



Oxford Sixth Form College

A NORD ANGLIA EDUCATION SCHOOL

Policy on the Administration of Medicines

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1. Administration of Medicines

1.1. Prescribed medicines are the property of the student to whom they have been prescribed and dispensed.

1.2. Medicine must be administered to the student whose name appears on the label and according to the prescriber's instructions. These instructions are indicated on the pharmacy label. At each administration, medicine must be recorded and signed for by the student and staff dispensing.

1.3. Paracetamol will only be administered by one of the trained College staff. All Paracetamol dispensed must be recorded and signed for by the student and staff dispensing and recorded manually in the blue medication book and on-line in the Boarding House Team, Paracetamol Record

1.4. Parental permission is required before any student can receive medication from College staff. Consent is taken on entrance to the College. Parents have the right to remove consent at any time and should inform the College of any changes.

1.5. Non-prescribed medicines will not have a pharmacy label so should be administered in conjunction with the instructions that accompany the medicine.

1.6. Potential allergies must be checked before administration. It is the parent's responsibility to inform the College of any known allergies. The College Matron will be responsible for ensuring that this information is shared appropriately with staff in College.

1.7. Medicine should never be pre-dispensed or dispensed for another person to administer.

1.8. Medication must not be transferred from one container to another.

1.9. If there is any query or concern regarding a student's medicine, then that medicine should not be given, and the prescriber must be consulted immediately.

1.10. The label on the container provided by the pharmacist must not be altered under any circumstances. If the label becomes detached from the container or is illegible, the medicine must not be given. The College Matron must be contacted for advice and instruction from the supplying pharmacist must be sought. A new supply must be requested.

1.11. The 6 Rights of Administration must be applied:

- **RIGHT PUPIL:** The identity of the student must be ascertained. This must be checked with the name on the medicines record, their photograph, the pharmacy label on the medicine and by addressing the student by name.
- **RIGHT MEDICINE:** The name, form and strength of the medicine must be checked during the administration process i.e. the pharmacy label on the medicine should be compared with the medicines record.
- **RIGHT TIME:** Medicine should be given at the time indicated on the medicines record. If medicine is administered more than one hour either side of the time stated, advice may need to be sought from the GP before the medicine is administered.
- **RIGHT DOSE:** The dose of medicine must be administered in accordance with the prescriber's instructions. Again, reference must be made between the medicines record and the pharmacy

label to ensure this. If there is any discrepancy between the dose on the medicines record and that stated on the label, advice must be obtained from the GP before the medicine is given.

- RIGHT ROUTE: Each medicine must be administered in its prescribed form i.e. tablet, capsule, patch, inhaler etc. and by the prescribed route i.e. oral, sublingual, topical etc.
- The student's RIGHT to REFUSE must be respected.

1.12. It is essential that administration of medicine and subsequent signing of the medicines record is completed for one student before selecting medicines for the next.

1.13. A diary should be used to ensure all students who require medicines receive them at the correct time.

1.14. For medicines with a limited expiry, containers of the medicine should be marked with the date of opening and / or date of expiry e.g. eye drops, creams, liquids.

1.15. Medicine must not be left unattended with the student. The trained staff member should remain with the student until administration is complete.

1.16. Medicine should not be opened or prepared until the student is ready to accept it.

1.17. For application of creams and ointments, disposable gloves must be worn.

1.18. Medicine should not be given if:

- The medicines record is missing or is difficult to read
- The pharmacy label is missing or is difficult to read
- A significant change in the physical or emotional condition of the student is observed
- The 6 Rights of Administration cannot be verified
- The student has queries about the medicines e.g. colour, size, shape, consistency of liquids etc
- There are any doubts or concerns. In these situations, the medicine should not be given until advice has been sought from the GP who may need to contact the original prescriber.

1.19. Medicine must never be crushed, broken or mixed with food and drink unless it is designed for that purpose or specific directions have been given to do so, in writing, by the prescriber and this has been documented in the students' IHCP.

