



Administration of Medication Policy and Procedure

It is the aim of Myerscough College to implement and maintain an effective management system for the administration of medicines to all students in our care, in order to ensure that the College provides support to individual students with medical needs.

Myerscough College is committed in supporting the health and wellbeing of all students. Our aim is to implement and maintain an effective management system for the administration of medicines to all students in our care in order to ensure that the College provides support to individual students with medical needs in a manner that complies with both legislation and good practice.

The College requests that medication is only taken at College if it is essential, that it is where it would be detrimental to the student's health not to administer the medication during the College day. Where possible, medicines should be taken at home, before and after attending College. This does not apply to students in Halls of Residence where additional control measures are implemented, as referenced in this policy.

This policy applies to all staff who are involved in the medical support of students, and covers the administration by staff of medication to students in our care in the College. It should be read alongside the First Aid policy and procedures and Off-site trips guidance.

This policy relates to all students on all sites including in Halls, within our Residential Provision, and trips, visits and residential activities.

This Policy should be read in conjunction with the full Myerscough College Health & Safety Policy and Procedure, Child Protection and Safeguarding Policy and Procedure and other related policies and procedures, in particular the First Aid Procedure, and is applicable to all areas throughout the College and its centres.

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1. Responsibilities

1.1 Senior Leadership Team

The Director of Student Support will lead on the application of this policy on behalf of the Senior Leadership Team to ensure that the policy is developed and effectively implemented. This includes ensuring that all appropriate staff are aware of the policy for supporting students with medical conditions and understand their role in its implementation.

The Senior Leadership Team will monitor, identify and respond to any issues arising from the administration of medication at College

The College will ensure that identified College staff receive suitable training to support students' physical health needs and that identified staff who need to know are aware of the student's condition, including any required medication.

The College should also make sure that College staff are appropriately insured and are aware that they are insured to support students in this way.

The Head of Inclusive Learning has overall responsibility for the development of individual wellbeing plans including administration of medication, and may delegate plans to inclusive learning staff, curriculum, residential or support and safeguarding staff.

1.2 Staff

Through effective and robust policy and procedures, including staff training, nominated and identified staff should feel knowledgeable, confident, competent and supported to administer medication when required.

Identified staff should implement this policy and procedures and all staff should be aware that they are not permitted to give any medication without appropriate training, planning and documentation.

Staff are under no obligation to administer medication. There may, however, be specific roles that require the administration of medication.

1.2.1 Trained Staff to Support the Administration of Medication

Specified roles may require the administration of medication including prescribed, non-prescribed and emergency medication. These staff will receive training and access to all relevant wellbeing plans and medication documentation.

If staff have any concerns or queries, they must seek advice prior to the administration of any medication.

1.3 Students

Students should be encouraged and supported to be fully involved in discussion about their medical support and contribute as much as possible to the development of, and comply with, their individual wellbeing plan.

Students who refuse to engage and comply with their wellbeing plan including medication plans will be discussed at the Admission and Advisory panel. All refusals in engagement must be recorded on ProMonitor, shared with parents, Inclusive learning and Residential support if a resident student.

Medicines should only be brought into College when essential, that is where it would be detrimental to a student's health if the medicine were not administered during the College day.

Residential students, however may need to take regular medication when they live away from home. Residential students and their parents/ guardians (for under 18s) are asked to complete a health and wellbeing questionnaire on application including any use of medication.

It is expected that most students are independent of staff in relation to self-administering their own medication. See section below on Residential students.

1.4 Parents and Guardians

The College promotes ongoing communication with parents in order to ensure that the specific medical needs of all students in our care are known and met.

Parents and guardians of under 18s, and those over 18 who may have identified people who have additional consent to support the student's health care needs in their best interest, are expected to work alongside college colleagues by completing health and medical declaration prior to starting and enrolment at the College to ensure effective transition and care planning as required.

They will be expected and supported to be involved in developing the wellbeing plan, sharing relevant health conditions and medication information. College will take into consideration consent and capacity to make decisions and develop wellbeing plans in collaboration with the student, families or guardians and external agencies as required. Parents are expected to replenish any medication.

