EMPOWERING FUTURES ALTERNATIVE PROVISION

MEDICATION MANAGEMENT POLICY

Issue Date: December 2025

Next Review: December 2026

Approved by: Director, Empowering Futures Alternative Provision

1. POLICY STATEMENT

Empowering Futures Alternative Provision (EFAP) is committed to safeguarding the health, safety and wellbeing of all children, young people and adult learners who attend our provision.

We recognise that some learners may require medication during the day to support:

- · Chronic medical conditions
- · Emergency treatment
- Mental health needs
- Short-term illness
- Disabilities and long-term health management
- Vocational activity safety (e.g., asthma during sports)

This policy sets out how EFAP manages, administers, stores and records medication to ensure the highest standards of safety and compliance.

EFAP follows:

- Children and Families Act 2014 (where relevant)
- DfE "Supporting Pupils with Medical Conditions" (for AP learners)
- · Health and Safety at Work Act 1974
- Equality Act 2010
- Mental Capacity Act 2005 (for adults)
- · Local Authority commissioning requirements
- · Awarding body expectations
- · Ofsted requirements for learner safety

2. SCOPE

This policy applies to:

- All learners aged 11-18 in AP
- All adult learners (18+) accessing out-of-hours provision
- All staff, tutors, assessors, support workers, managers
- · Contractors working directly with learners
- · On-site, off-site, and online delivery

This includes:

- · Prescribed medication
- Emergency medication
- Controlled drugs
- Self-administered medication
- Medication linked to vocational activity (e.g., asthma inhalers for sports)
- Mental health medication
- Temporary medication (e.g., antibiotics requiring afternoon dose)

3. ROLES & RESPONSIBILITIES

Director

- Overall responsibility for medication governance
- · Ensures policy compliance and staff training

Designated Medication Lead (DML)

Often the Manager/Deputy DSL.

Responsible for:

- Overseeing medication plans
- · Ensuring safe storage
- Recording administration
- Monitoring expiry dates
- Coordinating with parents/carers, LAs and health professionals

Staff Authorised to Administer Medication

Must be:

- Trained
- Recorded on EFAP's authorised list
- Competent and confident before administering any medication

Staff must NEVER administer medication unless authorised and trained.

Parents/Carers (for learners under 18)

- Provide written consent
- · Supply medication in original packaging
- Share accurate and up-to-date information
- Replace expired or depleted medication

Adult Learners

- Must provide their own medication information and consent
- May self-administer if safe and risk assessed
- Must inform staff of changes to medication

Learners

- Expected to follow their health plan
- · Must hand over medication upon arrival unless agreed otherwise

4. TYPES OF MEDICATION EFAP MANAGES

4.1 Short-Term Medication

For temporary illness requiring doses during the day.

4.2 Long-Term / Emergency Medication

Examples:

- Inhalers
- EpiPens
- Anti-seizure medication
- Diabetes management medication

4.3 Controlled Drugs

EFAP will store and record controlled drugs in line with statutory requirements and strict double-signature checks.

4.4 Self-Administered Medication

Permitted only when:

- · Learner is competent
- Risk assessment completed
- · Parent/carer or adult learner has given consent
- Staff supervise where required

5. INDIVIDUAL HEALTHCARE & MEDICATION PLANS

Required for:

- Long-term medical conditions
- · Emergency medication
- Significant health risks
- · Any condition that affects learning or behaviour
- · Conditions impacting vocational activity safety

Plans include:

- Diagnosis
- Medication required
- Dosage and timing
- · Emergency protocol
- · Roles and responsibilities
- Storage requirements
- · Parent/carer and professional input
- Risk assessments (especially for practical activities)

Reviewed:

- · At least annually
- After medical change
- · After an incident

6. MEDICATION STORAGE

EFAP ensures:

- · Medication is stored securely in a locked cabinet
- Controlled drugs are stored in a separate, compliant controlled-drug cabinet
- · Keys held by authorised staff only
- Fridge-stored medication kept in a secure medical fridge
- Emergency medication remains unlocked but supervised for immediate access (e.g.,

inhalers, EpiPens)

• No medication left in bags or pockets unless risk assessed

Clear signage and accountability logs must be maintained.

