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*We provide children with a well rounded education in a safe, nurturing, inclusive environment,
where everyone feels happy and respected, facilitating all to reach their full potential.*

Administration of Medication Policy

St. Comán's Wood Primary School

1. Introduction

This Administration of Medication Policy was developed through a collaborative school process and ratified by the Board of Management ("the Board") of St. Comán's Wood Primary School in October 2017. It was reviewed in September 2026.

2. Rationale

This policy is intended to:

- clarify areas of responsibility;
- provide clear guidance on when medicines may or may not be administered at school;
- explain the limits of the responsibilities that may be accepted by teachers and other school staff;
- set out arrangements for pupils with allergies and other medical needs;
- safeguard pupils and staff involved in the administration of medication; and
- reduce avoidable health, safety and legal risks.

3. Relationship to the School Ethos

The school promotes positive home–school relationships in relation to pupils' welfare and all aspects of school life. This policy supports the school's ethos by providing a safe, secure and caring environment and by encouraging clear communication between the school and parents/guardians.

4. Aims

The aims of this policy are to:

- minimise health risks to pupils and staff on school premises and during school activities;
- support the Board in meeting its health and safety responsibilities; and
- provide a clear framework for emergency medication and for regular medication arrangements agreed among the Board, parents/guardians and authorised staff.

Chairperson: Mrs. Marie Doorly

Principal: Dr. Úna Feeley

5. Definitions and General Principles

For this policy:

- **Medication** means a medicine prescribed for an individual pupil, unless this policy expressly states otherwise.
- **Authorised staff member** means a teacher or Special Needs Assistant (SNA) who has voluntarily agreed to administer or supervise medication, has been authorised by the Board, and has received the information and training required for the pupil's individual healthcare plan.
- **Individual healthcare plan** means the pupil-specific written instructions agreed by the school and parents/guardians and, where appropriate, supplied or approved by the pupil's treating healthcare professional.

No teacher or SNA may be required to administer medication to a pupil. A staff member who volunteers to do so must act only within the written arrangement authorised by the Board and the pupil's individual healthcare plan.

6. Parent/Guardian Responsibilities

Parents/guardians must:

1. notify the Principal and Board in writing of any medical condition that may affect their child during the school day or a school activity;
2. complete the relevant forms and provide clear, current written instructions, including the circumstances in which medication is to be given;
3. provide medication in its original labelled container, showing the pupil's name, medicine, dose and directions, unless the Board has approved another documented arrangement;
4. ensure that all medication and devices supplied are in date, correctly labelled and replenished before expiry or use;
5. notify the school promptly, in writing, of any change to medication, dosage, device, medical condition, contact details or emergency instructions;
6. collect expired, discontinued or surplus medication promptly;
7. ensure that the school receives an updated plan and authorisation at the start of each school year and whenever circumstances change; and
8. arrange, where reasonably possible, for medication to be administered outside school hours.

The school cannot safely implement an arrangement that has not been disclosed and documented. This does not, by itself, create a personal obligation for any individual teacher or SNA to administer medication.

7. Request and Authorisation Process

1. A parent/guardian must submit a written request to the Board for medication to be administered or supervised in school.
2. The request must include all relevant details and written instructions. For emergency or specialist medication, the school should also receive the pupil's current clinician-approved action plan.
3. The Board will decide whether the proposed arrangement can be implemented safely and will identify any authorised staff members.
4. Medication may be brought to school only by a parent/guardian or another adult designated in writing by the parent/guardian, unless the Board has approved a pupil self-carry arrangement.
5. The Principal will ensure that authorised staff can access the current instructions and know the location of the medication.
6. The school will inform its insurer of arrangements where required.
7. Relevant correspondence and records will be retained securely by the school.