If there are any changes to student's medical details and/or any changes to the medication required, all staff who are involved with the student including the support teams, course tutors or residential team must be informed immediately.

If the College is made aware that relevant health care information has not been shared which may create a risk for the student's health and the College's ability to ensure their health and safety this will be discussed at the Admission and Advisory panel.

2. Individual Wellbeing Plans and Consent

Students and parents/legal guardians of under 18 students who require prescribed medication to be administered or supported administration by College staff, must discuss this with the Inclusive learning team, appropriate Head /Assistant of Area, or Director of Student Support and the Residential Support Manager if they require residency, prior to enrolling, who will then inform the Admissions Advisory and Support panel for discussion and agreement of how and if the College can administer the medication. All requests for support in the administration of medicines will be discussed at the Admission and Advisory panel either prior to enrolment or during their programme. These notes will be securely stored.

Where a student has long term or complex health or personal needs requiring the administration or support with medication, the Head of Inclusive Learning or a nominated member of staff will establish a wellbeing plan for the student in consultation with the student and the student's parents or guardians, which will then be communicated to staff who need to know its content.

Students requiring administration of medication or support with medication will be required along with their parents or guardians (if under 18) and from the student (if over 18 and with capacity) to complete a consent form for the administration of medicines. Templates of consent forms should be used to gain written consent. This may require the involvement of medical practitioners.

Staff will not administer any medication to a student without obtaining prior written permission from their parents (if under 18) and from the student (if over 18 and with capacity). This requirement will not prevent a student with sufficient capacity to understand fully what is proposed from giving or withholding consent to medical treatment, or from seeking advice or treatment in confidence. Written agreements will be safely stored in the location where the administration will be administered along with the medication administration record. A record will be maintained on ProMonitor with reference to the plan.

Individual wellbeing plans will be reviewed on a regular basis and be logged on ProMonitor.

The Inclusive learning team will be responsible for the plan's review and ensuring it is followed effectively, in line with statutory guidelines. There may be situations where the plan is monitored and reviewed by the Residential support and Core/ student support teams.

2.1 Residential Students

Where an under 18 residential student takes prescribed medication, the Residential Support Manager will assess the need for a wellbeing plan recording on ProMonitor and liaise with inclusive learning and student support and safeguarding where appropriate.

When under 18s residential students self- medicate the college ensures that they are sufficiently competent and responsible to do so. The Residential Support Manager will assess and record for under 18 students who declare they take medication for competence and responsibility to self-medicate. This will be recorded on ProMonitor.

All residential students have access to a locked drawer in their room.

The confidentiality and rights of residential students as patients are appropriately respected. This includes the rights of a competent residential student to consent to his or her own medical treatment, without the need for parental permission or knowledge. A resident student is competent if he or she has sufficient understanding and intelligence to understand fully what is proposed (3.2-3.5 NMS, 2018).

It is expected that over 18 students manage their own medication and self-medicate. In situations where assisted administration is required for over 18s, the same process with consent, recording and documentation is required.

There may be occasions where spare medication is stored safely to support safe storage of medication; this will be stored and recorded in the locked Residential drug cabinet. The Residential Support Manager is responsible for monitoring the drug cabinet, checking content at least termly and ensuring safe return of medication to students as required.

Residential student plans will be monitored and reviewed on a regular basis by the Residential Support Manager in collaboration with inclusive learning or student support as appropriate.

3. Medication Recording

College documentation and templates must be used for the administration of medicines. Wellbeing plans and medical administration records will be kept for 7 years. These documents are located on the staff intranet.

Staff must access the student's medication documentation prior to and on each occasion of administration, see administration of medication section.

All sites will have a risk assessment in place which identifies where the records will be stored securely.

4. Prescription and Non-Prescription Medication

Staff will not administer any medication that has not been prescribed for that particular student.

A student must never be given medicine containing aspirin unless prescribed by a Doctor or medical/ healthcare professional.

4.1 Over the Counter Medication

The College has a small stock of over the counter remedies to be administered in College. There may be occasions when pain relief is required.

