



# Medication Policy and Procedures

Autism Mentors Ltd – Neurodiversity Mentoring & Support Services

Location: Oxfordshire, UK

Effective Date: 1st September 2025

Next Review Date: September 2026

## 1. Policy Statement

Autism Mentors Ltd is committed to delivering safe, person-centred, and dignified medication support to children, young people, and adults, including those with Special Educational Needs (SEN) and complex health conditions.

This policy sets out the procedures, responsibilities, and standards for the safe handling, administration, recording, and monitoring of medication. It is underpinned by current legislation, national guidance, and local Oxfordshire safeguarding procedures to ensure that every individual receives support that is safe, respectful, empowering, and tailored to their needs.

## 2. Values

- **Safe and Person-Centred Practices**

We will establish clear, safe, and person-centred procedures for the storage, handling, and administration of medication, in line with best practice and regulatory standards.

- **Promoting Independence**

Wherever possible, we support individuals to manage their own medication, encouraging independence while safeguarding their wellbeing.

- **Dignity and Respect**

All individuals will be treated with dignity and respect in relation to their medical history,

preferences, and treatments. Confidentiality will be maintained at all times.

- **Competence and Accountability**

Staff will only administer medication where they are trained, competent, and confident. Continuous training and professional development will be undertaken.

### **3. Scope**

This policy applies to all staff, self-employed associates, and contractors working with Autism Mentors Ltd who may provide medication support in:

- Client homes
- Schools or colleges
- Community settings

It covers:

- Prescribed medication
- Over-the-counter treatments
- Emergency medication (e.g. EpiPens, inhalers, buccal Midazolam)
- Alternative or home remedies (where documented and agreed in the care plan)

### **4. Legal and Regulatory Compliance**

Autism Mentors Ltd complies with relevant UK laws, regulations, and guidance, including:

- Medicines Act 1968
- Misuse of Drugs Act 1971 and Misuse of Drugs (Safe Custody) Regulations 1973
- Health and Social Care Act 2008 (Regulated Activities Regulations 2014)
- Care Act 2014
- Children Act 1989 & 2004

- Mental Capacity Act 2005
- NICE Guidance: Managing Medicines for Adults Receiving Social Care in the Community (2017)
- Working Together to Safeguard Children (2023)
- Oxfordshire Safeguarding Children Board (OSCB) and Oxfordshire Safeguarding Adults Board (OSAB) procedures
- UK GDPR and Data Protection Act 2018

## 5. Responsibilities

### Company Responsibilities

- Provide policies, risk assessments, and procedures for safe medication handling
- Ensure staff complete appropriate training and competency checks
- Promote reporting, accountability, and a culture of safety and learning

### Staff and Contractor Responsibilities

- Follow this policy, all care plans, and risk assessments
- Only administer medication if trained and competent
- Report errors, side effects, or concerns immediately to Designated Safe Guarding Lead (DSL)
  - Name: Michelle Wray
  - Tel: 07707764876
  - email: dsl@autismmentors.co.uk
- Maintain accurate records and respect client consent and confidentiality

## 6. Training and Competency

All staff and contractors who may be required to administer or support with medication must complete accredited training, including:

- Safe Handling of Medicines

- Competency Assessment in Administration of Medicines
- Annual refresher training

Condition-specific training (where applicable) includes:

- Buccal Midazolam administration
- EpiPen/Anapen use
- Rescue inhalers for asthma
- PEG and NG tube administration (where relevant)

No medicines-related task will be undertaken without adequate training and competence.

## **7. Consent**

- Adults: informed consent will always be obtained before administration.
- Children: parental/guardian consent is required, along with the child's cooperation at the time of administration. Children will never be forced to take medication.
- Where capacity is lacking: decisions will be made in line with the Mental Capacity Act 2005, including best interest meetings and professional consultation.

## **8. Medicines Support and Administration**

- An accurate, up-to-date list of all medications will be kept in the individual's care plan.
- Medicines will only be administered in accordance with the 6 Rights of Administration:
  1. Right person
  2. Right medicine
  3. Right dose
  4. Right time
  5. Right route

6. Right to refuse
  - Covert administration will only be used in exceptional circumstances, with lawful authorisation, capacity assessments, and best interest decisions.
  - All medicines must be dispensed from pharmacy-labelled containers or monitored dosage systems.
  - Records of administration (MAR charts) will be completed and securely retained for 8 years.
  - Any errors, refusals, or side effects will be reported immediately and recorded.

## **9. Storage of Medicines**

- Secure storage (locked cupboard or fridge) is strongly recommended where possible.
- In client homes, the final responsibility for safe storage lies with the individual or their parent/carer, following pharmacy label instructions.
- Controlled drugs will be handled in line with Misuse of Drugs legislation.

## **10. Risk Management**

- Each client will have a personalised medication risk assessment.
- Risk assessments will be reviewed annually, or sooner if:
  - Medication changes
  - Errors occur
  - There are capacity changes or incidents

## **11. Incident Reporting**

- All medication errors, near misses, or concerns will be recorded and investigated within 24 hours.
- Serious incidents will be escalated to safeguarding teams or the CQC/HSE where required.
- A “just culture” of learning and improvement will be promoted.

## 12. Review

This policy will be reviewed annually, or sooner if there are changes in legislation, local safeguarding procedures, or following an incident.

### Policy Approval

Signed:

A handwritten signature in black ink, appearing to read "M W".

Name: Michelle Wray [Director / Safeguarding Lead]

Date: 1/9/25