Substitute Staff: Where a pupil requires prescribed medication during the school day, the class teacher will ensure that the neighbouring class teacher and the designated Assistant Principal (AP) are aware of the pupil's approved medication arrangements, subject to appropriate confidentiality. In the event of a planned absence, the class teacher and designated AP will ensure that suitable cover arrangements are in place to protect the pupil's health and safety. For an unexpected absence, the pupil's current medication procedure will be clearly identified at the front of the substitute folder prepared by each class teacher. Access to this information will be limited to relevant staff. A substitute teacher must not administer medication unless specifically authorised, appropriately briefed and, where necessary, trained. An AP appointed by the Board of Management is responsible for alerting relevant staff and ensuring that current information and procedures are stored securely and are accessible to authorised staff at both the Junior and Senior sites.

8. Administration and Self-Administration

Medication should be self-administered where this is safe, age-appropriate and agreed in writing. An authorised adult may supervise self-administration where the individual healthcare plan requires it.

Where an authorised staff member administers medication:

- the pupil's identity, medicine, dose, time, route and written instructions must be checked;
- the medication must be given exactly as documented;
- a contemporaneous record must be completed; and
- any error, refusal, vomiting/spillage, adverse reaction or omitted dose must be managed and reported in accordance with the individual plan and the school's incident procedure.

9. Storage and Access

Medication must be stored securely, in accordance with the manufacturer's instructions and the pupil's individual healthcare plan, while remaining readily accessible in an emergency. Emergency medication must not be locked away or otherwise made inaccessible to the staff expected to use it. Some prescribed medication is required to be kept in the fridge. A fridge is available in the staff room on both sites.

Pupils may not keep medication in bags, coats or pockets unless an individual self-carry arrangement has been risk-assessed and approved in writing. The Principal must agree arrangements for medication that requires refrigeration, classroom storage, transport between the Abbey and Convent sites, or use on off-site activities.

10. Non-Prescribed Medicines

Non-prescribed medicines will not be stored or administered by the school unless the Board adopts a specific, legally and clinically reviewed exception procedure.

11. Long-Term and Life-Threatening Conditions

For a pupil with a long-term or potentially life-threatening condition, parents/guardians and the school must agree on a clear individual healthcare plan. The plan must address, as applicable:

- the pupil's usual care and ability to self-administer;
- early warning signs and emergency symptoms;
- exact instructions for medication and emergency action;
- when and how to contact emergency services and parents/guardians;
- storage, access and off-site arrangements;
- staff training and cover;

- consent and authorisation; and
- review dates.

The plan must be available to relevant staff while respecting the pupil's privacy.

12. Allergy and Anaphylaxis

12.1 Prevention and inclusion

The school will use reasonable, proportionate measures to reduce known allergen exposure without creating a false guarantee that the school is allergen-free. Measures may include:

1. not sharing lunches, treats, drinks, utensils or food;
2. teaching pupils to accept food only in accordance with their parent/guardian's instructions;
3. informing relevant staff and, where appropriate and with due regard to privacy, relevant families about agreed risk-reduction measures;
4. checking arrangements for classroom activities, celebrations, catering, trips and transport; and
5. ensuring that prescribed emergency medication and the pupil's action plan accompany the pupil on off-site activities.

12.2 Emergency response

Staff must follow the pupil's current Allergy/Anaphylaxis Action Plan and the instructions for the pupil's prescribed adrenaline auto-injector (AAI).

If anaphylaxis is suspected:

1. administer the pupil's AAI promptly in accordance with the individual action plan and device instructions;
2. call 112 or 999 immediately, state that anaphylaxis is suspected, and follow the call handler's instructions;
3. contact the pupil's parents/guardians;
4. continue to monitor the pupil and follow the individual plan, including any instruction about positioning or a second prescribed AAI; and
5. ensure that the pupil receives emergency medical assessment, even if symptoms improve.

Antihistamines may be used only when and as specified in the pupil's written plan. They must not delay adrenaline or the emergency call when anaphylaxis is suspected.