- Parents/Guardians of under 18s **must be contacted** and give verbal consent for the administration of over the counter remedies prior to administration.

- Only named trained staff are able to provide over the counter medication. Records of parental conversation must be maintained, recoding the name of the person, time, date and conversation.
- Staff must complete the non- prescription administration sheet for every student on every occasion and maintain safe storage of records and recorded on ProMonitor in general student comments.
- The administration of medicines procedure must be followed for over the counter medication see below in section 7.
- The non-prescription medication will be stored in a locked drug cabinet.

In the rare case of parents/guardians refusing consent for non-prescription, this is documented on ProMonitor and relevant staff will be notified.

Non-prescription stock items:

- **Paracetamol 500mg tablets or capsules**
- **Ibuprofen 200mg tablets or capsules**

4.2 Emergency Medication

Wellbeing plans will be completed for any student who requires emergency medication with specific detail of the condition, emergency treatment including location of medication.

It is expected that students will carry their own emergency medication and spares as required, however there may be occasions where spare emergency medication is also stored by the College in an identified drug cabinet or other appropriate safe storage as defined and agreed in the wellbeing plan.

5. Administration of Medication Procedure

Students who do not carry and administer their own medication must be told and understand which members of staff will administer their medication and where.

Staff who are supporting the administration of medication must have attended a CPD session or identified training package on Administering Medication provided by the College.

5.1 Self-Management

The age at which children and identified adults are ready to take care of and be responsible for their own medication varies. All students should be encouraged to participate in decisions about their medication and be supported to take responsibility whenever possible. Following risk assessment or wellbeing plan, they may either keep medication securely on themselves or in lockable facilities.

Where declared and agreed, a student may be able to have supervised access to their own supply in order to self-medicate. This will be clearly explained in their wellbeing plan.

5.2 Staff Administration

- Students receiving medication will be asked to attend an agreed meeting point with the staff member administering the medicine at prescribed times during the course of the medication to receive their treatment.
- All medicines supplied to the College by parents/legal guardians or student must be provided in the **original container** as dispensed by the pharmacist and include the prescriber's **instructions for administration**.
- Staff administering medication will check:
 - the student's name,
 - the name of the medication,
 - the prescribed dose,
 - the expiry date,
 - the method of administration,
 - the time/frequency of administration,
 - any side effects
 - written instructions on the container before providing the medicine to the students.
 - that the student has not already been given the medication.
- Staff agreeing to administer medication should have access to hand washing facilities to wash their hands before and after administering medication and to clean any equipment used after each use.
- There should be 2 members of staff present when administering medication.
- Medication must only be administered to one student at a time.
- The student must be able to identify themselves by their student ID.
- Staff administering medication must make an entry on the student's individual medication recording / MAR Sheet immediately after administration, which is kept either with the student, or in the named file / location. This must be completed at the time the medication is administered.
- If the medication is long term, then an absent mark should be entered if the student is absent from College.
- These entries must confirm the date, the medication and the staff administering the medicine plus a witness as required.
- If staff are in any doubt over the procedure to be followed, the parents/legal guardians will be contacted before action is taken.
- A medical oral syringe or medicine spoon should be used for liquid medicines.
- Wasted doses (e.g. tableted dropped on floor) should also be recorded.

If a student refuses their medication, staff will record this on the medication administration record and contact the parents/legal guardians if under 18 or as identified in the wellbeing plan as soon as possible.

Staff at the College will not administer any prescribed medication to a student without prior agreement from the Admissions Advisory and Support panel and obtaining prior written permission from the student or students' parents/legal guardians.

6. Storage of Medication

All prescribed medication must be in its original container with the original dispensing label intact (with name of student, medication, dosage and frequency clearly labelled) and stored in a designated lockable medicine cabinet (with the exception of some reliever or emergency medication).

Prescribed medication can only be administered to the named student.

