

SCHOOLS MEDICATION AUDIT

DATE:

NAME OF PERSON CONDUCTING AUDIT:

SUPPLY OF MEDICINES

		YES	NO
1.	Are all medicines clearly and fully labelled by the pharmacist and in the original container?		
2.	Are there any "as directed" labels?		
3.	Are all medicines in date?		
4.	Are medicines handed into school staff immediately on arrival?		
5.	Have dose changes been authorised by the prescriber?		
6.	Is it essential for the medicines to be taken during the school day?		
7.	Are any medicines missing?		
8.	Are there sufficient quantities of medicines available for the next 3 days?		

Notes and actions taken:

DOCUMENTATION

		YES	NO
1.	For children with a long term medical condition, has an IHCP been drawn up?		
2.	Has a medication record sheet been set up for each child requiring administration of medicines?		
3.	Is a parental consent letter in place for each child requiring administration of medicines?		
4.	Do parents provide details of any changes to prescriptions or the support required?		
5.	Does this correlate with the information provided by the prescriber?		
6.	Is a written record made when a medicine is administered?		
7.	Are risk assessments and plans drawn up for medicines needed on school trips, sporting activities, off site visits etc?		

Notes and actions taken:

STORAGE

		YES	NO
1.	Are all medicines stored safely and appropriately?		
2.	Is key security appropriate?		
3.	Are appropriate quantities of medicines held?		
4.	Are emergency medicines easily accessible e.g. asthma inhalers and adrenaline pens?		
5.	If medicines require fridge storage, are they stored safely in an airtight container, clearly labelled and separated from food?		
6.	Are Controlled Drugs stored securely?		
7.	What is the temperature of the medicines room? (it should be less than 25 °C)		
8.	What is the temperature of the fridge? (it should be between 2 - 8 °C)		
Notes and actions taken:			

BASIC HYGIENE AND HOUSEKEEPING

		YES	NO
1.	Are hands washed prior to administration of medicines?		
2.	Are gloves worn when creams are administered?		
3.	Are storage cupboards clean, tidy and secure?		
4.	Are expiry dates of medicines checked?		
5.	Are containers dated on opening, if appropriate?		
6.	Where necessary, is stock rotated to avoid it going out of date?		
Notes and actions taken:			

ADMINISTRATION

		YES	NO
1.	Is PRN (when required) medication given according to a written protocol in the IHCP?		
2.	Is medication given at appropriate times?		
3.	Have any medications been missed? (state details below)		
4.	Does any child need to take medication out with them e.g. for trips, sporting activities etc?		
5.	Is there an appropriate system in place for this?		
6.	Is there an in/out log for medication for day trips, holidays etc?		
7.	Are any refusals to take medication recorded and reported back to the parents on the same day?		
8.	Is there any evidence of medicines being disguised in food or drink?		
9.	Are liquid doses measured accurately?		
10.	Does the number of tablets remaining agree with the medication records?		
Notes and actions taken:			

RECORDING OF MEDICINES

		YES	NO
1.	Is there an audit trail of (signed in/out) medicines in place? (i.e. medicines received, administered and returned to parents)		
2.	Are all medications signed for when they are administered?		
3.	Are PRN (when required) medications recorded appropriately?		
4.	Are dose changes/amendments to medication accurately recorded on the medication record sheet?		
Notes and actions taken:			

DISPOSAL OF MEDICINES

		YES	NO
1.	Is there a record of all medication returned to parents?		
2.	Do parents collect unused medicines at the end of summer term?		
3.	Are uncollected medicines taken to the pharmacy at the end of the term?		
4.	Are sharps boxes used for disposal of needles?		
Notes and actions taken:			

EMERGENCY PROCEDURES

		YES	NO
1.	Is there a policy in place for dealing with emergencies?		
2.	Are staff aware of who is responsible for carrying out emergency procedures?		
3.	Are staff aware of the circumstances in which to call an ambulance?		
Notes and actions taken:			

NON-PRESCRIBED MEDICINES

		YES	NO
1.	Does the school's policy allow the administration of non-prescribed medicines?		
2.	If yes, has specific prior written permission been given from the parents for any non-prescribed medicine to be administered?		
3.	Is there certification in writing from the parents that the medicine has been administered to the child in the past without adverse effect? (Best Practice)		
4.	If children are receiving non-prescribed medicines, has the possibility of interactions with other medicines been considered?		
5.	Has a healthcare professional been consulted for advice?		
6.	Are staff aware that a child under 16 should never be given aspirin-containing medicine unless prescribed by a doctor?		
Notes and actions taken:			

SELF-ADMINISTRATION OF MEDICINES

		YES	NO
1.	Are children encouraged and supported to take responsibility for their own medicines where appropriate?		
2.	Are risk assessments carried out for children who self-administer?		
3.	Have the parents and/or health professionals been involved in the decision?		
4.	Is supervision of medicines administration required by staff for any children?		
5.	Do any children carry their own medicines with them?		
6.	Has this been risk assessed and monitored?		
7.	Has a parental consent form been completed?		
8.	Has a risk assessment for self-administration of Controlled Drugs been undertaken?		
9.	Are these Controlled Drugs kept in safe custody with the child being able to access them as appropriate?		
10.	Are storage arrangements appropriate for children self-administering medicines?		

Notes and actions taken:

ADVICE AND TRAINING

		YES	NO
1.	Have all relevant staff been trained to administer medicines?		
2.	Is all staff training documented?		
3.	Has a healthcare professional been consulted for the training of specialist tasks e.g. adrenaline pens, insulin etc		
4.	Have staff competencies been assessed?		
5.	Have staff received a refresher medication training course after 2 years to update them on latest procedures and guidelines?		
6.	Are all staff aware of their responsibilities?		
7.	Do staff know who to contact for advice and support?		
8.	Have all medication errors and incidents been documented?		
9.	Have these incidents been audited and used as an educational tool to improve practice and prevent recurrence?		
Notes and actions taken:			