-going clinical audit of records. (Appendix H)

Monitoring of training within each school setting will be conducted annually in communication with Executive Headteachers.

## 16. References

1. Cwm Taf University Health Board: Administration of medicines procedure pharm MM115
2. Welsh Government circular no: 015/2014 Guidance on the use of emergency salbutamol inhalers in schools in Wales.
3. Professional Guidance on the Administration of Medicines in Healthcare Settings Royal Pharmaceutical Society and Royal College of Nursing. January 2019.  
<https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/SSHM%20and%20Admin/Admin%20of%20Meds%20prof%20guidance.pdf?ver=2019-01-23-145026-567>  
Accessed 2/2/19
4. Royal College of Nursing (2017) Accountability and delegation – a guide for the nursing team, pub code 006465
5. Royal Pharmaceutical Society (2018) Professional guidance on the safe and secure handling of medicines, <https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of-medicines> Accessed 5/2/2019
6. The Misuse of Drugs Act (1971), <https://www.legislation.gov.uk/ukpga/1971/38/contents> , accessed 5/2/2019
7. Welsh Government (2017) Supporting learners with healthcare needs. Guidance <http://learning.gov.wales/docs/learningwales/publications/170330-healthcare-needs-en.pdf> , accessed 5/2/2019
8. Welsh Government (2017) Guide to Consent for Examination or Treatment <http://www.wales.nhs.uk/sitesplus/documents/1064/Welsh%20Government%20Guide%20to%20Consent%20for%20Examination%20or%20Treatment%20%28July%202017%29.pdf> , accessed 5/2/2019

**1. Appendix A Parental agreement for education setting to administer medicine**

**Parental agreement for education setting to administer medicine**

**[Insert name of education setting] needs your permission to give your child medicine. Please complete and sign this form for each individual medicine to allow this.**

Name of education setting	
Name of child	
Date of birth	
Group/class/form	
<b>Contact details</b>	
Parent Name	
Daytime telephone no:	
Relationship to child:	
Address	
Healthcare need	
<b>Medicine</b>	
Name/type of medicine (as described on the container)	
Dosage and method	
Timing	
Are there any side effects or Allergies that the setting needs to know about?	
Self-administration	<b>Yes/No</b>
Procedures to take in an emergency	

I understand that I must deliver the medicine personally to *[agreed members of staff]*

I understand that I must notify the setting of any changes in writing.

Date

Signature(s) .....





**4. Appendix D Record of medicines administered to all learners – by date**

**Record of medicines administered to all learners – by date  
Recording of medication Chart**

**Child's name**.....

**Medication being given**.....

**Dose mg**.....

<b>DATE</b>	<b>Time</b>	<b>Route</b>	<b>Dose MG</b>	<b>1<sup>st</sup> signature</b>	<b>2<sup>nd</sup> Signature For CD's</b>	<b>Balance of medication left for CD's</b>

**5. Appendix E CHECKLIST TO RECEIVE MEDICATION IN SCHOOL FOR NEW SUPPLY OF EXISTING MEDICATION**

**CHECKLIST TO RECEIVE MEDICATION IN SCHOOL FOR NEW SUPPLY OF EXISTING MEDICATION**  
 MEDICATION NEEDS TO BE SIGNED IN BY SCHOOL NURSE OR MEMBER OF SENIOR MANAGEMENT TEAM (SMT)

Please check and sign below

Name of child.....

Date.....

Check details	Sign and date
Correct name of child	
Correct medication	
Correct dosage	
Expiry date	
Route of administration	
Put in cupboard with child's current medication and add new supply to current total	

If new medication as above but parent will need to sign a new request form. Please contact nurse to confirm if any change to dose or new medication.

Sign and print by Nurse/Member of SMT

.....

Sign and print by Parent/Guardian:

.....

**6. Appendix F Staff training record – administration of medicines**

**Staff training record – administration of medicines**

Please ensure that the Education Workforce Council registration is updated accordingly.

Name of setting	<input type="text"/>
Name	<input type="text"/>
Type of training received	<input type="text"/>
Date of training completed	<input type="text" value="/ /"/>
Training provided by	<input type="text"/>
Profession and title	<input type="text"/>

I confirm that [name of member of staff] ..... has received the training detailed above and is competent to carry out any necessary treatment.

I recommend that the training is updated [please state how often] .....

Trainer's signature ..... Date

I confirm that I have received the training detailed above.