6.1 Safe storage – non-emergency medication:

- It is expected that students are independent of their medication needs however there may be times when support or storage is required.
- All non-emergency medication is kept in a secure place, in a lockable cupboard in a cool dry place. Learners with medical conditions know where their medication is stored and how to access it.
- Staff ensure that medication is only accessible to those for whom it is prescribed.
- A localised record is maintained for all stored medication i.e. located in all college locked medical cabinets or other identified area in the location of the cabinet.

6.2 Safe Storage – General:

- There is an identified member of staff who ensures the correct storage of medication at each of the college sites where there are locked medication cupboards.
- All controlled drugs are kept in a locked cupboard and only named staff have access, even if learners normally administer the medication themselves.
- There may be circumstances where students self-medicate controlled drugs. Where this has been declared to College, a wellbeing plan will be completed with appropriate risk assessment and management plans in place. This would be dependent on competency and appropriate safety measures.
- Three times a year the identified member of staff checks the expiry dates for all medication stored at college, completing audit records.
- Medicines are always securely stored in accordance with individual product instructions paying particular note to temperature.

6.3 Safe Storage – Medication Fridge:

- If required, medication fridges will be purchased. There is a dedicated medication fridge located in the Core at the Preston Campus.
- Daily fridge temperatures are taken and recorded with actual, minimum and maximum temperatures.

- At least annual calibration or purchase of new fridge thermometer (must have min and max temperatures)
- Only reasonable amounts of medication are stored.
- College guidance on the safe and effective fridge management supports staff to ensure correct fridge management and maintenance.

The College will carry out a risk assessment per site to consider any risks to the health and safety of the College community and put in place measures to ensure that identified risks are managed and that medicines are stored safely in their correct containers and identified storage location.

Students may and are encouraged to carry their own emergency medication. However, if parents or legal guardians require the College to store any emergency medication such as spare reliever inhalers and adrenaline pens, they will be kept in the Student Support area or other identified area of each campus in a clearly marked box or in another identified area such as Residency, Foundation Learning or identified and recorded areas where ease of access is paramount. The student will be made aware of the location of storage of their medication.

Medication must not be stored in any other place than an identified medication cabinet or medication fridge.

If a student is prescribed a controlled drug, it will be kept in a locked non-portable container, and only named staff will have access to this.

It is the responsibility of the student or parents / guardians to collect all medicines belonging to the student when the student is no longer taking that particular medication or any date-expired medication. If it is not collected any medication will be disposed safely.

7. Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. A Pharmacist will give advice as to whether a medication is a controlled drug or not.

To keep up to date with the medications classified as a controlled drug, the College will refer to Government controlled drugs list.

[List of Controlled Drugs](#)

7.1 Controlled Drugs Register

A separate record of controlled drugs should be maintained to include the receipt, administration and possible disposal of controlled drugs. These records must be kept in a bound book or register with numbered pages. The book will include the balance remaining for each product with a separate record page being maintained for each student. It is recommended that the balance of controlled drugs be checked at each administration and also on a regular basis e.g. monthly.

The book should be locked away when not in use. There may be several books for separate sites. A central log of identified books will be held centrally.

7.2 Administration of Controlled Drugs

Any authorised member of staff may administer a controlled drug to the student for whom it has been prescribed and they should do so in accordance with the prescriber's instructions in the presence of another member of staff as witness. The administration of controlled drugs is recorded using the Controlled Drugs Register which can be purchased from a pharmacist and on the Medication Administration Record sheet.

Staff **MUST NOT** sign the record of administration unless they have been involved in the administration of the medication.

The recommended procedure for the administration of controlled drugs is as follows:

1. Check the student's / parental Consent form for details of dosage required etc.
2. Verify the quantity of medication as stated on the controlled drug register to ensure that the dose has not already been given.
3. Ensure two members of staff are present; one member of staff must witness the other administer the medication to the student.
4. Both staff must sign the Medication Administration Record sheet and controlled drug register to confirm that the dose was given and the amount remaining.
5. If medication is refused or only partly taken both staff must witness the disposal of the remaining medication and record the details and sign to that effect. If a dose of medication is refused or only partly taken. then the parents/carer should be contacted for advice on any adverse reactions and risk to the young person.