1.20. All liquids must be shaken prior to administration. Liquid dose measurements must be undertaken with accuracy. For doses of 5 or 10ml, the 5ml plastic measuring spoon should be used. For doses over 10ml, an appropriately graduated plastic measuring pot can be used. This must be held at eye level for accurate dose measurement. For doses of less than 5ml, an oral syringe should be provided for measurement of the dose.

1.21. All bottles of liquid should be wiped after use.

2. TRAINING

2.1. Medicine may only be administered by designated staff who will only administer medicine when it is within their competence and within the parameters set out in this policy and when authorised to do so by the College Matron.

2.2. All staff who administer medicines must have completed the i-Hasco course, 'Medication Awareness Education'. Paracetamol may only be administered by staff who have completed 'Paracetamol training'. Competence of staff must be assessed at least annually or more frequently if required e.g. following an incident or error.

2.3. Advice on medicine issues, policies and procedures should be sought from a Pharmacist in conjunction with the College GP.

2.4. Medicine reviews will be performed by the GP or other healthcare professional and staff must be aware of potential changes to a student's medication regime.

2.5. Staff must be aware of the medicines they are administering and the consequences of administration and non-administration. Full consideration must be given to whether the best outcomes are being achieved for students.

2.6. Staff must be mindful of the arrangements that must be in place for medicines that need to be given at specific times to ensure the dose interval is appropriate.

3. RECORDS AND RECORDING

Overview: There are two types of recording of medicines used by the College; electronic and manual. A manual recording is used for the administration of **ALL** medicines. The manual record must always be signed by the receiving student and the administering member of staff/s. If the medicine is classified as a controlled drug, it must be recorded in the controlled drugs log sheet in the student profile. The administration of paracetamol is also recorded online and updated by the pastoral team across all buildings.

3.1. All medicines brought into the boarding houses must be given to the Houseparent. Medicines that are prescribed by a GP must have an accompanying letter with them explaining what the medicine is for, the dosage, when and how it should be administered and the length of time the student needs to continue to take the medicine. Non-prescription medications must be in their original containers, with the original instructions, and, where necessary, translated into English.

3.2. Medicines received into boarding must be recorded on arrival and a student profile must be created by the boarding team or the Matron. Foreign medication must be accompanied with a doctor's letter with the information about the medication in English, including the type of medication, dosage. If there is no translation, the medication will be confiscated.

3.3. Records must be kept of all medicines administered to students including what, how and how much was administered, when and by whom. Any side effects of the medication should be noted. A record must also be made for non-administration e.g. refusal.

3.4. The medicines record must contain an up-to-date record of all medicines administered. After each administration, the trained staff member should sign the medicines record to verify that the medicine has been administered. This must occur immediately after the medicine has been administered and once the student has signed to say they have received the medicine.

3.5. Medicines records should be signed in blue or black ink. If a mistake in recording is made, a single line should be made across the incorrect entry and a new clearly legible entry made.

3.6. For students with a long-term condition, an individual healthcare plan (IHCP) and Risk Assessment that will be developed with parents, the student and College Matron.

3.7. An up-to-date sample signature and initials list should be kept for those staff eligible to undertake medicine administration.

3.8. For medicines that are administered regularly, but infrequently - e.g. monthly or every 3 months, a system must be in place to record when these medicines are due. This may include marking the relevant box on the medicines record for monthly items and recording the date in the diary to remind staff e.g. for 3-monthly medicines.

3.9. The College Matron must be informed of any unusual incidents e.g. medicine given out of the time frame, refusal etc.

3.10. Discontinued medicines may only be documented on the medicines record by the College Matron.

3.11. All entries must be written clearly, unambiguously and with no abbreviations.

3.12. An audit trail of medicines needs to be maintained i.e. a record of all medicines received, administered and returned.

3.13. The Matron or Head of House will provide a record of all medicines leaving and returning to College with students on day trips, residential visits, sporting activities and trips home. An in/out log must be used.

3.14. For students who have more than one medicines record, these must be labelled 1 of 2, 2 of 2 etc

3.15. Any changes to medication made by the prescriber by phone can only be accepted if it is supported in writing (by secure email) before the next or first dose is given. The records (and IHCP if appropriate) must be updated as soon as possible (usually within 24 hours).

