

Administration of Medication Policy 2026-27

1. Policy Statement

- 1.1 This policy aims to ensure the safety and well-being of our students who require support to administer their medication. City of Bristol College recognises its duty and responsibility to ensure the welfare and safeguarding needs of students and vulnerable adults in receipt of support interventions, and to provide a service that promotes a safe and secure environment for both staff and students in accordance with the Equalities Act 2010 and Benedict's Law 2026.
- 1.2 The intention of all medication administered is to achieve the maximum benefit, and in such a way that the risks involved in the administration system are reduced to a minimum. All trained staff will administer medication with due regard to the 'Procedure for the Administration of Medication'. Only staff who have completed their administration of medication training can administer medication, except for students who require administration of an EpiPen due to allergy/anaphylaxis as per Benedict's Law 2026.

2. Scope of Policy

2.1 This Administration of Medication Policy has been developed to assist students who are unable to safely manage their own medication.

2.2 This policy covers the following:

- Introduction of Benedict's Law, 2026 and required duties
- Consideration of administration of medication for students requiring support and students who are independent
- Medication and safeguarding considerations
- Safe systems of work
- Safe storage of medications
- Coding for medication administration record

3 Definitions

3.1 City of Bristol College is committed to the Equality Act 2010 and the protective characteristics that this Act covers. Benedict's Law 2026 to improve allergy awareness, prevention, and emergency response.

- CoBC – City of Bristol College
- MAR – Medication Administration Record
- GP – General Practitioner
- NHS – National Health Service
- PRN – Pro re Nata (as and when as stipulated in medical guidance)
- Schools – this also applies to college

Medication Administration Coding:

- R – Refused
- T – Taken
- NT – Not taken

- S – Spat out
- ADM – Administered by
- WT – Witnessed by
- C – Hospitalised
- D – Social leave
- E – Refused and destroyed
- P – Prompted
- NR – Not required
- M – Made available

4 Responsibilities

4.1 This policy is written for all Colleagues within College and reviewed annually by the Head of Additional Learning Support, Head of Health and Safety and the Senior Leadership Team. It is available to all College stakeholders.

4.2 All College stakeholders are responsible for implementing this policy and the accountability and monitoring of the achievement of the aims of this policy lie with Head of Additional Learning Support in conjunction with all members of the College Management and Senior Leadership teams.

5 Policy

5.1. Introduction of Benedict's Law, 2026 and required duties

Benedict's Law forms the new statutory guidance on allergy safety within Schools. City of Bristol College is committed to the Allergy Safety in Schools 2026, issued by DFE, July 2026, Section 34 of the Children's Wellbeing and School act 2026 and the protective characteristics that this Act covers.

City of Bristol College have a duty to ensure that all students and employees are aware of specific allergies and how to respond to these. The Health and Safety team, alongside named First Aiders have the responsibility to ensure that all spare adrenaline auto-injectors, also known as EpiPens are fully stocked and in date. For this policy these are referred to as EpiPens.

5.2 Students can disclose medical information/needs during the enrolment process and at any point during the academic year by contacting their course tutor. A specific risk assessment to capture an allergy action plan will be created and shared through Pro-Monitor with the students teaching and support teams. Curriculum staff will have responsibility to consider allergies through robust risk assessment and minimisation for classroom, vocationally based and offsite activities. Risk assessments contain consideration of handling allergen cross contamination risks in commercial training environments (such as hair dye chemicals, cosmetic oils or instructional food preparation).

5.3 City of Bristol College is committed to providing high-quality training and development opportunities for all teaching and support staff. This includes training on allergy awareness and anaphylaxis to ensure staff have the knowledge, skills to spot symptoms of allergic reactions and understanding to effectively support learners with medical needs.

5.4 An emergency supply (non-prescription) spare of EpiPens will be easily accessible from Student Services. All first aiders and key named staff will be responsible for administering emergency EpiPens. All staff will implement key steps to support a student who is experiencing an allergic reaction or anaphylaxis – see **Appendix 1**.

5.5 City of Bristol College have clear procedures in place for all staff to report incidents including near misses, administration of emergency medication and where emergency services have been contacted. A review of the students' individual risk assessment and other associated classroom, vocational and offsite activities risk assessments will take place following an allergic reaction and/or anaphylaxis incident.

6 Medication and Safeguarding Considerations

6.1 Safeguarding and medication, KCSIE 2026 provides additional clarity involving the management of a child's /young person's medical condition or allergy. These would not automatically require a safeguarding referral. However, it may become a safeguarding issue if it suggests the child/young person is at risk of neglect, abuse, or exploitation. Examples include:

- Parents repeatedly failing to provide essential medication.
- Important medical information being withheld from the college.