7.3. Return or Discontinued Controlled Drugs

A controlled drug, as with all medicines, should be returned to the parent/carer when no longer required to arrange for safe disposal (by returning the unwanted supply to the local pharmacy).

7.4. Missing Controlled Drugs

In the event of any controlled drugs being unable to be accounted for, this must be reported to the Director of Student Support.

8. Emergency Procedures

In the event of an emergency related to the administration of medicine, a trained first aider should be called as soon as possible, if not already present. If the trained first aider does not consider that she or he is able to deal with the presenting condition, then they should continue any first aid or medical procedures being provided whilst another person summons emergency medical care. This does not however affect the ability of any person to contact the emergency services in the event of a medical emergency.

Staff should always dial 999 for the emergency services in the event of a serious medical emergency before implementing the terms of this procedure and make clear arrangements for liaison with the ambulance services on the College site i.e. inform Reception that an emergency vehicle has been called.

9. Refusal of Medication

Should an under 18yr old student or a student with identified and documented lack of capacity to consent to their own health care or medical treatment, refuse to take medication, parents or guardians will be informed and a note kept on the medication record form. If a refusal to take medicine results in an emergency then medical help will be sought from emergency services.

10. Pharmacy Delivery Service – Preston Campus only for Residential Students

In partnership with Garstang Medical Practice and Pharmacy Services, the College benefits from a pharmacy delivery service for the students in Halls with safe receipt, storage and distribution.

- Medication is signed for by the member of staff (within the Core).
- All received medication is stored in locked medicine cabinet within a locked room (or fridge if required).
- Payment is made if required.
- Staff does not open the prescription bag and it remains sealed.
- Student is informed of receipt of medication.
- Student attends and staff check ID badge to ensure correct student.
- Student is given medication and signs to acknowledge receipt.

11. Off-Site Visits and Sporting Events

If a student attending an off-site visit or sporting event cannot self-medicate, they will be accompanied by a member of staff who has received appropriate training to administer the medication in accordance with this procedure.

All students requiring preventative medicine (particularly for sport), if sufficiently competent to self-medicate, are responsible for carrying their medication with them. If not sufficiently competent, a member of staff shall carry the medication, individually labelled.

All Party Leaders/ Heads of Area should ensure that the Medical and Additional Needs Risk Assessment is completed for all trips, with details and control measures for any students who have declared any medical and additional needs and this will be shared with all staff on the trip and with the emergency services in the event of an emergency.

For any overseas and residential activities, additional risk management and health care plans should be employed in line with Overseas Trips policy.

12. Confidentiality

Medical information about a student will be treated as confidential and shared with agreement with the students or their parents/ guardians with appropriate staff as required.

The College will ensure that all relevant staff are made of the student's condition.

Medical and health information may be shared with appropriate agencies, such as the emergency services in the persons' best interests, such as emergency medical support.

13. Training

We expect students and parents/legal guardians to make us aware of any medication that students are required to take throughout the course of the College day or whilst staying in Halls of Residence. Unless we are informed otherwise, it will be assumed that the student is aware of how and when to administer the medicine themselves.

Should the College admit a student, following discussion and approval at the Admissions Advisory and Support panel or the Medical needs panel, who has a specific medical need requiring assistance in the administration of medicine by a staff member, we would seek to ensure that relevant and identified staff members undertook the relevant training.

All staff who undertake administering or supporting students to take their medication will receive administration of medication training.

The Head of Inclusive Learning is responsible for ensuring that all identified staff are suitably trained.

A record of training will be maintained.

14. Monitoring and Review

Audits of practice will take place during the academic year on all process, including medication storage, record keeping and training.

The implementation and impact of this procedure will be reviewed regularly and the policy reviewed every 2 years. Any changes to legislation or best practice will instigate a procedure review.

Documents Associated with this Policy:

- Garstang Medical Practice Partnership Agreement
- Medication Fridge Guidance
- Wellbeing plan
- Sale of Non-prescription Guidance
- Health & Safety Policy (in Particular the First Aid Procedure)

- Child Protection and Safeguarding Policy and Procedure
- Personal Care Policy
- Staff Training Records
- Trips, Visits and Residential Trips, including Overseas Procedure
- Further Education Residential Accommodation: National Minimum Standards (NMS)
- Supporting Pupils with Medical Needs, DfE.

