

ADMINISTERING OF MEDICINES POLICY

(Please refer also to First Aid and Medical Policy)

This policy applies to the whole school including the Early Years Foundation Stage.

Scope

This Policy is applicable to all employees and / or others who may administer medication at the school. This policy sets out how prescribed and non-prescribed medicines are managed for the benefit and safety of all pupils and staff. It takes into account regulatory requirements, Section 100 of the Children and Families Act 2014, and DfE guidance; "Supporting Pupils at school with Medical Conditions" Dec 2015, although this is not a statutory document for Independent schools, and "Managing Medicines in Schools and Early Years Settings" March 2015.

This policy is reviewed every year or if legislation changes.

Objectives

To ensure that the school administers medicines in an appropriate manner by:

- Having authorised persons in place to administer the medication
- Having a contingency plan in place for issues which may arise from the administering of medication

General

Medicines should only be brought into the school or the setting when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school/setting day and where approval to do so has been sought and given.

The School recognises that occasionally pupils will, at some time, need to take medication at school. While parents retain responsibility for their child's medication, the school has a duty of care to the pupils during school hours, and the Governors wish to do all that is reasonably practicable to safeguard and promote children's welfare. In order to ensure that correct procedures are followed in the administering of medicines the Governors have appointed a medical advisor (who is also a Teaching Assistant); Ms. Wendy Allaway and have also ensured that adequate numbers of staff are trained in first aid and how to administer medicines. The School shall inform parents/carers of this policy.

Responsibilities

The Governors take responsibility for the administration of medicines during school time in accordance with the government's guidelines.

The Headmistress will implement this policy and report as required to the Governors.

Medication will normally be administered by the office staff who are trained in First Aid. In their absence children will be sent to another appropriately trained member of staff. We aim for all staff to be trained in First Aid.

All staff are expected to maintain professional standards of care but have no contractual or legal duty to administer medication.

Staff Indemnity

The Governors through the School will fully indemnify all staff against claims for any alleged negligence, providing they are acting within their conditions of service and following Governor's guidelines.

The indemnity covers situations where an incorrect dose is administered or where any other mistake in the procedure is made. The Governors through the School will be responsible for any claims in these circumstances.

Parent/carers responsibilities for their child's medical needs

It is the parents/carers' responsibility to provide the school with sufficient written information about their child's medical/health needs if treatment or special care is required.

Responsibility for administering non-prescribed medicines or common remedies to a child in a school or other setting lies with the child's parent/carer. It is the child's parent/carer who is responsible for providing permission for the issuing of non-prescribed medicines in the first instance. It requires only one parent/carer to agree to or request that medicines are administered to a child. It is likely that this will be the parent/carer with whom the school has day-to-day contact.

Parent/carers will be advised that the school will not administer non prescribed medications for a period exceeding 8 days (including weekends) without a written care plan.

It is the parents/carers' responsibility to keep their children at home when they are acutely unwell.

Administration of Medication

Parents/carers must provide full written information about their child's medical needs to the school /setting at the time of acceptance of a place at the school.

Any requests for medicine to be administered must come from a parent in writing on the school's **Parental Agreement for School to Administer Medicine** Form (see Appendix A), which must be completed in full, and each request will be considered on an individual basis.

Short-term prescription requirements should only be brought to the school/setting if it is detrimental to the child's health not to have the medicine during the day. If the period of administering medicine is prolonged for any reason (more than 8 days including weekends), the parent must discuss with the school an individual healthcare plan that may be required in this case.

All children must have a separate form completed for each medicine to be administered.

Parents will be expected to notify any requests for the administration of medicines at the earliest opportunity and to discuss it with a member of the office staff trained in First Aid. If there are any concerns about the medicine and its administration the Headmistress will be consulted. She will decide whether this medication will be administered in school, and by whom (usually the office staff). In appropriate cases the Headmistress and parents in consultation with the office staff (and anyone else the Headmistress deems necessary) will draw up a healthcare plan.

The medication must be in a container as prescribed by the doctor and dispensed by a chemist with the child's name, dosage instructions and method of administration printed clearly on the label. The expiry date of the medicine should also be visible to check. Medication cannot be accepted without its proper label. Medication must be handed to/collected from the office by an adult. In no circumstances are children permitted to carry any medication without the permission of the Headmistress.