12.3 Possible indicators

Possible signs of anaphylaxis can include sudden breathing difficulty, wheeze, persistent cough, throat tightness or swelling, difficulty speaking or swallowing, dizziness, collapse, altered responsiveness, and other symptoms specified in the pupil's action plan. Skin signs may be present but should not be treated as essential for recognising anaphylaxis.

13. Training

Only appropriately authorised and briefed staff should undertake medication duties. Training must be appropriate to the medication, device, pupil and role; refreshed at intervals advised by the trainer or when the plan/device changes; and documented in a separate training record.

14. Emergencies

In an emergency, staff should take reasonable and proportionate action to prevent serious harm, follow the pupil's individual healthcare plan where available, obtain qualified medical assistance at the earliest opportunity, and contact parents/guardians.

Emergency services should normally determine the appropriate transport for a seriously unwell pupil. If no ambulance or qualified medical assistance is available and immediate transport is considered necessary, the Principal or person in charge must follow the school's emergency transport and safeguarding procedure.

The school will maintain current parent/guardian and emergency contact details. Parents/guardians must notify the school promptly of any change; the school will also request confirmation at least annually.

15. Off-Site Activities

Before a pupil with medication needs attends a tour, match, athletic event or other off-site activity, the staff member in charge must confirm that:

- the current medication and action plan will accompany the pupil;
- an authorised person is available where required;
- storage and access arrangements remain suitable;
- emergency and parent/guardian contact details are available; and
- the venue, transport and supervision arrangements have been considered in the activity risk assessment.

16. First-Aid Supplies

A suitable first-aid kit will be kept in each designated location and taken on off-site activities. A named staff member at each site—the Abbey site and the Convent site—will check and replenish supplies according to a documented schedule.

17. Illness During the School Day

Parents/guardians should keep a child at home when the child is too unwell to participate safely in the normal school day or when attendance would conflict with applicable public-health guidance. If a pupil becomes unwell at school, staff will follow the school's illness and parent-contact procedures.

18. Records, Confidentiality and Data Protection

The school will keep medication requests, healthcare plans, consent/indemnity forms, administration records and relevant correspondence securely in the child's file in the locked cabinet in each classroom. Access will be limited to those who need the information to protect the pupil's health and safety. Relevant staff must nevertheless be able to access emergency information promptly.

19. Roles and Responsibilities

The Board has overall responsibility for approving, implementing and monitoring this policy. The Principal manages day-to-day procedures, supported by authorised staff. A designated staff member at each school site is responsible for checking and replenishing first-aid supplies. Parents/guardians retain primary responsibility for their child's medication and for providing accurate information, consent, current medication

and updated instructions.

20. Success Criteria

The policy will be evaluated by reference to:

- compliance with applicable health, safety and data-protection requirements;
- clear, consistently followed pupil-specific arrangements;
- safe and timely access to medication;
- complete administration and incident records;
- current staff training and parent/guardian information; and
- feedback from pupils, parents/guardians and staff.

21. Ratification and Review

Original ratification: October 2017

Previous review: September 2025

Revised policy approved: October 2025

Next scheduled review: October 2026 and yearly after that.

The policy will also be reviewed after a relevant incident or near miss; when a pupil with significant new medical needs enrolls; when relevant guidance changes; or when operational experience shows that an amendment is required.

Signed: _____
Chairperson, Board of Management

Date: _____

Appendix 1 — Medical Condition and Request for Administration/Supervision of Medication

Pupil details

- Pupil's name: _____
- Date of birth: _____
- Address: _____
- Class/teacher: _____
- Medical condition: _____

Emergency contacts

1. Name: _____ Relationship: _____ Phone: _____
2. Name: _____ Relationship: _____ Phone: _____
3. Name: _____ Relationship: _____ Phone: _____

Healthcare professional

- Name/role: _____
- Telephone: _____

Medication details

- Medicine and formulation: _____
- Prescribed dose: _____
- Route: _____
- Time/circumstances for administration: _____
- Start/end or review date: _____
- Storage instructions: _____
- Expiry date: _____
- Is the pupil able to self-administer? Yes / No / With supervision
- Action required if a dose is refused, missed, spilled or vomited:
.
- Possible side effects and required action:
.
- Emergency instructions/action plan attached? Yes / No / Not applicable

I/We request that the Board authorise the arrangement described above. I/We confirm that the information and medication supplied are current and that I/we will notify the school promptly in writing of any change. I/We will replace medication before it expires and collect medication that is expired, discontinued or no longer required.