[Supporting pupils with medical conditions at school - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

Appendices:

1. Agreement for Myerscough College to Administer or Support with the Administration of Medicines
2. Administration of Medicines Record of Administration of Non-Prescription Medication
3. Staff Training Records – Administration of Medicine
4. Guidance for Refrigerated Medicines





**Agreement for Myerscough College to Administer or Support with the
Administration of Medicines**

Myerscough will not administer medication unless this form is completed and signed. Myerscough College has a policy in place that states only designated staff can administer medication.

Name of Setting and Campus	Myerscough College Site:
Date for review to be initiated by	
Name of Student	
Date of Birth	
Group / Course	
Medical Condition or Illness	

Medication

Name of Medication – as described on the original container	
Type of Medication (tablets, liquid, emergency medication (form))	
Is this a Controlled Drug? Yes/ No Controlled drugs list - GOV.UK (www.gov.uk)	
Dosage	
Method of Administration (eg, oral, injection)	
Special Precautions and other instructions	
Are there any other side effects that the College should know about?	
Self- administration? Yes / No	
Procedures to be taken in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy indicating the medication, dose, frequency name of student, expiry date.

Contact Details of student (if over 18) or parent/ carer if under 18:

Name	
Relationship to Student	
Contact Details	
Address (if different to student)	
I understand that I must deliver the medicine personally to:	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Myerscough College staff administering or supporting as agreed in accordance with their policy. I will inform Myerscough College immediately, in writing, if there are any changes to dosage, frequency or other details with the medication or if the medication is stopped.

Student signature if over 18:

Name	
Signature	
Date	

For students under 18, both the student and parent / guardian must consent and agree the information.

Signature of Student if under 18:

Name	
Signature	
Date	

Parental / Carer if under 18:

Name	
Signature	
Date	

Wellbeing / care plans will provide further information in relation to the care plan and support requirements, including the storage of medication.

Please provide any further information which may support (eg links to other documents, literature, communication / correspondence, best interest decisions / other legal aspects or links to further information





Record of Administration of Non- Prescription Medication

Name of Student		
Date of Birth / Age		
Campus		
Course		
Reason for Request		
Parental / Guardian consent required	Y	N
Consent (record conversation with P/ G highlighting the content of the conversation and consent / refusal given)		
Date and time of consent		
Questions prior to medication These questions should also be asked when speaking to parent/ guardian, <u>then again</u> with the student		
	Parent / Guardian – Y / N	Student Y / N
Do you have any known allergies?		
Have you taken this medication before?		
Have you taken any medication today?		
When was the last time you took any medication?		
Signatures		
Name of member of staff		
Signature of staff		
Name of staff witness		
Signature of staff witness		
Date and time of administration		
Signature of student		



Staff Training Records – Administration of Medication

College	Myerscough College
Name/s of Member of Staff	
Type of Training Received	
Date of Training	
Training Provided by	
Trainer Details (profession and title if appropriate)	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

NB: some training may be purchased as a training package and should be recorded above.

Trainer Name _____

Trainer's Signature _____

Date _____

I confirm that I have received the training detailed above

Staff Name _____

Staff Signature _____

Date _____

Suggested Review Date _____

If multiple staff have been trained, complete individual records and share with CPD and HR for individual staff files for HR and CPD



Guidance for Refrigerated Medicines

Aim: To outline the controls that should be in place to ensure safe storage of medicines that require refrigeration.

A medication fridge is located in a locked room the Core on the Preston Campus.

Students may keep their own medication in their own fridge within their room in Halls. Personal fridges do not fall in scope for this guidance.

