



MANAGING MEDICINES IN SCHOOL

Last reviewed: June 2019

This policy has been based on local authority guidance, and guidance from the DfE (Code of Practice for Schools – Disability Discrimination Act 1995: Part 4) (Disability Rights Commission, 2002), Supporting pupils at school with medical conditions (DfES, 2014) and Guidance on First Aid for Schools: a good practice guide (DfE, 1998), in conjunction with the medically trained staff, and the Headteacher, subject to approval by Governors.

Policy Written by J. Taylor/updated by E. Gray

INTRODUCTION

There is no legal requirement for school staff to administer medicines. Staff are expected to do what is reasonable and practical to support the inclusion of all students. The DfE states that the Children and Families Act 2014 places a duty on schools to 'make arrangements to support students at their school with medical conditions'.

AIMS

1. To ensure that all pupils with medical conditions, in terms of physical and mental health, are supported in school so that they can play a full and active role in school life.
2. To ensure the safe administration of medicines to children where necessary.
3. To ensure the on-going care and support of pupils with long term medical needs via an individual health care plan (IHCP).
4. To explain the roles and responsibilities of school staff in relation to medicines.
5. To clarify the roles and responsibilities of parents and carers in relation to children's attendance during and following illness (please refer to section: School Attendance During/After Illness).
6. To outline to parents, carers and school staff the safe procedure for bringing medicines into school when necessary and their storage.
7. To outline the safe procedure for managing medicines on school trips.

ROLES AND RESPONSIBILITIES

Leadership team

- To bring this policy to the attention of school staff and parents and to ensure that the procedures outlined are put into practice.
- To ensure that there are sufficient appointed persons for the school to be able to adhere to this policy.
- To ensure that staff receive appropriate support and training.
- To ensure any IHCP provided by medical professionals for pupils with complex or long-term medical needs are discussed with parents and information shared with relevant staff for the wellbeing of the child.
- To ensure that parents and carers are aware of the school's **Administration of Medicines Policy (Appendix A)**.
- To ensure that this policy is reviewed annually.

All staff

- To follow the procedures outlined in this policy using the appropriate forms.
- To share medical information as necessary to ensure the safety of a pupil, in line with GDPR rules and regulations.
- To retain confidentiality.
- To take all reasonable precautions to ensure the safe administration of medicines.
- To contact parents or carers with any concerns without delay.
- To contact emergency services if necessary without delay.
- To keep the first aid room and first aid boxes stocked with supplies.
- Educational Visits Leader – see '**MEDICINES ON SCHOOL TRIPS**' below.
- The school is responsible for contacting parents/carers if the medicines cannot be given on the date due.
- If the pupil refuses to take the medicine, or allow a specific procedure, the school will not force them to do so. The school will inform parents/carers as soon as possible and on the same day.

Parents and Carers

- To give the school adequate information about their child's medical needs prior to a child starting school; and any changes, such as higher/ lower dosage during their time at school.
- To follow the school's procedure for bringing medicines into school.
- To only request medicines to be administered in school when essential.
- To ensure that medicines are in date and that asthma inhalers are not empty.
- To notify the school of changes in a child's medical needs, e.g. when medicine is no longer required or when a child develops a new need, e.g. asthma.
- To ensure that any medical equipment needed to provide care for their child is kept up to date and replaced when necessary.

SCHOOL ATTENDANCE DURING/AFTER ILLNESS

- Pupils should not be at school when unwell, other than with a mild cough/cold.
- Symptoms of vomiting or diarrhea require a student to be absent from school and not to return until clear of symptoms for 48 hours if there are a lot of cases.
- Pupils should not be sent to school with earache, toothache or other significant discomfort.
- Pupils should not be sent to school with an undiagnosed rash or a rash caused by any contagious illness.
- Any other symptoms of illness which might be contagious to others or will cause the pupil to feel unwell and unable to fully participate in the school day require the student to be absent from school.
- Pupils should not return to school after a medical procedure before the designated time advised by professional medical staff.

