



Evergreen Education and Therapy Medication Policy 2026-7

This Medication policy aims to provide clear guidance on managing medication for children attending Alternative Provision or Therapy. Adopted: Created by:	July 2023 R Peacock Head of Therapeutic Services
Reviewed: Review Due:	August 2026 August 2027

Aims of the Policy

By implementing the policy, we intend to achieve the following:

1. To provide guidance and reassurance to the staff team.
2. To safeguard the health and well-being of children & young people
3. To assure parents that team members will be knowledgeable and competent as far as possible in the management of their child's/young person's care, given that the team are not health professionals
4. To develop policies related to the administration, storage and management of medicines in the variety of locations used.
5. To put in place effective management systems to support individual children & young people with medical needs.
6. To identify roles and responsibilities in the management of medicines and supporting children & young people with medical needs.
7. To take account of statutory responsibility.

Guidance:

- Medicines should only be taken whilst attending Alternative Provision and Therapy when essential; that is where it would be detrimental to a child or young person's health if the medicine were not administered during that time period. Where possible, provision should be made to plan sessions when medication or personal care is not required.
- Children or Young People who require personal care during their time with us will need to be supported by a carer/family member at the session. This will need to be discussed and agreed with the Schools/ parents on an individual basis. The agreement must be in writing and part of the child/young person's Individual Health Care Plan (IHCP).
- We are only able to accept medicines that have been prescribed by a doctor or dentist. Non-prescribed medication will not be accepted or administered by our staff.
- Parents must request in writing that their child be given medication and any subsequent changes must also be in writing.
- Medicines must always be provided in the original container as dispensed by a pharmacist and not repackaged. Medicines that have been taken out of the container as originally dispensed will not be accepted.
- The label should include the date, child/young person's name and the prescriber's instructions for administration. Instructions must be 'as directed' only and not 'as required'.



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- Team members receiving medication should read the label carefully, ensure the child/young person's name is stated, ensure that they understand the instructions and check prescribed dosage and expiry date.
- Changes to dosage on parental instruction will not be accepted.
- Medication must be brought in by an adult and collected by an adult at the end of the Session.
- Records of all medication received must be kept, even if not subsequently administered.
- Parents must give written consent. It only requires one parent to agree or request that medicines are administered.
- Where close contact is required with child or young person, appropriate PPE will be worn by the team member administering medication.

Storage:

- Only the minimum amount necessary should be provided for the child/young person. Large volumes of medication should not be stored.
- A record should be kept of all medication received, even if it is not subsequently administered. This allows for an audit trail to be constructed.
- Children/Young people must not keep their own medicines, other than inhalers or epi pens..
- Controlled drugs must be kept in the locked cupboard in a designated location for the period of time a child/young person is attending their session. Only named staff will have access.
- Medicines that need to be refrigerated may not be able to be accommodated in all Therapeutic or AP venues. This will be determined and recorded on the child/young person's IHCP. Where it can be accommodated the medication needs to be stored in a box with a lid and clearly labelled.
- Epi-pens and inhalers must be clearly marked and easily accessible in case of emergency.
- In the event of loss, theft or burglary, of any medication, the Schools Directors must be informed immediately.
- Medication for team members personal use must be kept securely and away from children/young people.

Administration of Medication:

- There is no legal or contractual duty on team members to administer medication or supervise a child/young person taking it or carry out personal care tasks required to support children with medical needs. This is a voluntary role.
- All team members have common law duty to act as any reasonable parent to make sure that children are healthy and safe, therefore they would be expected to assist in an emergency.
- Children/Young People may self-administer their own inhalers, creams etc; therefore, members of staff will only need to supervise.
- Medicines must only be administered to the person named on the medication.



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- No child or young person is to be given anyone else's medication under any circumstances. This would be an illegal act.
- Regardless of age enquiries must always be made as to whether the pupil is taking any other medication, checks must be made to ensure that there are not likely to be adverse health effects from the interaction of the two.
- Before administering medication check the packaging for child/young person's name, prescribed dose, expiry date, pharmacist's instructions. If in doubt about a procedure, team members should not administer the medication but check with parents and/or health professionals, before taking further action.
- Confirm the identity of the child/young person to be given the medication.
- There must be an adult witness present when the medicine is administered. This is important to consider when a child is being seen on a one-to-one basis. It must be recorded in the child's/young person's IHCP the availability of a second person and how this will be managed.
- Ensure the child/young person has actually taken the medication. If a they refuse to take medication, they should not be forced to take it. Parents/Carers should be informed as soon as possible.
- Record sheets must be signed and dated by the person administering immediately after administering the medication.

Disposal Of Medication:

- The staff are not responsible for the disposal of medication. Medicines should not be flushed down the sink or the toilet.
- Parents are responsible for ensuring that date expired medicines are returned to a pharmacy for safe disposal. Date-expired medication or any medication no longer required should be returned to the parent/carer. This must be given to an adult. The amount of returned medication should be logged.
- Parents should collect medicines at the end of each session. Medicines cannot be stored at any venue being used or by any of its team members.
- Sharps boxes should always be used for the disposal of needles e.g., epi-pens. These can be obtained by parents on prescription from a G.P. The sharps box must be returned to the parent/carer at the end of the child/young person's session. Sharps boxes cannot be stored at any venue being used or by any of its team members.