Staff signature ..... Date

Suggested review date

Training checklist

Administer medication to individuals and monitor the effects assessment sheet

LEARNING OUTCOMES	ASSESSMENT CRITERIA	Date	Signature								
The learner will:	The learner can:	Date achieved									
1 understand legislation, policy and procedures relevant to administration of medication	<table border="1"> <tr> <td data-bbox="305 443 370 569"><b>1.1</b></td> <td data-bbox="370 443 1105 569">Identify current legislation, guidelines, policies and protocols relevant to the administration of medication</td> </tr> </table>	<b>1.1</b>	Identify current legislation, guidelines, policies and protocols relevant to the administration of medication								
<b>1.1</b>	Identify current legislation, guidelines, policies and protocols relevant to the administration of medication										
2 know about common types of medication and their use	<table border="1"> <tr> <td data-bbox="305 657 370 732"><b>2.1</b></td> <td data-bbox="370 657 1105 732">Describe common types of medication including their effects and potential side effects</td> </tr> <tr> <td data-bbox="305 732 370 808"><b>2.2</b></td> <td data-bbox="370 732 1105 808">Identify medication which demands the measurement of specific physiological measurements</td> </tr> <tr> <td data-bbox="305 808 370 884"><b>2.3</b></td> <td data-bbox="370 808 1105 884">Describe the common adverse reactions to medication, how each can be recognised and the appropriate actions required</td> </tr> <tr> <td data-bbox="305 884 370 930"><b>2.4</b></td> <td data-bbox="370 884 1105 930">Explain the different routes of medicine administration</td> </tr> </table>	<b>2.1</b>	Describe common types of medication including their effects and potential side effects	<b>2.2</b>	Identify medication which demands the measurement of specific physiological measurements	<b>2.3</b>	Describe the common adverse reactions to medication, how each can be recognised and the appropriate actions required	<b>2.4</b>	Explain the different routes of medicine administration		
<b>2.1</b>	Describe common types of medication including their effects and potential side effects										
<b>2.2</b>	Identify medication which demands the measurement of specific physiological measurements										
<b>2.3</b>	Describe the common adverse reactions to medication, how each can be recognised and the appropriate actions required										
<b>2.4</b>	Explain the different routes of medicine administration										
3 understand procedures and techniques for the administration of medication	<table border="1"> <tr> <td data-bbox="305 972 370 1089">3.1</td> <td data-bbox="370 972 1105 1089">Explain the types, purpose and function of materials and equipment needed for the administration of medication via the different routes</td> </tr> <tr> <td data-bbox="305 1089 370 1171">3.2</td> <td data-bbox="370 1089 1105 1171">Identify the required information from prescriptions/medication charts</td> </tr> </table>	3.1	Explain the types, purpose and function of materials and equipment needed for the administration of medication via the different routes	3.2	Identify the required information from prescriptions/medication charts						
3.1	Explain the types, purpose and function of materials and equipment needed for the administration of medication via the different routes										
3.2	Identify the required information from prescriptions/medication charts										
4 prepare for the administration of medication	<table border="1"> <tr> <td data-bbox="305 1213 370 1289">4.1</td> <td data-bbox="370 1213 1105 1289">Apply standard precautions for infection control</td> </tr> <tr> <td data-bbox="305 1289 370 1365">4.2</td> <td data-bbox="370 1289 1105 1365">Explain the appropriate timing of medication and check that the individual has not taken any medication recently</td> </tr> <tr> <td data-bbox="305 1365 370 1524">4.3</td> <td data-bbox="370 1365 1105 1524">Obtain the individuals consent and offer info, support and reassurance, in a manner which encourages their cooperation and which is appropriate to their needs and concerns</td> </tr> <tr> <td data-bbox="305 1524 370 1606">4.4</td> <td data-bbox="370 1524 1105 1606">Select, check and prepare correctly the medication according to the medication administration record</td> </tr> </table>	4.1	Apply standard precautions for infection control	4.2	Explain the appropriate timing of medication and check that the individual has not taken any medication recently	4.3	Obtain the individuals consent and offer info, support and reassurance, in a manner which encourages their cooperation and which is appropriate to their needs and concerns	4.4	Select, check and prepare correctly the medication according to the medication administration record		
4.1	Apply standard precautions for infection control										
4.2	Explain the appropriate timing of medication and check that the individual has not taken any medication recently										
4.3	Obtain the individuals consent and offer info, support and reassurance, in a manner which encourages their cooperation and which is appropriate to their needs and concerns										
4.4	Select, check and prepare correctly the medication according to the medication administration record										

