Controlled Medicines Policy

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Person(s) responsible for review and role:

Headteacher: Nadia Ward

Designated Safeguard Lead: Ella Whitbread

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Aim of policy:

The aim of this policy is to set out how the school ensures that controlled medicines are managed safely, lawfully and accountably as part of the School's wider administration of medicines framework. The School will support pupils with medical conditions, including day pupils and EYFS children, while safeguarding and promoting their welfare.

Related Guidance and School Policies

This policy outlines the schools approach to the storage and administration of substances classed as controlled medications but is not exhaustive in its scope and should be used in conjunction with the following policies, statutory guidance and advice:

Policies:

- *Safeguarding and Child Protection Policy*
- *Administration of Medicines Policy*
- *Attendance Policy*
- *Accessibility Plan*
- *Catering & Food Allergens Policy*
- *Continuous Professional Development Policy*
- *Drug, Alcohol & Tobacco Misuse Policy*
- *Educational Visits & Offsite Activities Policy*
- *First Aid Policy*

- *Health & Safety Policy*
- *Mental Health & Emotional Wellbeing Policy*
- *Parent Code of Conduct*
- *Search & Confiscation Policy*
- *Special Educational Needs & Disabilities Policy*
- *Staff Code of Conduct*
- *Transport Policy*

Statutory & Regulatory Guidance:

- *KCSIE 2026*
- Misuse of Drugs Act 1971
- Misuse of Drugs Regulations 2001
- Misuse of Drugs (Safe Custody) Regulations 1973
- Human Medicines Regulations 2012
- Children and Families Act 2014
- Controlled drugs list
- Supporting pupils with medical conditions at school — Department for Education
- First aid in schools, early years and further education — Department for Education
- Early years foundation stage statutory framework for group and school-based providers — Department for Education
- Data protection in schools — Department for Education
- Safe and secure handling of medicines — Royal College of Pharmacy / Royal Pharmaceutical Society

Controlled Drugs

For the purposes of this policy, "controlled medicines" means medicines that are controlled drugs under the Misuse of Drugs Act 1971 and the Misuse of Drugs Regulations 2001, where those medicines have been lawfully prescribed for an individual pupil and are brought into, stored or administered within the School.

Controlled drugs are subject to additional safeguards because of their potential for misuse, dependence, unauthorised access or diversion, and the School will manage them through enhanced arrangements for:

- Consent
- prescription checking
- secure storage
- witnessed administration and accurate recording
- reconciliation, disposal and incident reporting

The Home Office controlled drugs list identifies the classifications and schedules of commonly encountered controlled drugs, including methylphenidate, as a Schedule 2 controlled drug; other

medicines that may be encountered in school settings include some prescribed medicines used for ADHD, severe pain, epilepsy, anxiety, emergency seizure management or other neurological conditions, depending on the individual prescription and current classification.

The fact that a medicine is a controlled drug does not remove the School's duty to support a pupil with a medical condition, nor does it permit the School to deny a pupil appropriate access to education. Rather, the School must ensure that the medicine is managed safely, lawfully and proportionately, with clear accountability and with due regard to the pupil's health, dignity, privacy, safeguarding needs and right to participate in school life. Where there is uncertainty as to whether a medicine is a controlled drug, the School will check the prescription label, consult the parent and, where necessary, seek advice from a pharmacist, prescriber, school nurse or other appropriate healthcare professional before accepting or administering the medicine.

Secure Storage

Controlled medicines must be stored securely at all times, they may only be out of secure storage when they are being:

- received
- checked
- administered
- reconciled
- returned
- disposed of or otherwise handled by authorised staff in accordance with this policy

DfE guidance states that schools should keep controlled drugs prescribed for a pupil securely stored in a non-portable container, with access limited to named staff, while also ensuring that controlled drugs remain accessible in an emergency. A such the School will normally store controlled medicines in a locked, non-portable container, such as a fixed safe or metal controlled drugs cabinet, located within a locked medical room, medical cupboard, or other approved secure room. Access is restricted to named, trained and authorised members of staff, and keys or access codes are held securely. These are also never left unattended or accessible to pupils, visitors, contractors or unauthorised staff.

The storage arrangements must be appropriate to:

- the medicine
- the age and needs of the pupil
- the level of risk
- the frequency of administration
- any specific storage instructions on the prescription label such as keeping refrigerated

The School will not store controlled medicines with general first aid supplies, staff medicines, money, valuables or unrelated items. Where a controlled medicine requires refrigeration, it must be stored in a locked medicines refrigerator or in a clearly segregated locked container within a locked medicines refrigerator, with access restricted to authorised staff and with arrangements documented in the

pupil's Individual Healthcare Plan or medication plan. Storage arrangements will be reviewed after any discrepancy, incident, change in prescription, change in location, off-site activity or concern about security, misuse or diversion.