SAFE ADMINISTRATION OF MEDICINES AT SCHOOL

- Medicines should only be brought to school when essential, i.e. where it would be detrimental to the pupil's health if the medicine were not administered during the school day. In the case of antibiotics, only those prescribed more than three times a day may be administered at school.
- Only prescribed medicines (including eye drops) in the original container labelled with the student's name and dosage will be accepted in school.
- Painkillers, such as paracetamol, ibuprofen, hayfever or travel sickness tablets, may NOT be brought in to school without checking with school first.
- Medicines will not be accepted in school that requires medical expertise or intimate contact unless there is a prior agreement with the Headteacher.
- All medicines must be brought to the school office by an adult.
- The adult is required to complete a parental agreement form (see **Appendix B**) at the school office for the medicine to be administered by school staff.
- The Headteacher must be informed of any controlled drugs required by children, e.g. equasy, insulin.
- Tablets should be recorded when brought to the office and when collected again.
- Administration of medicines at school must be recorded on the pupil's medicine log by the appointed person dealing with the administration, and witnessed by a second member of staff.
- Parents may come to the school reception to administer medicines if necessary.
- If a pupil refuses to take medicine, staff must not force them to do so. The refusal should be recorded and parents informed as soon as possible.

STORAGE OF MEDICINES

Medication must be stored in accordance with the storage instructions on the packaging:

- Medication that stipulates it should be stored in a cold place must be kept in the First Aid fridge located in the School Office.
- Medication that stipulates it should be stored at room temperature must be stored in the locked first aid cupboard located in the School Office.
- Adrenalin pens (Epipen/Jext/Emerade) – parents should provide school with 3 of these for each child (each in their original packaging and labelled with the child's name).

Pen 1 will be kept in an insulated storage bag and remain with the child in the classroom and taken outside for outdoor lessons – a nominated member of staff will be responsible for the safekeeping of this medication. Located in bright green storage bag, on hook, up high but within reach, at entrance of classroom.

Pen 2 will be stored in the School Kitchen where it is out of reach of children but accessible. Located in bright green storage bag near back door of Kitchen.

Pen 3 will be stored in an insulated storage bag in the School Office. (a) Break time - a nominated member of staff will be responsible for collecting it at the beginning of break times to take on to the school playground and for returning it to the School Office at the end of break time. (b) Lunch time - a nominated member of the Midday Team will be responsible for collecting it at the beginning of lunch time to take on to the school playground and for returning it to the School Office at the end of lunch time. Two bright greens storage bags – one for KS2 and one for FS2/KS1.

- Sharps should be disposed of in the designated sharps box located in the First Aid cupboard located in the First Aid Room.
- Asthma inhalers should be stored in the office, and labelled with the pupil's name and should be taken with the pupil during physical activities on and off site. As there is no risk of overdose from this medication, it is not administered by a nominated member of staff or recorded and witnessed. However, if a child is requiring it frequently throughout the day and their medical situation is deteriorating, a call will be made home to advise.
- No medicines may be kept in the classroom with the exception of adrenalin pens and inhalers where children need to be able to reach them quickly if necessary.
- Parents are responsible for the safe return of expired medicines to a pharmacy.

MEDICINES ON SCHOOL TRIPS

Pupils with medical needs are given the same opportunities as others. Staff may need to consider what is necessary for all pupils to participate fully and safely on school trips. Staff should discuss any concerns about a pupil's safety with parents and carers.

- 1a. The trip leader is responsible for ensuring that the medical needs of all the children participating in the visit have been identified.
- 1b. The trip leader is responsible for designating a person trained in administering relevant medicines for the trip. This person will be responsible for ensuring the correct medicines and health care action plans are taken on the trip (including first aid equipment).
- 1c. The trip leader is responsible for ensuring that arrangements are in place for any pupil with medical needs prior to a trip taking place, including ensuring that asthma inhalers are carried as required. A copy of any relevant health care action plan should be taken on the trip. If a pupil needs medication to be administered during the visit, a parental consent form must be completed by the parent/carer prior to the visit. The appropriate amount of medication (ideally in its original packaging and named) must be handed over to the designated member of staff on the morning of the visit.
- 1d. The designated school person (named in 1b) on the trip will administer any medicines required in the presence of a witness and record and store the details in a secure manner.
- If this trip is an overnight residential, this information will be transferred on to an secure electronic pupil medicine log for the designated member of staff to access whilst off-site and record the administration of medicine; this must be in the presence of a witness (with exception to inhalers).
- 1e. The person (named in 1b) will return any unused medicines to the School Office on return to school.
- 1f. All medications must be kept safe by the person named in 1b. Medicines on residential trips must be safely stored with the same care and consideration outlined in safe Storage of Medicines (see above).

APPENDIX A

ADMINISTRATION OF MEDICINES

1 GENERAL

1.1 No medicine should be administered unless clear written instructions to do so have been obtained from a doctor. The school reserves the right to refuse responsibility for the administration of medicine in some instances.