The 'four Rs' of Monitoring Refrigerator Temperatures:

- ✓ **Read:** Read temperatures at least daily
- ✓ **Record:** Record temperatures on a standard form, including signing
- ✓ **Reset:** Reset after each temperature reading
- ✓ **React:** React by taking action if temperature is outside +2°C to +8°C and document this action

Fridge Requirements

- Medication that needs to be refrigerated should be stored in a separate, secure, fridge that is only used for medicines (do not keep any food in medicines fridge).
- The fridge should either be locked or kept in a locked medicines room. Staff should be aware of key storage and access.
- When medicines requiring refrigeration are received they should be immediately identified and placed in the medicines fridge.
- Check that the fridge wall socket (where it is plugged in) is clearly labelled to leave on so that it does not get inadvertently switched off at the wall. (Some pharmaceutical fridges are directly wired so that this cannot occur).
- All fridges where medicines are stored should be serviced at least yearly.
- Store medicines in an orderly fashion on shelves, not on the floor of the unit, or in the door. Avoid overfilling and keep a space between boxes and vials for proper circulation. Do not keep large amounts of medicines in the fridge as this can lead to inadequate air flow and potential freezing. Medicines should not touch the cooling plate in the back of the fridge
- Ensure fridge medications are regularly date checked and the stock rotated
- All fridges should be cleaned as part of the general cleaning rota and dated records kept.

Thermometer Requirements

- The medicines fridge must be monitored using a thermometer which measures both the minimum & maximum temperature.
- The thermometer, or its temperature monitoring probes should be sited in a central location within the fridge, preferably between the products - they should not be placed in the door.

Daily Temperature Recording

- The fridge temperature should be checked and recorded daily.
- It is recommended that the minimum and maximum temperatures and the current temperature are all recorded.
- The fridge temperature must be kept between the range of +2°C and +8°C.
- If the fridge temperature is outside of this range action should be taken immediately - see below for required actions
- Ensure staff taking the thermometer readings understands how to read and reset the thermometer and why this is necessary

What To Do When The Fridge Temperature Is Out Of Range Of +2°C and +8°C

- Inform the named members of staff for each site immediately (Safeguarding, Support and Welfare Manager or Director of Student Support for the Core Preston)
- Quarantine (separate and put in a safe place) the affected fridge stock by bagging and labelling 'Not for Use' and keep within a designated fridge while advice is sought
- Attach a notice to the fridge clearly stating do not use
- Estimate how many hours the fridge has been out of range (you should have the reading from the previous day's check)
- Contact your pharmacy provider for advice
- Ensure that the stock which you are advised is no longer usable is disposed of promptly in line with local protocols
- Contact the student to explain what has happened and request replacement medicines, if required
- If necessary, call out an engineer to repair the fridge – contact Estates for guidance
- Remember to record the action taken on the fridge temperature record sheet
- Ensure that it is clear where medicines should be stored (in an emergency) if the fridge malfunctions

Produced by	Lisa Hartley, Director of Student Support and Welfare
Date:	November 2021
Review	September 2024
Comments	New Fridge and Thermometer- November 2021

Document History			
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Quality Assurance			
This Policy and Procedure maps to the following external quality assurance frameworks			
Framework		Framework Section Reference(s)	
Education Inspection Framework			
MATRIX			
QAA			
QIA			
ESFA			
Key Changes to Document			
Policy rewritten			

All Myerscough College Policies are subject to screening for Equality Impact Assessment

Equality Impact Assessments are carried out to see whether the policy has, or is likely to have, a negative impact on grounds of: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, marriage or civil partnership, sex or sexual orientation

Myerscough College not only fulfils its legal position in relation to current and future equality legislation, but additionally goes beyond compliance in providing and promoting “Opportunities for all to succeed”, free from any aspect of discrimination, harassment or victimisation.

All staff have a duty of care to look after the interests of and support their colleagues. *This policy takes account of* our commitment to eliminating discrimination, identifying and removing barriers and providing equal opportunities for our learners, staff and visitors to ensure that no one feels excluded or disadvantaged.

Safeguarding, Learner Protection and Prevent

All staff have a responsibility to support and promote the College’s commitment to providing a safe environment for students, staff and visitors. Additionally, all staff have a responsibility to report any safeguarding or Prevent issues to the Designated Senior Lead for Safeguarding and Prevent.