6.2 Patterns of behaviour that place the child/young person at risk because of their medical condition. Staff must report any such concerns immediately to the DSL in accordance with the Safeguarding Policy. Medication incidents and safeguarding concerns should be recorded separately where appropriate. A medication error will not automatically constitute a safeguarding concern; however, repeated issues, patterns of neglect, or circumstances that place a child at risk will be considered through safeguarding procedures.

7 Safe Systems of work

7.1 Prescriptions Medication will be prescribed by a qualified health professional for a named individual and dispensed accordingly. The medication must only be used for the student for whom it is prescribed. For prescribed medication that is not received in a Dossett box on site must be in prescribed packs/bottles and match the numbers of tablets or amount of liquids/creams as stated on the dispensing chemist's label.

7.2 Medication brought in Dossett boxes must be accompanied with the prescription box which clearly states the students name who the medication is prescribed to and the prescription information leaflet.

7.3 Tablets must not be split (i.e. a 10mg tablet cannot be split in two, to administer a 5mg dose) and sachets or powdered medication cannot be part mixed and administered. The whole sachet or prescribed amount must be administered.

7.4 Non-prescription (Homely remedies)

Homely remedies are used for the treatment of minor ailments without immediate consultation with the medical practitioner. Students in consultation with their parents/carers should agree a suitable list of remedies with their GP providing medical cover for the young adult. This applies equally for non-prescription medicines. Manufacturers' directions must be adhered to, with particular attention to the stated maximum dosage over a specified time and should not be used for more than 24hrs without consultation with a GP.

7.5 Ordering

Each College site will have a recording/checking system to ascertain when they will require a repeat prescription. It is the responsibility of the Learning Support Team Leader or nominated other in their absence, to ensure an adequate supply is on site at all times.

7.6 Deliveries

On receipt of medication, staff should complete the 'Medication received/returned log' for accurately recording the supply of medication accepted and held on site. Medication Administration (MAR) charts will include details of medicine receipt/disposal and should be cross referenced to the Medication received/returned log. All medicines should be checked to ensure that they are prescribed and in date.

7.7 Storage

All medication will be stored in designated medicine cabinets located within the Additional Learning Support base room at each of CoBC's centres, with the exception of students who are accessing our Independence Training Facilities – these will be situated within the student's bedroom. This storage space will contain both prescription and non-prescription medications. The designated place must be maintained at a temperature appropriate for the purpose.

Where necessary, certain medications such as inhalers, epi-pens and glucose replacements should be readily available and kept in a safe place close to the student as guided by the student's medical risk assessment. Such medications should always go with and be available to the student during off site activities. A separate secure and dedicated refrigerator should be available to be used exclusively for the storage of medicines requiring cold storage.

7.8 Medication Cabinet Keys

Key security is integral to the safe storage of the medicines; therefore, access is to be restricted to authorised members of staff who are responsible for ensuring medication cabinets are securely locked and keys removed after use. Never leave the key in a medicine cabinet when it is unattended.

7.9 Disposal

A complete record of medicines going out of the college for disposal should be recorded. The normal method for disposing of medicines should be by returning the medicine to the students/parents/carers who should then return them to the pharmacist. Medication that is not collected by students/parents/carers will be disposed of by taking to the nearest pharmacy and a receipt obtained. A copy of the receipt will be stored within the students Pro Monitor record and the receipt sent home.

Staff must ensure the Medication received/returned log and MAR form are completed to reflect any medication sent home. (NB. following the death of a student, the medicines should be retained for seven days, in case the Coroner's Office requires them).

7.10 Crushing

Some students may be unable to swallow their tablets or capsules whole. In these situations, staff will seek advice & guidance from the authorised prescriber or pharmacist.

7.11 Wastage - Spitting out/vomiting shortly after administration

If a student has spat out their medication advice/guidance should be sought from a medical professional i.e.: for non-rescue medication contact 111 who will then triage as necessary, and for rescue medication call 999, this is also guided by the student's risk assessment. Such occurrences must be noted on the MAR form using the relevant key code (S).

7.12 Dropping/Spilling medication

This medication should be considered contaminated and disposed of in accordance with this policy. Such occurrences must be noted on the MAR form using the relevant key code (E).

7.13 Self-Administration of Medicine

City of Bristol College welcomes and supports the self-administration of medicines wherever it is appropriate and noted, where appropriate for students in receipt of additional support in their plan. Where students are in receipt of additional support and able to self-administer medication, a risk assessment should be completed by designated members of staff within Additional Learning Support and Independent Training Facilities Teams, agreed and placed in their student record. In both teams the risk assessments are reviewed and agreed by the Line Manager.