Indemnification: Before any medication arrangement begins, the pupil's parent(s)/guardian(s) must complete the indemnity and consent documentation approved by the Board of Management and the school's insurer. The documentation should cover the Board, its members and authorised staff who administer or supervise medication in good faith and in accordance with the pupil's current written instructions. Indemnification does not replace the school's duty of care or its responsibilities concerning authorisation, staff training, record-keeping, insurance and safe procedures.

Parent/guardian name: _____

Signature: _____ Date: _____

Second parent/guardian, if required: _____

Signature: _____ Date: _____

Board/Principal decision: Approved / Not approved / Further information required

Authorised arrangement and staff:

.

Approval signature: _____ Date: _____

Review date: _____

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Appendix 2 — Allergy Details

- Pupil's name: _____
- Date of birth: _____
- Diagnosed allergen(s): _____
- Typical reaction/signs: _____
- Emergency medication/device and dose: _____
- Storage/location: _____
- Expiry date(s): _____
- Is the pupil authorised to self-carry? Yes / No
- Current clinician-approved Allergy/Anaphylaxis Action Plan attached? Yes / No
- Date of action plan: _____ Review date: _____
- Prevention and inclusion measures:
.
- Off-site arrangements:
.

Parent/guardian signature: _____ Date: _____

School approval: _____ Date: _____

Appendix 3 — Emergency Procedures

- Pupil's name: _____
- Medical condition: _____
- Current clinician-approved emergency plan attached? Yes / No
- Plan date: _____ Review date: _____

Symptoms/signs requiring action

Procedure

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Emergency services: 112 or 999

Parent/guardian contact(s): _____

Parent/guardian signature: _____ Date: _____

School approval: _____ Date: _____

Appendix 4 — Record of Medication Administration

- Pupil's name: _____
- Date of birth: _____
- Medical condition: _____
- Medication/formulation: _____
- Date: _____ Time: _____
- Dose: _____ Route: _____
- Reason/circumstances: _____
- Outcome/observations: _____
- Refusal, omission, error, spillage, vomiting or adverse reaction?
No / Yes — details and action: _____
- Parent/guardian informed? No / Yes — time/method: _____
- Emergency services contacted? No / Yes — time: _____

Administered/supervised by: _____

Signature: _____

Witness/checker, if required: _____

Signature: _____

Appendix 5 — Consent for Use of an Adrenaline Auto-Injector

We, the parent(s)/guardian(s) of _____, authorise trained and Board-authorised staff of St. Comán's Wood Primary School to administer the pupil's prescribed adrenaline auto-injector in accordance with the current Allergy/Anaphylaxis Action Plan and device instructions.

- Device brand/type: _____
- Dose: _____
- Number of devices supplied: _____
- Expiry date(s): _____
- Storage location(s): _____
- Action plan date: _____

Parent/guardian name: _____

Signature: _____ Date: _____

Second parent/guardian, if required: _____

Signature: _____ Date: _____

School approval: _____ Date: _____

References

- HSE guidance states that an adrenaline auto-injector should be used when available and that 112 or 999 should be called for an ambulance: <https://www2.hse.ie/conditions/anaphylaxis/>
- The Irish Food Allergy Network provides school/childcare information and action-plan resources: <https://www.ifan.ie/childcare-schools/>
- INTO publishes guidance on the administration of medicine in schools: <https://www.into.ie/help-advice/other-school-matters/administration-of-medicine/>