3.16. Any discrepancies and remedial action taken must be documented.

3.17. Medicines records must be kept with the individual medical records and retained for the time specified by the regulator and thereafter destroyed securely. This is currently advised at 25 years of age or 10 years after leaving the College.

3.18. The Controlled Drugs register must be used when Controlled Drugs are received into the College, administered, or returned to the parent/pharmacy.

4. CONTROLLED MEDICATION

4.1. The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as a medicine for use by students, e.g. methylphenidate (Ritalin).

4.2. Any authorised and trained member of staff may administer a controlled drug to the student for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions.

4.3. A student who has been prescribed a controlled drug may legally have it in their possession if deemed Gillick Competent, however Oxford Sixth Form College does not allow students to self-administer controlled drugs to ensure the safety of the whole College community.

4.4. It is permissible for schools and colleges to look after a controlled drug, where it is agreed that it will be administered to the student for whom it has been prescribed.

4.5. Controlled drugs (CDs) are subject to safe custody and must be stored in a locked receptacle such as an appropriate CD cabinet. The key to this cabinet must be securely stored and only accessible to staff authorised to have access to it. CDs must be administered in a timely fashion in line with relevant legislation and local standard operating procedures.

4.6. Record Keeping For Controlled Drugs – Legal Requirements:

- Paper Controlled Drug Register (CDR) will be kept in the students' profile medicine log (Appendix 1 and Appendix 2).
- There must be a separate page for each strength & form of an individual drug
- Each page must specify the name, strength and form of the drug at the head of the page and all of the entries on that page must relate to that drug only
- Each entry must be in chronological order Each entry must be legible and written in indelible ink If a mistake is made then it should be crossed through with a single line so that it can still be read The CDR must be kept on the premises to which it relates The CDR must be available for inspection by an authorised person.

4.7. Houseparents will be given biennial training on the administration and safe storage of Controlled Drugs, however competency will be checked at least annually.

4.8. All students requiring CDs must have a consultant's letter, in English, stating diagnosis, medication prescribed and dosage.

4.9. All CDs must be in the original packaging, with a pharmacy label including the Name and correct dosage.

4.11. International pupils bringing CDs with them also need to have a consultant's letter written in English. If the medication is not an EU recognised medication a UK alternative will need to be prescribed.

5. CHOICE AND CONSENT

5.1. Medicine may not be administered without consent.

5.2. All students should be given the choice to take or refuse medicines and their dignity and independence should be maintained at all times.

5.3. If a student refuses to take medicine, they should not be forced to do so but staff should inform the College Matron who will report to the issuing physician, where possible, and the students' parents. If the medication has been issued by the College GP surgery, the Matron will inform the GP directly.

5.4. Non-prescription and prescription medicines should only be given if parents/guardians have provided written consent (for under 16's). Over 16's will provide their own consent.

5.5. Prior to a student joining the College, the parents are required to complete the College Enrolment Form which requests details of any known allergies, whether they are taking any medication or undergoing any medical treatment. In addition, parental consent will also be requested for administration of routine vaccines and over the-counter medicines. When the student joins the College, they will be requested to complete a questionnaire outlining any past medical history, current medical issues and treatment, any known allergies and past immunisations.

5.6. For medicines prescribed during the College term, it is good practice to inform parents/ guardians that they have been prescribed and every effort made to encourage students to involve their parents

whilst respecting their right to confidentiality. Fraser competence guidelines should be followed for under 16s without parental consent.

6. COVERT ADMINISTRATION

6.1. Disguising medicines in food and drink is not permitted.

6.5. It should be noted that if a pupil requests that their medicine is added to food or drink, this is not “covert” as they are fully aware that the medicine is being administered to them.