7.14 Administration of Medicines Away from the College

Relevant medication and the MAR chart MUST accompany the student when any outing or appointment coincides with the time for medication to be administered. All medication taken off the college premises must be logged on the 'Medication taken off premises' form located in the student's medication file. Where the student is off site with 1 member of staff, then it is acceptable for that staff member to administer the medication subject to them having completed relevant training without a counter-signatory. If a student is admitted to hospital, it is the responsibility of nursing personnel to administer medication.

7.15 Refusal to take medication

If a student refuses to take their medication, this must be noted on the MAR form and advice sought from their GP or 111. If the student refuses on a regular basis to administer their medication, then a referral to Safeguarding will be completed with further liaison with parent/carers for students over the age of 18, permission to share information will be sought and relevant medical professionals to establish a way forward.

7.16 Administration and storage of controlled drugs

A controlled drug means any drug which is subject to control under the Misuse of Drugs Legislation (Home Office 1998). All controlled drugs must be signed onto the premises using the Controlled Drug Record Book. Controlled Drug (CD) must have a CD cabinet complying with the requirements laid out below:

1. Drugs requiring safe custody should be stored under lock and key in a cabinet/safe
2. The locked cabinet/safe should be made of metal, with suitable hinges, fixed to a wall or the floor with rag bolts (these bolts should not be accessible from outside the cabinet)
3. The walls of the room should be constructed to a suitable thickness using suitable materials

8 Commitment to Staff Development

8.1 City of Bristol College is committed to providing high-quality training and development opportunities for all teaching and support staff. This includes training on anaphylaxis and allergy awareness to ensure staff have the knowledge, skills, and understanding to effectively support learners with medical needs. We will offer training on a wide range of topics such as:

- Medication administration (as necessary)
- First aid at work
- Epilepsy awareness
- Anaphylaxis awareness
- Working effectively with learners who have complex needs

8.2 In addition to our internal training provision, we recognise the value of staying up to date with developments. Where possible, we will support colleagues to attend appropriate external training opportunities offered by relevant organisations and to share their learning with colleagues. This commitment to continuous professional development ensures our colleagues access to the most up-to-date knowledge and best practices to benefit all our learners.

9 Linked policies/procedures and consideration of regulatory/legislation guidance

- ABC - Positive Attendance, Behaviour and Commitment to study policy
- Fitness to Study Policy
- Admissions Policy
- Safeguarding Policy and Procedures, including KCSIE 2026
- SEND – Special Educational Needs and Disabilities Policy
- Personal Care Policy
- Equity, Equality, Inclusion and Diversity Policy
- Health and Safety Policy
- Travel Training Policy

Regulatory / Legislation Guidance

- Children and Families Act 2014
- SEND Code of Practice, 2015
- Guidance on Equality Act 2010, issued by DfE, March 2018
- Keeping Children Safe in Education guidance
- Benedict's Law 2026
- Allergy Safety in Schools 2026, issued by DFE, July 2026
- Section 34 of the Children's Wellbeing and School act 2026
- Equalities Act 2010
- Human Rights Act 1998
- Misuse of Drugs Legislation (Home Office 1998)
- Health & Safety at Work Act 1974
- The Health and Safety (First-Aid) Regulations 1981 as amended 2013.

Approved by	SLT
Date of Approval	August 2026
Date to Review	August 2029
Lead officer	Head of Additional Learning Support Head of Health and Safety
Senior Management Responsible	Director of Student Experience, Quality and Safeguarding

Appendix 1



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Be Allergy Aware & Save a Life

Anaphylaxis is a serious and life-threatening reaction to allergens such as food, insect stings, medication and latex.

Recognise the **ABC symptoms** and act quickly - you could save a life.

WHAT TO LOOK FOR

A AIRWAY

- Swelling in throat, tongue or upper airways
- Vocal changes (hoarse voice)
- Difficulty swallowing

B BREATHING

- Sudden onset wheezing
- Breathing difficulty
- Noisy breathing
- Persistent cough

C CIRCULATION

- Dizziness or feeling faint
- Sudden sleepiness, confusion
- Pale clammy skin
- Loss of consciousness or collapse

These severe symptoms may occur alongside milder skin, mucosal or gut symptoms.

Anaphylaxis may occur without skin symptoms (e.g. hives or swelling).

WHAT TO DO

Lay the person flat and raise their legs - do **NOT** allow them to stand or walk anywhere.

- ! If unconscious, place them in the recovery position
- ! If breathing is difficult, allow them to sit up supported

Administer adrenaline without delay (use prescribed AAI or intranasal EURneffy) Refer to device label for instructions.

Phone 999 and tell them the person is suffering from **ana-fil-ax-is**

If symptoms don't improve after five minutes, or symptoms get worse, a second dose of adrenaline can be given

Medical observation in hospital is recommended after anaphylaxis.



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A brighter future for people with serious allergies