Individual Health-Care Plans:

- All children/young people requiring medication or complex care should have a care plan e.g., asthma, diabetes, ADHD, epilepsy, mobility difficulties.
- Children/Young people who have short term illness which requires significant intervention during their session should have a care plan for the duration of their treatment. (Short term



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illness lasting only a few days would not normally merit a care plan). Review arrangements should be agreed by all contributors.

- The Directors, parents, support staff and health professionals are responsible for drawing up the care plan together. This should include:-
 - Details about the child/young person and his/her condition
 - Name and details of medication, including any side-effects
 - Accessibility to the session
 - Special requirements, e.g., dietary needs, pre-activity precautions, facilities, equipment
 - Role of the team members and training requirements
 - Arrangements for off-site activities
 - Emergency procedures:
 - Who is responsible in an emergency
 - what constitutes an emergency
 - what to do
 - what not to do
 - who to contact
- Care plans will be kept on the child/young person's file, and with team members.

Staff Training:

- There will be at least 1 member of staff who had completed paediatric first aid training including administration of an epi-pen.

Confidentiality:

- This policy should be used in conjunction with GDPR policy.
- Children/Young People have a right to privacy and medical information should be treated as confidential. Medical information should be shared with the minimum number of people possible that would ensure the child/young person's safety
- Parental agreement should be sought about passing health information to the team. Sharing information is important if the team and parents are to ensure the best care for the child/young person. However, if information is withheld from the team, they should not generally be held responsible if they act incorrectly in giving medical assistance, but act otherwise in good faith.



Sporting Activities:

- Most children/young people with medical conditions can participate in Sports.
- Some children/young people may need to take precautionary measures before or during exercise and may need immediate access to their medication.
- Team members supervising sporting activities should be aware of the relevant medical conditions, medication requirements and emergency procedures.
- Any restrictions should be appropriately recorded in the child/young person's IHCP.
- All children/young people accessing Sports Mentoring must have an up-to-date ParQ form completed prior to sessions starting.

Hygiene And Infection Control:

- Basic hygiene precautions for avoiding infection should be followed, such as washing and drying hands before and after the administration of medication.
- Disposable gloves should be used as appropriate and extra care taken when dealing with blood or other bodily fluids and when disposing of dressings or equipment.

Emergency Procedures:

- Where possible first aiders should provide essential first aid treatment and make an assessment of the situation.
- Where necessary the ambulance service should be called. Team Members should not take pupils to hospital in their own car in an emergency. This can hinder emergency treatment. An ambulance should always be called.
- Parents should be informed immediately.
- Any pupil taken to hospital by ambulance should be accompanied by a member of the staff, who should remain until a parent/carer arrives. Health professionals are responsible for any decision on medical treatment when parents are not available. Team members should not make any decisions.

Allergy Awareness and Benedict's Law

Purpose

The organisation is committed to safeguarding all children, young people, staff, volunteers, and visitors who have allergies. We recognise that allergic reactions, including anaphylaxis, can be life-threatening and require prompt and effective management. Our aim is to create an inclusive environment where individuals with allergies can participate safely in all activities.



Commitment to Benedict's Law

In accordance with the principles of **Benedict's Law (School Allergy Safety Requirements)**, the organisation will:

- Maintain a whole-setting approach to allergy management and awareness.
- Promote a culture of allergy safety and inclusion.
- Ensure all staff receive appropriate allergy awareness and emergency response training.
- Maintain accurate and up-to-date records of individuals with known allergies.
- Develop Individual Healthcare Plans (IHPs) or Allergy Action Plans for those with diagnosed allergies.
- Ensure effective communication between staff, parents/carers, healthcare professionals, and relevant agencies.
- Review allergy management procedures annually and following any allergy-related incident.
- Record and investigate allergy incidents and near misses to identify learning and improve practice.

Identification and Recording of Allergies

The organisation will:

- Obtain information regarding allergies, intolerances, and prescribed medication during admission and registration processes.
- Keep allergy information securely recorded and readily accessible to relevant staff.
- Ensure allergy information is regularly reviewed and updated by parents/carers or the individual where appropriate.
- Clearly identify individuals with severe allergies while maintaining confidentiality and dignity.

Risk Assessment and Prevention

The organisation will:

- Undertake risk assessments for activities, educational visits, therapeutic sessions, food provision, and events where allergens may be present.
- Take reasonable steps to minimise exposure to known allergens.
- Ensure food preparation and serving practices consider allergen risks and cross-contamination.
- Communicate allergen information clearly to staff, parents/carers, and service users.
- Promote awareness among all staff and participants regarding the seriousness of allergies.

Staff Training

All staff, including temporary freelance personnel, will receive training covering:

- Common allergies and allergic reactions.
- Recognition of anaphylaxis symptoms.
- Emergency procedures and escalation processes.



