



Outcomes
First Group

Medicines Policy (Education Settings)

Policy Folder:

Policy Statement

Outcomes First Group provides high-quality care, education, and clinical support every day. We create happy places that are safe, friendly, and supportive, so that we are trusted to do the best for each young person in our care.

This medicines policy sets out our commitment and duty of care to ensure the safe handling of medicines in our Education Settings. It must be read and followed by all team members working in these settings. Team members are required to sign that they have read and understood the policy.

The medicines policy should be used and referred to by team members when undertaking medicines training, which is part of the organisation's mandatory training programme. In addition, all team members required to administer medicines will have a practical assessment to ensure they are competent to administer medicines.

The medicines policy will be reviewed annually to ensure that it reflects current working practices, legislation, and standards. The associated procedures, forms and documents may be accessed through OFG Resources.

Each setting must have a system in place to ensure a young person's medicines records are kept confidential and only shared with the relevant people, in line with the General Data Protection Regulations. (GDPR).

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1. Scope

- 1.1 This policy sets out our commitments to ensure the safe handling of medicines in our organisation, in line with best practice, guidance and legislation.
- 1.2 This medicines policy must be used in conjunction with the medicines procedures and associated forms (together, the POLICY PACK).
- 1.3 The medicines procedures set out step-by-step guides that team members must follow when undertaking medicines-related tasks.
- 1.4 The associated forms should be used to record relevant information, to promote best practice.
- 1.5 This policy must be followed by all team members who support young people with their medicines. Team members must read and sign to acknowledge their agreement to abide by it.

2. Our Values & Responsibilities

- 2.1 We will involve the young people we support in the decision-making around medicines, and always take a young person-centred approach.
- 2.2 We will work collaboratively with other agencies, advocates, and healthcare professionals to actively promote each young person's independence with medicines.
- 2.3 We will ensure that all medicines are administered in a way that respects the dignity, privacy, cultural and religious beliefs of each young person.
- 2.4 We will respect the confidentiality of the young people we support, including their medical history and information about their medicines.

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- 2.5 We will provide full training and competency assessment for team members, to ensure they administer medicines safely and effectively, and keep the young people we support safe.
- 2.6 We will make every effort to ensure team members are not interrupted when administering medicines, and ensure they are clear about their roles and responsibilities.
- 2.7 We will always comply with legislation, regulations, guidance and best practice relating to medicines, including (but not limited to):
- Medicines Act 1968
 - Misuse of Drugs Act 1971 and Misuse of Drugs (Safe Custody) Regulations 1973
 - Health and Social Care Act 2008 and (Regulated Activities) Regulations 2014
 - Care Act 2014
 - CQC Fundamental Standards and Regulations (England)
 - Mental Capacity Act 2005
 - Gillick Competency 1985
 - RCN/RPS Professional Guidance for Administration of Medicines in a Healthcare Setting and Professional Guidance for Safe and Secure Handling of Medicines in a Healthcare Setting
 - Department for Education statutory guidance “Supporting Pupils at School with Medical Conditions” (2015)
 - Department of Health “Guidance on the use of emergency salbutamol inhalers in schools” (2015) and “Guidance on the use of adrenaline auto-injectors in schools” (2017)
 - Ofsted requirements

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- 2.8 We acknowledge that prescribed medicines are the property of the young person to whom they have been prescribed and dispensed.

3. Consent

- 3.1 Where the young person has the mental capacity to consent to treatment, we will not administer medicines to them without their consent.
- 3.2 We will seek and make a record of the informed consent from the young people we support or those acting on their behalf, about support with their medicines.
- 3.3 Where the young person may need help to be able to give consent, we will provide the young person/those acting on their behalf with support, to help them make an informed decision.

4. Providing Medicines Support

- 4.1 We will assess the medicines support needs of each young person we support on an ongoing basis to ensure that the support they receive is appropriate for their needs.
- 4.2 At a young person's request, and following an appropriate risk assessment, we will support the young person to retain responsibility for obtaining, holding and/or taking their own medicines.
- 4.3 We will ensure that an accurate list of a young person's medicines is obtained and kept up-to-date at all times.
- 4.4 We will administer medicines in accordance with the 6 Rights of Administration.

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- 4.5 We will only undertake covert administration of medicines in exceptional circumstances, where this is lawful and is in the young person's best interest. A risk assessment, mental capacity assessment (known as Gillick Competency for young people under the age of 16), best interest decision and written support of a multidisciplinary team must be in place.
- 4.6 To ensure the safety of the young person, we will administer medicines from pharmacy-labelled containers (or professionally-filled and sealed monitored dosage systems) following the prescriber's written instructions.
- 4.7 We are not permitted to administer medicines from dosette boxes filled by others, such as family members.
- 4.8 We will keep appropriate and accurate records of medicines administration and support.
- 4.9 We will monitor young people who take medicines for changes in their condition, allergies, and side effects, and liaise with healthcare professionals as necessary.
- 4.10 We will keep medicines administration records for the length of time specified in the organisation's retention of records policy.
- 4.11 We will store medicines safely and securely.
- 4.12 We will undertake risk-based audits internally at least monthly, and complete external audits at regular intervals. Action will be taken as appropriate, and documented.
- 4.13 We will monitor for medicines errors / incidents through regular auditing of medicines and processes, and will investigate any identified errors to share our findings and mitigate against them reoccurring.
- 4.14 We support a "just culture" where we promote a culture of fairness, openness, and learning.

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5. Training and Competency Assessment

- 5.1 We will ensure team members who are supporting young people with their medicines receive accredited medicines training, which will be updated in line with the agreed training pathway.
- 5.2 We will undertake competency assessments for team members following initial training and then every year thereafter, or more frequently, if necessary (e.g. following a medicines error), and in accordance with the agreed training pathway.
- 5.3 We will ensure Managers/ senior team members who are responsible for assessing the competency of their team members are trained and competent to undertake this task.
- 5.4 We will maintain records of all team member training and competency assessments relating to medicines handling and administration.
- 5.5 We will provide training for specific medical conditions, medicines, or skills, where required.
- 5.6 We will support team members where they do not feel they have received sufficient training or are not competent to undertake any medicines-related task.

6. Implementation & Use

- 6.1 We will comply with all information in the Policy Pack.
- 6.2 We will ensure that all team members who are involved in the handling of medicines have read and understood the Policy Pack.

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6.3 This Policy Pack will be reviewed yearly, or following any major changes to legislation or best practice to ensure that it reflects current working practices, legislation and standards.

6.4 In this Policy Pack the below terms have been used and have the following meanings:

Term	Refers to	Organisation's Equivalent Job Title
Designated team member	A team member who has been trained and assessed as competent to complete a medicines-related task.	
Senior team member	A team member in a senior or managerial position with regards to medicines handling.	
Team member	All team members whose role is related to providing care/ support with medicines, regardless of position or seniority.	

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