Controlled Medications Register

The School will maintain a Controlled Drugs Register for all controlled medicines managed under this policy. The purpose of the register is to allow for a clear audit trail for each controlled medicine held by the School and must record the:

- receipt
- administration
- refusal
- omission
- movement
- return
- disposal
- reconciliation and current running balance of the medicine.

Each entry in the Controlled Drugs Register must be made as soon as reasonably practicable and, wherever possible, at the time of the transaction. The entry must record:

- the date and time
- the pupil's name
- the name, form and strength of the medicine
- the quantity received, administered, returned or otherwise accounted for
- the remaining balance with the reason for any non-administration
- the name and signature or secure electronic authentication of the member of staff making the entry, and the name and signature or authentication of the second member of staff witnessing the transaction

Corrections must be made by a dated, signed amendment that leaves the original entry legible; entries must not be erased, obscured, overwritten or removed. The Controlled Drugs Register records must be retained in accordance with the School's records-retention schedule and any applicable legal or regulatory requirements.

Parental Consent & Prescription

The School will only accept a controlled medicine where it has been prescribed for the named pupil, is in date, is provided in the original container as dispensed by a pharmacist, and carries a clear prescription label stating the pupil's name, medicine name, strength, dose, route, frequency, administration instructions and any storage requirements.

Controlled medicines must not be accepted loose, unlabelled, repackaged into another container, supplied for another person, or brought in without sufficient written instructions. Written parental consent must be obtained before the School administers or supervises a controlled medicine, except

where a lawful and clinically appropriate confidentiality or consent issue arises for an older pupil, in which case the matter must be referred to the senior medical lead, DSL and Head or nominated senior leader for case-by-case advice.

For EYFS children, written permission for the particular medicine must be obtained before administration, a written record must be kept each time medicine is administered, and parents or carers must be informed on the same day or as soon as reasonably practicable. Parents are responsible for ensuring that the School receives accurate, up-to-date information, that the medicine supplied matches the prescription and that any change in dose, formulation, timing, side effects or discontinuation is communicated promptly in writing.

Administration

Controlled medicines may only be administered by staff who have been authorised by the School, have received appropriate training and are competent to administer the medicine in accordance with the prescriber's instructions and the pupil's Individual Healthcare Plan or medication plan.

Before administration, staff must check:

- the pupil's identity
- the medicine name
- strength, formulation, route of administration, dose
- timing
- expiry date, prescription label and parental consent,
- any known allergies
- the previous dose recorded and the running balance in the Controlled Drugs Register

Administration should take place in a manner that respects the pupil's privacy, dignity and safeguarding needs, while ensuring that procedures are transparent and accountable. The administration of a controlled medicine must be witnessed by a second trained member of staff.

Both staff members must sign the Controlled Drugs Register immediately after administration, staff should also identify any refusal, spillage, side effect, concern or unusual circumstance.

If a pupil refuses a controlled medicine, staff must not force or coerce the pupil to take it; instead, staff must follow the procedure in the Individual Healthcare Plan, record the refusal, inform parents where appropriate, and seek medical advice if refusal creates a risk to the pupil's health.

Disposal

Controlled medicines that are no longer required, have expired, have been discontinued, have been replaced following a prescription change, or are otherwise unsuitable for administration must be removed from current stock promptly and stored securely pending return or disposal.

The School will normally return unused or expired controlled medicines to the parent or carer so that they can arrange safe disposal through a community pharmacy, unless local arrangements require or permit direct return to a pharmacy by the School. The return or disposal must be recorded in the

Controlled Drugs Register, including the date, pupil's name, medicine name, form and strength, quantity returned or disposed of, running balance, name of the person receiving the medicine, and the signatures of the staff member and witness.

Where disposal is required because a dose has been prepared but not fully administered, or because of spillage, damage or contamination, the incident must be witnessed, recorded immediately, and the remaining balance reconciled. Any suspected tampering, unexplained loss, attempted diversion or discrepancy arising during disposal must be escalated under the lost or stolen controlled medicines procedure and safeguarding procedures. Destruction and disposal arrangements for controlled drugs must be in line with the Misuse of Drugs Regulations 2001 and relevant waste requirements.

Store Checks

The School will reconcile the Controlled Drugs Register against the physical stock of each controlled medicine on a regular basis and at least termly. More frequent checks will be carried out where:

- where the controlled medicine is administered regularly
- where the medicine is high risk
- where more than one authorised location holds controlled medicines
- where there has been a recent prescription change
- or where any concern, discrepancy, safeguarding issue or incident has arisen

Each stock check must compare the physical quantity held with the running balance recorded in the Controlled Drugs Register and must be recorded with the date, time, medicine checked, balance expected, balance found, names and signatures of the staff conducting and witnessing the check, and any action taken.