The school will not deal with any requests to renew the supply of the medication. This is entirely a matter for the parents.

If the pupil is required and able to administer her own medicine (e.g. inhaler for asthma) the office staff will check that the pupil fully understands what has to be done and will supervise the administration.

Normally medication will be kept under the control of the school office unless other arrangements are made with the parent. Asthma inhalers, auto injectors and cough sweets or strepsils can be carried by the pupils.

Normally the administration of medication will only be done in school at the following times:

- immediately before school
- breaks and lunch time
- exceptionally, immediately after the end of the school day
- inhalers for asthma – before sport or as required
- auto-injectors when needed

The school may allow the administration of the following non-prescription medicines to children if parent/carer consent is gained or in exceptional circumstances where parental consent is unobtainable and a member of staff is acting in loco parentis, for a period not exceeding eight days (including weekends).

- Infant Calpol/calpol 6+/fastmelts
- Piriton linctus or tablet
- Nurofen (ibuprofen) – up to 12 years
- Strepsil throat lozenges (If supplied by the parent for an individual child in a named box)
- Anthisan cream for bites
- Arnica for bruises

Supplies of these medicines will be kept in the office (except Strepsils).

Parents are required to complete consents on SchoolBase for the administration of all medicines and to ensure that these are always up to date.

Administration of creams or lotions.

Where there is a requirement to administer a cream or lotion to an EYFS child permission needs to be sought from the parent. Key Stage 1 and 2 children will be expected to apply it themselves and be taught at home how to do this.

If medication is administered, parents will be informed.

Logging information

Logs for recording administration of inhalers and non-prescription medicines are updated and stored on the All Staff Granville area in the Pastoral Section. The folder is called **Medical** and allows who ever administers the medicine or inhaler to record the data and keep a check on the dosages and pattern of need.

The administration of Medication Record Form must be completed in every instance.

The form will record:

- Name of the pupil
- Date and time of the administration
- Who supervised the administration
- Which medication
- How much was given
- A note of any side-effects
- Whether the parents were contacted

Intimate or Invasive Treatment

The school will not allow these to take place in school, unless in an emergency.

Long-term Medical Needs

The Governors and Headmistress will do all they reasonably can to assist pupils with long-term needs. Each case will be determined after discussion with the parents, and in most cases the family doctor. The Governors also reserves the right to discuss the matter with the school's medical adviser, with parental consent. Confidentiality will be respected at all times.

Managing medicine on trips, outings and during sporting activities

The school/setting will consider what reasonable adjustments might be made to enable children with medical needs to participate fully and safely on visits. This may extend to reviewing and revising the visits policy and procedures so that planning arrangements incorporate the necessary steps to include children with medical needs. It might also incorporate risk assessments for such children and information from their individual health care plan.

If staff are concerned about how they can best provide for a child's safety or the safety of other children on a visit, they should seek parental views and advice from the child's GP.

The school/setting will support children wherever possible in participating in physical activities and extra-curricular sport. There should be sufficient flexibility for all children to follow in ways appropriate to their own abilities. Any restriction on a child's ability to participate in PE should be recorded on their health care plan. All adults should be aware of issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise, and may need access, for example, to asthma inhalers. Staff supervising sporting activities should be aware of relevant medical/health conditions, and will consider the need for any specific risk assessment to be undertaken.

Training

The Governors are committed to providing appropriate training for all teachers, classroom assistants and administrative staff. The school will ensure that there are sufficient members of staff who manage medicines. This will involve participation in appropriate training which consist of both accreditation courses and online CPD training through our training provider.

Critical incidents

In an emergency at school (fire / evacuation) the office staff are responsible for collecting the medicines of children whose lives are at risk without it.

Safe storage of medicines

The school/setting will only store, supervise and administer medicine that has been prescribed for an individual child unless written consent to administer a non-prescribed medicine has been given by the parent/carer or by the individual acting in loco parentis.

Medicines will be stored securely and strictly in accordance with product instructions - paying particular note to temperature and in the original container in which dispensed.

Staff will check that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine, the method and frequency of administration, the time of administration, and the expiry date. The school/setting staff must not alter or add to the label. Medicines that do not comply with these requirements will be returned to the parent/carer.

