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|  | **Administration of Medicines in Educational Settings Risk Assessment (H&S Update – April 2020)** |  |

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| Operations/Work Activities covered by this assessment:  | **ADMINISTRATION OF MEDICINES in educational settings** |
| Site Address/Location:  |  | Department/Service/Team: |  |
| **Note:** A person specific assessment must be carried out for individual children / young persons |

| Hazards Considered*Step 1 (Clause 3.1)* | Who might be harmed and how*Step 2**(Clause 3.2)* | Existing Control Measures:*Step 3**(Clause 3.3)* | Risk Rating  | Further action *Step 3**Consider hierarchy of controls i.e. elimination, substitution, engineering controls, signage/warning and/or administrative controls, (PPE as a last resort)* | Actions Step 4 (Clause 3.4) | Risk Rating |
| --- | --- | --- | --- | --- | --- | --- |
| Likelihood | Severity  | Risk Rating | who | when | complete | Likelihood | Severity  | Risk Rating |
| *(Name)* | *(Date)* | *(Date)* |
| **Issue of incorrect medication and emergency procedures** | Staff and children / young people may experience ill-health, unconsciousness, or death as a result of consumption of incorrect medicine | A Schools Medicines Policy has been implemented (*model Policy is available on the Schools Portal*).The policy is communicated to employees within the school and a record of this is maintained.Parental consent has been obtained and a written record is maintained.Employees who administer medicines have received the appropriate training.A written record is completed for the administration of medicines to individuals and countersigned by staff (for class A or B substances as identified in the Misuse of Drugs Act 1971)Qualified medical advice is available and employees know how to access it.  |  |  |  |  |  |  |  |  |  |  |
| **Incorrect storage of medication** | Staff and children / young people may experience sickness, fever and unconsciousness as a result of ingesting medication which has been stored incorrectly. | Arrangements are in place for the safe storage of medication. This is in a locked cabinet within a locked room and access is available (keys/codes) should they be required.Lockable containers are available and labelled correctly for use during off-site visits.A purpose designed fridge for medicine storage is available for medicines such as insulin and liquid antibiotics. The key requirements of the fridge are:* A digital minimum/maximum thermometer, ideally integrated and readable from outside the fridge and ability to data log temperatures
* Maintain temperatures between 2°C and 8°C.
* All refrigerators used for storing medicines should be of pharmaceutical grade and meet the Medicines and Health Regulatory Agency (MHRA) guidelines on ‘Control and monitoring of storage and transportation temperatures of medicinal products.’
* Meet W.H.O. performance criteria (E3/PROC/3/2)

Staff and pupils with asthma have immediate access to their inhalers (including off-site visits).  |  |  |  |  |  |  |  |  |  |  |
| **Accepting medicines from parents / carers** | Poorly maintained records may result in the incorrect type/quantity of medication. Staff and children / young people may experience ill-health effects. | All medicines MUST be in their original pharmacy packaging, stating date / dosage and duration.No medicines should be accepted if they are only in “blister packs”.A written record MUST be kept stating the amount, drug name, dosage and duration for the administration of medicines. |  |  |  |  |  |  |  |  |  |  |
| **Disposal of Medicines** | Staff and children / young people may experience sickness, fever and unconsciousness as a result of ingesting medication which is past its use-by date. | Arrangements are in place to ensure that out-of-date medication can be disposed of (e.g. local pharmacy).Parents/carers are required to remove any excess medication before holiday periods. If this does not occur they must be contacted and the drugs taken to a safe disposal point (local agreed pharmacy) |  |  |  |  |  |  |  |  |  |  |
| **Record Keeping** | Poorly maintained records may result in the incorrect type/quantity of medication. Staff and children / young people may experience ill-health effects. | Records are reviewed routinely to ensure accuracy. Where necessary records are countersigned, e.g. Class A and B drugs. |  |  |  |  |  |  |  |  |  |  |
| **Short term administration of medicines (e.g. antibiotics)** | Staff and children / young people may experience ill-health if incorrect/no information is provided about how to administer a new/short term medicine.  | Consideration is given as to whether medication can be administered before or after the school day. When medication is to be administered during the school day written instructions are provided for their administration.  |  |  |  |  |  |  |  |  |  |  |
| Consider if any additional hazards are created and control measures are required if this activity is undertaken in non-routine or emergency conditions | Review Date (*Step 5*) : |
| Assessors Signature: | Date: | Authorised By: | Date: |

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| **Potential Severity of Harm** | **High (e.g. death or paralysis, long term serious ill health)** | **Medium** | **High** | **High** |
| **Medium (an injury requiring further medical assistance or is a RIDDOR incident)** | **Low** | **Medium** | **High** |
| **Low** **(minor injuries requiring first aid)** | **Low** | **Low** | **Medium** |
|  |  | Low**(The event is unlikely to happen)** | Medium**(It is fairly likely it will happen)** | High**(It is likely to happen)** |
|  |  | Likelihood of Harm Occurring |

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| **Risk Definitions** |
| **Low** | Controls are adequate, no further action required, but ensure controls are monitored and any changes reassessed. |
| **Medium** | Consideration should be given as to whether the risks can be reduced using the hierarchy of control measures. Risk reduction measures should be implemented within a defined time period. Arrangements should be made to ensure that the controls are maintained and monitored for adequacy. |
| **High** | Substantial improvements should be made to reduce the level to an acceptable level. Risk reduction measures should be implemented urgently with a defined period. Consider suspending or restricting the activity or applying interim risks controls. Activities in this category **must** have a written method statement/safe system of work and arrangements must be made to ensure that the controls are maintained and monitored for adequacy. |