LEARNING OUTCOMES	ASSESSMENT CRITERIA	Date	Signature
The learner will:	The learner can:	Date achieved	
5 administer and monitor individuals medication	5.1 Select the route for the administration of medication, according to the patients plan of care and the drug to the administered, and prepare the site if necessary		
	5.2 Safely administer the medication: (a) in line with legislation and local policies (b) in a way which minimises pain, discomfort and trauma		
	5.3 Describe how to report any immediate problems with the administration		
	5.4 Monitor the individual's condition throughout, recognise any adverse effects and take the appropriate action without delay		
	5.5 Explain why it may be necessary to confirm that the individual actually takes the medication and does not pass the medication to others		
	5.6 Maintain the security of medication and related records throughout the process and return them to the correct place for storage		
	5.7 Describe how to dispose of out of date and part used medications in accordance with legal and organisational requirements		

**7. Appendix G Medication/healthcare incident report**

**Medication/healthcare incident report**

Learner's name \_\_\_\_\_

Home address \_\_\_\_\_ Telephone no. \_\_\_\_\_

Date of incident \_\_\_\_\_ Time of incident \_\_\_\_\_

**Correct medication and dosage:** \_\_\_\_\_

- Medication normally administered by:** Learner   
Learner with staff supervision   
Nurse/school staff member

**Type of error:**

- Dose administered 30 minutes after scheduled time   
Omission   
Wrong dose   
Additional dose   
Wrong learner   
Dose given without permissions on file   
Dietary   
Dose administered by unauthorised person

**Description of incident:**

\_\_\_\_\_

**Action taken:**

- Parent notified: name, date and time \_\_\_\_\_  
 School nurse notified: name, date and time \_\_\_\_\_  
 Physician notified: name, date and time \_\_\_\_\_  
 Poison control notified  Learner taken home  Learner sent to hospital  
 Other:

**Note:**

\_\_\_\_\_

**Appendix H Medicines Management Audit Tool**

**Medicines Management Audit Tool**

**AUDIT WILL BE COMPLETED EVERY HALF TERM IN THE SCHOOL YEAR**

**DATE OF AUDIT:** .....

**NURSE COMPLETING AUDIT TO PRINT AND SIGN**

1. STORAGE OF MEDICINES		
	Yes	No
Is this room kept locked?		
Are medicines stored in locked cupboards?		
Are emergency and regular medicines stored separately?		
Are medicines requiring refrigeration stored in a separate refrigerator?		
Are emergency medicines stored in a separate, secure, labelled container along with emergency care plan?		
Is the temperature of refrigerators monitored using max/min thermometers?		
Are refrigerated medicines properly labelled to indicate storage requirements?		
Are medical oxygen cylinders and any other medical gases securely and safely stored?		
Are stock levels appropriate?		
How often are expiry dates checked?		
Are arrangements for security of keys satisfactory? (Check key holders /handover of keys procedure/duplicate keys etc)		
Problems/comments/advice given		

2. ADMINISTRATION OF MEDICINES		
	Yes	No
Are medicines administered from original containers as received from the pharmacy one patient at a time?		
Are labels printed clearly?		
Are dosage instructions clear?		
Have any labels been defaced or changed?		
Are appropriate cautions and warnings clear?		
Are all medicines labelled for individual patients? (including medications for external use)		
Are 2 people signing and print for all medication?		
Is the medication administration record completed correctly?		
Is there a risk assessment for each pupil who self-medicates any of his or her medicines?		
Are times for medications clearly recorded?		
Is the route of the medication clearly recorded?		
Have staff who give medicines been trained in the school's policies and procedures for handling and recording medication and been assessed as competent?		

Are measures in place to identify pupils to ensure that they receive the correct drug?		
--	--	--

<b>3. RECORD KEEPING</b>		
	Yes	No
Are allergies or "nil known" recorded on the chart or elsewhere?		
Is it clear when medicines have been refused or not given?		
Are there suitable procedures in place for recording medicines receipt and disposal?		
Is the reason for non-administration clearly documented?		
Have records been checked for consistency with medicines labels?		
Are changes to doses clearly marked and signed?		
Is the record initialled by staff administering the medicine?		
Problems/comments/advice given		

<b>4. CONTROLLED DRUGS</b>		
<b>FOR SCHOOLS WHICH STOCK CONTROLLED DRUGS</b>	Yes	No
Is there secure storage for controlled drugs as specified in the Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007?		
Is the cupboard fixed to a solid wall?		
Do stock levels agree with the written balance?		
Are receipt and administration of CD's clearly and legibly recorded: signed, dated and witnessed?		
Problems/comments/advice given		

<b>6. DISPOSAL OF MEDICINES</b>		
	Yes	No
Have all discontinued and/or expired medicines been returned to the family for disposal and recorded? Or returned to pharmacy for disposal?		
Problems/comments/advice given		

**7. ADDITIONAL NOTES (IF ANY)**