Where a child needs two or more prescribed medicines, each will require a written consent and be provided in a separate container.

All emergency medicines, such as asthma inhalers and auto injectors, will be readily available to children and will not be locked away. A spare asthma inhaler and auto injector is also available in the school office.

Schools will allow children to carry their own inhalers. If the child is too young or immature to take personal responsibility for their inhaler, staff will make sure that it is stored in a safe but readily accessible place, and clearly marked with the child's name.

Other non-emergency medicines will be kept in a secure place not accessible to children.

Some medicines need to be refrigerated. They can be kept in a refrigerator containing food but *must* be in an airtight container and clearly labelled. There will be restricted access to a refrigerator holding medicines.

Disposal of medicines

Staff must not dispose of medicines. Parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. Return of such medicines to parents/carers will be documented.

Parents/carers should also collect medicines held at the end of each term. If parents/carers do not collect all medicines, they will be taken to a local pharmacy for safe disposal. This process will be documented.

Monitoring and Review

The Headmistress will be responsible for monitoring the implementation of the policy and reporting annually to a prescribed committee of the Governors.

Linked Policies:

- First Aid and Medical

Parents of new pupils are provided with SchoolBase Parent Portal access and are requested to complete the medical information and medical consents in the Portal before they join the school.

Appendix A

Parental agreement for school to administer medicine

The school has a policy that staff can administer medicine, although will not give your child medicine unless you complete and sign this form (except those for which you may have given consent in the SchoolBase

Parent Portal: specifically, Anthisan, Arnica, Calpol, Ibuprofen, Piriton, emergency auto injector or emergency inhaler). The medication must be in a container as prescribed by the doctor and dispensed by a chemist with the child's name and instructions for administration printed clearly on the label.

The following information must be provided:

Name of child

Class

Medical condition or illness

Medicine required (name)	Dates to be given (e.g. every day)	Dosage required	Times per day

Name of medicine (as described on the container)

Name of Dr who prescribed medicine

Phone no of Dr

Date Dispensed

When to be administered

Any other information?
.....
.....

I understand that I must deliver/collect the medicine personally to/from the School Office.

I accept that this is a service that the school is not obliged to undertake.

I understand that I must notify the school of any changes in writing.

Signature

Date

Name..... **Contact No.**

Appendix B

Dealing with Anaphylaxis

Someone experiencing anaphylaxis should be placed in a comfortable position.

Most people should lie flat.

Pregnant women should lie on their left side to avoid putting too much pressure on the large vein that leads to the heart.

People having trouble breathing should sit up to help make breathing easier.

People who are unconscious should be placed in the recovery position to ensure the airway remains open and clear – place them on their side, making sure they're supported by one leg and one arm, and open their airway by lifting their chin.

Avoid a sudden change to an upright posture such as standing or sitting up – this can cause a dangerous fall in blood pressure.

There is no need to remove clothing to use your EpiPen®, but make sure the orange end will not hit buckles, zips, buttons or thick seams on your clothes.

To remove EpiPen® from the carry case. Flip open the lid on the carry case. Tip the carry case and slide the EpiPen® out of the carry case.

Lie down with your legs slightly elevated to keep your blood flowing or sit up if breathing is difficult.

Inject first then call 999 and ask for an ambulance and state anaphylaxis or get a colleague to call while you inject.



Each EpiPen® can only be used once. If symptoms don't improve, you can administer a second EpiPen® after 5-15 minutes.

Appendix C

From DfE: Responding to signs of an asthma attack:

- *Keep calm and reassure the child*
- *Encourage the child to sit up and slightly forward.*
- *Use the child's own inhaler – if not available, use the emergency inhaler*
- *Remain with child while inhaler and spacer are brought to them*
 - ❖ *Immediately help the child to take two separate puffs of the salbutamol via the spacer*
 - ❖ *If there is no immediate improvement, continue to give two puffs every two minutes up to a maximum of 10 puffs, or until their symptoms improve. The inhaler should be shaken between puffs.*
 - ❖ *Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better*
 - ❖ *If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE*
 - ❖ *If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way*
- *The child's parents or carers should be contacted*

Appendix D

Medical Form for Educational Visits

Date..... Class..... First Aider.....

NAME	CONDITION	MEDICATION	WHEN	AM	PM