7. PRN MEDICINES

7.1. Pro Re Neta (PRN) (translates to ‘when required’) medicines must be given in accordance with the prescriber’s instructions, details of which should be recorded in the medicine dispensing log and, where applicable in the student’s IHCP. The PRN protocol should be pupil-centred and focus on outcomes. Details should include the name and reason for the medicine, dosage criteria i.e. how and when the medicine should be given, how often it may be repeated and any maximum quantity that may be administered in a 24-hour period. Details should also include how the decision is reached about when and how to give the medicine, any actions taken prior to administration, expected outcomes and follow up actions.

8. MEDICINE ERRORS AND SAFEGUARDING

8.1. Oxford Sixth Form College recognises that, despite the high standards of good practice and care, mistakes may occasionally happen for various reasons. If a mistake occurs, this must IMMEDIATELY be reported to the College Matron and Vice Principal so as to prevent any harm to the student. There must be no concealment or delay in reporting the incident.

8.2. Advice must be sought from the GP/ emergency services as appropriate. Any advice given by the healthcare professional must be actioned immediately. The student must be observed and monitored for side effects and emergency action taken if required. The parents must be informed immediately.

8.3. All medication errors, incidents and near misses must be fully and carefully investigated and documented by the Matron on Sphera to determine the root cause and action taken as appropriate. Detailed audits must be carried out on a regular basis and used in College briefing meetings to improve practice.

8.4. The Principal should encourage staff to report errors. They should be dealt with in a constructive manner that addresses the underlying reason for the incident and prevents recurrence. All medicine errors must be reported to Matron initially and forwarded to the Principal.

8.5. If the Matron believes an error/ incident could be a safeguarding issue as defined below, they should report to the Designated Safeguarding Lead (DSL) immediately.

8.6. A safeguarding issue in relation to managing medicines could include:

- Deliberate withholding of a medicine without a valid reason
- Incorrect use of a medicine for reasons other than the benefit of a student
- Deliberate attempt to harm through use of a medicine
- Accidental harm caused by incorrect administration or a medicine error

This list is not exhaustive.

8.7. Accurate details of any medicine-related safeguarding incidents must be recorded on CPOMS in the student's area as soon as possible so that the information is available for any investigation and reporting. The GP must be informed straight away.

RELATED POLICIES

- First Aid Policy
- Safeguarding & Child Protection Policy
- Medical Needs

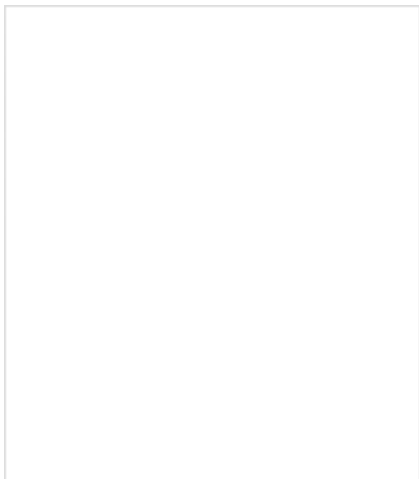
Appendix 1

Student profile

Name:

DoB:

Student Photo:



Medication	Dose	When	Type of medication*

* CD: Controlled Drug, PM

POM: Prescription Only Medicine

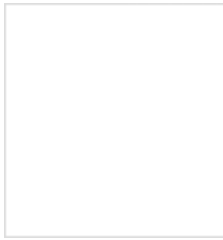
P: Pharmacy medicine (behind the counter)

GSL: General Sales List (e.g. cold and flu, paracetamol, etc over the counter)

**Appendix 2
Controlled Drug Log Sheet**

Student full name:	
D.O.B	
Controlled drug name:	
Form/ strength:	

Student Photo:



Medication Obtained			Administered/ Disposed			Signatures		Stock Balance
Date	QTY	Received from	Date & Time	Qty given	Qty disposed.	Given By (signature)	Witnessed by (signature)	

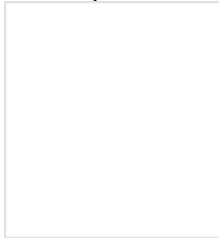
Appendix 3

All other medicine log sheet

Student full name:	
DoB:	

Medicine
Log sheet

Student photo



Date	Time	Medication	Dose	Frequency of dosage	Taken (student signature)	Note (staff signature)	Med count