7. ADMINISTRATION OF MEDICATION

Medication may only be administered when:

- Written consent is provided
- · Medication is in original packaging
- · Dosing instructions match the consent form
- · Medication is within expiry date
- Two trained staff members check:
- Right learner
- Right medication
- Right dose
- Right time
- Right method

Recording Administration

Staff must record:

- Date
- Time
- Dosage
- · Staff administering & witnessing
- · Any issues or side effects

A copy is shared with parents/carers or adult learners when relevant.

8. EMERGENCY MEDICATION

Examples include:

- EpiPens
- Inhalers
- Rescue medication for epilepsy
- Medication needed during a severe allergic reaction or asthma attack

EFAP ensures:

- Emergency medication is always accessible
- · Staff are trained in use
- Health plans clearly state triggers & procedures
- Emergency services called immediately when needed
- · Parents/carers and LA notified following an incident

No learner will ever be denied emergency treatment.

9. MEDICATION DURING VOCATIONAL ACTIVITIES

Beauty, Nails & Hair

Some chemical fumes may affect asthma or respiratory conditions. Risk assessments must include:

- · Access to inhalers
- · Monitoring for symptoms
- Ventilation control

Sports & Fitness

Medication must be immediately accessible for:

- Asthma
- Diabetes
- Epilepsy
- Anaphylaxis

Learners with medical needs must not participate until medication is available.

Off-Site Activities

The tutor must carry:

- · Medication in labelled bags
- · A copy of the health plan
- Emergency contact details

10. SELF-MEDICATION SAFETY

EFAP permits self-medication when:

- Learner is competent
- Risk assessed
- Written consent obtained (for U18s)
- · Staff monitor or supervise if needed

Learners must NOT:

- Share medication
- · Store medication unsafely
- · Change doses without instruction
- · Bring non-authorised medication onsite

11. REFUSAL OF MEDICATION

If a learner refuses medication:

- Staff cannot force administration
- Record refusal
- Inform parents/carers immediately (for U18s)
- Monitor learner for symptoms
- Follow health plan instructions

Refusal may result in contacting emergency services where necessary.

12. MEDICATION ERRORS

If incorrect dosage or medication is given:

- 1. Seek medical advice immediately
- 2. Inform the Director and DSL
- 3. Notify parent/carer or adult learner
- 4. Complete incident form
- 5. Review risk assessments
- 6. Implement corrective actions

13. DISPOSAL OF MEDICATION

EFAP will:

- Return medication to parents/carers or adult learners at the end of treatment
- Safely dispose of expired medication using a pharmacy
- · Document disposal with signatures

Staff must never dispose of medication in general waste.

14. TRAINING FOR STAFF

Authorised staff must complete:

- · Medication administration training
- Emergency medication training
- Training for specific conditions (diabetes, epilepsy, anaphylaxis)
- Annual refreshers
- Awareness of mental health medication impacts
- Vocational-specific medical risk training (beauty/sports)

Training records stored centrally.

15. CONFIDENTIALITY & DATA PROTECTION

All medication records are:

- Confidential
- Stored securely
- Compliant with Data Protection Policy
- · Shared only with relevant staff
- · Available to LAs, Ofsted or awarding bodies during audits

Medical information forms part of safeguarding documentation.

16. AUDIT & QUALITY ASSURANCE

EFAP performs:

- Monthly medication storage checks
- · Expiry date audits
- Termly medication process reviews
- Annual policy review
- · Incident analysis to improve practice

Awarding bodies may request evidence of compliance.

17. POLICY REVIEW

This policy will be reviewed:

- Annually
- · After any serious incident
- · When legislation changes
- Following LA or awarding body feedback

Approved by:

Rhean White - Director & Designated Safeguarding Lead

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