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- Safe handling of food and allergen management.
- Administration of emergency medication, including Adrenaline Auto-Injectors (AAls), where appropriate.

Training will be refreshed regularly and recorded.

Emergency Response

Where an individual displays symptoms of a severe allergic reaction or anaphylaxis:

1. Emergency medication, including an Adrenaline Auto-Injector, should be administered without delay where prescribed or available and appropriate.
2. Emergency Services (999) must be contacted immediately.
3. Parents/carers and designated managers must be informed as soon as practicable.
4. The individual must not be left unattended.
5. An incident report must be completed following the event.

Storage and Access to Medication

The organisation will:

- Ensure prescribed allergy medication is stored safely but remains easily accessible in an emergency.
- Regularly check expiry dates and condition of medication.
- Obtain necessary consent and healthcare documentation where required.
- Ensure staff know the location of emergency medication and are trained in its use.

Inclusion and Participation

No individual will be excluded from activities solely because they have an allergy. Reasonable adjustments and risk management measures will be implemented to enable safe participation wherever possible.

Monitoring and Review

This policy section will be reviewed annually, following significant legislative changes, or after any serious allergy-related incident to ensure continued compliance with safeguarding responsibilities and best practice guidance.



APPENDIX 1

Medication Plan

Please complete this form and return it to the Directors along with the medication. No medication will be administered without signed parental permission.

Details Of Child/Young Person	
Child/Young Person's Name:	
Address:	
Date of Birth:	
Medication	
Name/Type of Medication: (as described on the container)	
For how long will your child/young person take this medication:	
Date dispensed:	
Directions For Use (As described by the prescriber)	
Dosage and method:	
Timing: (Please note: specific timing cannot be guaranteed)	
Special Precautions:	
Side Effects:	
Self-Administration:	YES/NO
Procedures to take in Emergency:	
Details of Medication taken at home:	
Parent/Guardian/Carer Contact Details	
Name:	
Daytime Telephone Number:	
Relationship to Child/Young Person:	



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Address:	
Declaration:	I understand that I must deliver the medicine personally and accept that this is a service which the AP is not obliged to undertake.
Signature:	
Date:	



APPENDIX 2

Individual Health Care Plan – Medium / Long Term

Could you please complete this form and return it to the Directors as soon as possible.

Details of Child/Young Person	
Child/Young Person's Name:	
Address:	
Gender: (assigned at birth)	
Date of Birth:	
Medical Condition:	
Give details of child's / young person's symptoms/reactions:	
Daily care requirements (e.g. medication type/administration details)	
Medication Condition:	
Describe what constitutes an emergency for the child/young person & action to take if this occurs:	
Contact Details	
Name:	
Daytime Telephone Number:	
Relationship to Child/Young Person:	
Address:	
Clinic / Hospital Contact	
Name:	
Address:	



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Phone Number:	
GP:	
Name:	
Address:	
Phone Number:	
Parent/Guardian/Carer Declaration:	
I give permission for my child's photograph to be taken and brought to the attention of staff with details of medical condition and action to be taken.	
Signature:	
Date:	
Relationship to Child/Young Person:	



APPENDIX 3

Record of Medication Given

Child/Young Person's Name:	
Time & Date:	
Medication Administered:	
Dosage Given:	
Name of Medication Administrator:	
Signature:	
Name of Witness:	
Signature:	

Child/Young Person's Name:	
Time & Date:	
Medication Administered:	
Dosage Given:	
Name of Medication Administrator:	
Signature:	
Name of Witness:	
Signature:	



APPENDIX 4

Asthma Register Sheet

We note from your child's emergency form that your child suffers from Asthma. Could you please complete this form and return it to Evergreen staff as soon as possible.

Details Of Child/Young Person	
Child/Young Person's Name:	
Address:	
Date of Birth:	
Medication	
Name/Type of Medication: (as described on the container)	
For how long will your child/young person take this medication:	
Date dispensed:	
Directions For Use (As described by the prescriber)	
Dosage and method:	
Timing: (Please note: specific timing cannot be guaranteed)	
Special Precautions:	
Side Effects:	
Self-Administration:	YES/NO
Procedures to take in Emergency:	
Details of Medication taken at home:	
Parent/Guardian/Carer Contact Details	
Name:	
Daytime Telephone Number:	



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Relationship to Child/Young Person:	
Address:	
Declaration:	I understand that I must deliver the medicine personally centre staff and accept that this is a service which the Company is not obliged to undertake.
Signature:	
Date:	



APPENDIX 5

Contacting Emergency Services

- Request for an ambulance
- On telephone dial 999, ask for ambulance and be ready with the following information:
 - Your telephone number
 - Give your location – Venue Address
 - Give exact location within the venue
 - Give your name
 - Give name of child and a brief description of child's symptoms
 - Inform Ambulance Control of the best entrance and state that the crew will be met and taken to child.
- Please speak slowly and clearly and be ready to repeat information, if asked
- A member of the team will accompany the child/young person in the ambulance and will need to have the child's/young person's IHCP available to take to hospital
- As soon as possible the Directors must be informed –
Rebecca Peacock 07388 110895
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