Any discrepancy, however small, must be treated as significant until resolved. Staff must immediately re-check the register, medication administration records, recent receipts, returns, refusals, omissions, spillages and movements between locations. If the discrepancy cannot be explained promptly and safely, it must be escalated to the senior medical lead, DSL and Head or nominated senior leader, and the lost or stolen controlled medicines procedure must be followed.

Staff Training

Only staff who have received appropriate training and have been authorised by the School may accept, store, administer, witness, record, reconcile, return or otherwise handle controlled medicines.

Training must include:

- the legal and safeguarding significance of controlled medicines
- secure storage and key control
- prescription and consent checks
- administration procedures including the role of the second witness
- completion of the Controlled Drugs Register with:

    - stock reconciliation
    - disposal or return procedures
    - incident escalation,
    - suspected misuse or diversion
- confidentiality and parental communication, and the relationship between the Controlled Medicines Policy and Individual Healthcare Plans.

Training must be refreshed periodically and whenever policy, guidance, legislation, staffing, medicines, or individual pupil needs change. New staff who may have any role in medicines management must receive relevant induction before handling controlled medicines.

The School will keep records of training, competency checks and authorised staff lists, and senior leaders will monitor whether staffing levels, absence cover and out-of-hours arrangements are sufficient to administer controlled medicines safely, this includes consideration to increased staffing to cover ratios in the EYFS due to multiple staff being required to administer the medication.

Lost or Stolen Controlled Medications

Any missing, lost, stolen, tampered-with, unaccounted-for or suspected diverted controlled medicine must be reported immediately to the senior medical lead, DSL and Head or nominated senior leader who will immediately investigate.

1. The medicine storage area must be secured
2. The register and physical stock must be checked by two authorised staff
3. Recent administration and movement records must be reviewed
4. Any immediate risk to the pupil must be assessed, including whether replacement medicine, medical advice or emergency action is required.
5. The incident must be recorded as a medicines incident and, where there is any safeguarding concern, must also be managed under the School's safeguarding procedures.

If theft, attempted theft, unexplained loss, deliberate misuse, unauthorised possession or diversion is suspected, the School will report the matter to the police and will follow any advice from police, local safeguarding partners, healthcare professionals, the regional NHS England controlled drugs accountable officer or CD reporting arrangements.

The Home Office provides a notification route for thefts or unaccounted losses of controlled drugs to the Drugs and Firearms Licensing Unit, and Home Office SOP guidance expects procedures to cover theft, loss, adverse incident reporting, investigation and remediation. Parents will normally be informed unless doing so would compromise a safeguarding investigation or police inquiry, and the School will review storage, access, staff practice, pupil risk assessment and training after any such incident.

Self-Administration

A pupil may self-administer but not self-possess a controlled medicine only where this is lawful, clinically appropriate and supported by an individual risk assessment. In any case this should still be

supervised by two members of staff who check and approve the dosage after having completed the checks required by this policy. DfE guidance states that a child prescribed a controlled drug may legally have it in their possession if competent to do so, but passing it to another child for use is an offence and monitoring arrangements may be necessary.

The School will therefore only permit self-administration of a controlled medicine where the pupil is sufficiently mature and responsible, where parents and relevant healthcare professionals have been consulted where appropriate and have written agreement, and where the arrangement is documented in the Individual Healthcare Plan or medication plan.

Self-administration arrangements must specify where the medicine will be stored, how access will be controlled, how doses will be recorded, how stock will be reconciled, what supervision is required, and what will happen if the pupil fails to follow the agreed arrangements. Controlled medicines will continue to be stored securely by the School and accessed by the pupil only under staff supervision. Self-possession is not normally appropriate for younger pupils or EYFS children. Any evidence of sharing, attempted sharing, loss, misuse, non-compliance, coercion, bullying, pressure from peers or unsafe storage will lead to immediate review and may result in withdrawal of self-administration arrangements.

Individual Health Care Plans

Any pupil who requires a controlled medicine during the school day, on school transport, during trips or in EYFS provision will normally have an Individual Healthcare Plan or equivalent medication plan.

The plan must identify:

- the pupil's medical condition
- the prescribed controlled medicine
- dose, route, timing and possible side effects
- storage requirements
- arrangements for administration or self-administration
- staff training requirements and emergency procedures
- parental communication arrangements
- arrangements for school trips and any safeguards needed to prevent misuse or diversion.

The Individual Healthcare Plan must be developed in partnership with parents, the pupil where appropriate, relevant healthcare professionals and School staff, and must be reviewed at least annually or earlier if the pupil's needs, prescription, risk assessment, or self-administration arrangements change.

Where a pupil has an Education, Health and Care Plan, the Individual Healthcare Plan should be linked to or form part of the wider planning for the pupil's needs where appropriate. For EYFS children it must align with EYFS requirements for written permission, staff training, records and same-day parental notification.

The School remains responsible for ensuring that the plan is finalised, implemented, monitored and reviewed, and senior leaders must ensure that relevant staff are aware of the plan while preserving the pupil's confidentiality.