1.2 Children who are acutely ill and who require a short course of medication e.g. antibiotics, will normally remain at home until the course is finished. If it is felt by a medical practitioner that the child is fit enough to return to school, he/she can sometimes adjust the dose so that none is required during school hours.

1.3 For each child, medicines should be administered by named individual members of school staff (with specific responsibility for the task) in order to prevent any errors occurring. All children who require medication to be given during school hours should have clear instructions where and to whom they report. This procedure will only be necessary where medicines have to be taken for an extended period of time or retained by the school for emergency purposes.

1.4 The parents or legal guardians must take responsibility to update (with a doctor's signature) the school of any changes in administration for routine or emergency medication and maintain an in date supply of the medication. Any unused or time expired medication must be handed back to the parents or legal guardians of the child for disposal.

1.5 All medicines must be clearly labelled with the child's named, route i.e. mode of administration oral/aural etc., dosage, frequency and name of medication being given. Oral medication must be in original packs with the original prescription label.

1.6 Inhalers and other emergency treatment medication (see below) must follow the child to the sports field/swimming pool/ trips, etc. All other medicines (except inhalers) should be kept securely.

1.7 If there is any difficulty about the use of medicines, including injections or inhalers, the school nurse or specialist nurses should be contacted for advice.

1.8 A record of medication given in school must be kept in the School Office.

1.9 Staff must be issued by the school with disposable protective gloves and aprons to be used where appropriate.

1.10 Staff asked to handle hazardous material e.g. "sharps" should request specific information regarding disposal. It is usually the case that this is sent home.

1.11 Procedures, including tube feeding, can only be carried out by trained staff. A care plan must detail all aspects of the procedure. A copy to be maintained in the School Office.

1.12 Cough sweets are considered as confectionary and therefore cannot be eaten in class. They are not a prescribed medicine.

1.13 Medical Alerts -The Headteacher and administration staff will regularly check the medical alerts website to ensure school has up to date information and will inform whoever necessary if there are any changes.

2 LONG TERM MEDICATION

2.1 The medicines in this category are largely preventative in nature and it is essential that they are given in accordance with instructions, see paragraph 1.5 above, otherwise the management of the medical condition is hindered.

2.2 In addition, the parents/carers must be informed that they must update the Medical Form to report any changes in medication to the school. Schools may need to offer support in the completion of this form where parents have literacy problems or where English is not their first language.

2.3 It is sometimes necessary to explain the use of medication to a number of pupils in the class in addition to the affected child so that peer group support can be given.

2.4 Long term medication is particularly applicable to the management of asthma and diabetes.

2.5 Use of Inhalers

- i) Advice for school staff on the management of asthma for individual children (including emergency care) will be provided by the school nurse or main first aider, as requested.
- ii) Any difficulties in the use of an inhaler or understanding about medication usage should be referred to the school nurse or main first aider for further advice.
- iii) It is important that the reliever inhalers are immediately accessible for use when a child experiences breathing difficulties or when specifically required prior to a sporting activity and outings.
- iv) If a midday dose of a preventative inhaler is prescribed, this must be given in accordance with section 1 – see above.

2.6 In the instance of long-term, ad-hoc prescribed medication (e.g. antihistamine for hayfever, paracetamol or ibuprofen for migraines) a telephone call must be made to the parent/carer prior to administration. This is to establish the last time administered to avoid the risk of overdose.

3 EMERGENCY TREATMENT

3.1 No emergency medication (insulin, inhalers, adrenalin pen) should be kept in the school except those specified for use in an emergency (see 1.1 above). In exceptional circumstances a student can carry their emergency medication with prior arrangement with the Headteacher. This may be applicable for diabetics.

3.2 Advice for school staff about individual children will be provided by the school nurse, the school main first aider or other health care professionals on request.

3.3 Information will be recorded on the care plan and filed in the school office and in the pupil's individual file.

3.4 If it is necessary to give emergency treatment, a clear written account of the incident must be given to the parents/carer of the child, and a copy retained in the school.

All members of staff must sign to confirm that they have read and understood the Policy and Guidance for supporting pupils with medical needs.

4 TRAINING STAFF

4.1 The Leadership team are responsible for the implementation of this policy.

4.2 The Leadership team will ensure that staff allocated to the roles of administering medicines are adequately trained.

4.3 The Leadership team will name staff responsible for administering medicines, or delegate the role to a trained member of staff as appropriate.

