

Administration of Medicines in School

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SLT Liaison:

Wardle Academy Policy



1. National Context

All schools and early years settings and their employers are expected to develop policies on managing medicines, and to put into place effective management systems to support individual children with medical needs.

Positive responses by school and settings to a child's medical needs will not only benefit the child directly, but can also positively influence the attitude of peers.

2. School Context

The purpose of this procedure is to put into place effective management systems and arrangements to support children and young people with medical needs in our school and to provide clear guidance for staff and parents/carers on the administrations of medicines. This procedure statement must be considered in conjunction with other relevant policies, for example Health and Safety.

3. Roles and Responsibilities: School Staff

All members of staff have a duty to maintain professional standards of care and to ensure that children and young people are safe. Our school will monitor and review individual needs and administer medicines in order to meet the all needs of the child. There is no legal duty requiring staff to administer medication or to supervise a child when taking medicines. This is a voluntary role.

In response to the Disability Discrimination Act (DDA) 1995, we are making reasonable adjustments for disabled children, including those with medical needs. We are also reasonable adjustments to enable children with medical needs to participate fully in all areas of life including educational visits and sporting activities.

Staff, including supply staff, will be informed of any pupil's medical needs where it is relevant and of any changes to their needs as and when they might arise. All staff, parents/carers and pupils will be informed of the designated person with responsibility for medical care.

4. Roles and Responsibilities: Parents/Carers

It is the responsibility of parents/carers to:

- Inform the school of their child's medical needs
- Provide medication in a container clearly labelled with the following:
 - Child's name & form
 - Name of medication
 - Dose and frequency of medication
 - Any special storage arrangements
- Collect and dispose of any medications held in school at the end of each term
- Ensure medications have NOT passed the expiry date

5. Pupil Information

At the start of the school year, parents/carers should give the following information about their child's long term medical needs. THE INFORMATION MUST BE UPDATED AS AND WHEN REQUIRED AND AT LEAST ANNUALLY.

- Details of the pupil's medical needs
- Medication including side effects
- Allergies
- Name of GP/Consultants
- Special requirements e.g. dietary needs, pre-activity precautions
- Cultural and religious views regarding medical care

6. Administering Medication

We expect parents/carers to administer medication to their child at home. No medication will be administered without prior written permission from the parents/carers including written medical authority if the medicine needs to be altered (e.g. crushing of tablets).

A Request to Administer Medicine Form (Appendix A) must be completed. Staff are not legally required to administer medicines or to supervise a pupil when taking medicine. This is a voluntary role.

The Headteacher will determine if medications are to be administered in school, and by whom, following consultation with staff. All medicine will normally be administered during breaks and lunchtimes. If, for medical reasons, medicine has to be taken during the day, arrangements will be made for the medicine to be administered at other prescribed times. Pupils will be told where their medication is kept and who will administer/supervise them taking it.

Any member of a staff, giving medicine to a pupil, should check on each occasion;

- Name of the pupil
- Written instructions provided by parent/carer
- Prescribed dose
- Expiry date

7. Carrying Medicines

For safety reasons, pupils are not allowed to carry medication, other than Inhalers and/or Epi-pens where required. All other medicines must be handed into to reception by parent/carer, along with a completed Request to Administer Medicine form.

8. Storage

All medicine, in the care of the school, will be kept at reception. Reception staff will store pupil's spare inhalers/epi-pens which must be labelled with the pupil's name. Inhalers/Epi-pens and other medicines must be labelled with the required dosage and must be returned to parents when they are out of date.

9. Records

Each time medication is given to child, a member of staff, will complete the medicine log on pupil reception. These sheets record the following:

- Date and time of administration
- Who supervised the administration
- Name of medication
- Dosage
- A note of any side effects

10. Refusing Medication

If a child refuses to take their medication, no member of staff will force them to do so. Parents/carers will be informed as soon as possible. Refusal to take medication will be recorded and dated on the child's record sheet. Reasons for refusal and any actions then taken by the staff member will also be recorded.

11. Training

Training and advice will be accessed from health professionals for staff involved in the administration of medicines. Training for all staff will be accessed on a range of medical needs, including any resultant learning needs as and when appropriate. Details of all training will be recorded.

12. Health Care Plans

When appropriate a personal Health Care Plan, will be drawn up in consultation the school, parents/carers and health professionals. The Health Care Plan will outline the child's needs and level of support required in school. Health Care Plans will be reviews at least annually.

13. Intimate or Invasive Treatment

Intimate or Invasive treatment will only take place at the discretion of the Headteacher with written permission from the parent/carer and only under exceptional circumstances. Two adults, one of the same gender as the child, must be present for the administration of such treatment. Cases will be agreed and reviewed on an annual basis. All such treatments will be recorded. Governors will be informed at least annually of any intimate or invasive treatment carried out.

14. Educational Visits

To enable, as far as possible, all pupils to have access to all activities and areas of school life, a risk assessment will be undertaken to ensure the safety of all participants in educational visits. No decision about a child with medical needs attending/not attending a school visit will be taken without prior consultation with parents/carers.

15. Residential Visits

Sufficient essential medicines and appropriate health care plans will be taken and controlled by the member of staff supervising the visit. If additional supervision is required for activities e.g. swimming, we may request the assistance of the parent/carer.

16. Emergency Procedures

The Headteacher will ensure that all members of staff are aware of the school's planned emergency procedures in the event of medical needs. The Ambulance protocol (Appendix B) should be followed at all times.

Ambulance Protocol

Life Threatening Injuries/Illness

- Attending First Aider to make decision on whether an ambulance is required. Additional first aid support requested.
- Reception to be informed and if necessary call ambulance, unless this has been done by first aider on location.
- Reception to inform one of the following: JAA, JSK, JAH
- Reception to contact parent/carer of pupil involved, explain situation and ask the parents to attend school.
- If parent/carer cannot get to school before Ambulance leaves site, member of staff to accompany pupil until parents can get to the relevant hospital.

Non-Urgent/Life Threatening Injuries/illnesses

Is an ambulance require?

- If Yes – follow above protocol.
- If no but the pupil requires hospital treatment:
 - Reception/First Aider to contact parent/carer to explain the situation and to arrange collection from school.
 - If parent/carer cannot pick up in a suitable timeframe (dependant on injury/illness and pupil discomfort), then First Aider to speak to safeguarding team re transporting pupil the A&E/Urgent Care. There will always be two members on staff accompanying a pupil, one of which will be a first aider.
 - Staff to stay with pupil at the hospital until parent/carer arrives.