4.4 The Leadership team will ensure that all staff are updated on the medical needs of the pupils; be able to access the names of the students with IHCP; be aware of the changes to pupils' medical needs; aware of who the lead staff are when faced with an issue to do with administering medicines.

4.5 The SENDCo is responsible for ensuring the writing, maintaining and monitoring of IHCPs.

5 INDIVIDUAL HEALTH CARE PLANS

5.1 The SENDCo is not responsible for writing an IHCP. IHCPs are produced by medical professionals and should be forwarded to the SENDCo for their consideration.

5.2 The Senior Leadership Team (including the SENDCo) are then responsible for sharing this information with relevant staff.

5.3 The Senior Leadership Team is also responsible for ensuring that relevant information, pertaining to the health of a pupil, is available at the start of the pupil's admission whenever possible e.g. liaising with previous school/nursery.

5.4 Where there is disagreement about the need for an IHCP, between the parents, medical professional and school, the Headteacher will take the advice of the medical professional and then decide accordingly.

5.5 The IHCP should be linked to, or be part of, a child's Education and Health Care Plan.

6 ROLES AND RESPONSIBILITIES

<u>ROLE</u>	<u>NAME OF PERSON RESPONSIBLE</u>
Headteacher	Mr. I. Johnson
<ul style="list-style-type: none"> Responsible for the implementation of this policy and ensuring all medical information is shared with relevant staff 	

<u>ROLE</u>	<u>NAME OF PERSON RESPONSIBLE</u>
SENDCO	Mrs. E. Balfour
<ul style="list-style-type: none"> Responsible for ensuring risk assessments are regularly updated, including medical needs 	
<ul style="list-style-type: none"> As part of the Senior Leadership Team, sharing the information in an IHCP with relevant staff 	
<ul style="list-style-type: none"> Reviewing Individual Health Care Plans which have been written and sent by a medical professional 	

<u>ROLE</u>	<u>NAME OF PERSON RESPONSIBLE</u>
Overseeing the administration of medicines	Administration Staff and School Business Manager E. Gray/J. Blackshaw/J. Hurst/S. Shaw
<ul style="list-style-type: none"> Checking validity of medicines 	
<ul style="list-style-type: none"> Ensuring medicines are stored correctly 	
<ul style="list-style-type: none"> Ensuring that only trained staff are administering medicines 	
<ul style="list-style-type: none"> Contacting parents about any issues concerning the administration of medicines 	
<ul style="list-style-type: none"> Recording the administration of medicines 	

APPENDIX B

MARKEATON PRIMARY SCHOOL
 BROMLEY STREET
 DERBY DE22 1HL



Headteacher: Mr. I Johnson
 School/Medicine Parental Consent

Telephone: 01332 347374

PARENTAL CONSENT - ADMINISTRATION OF MEDICINES IN SCHOOL

TO BE COMPLETED BY THE PARENT/GUARDIAN OF ANY CHILD REQUESTING THAT DRUGS BE ADMINISTERED UNDER THE SUPERVISION OF SCHOOL STAFF (medicine prescribed by Doctor only)!

If you need help to complete this form, please contact the School Office.

Please complete in block letters.

Name of Child

Date of Birth

Teacher/Class

The Doctor has prescribed as follows for my child:

Name of drug?	When? (e.g. lunchtime/after food/when wheezy)	Duration? (e.g. 2 days/until medication finished)	How much? (e.g. 5ml/1 tablet/2 drops)	Route? (e.g. by mouth/in each ear)	Any special storage instructions? (e.g. keep cool/room temperature)

- I request that the treatment be given in accordance with the above information by a named member of the school staff who has received all necessary training and in the presence of a witness. ***Please note: children will be responsible for administering their own inhalers and therefore, will not be documented.***
- I undertake to supply the school with the drugs and medicines in the original packaging with my child's name and date of birth printed by the Dispensing Chemist.
- I accept that, whilst my child is in the care of the school, the school staff stand in the position of parent and that the school staff may therefore need to arrange any medical aid considered necessary in any emergency. If emergency aid is required, I will be told of any such action as soon as possible.

I can be contacted on the following telephone numbers:

Contact 1 Name Relationship to child

Contact telephone nos: (home) (work) (mobile)

Contact 2 Name Relationship to child

Contact telephone nos: (home) (work) (mobile)

Signed

Parent Name

Date

Please refer to our Managing Medicines in School policy for more information, available on our website www.markeaton.derby.sch.uk

Child's Name:

Class:

