

**Managing Medicines in School Policy** 

# Bewdley Primary School is committed to safeguarding and promoting the welfare of children and young people and expects all staff, governors and volunteers to share this commitment.

This policy is written with reference to the DfES document 'Supporting pupils at school with medical conditions' 2014

# **Key points**

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Governing bodies **must** ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

# AIMS

To provide a clear policy that is understood and accepted by all staff, parents and children providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that for such children attendance is as regular as possible.

The policy is to include:

- Procedures for managing prescription medicines which need to be taken in the school day
- Procedures for managing prescription medicines on trips including residential trips
- Roles and responsibilities of staff administering medicines
- A clear statement of parental responsibilities in respect of medicines
- Written permissions from parents for medicines
- Circumstances in which children may take non-prescription medicines
- Assisting children with long term medical needs
- Staff training
- Record keeping
- Safe storage of medicines
- The school's emergency procedures
- Risk assessment and management procedures

# **Prescribed Medicines**

We should never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions. The Medicine Form available in the Medical Room is to be completed by parents / carers.

It is helpful, when clinically appropriate, that medicines are prescribed in dosages that enable it to be taken outside of school hours. We should encourage parents to discuss this with the prescriber. However we do appreciate that with younger children and early bedtimes, doses have to be fitted into a shorter time.

Prescribers should be encouraged to issue two prescriptions, one for home and one for school, thus avoiding the need for repackaging of medicines.

# **Administering Medicines**

No child under 16 should be given medicines without written parent / carer consent. The Medicine Form must be completed by the parent giving permission for medicine to be administered by staff. All medicines should be brought into school by the parent/carer: Members of staff giving medicines should check:

- $\cdot$  The child's name
- · Prescribed dose
- · Expiry date
- · Written instructions on the packaging

Members of staff giving medicines must be willing to perform such tasks and trained where necessary for the task. If in doubt then do not administer medicines without checking with one of the school's First Aiders who should then contact parent / carer.

- Parents should request an 'Administration of Medicine' form from the school office. After completion this form will be photocopied and sent to the class teacher who will remind the pupil to come down to the office. The original will be kept with the medicine in the locked cupboard.
- Office staff will write details on the reminder board in the office.
- Parents are welcome to give the school a phone call to ensure that medicine has been given.
- Medicine will be stored either in a locked box in the fridge in the staffroom or the locked medicine cupboard. Parents should collect this, if needed, at the end of the school day
- Medicine can be administered by all school staff. The details should be logged in the Record book in the medical room, signed, witnessed by another member of staff who will countersign to confirm correct dosage and procedures have been followed.

# **Controlled Drugs**

These should never be administered unless cleared by the Head. Reference should be made to the DfES document 'Supporting pupils at **school** with medical conditions' 2014 which is kept in the medical room.

# **Non-Prescription Drugs**

Staff should **never** give drugs containing aspirin unless there is a prescription for this even when there is permission given by a parent/guardian. New guidelines allow Nonprescription drugs such as Calpol, other paracetamol based medicines, throat lozenges to be given if a parent completes the Medicine form. Should this be an ongoing need (above 5 days) a health care plan will need to be put in place so that the child's needs can be monitored. Should written consent be difficult to obtain, school staff can administer non prescriptive medicine if verbal permission is given and is witnessed by two members of staff.

# **Short Term Medical Needs**

In order to reduce the time a child is away from school, the school may administer medicines, for example, the end of a course of antibiotics or apply a lotion, but only for a short course of up to 5 days, and only when previous avoidance strategies have been examined. Note the exceptional terms in the previous paragraph. The Medicine Form should be completed by parents / carers.

# Long Term Medical Needs

The school should be fully informed of the child's needs before admittance. It is essential to have sufficient information in order for the child's medical needs to be adequately supported. ('Supporting pupils at school with medical conditions' 2014) A Healthcare plan will be drawn up with the parent/carer and healthcare professional where needed.

#### Self-Management

Children who are able should be encouraged to manage their own medicines. This should generally apply to relief treatments for asthma. Other medicines should be kept in secure storage so access should only be through the medical room.

#### **Educational Visits**

All medicines required by children on such undertakings should be part of the overall risk assessment for the visit. Medicines not self managed by pupils should be in the safe care of a nominated member of the support staff. This colleague should be one who is willing to carry this responsibility. If any member of staff is concerned they should seek advice from the School First Aiders. Travel sickness pills should be in labelled boxes and an 'Administration of Medicine' form should be completed.

# **Residential Visits**

If a pupil requires medicines which he / she takes at home only i.e. not during the school day, then the Medicine form must be completed by parents / carers before departure for the medicine to be administered during the residential. This should be administered by a member of staff who is willing to carry out the task and witnessed by a second member of staff. There should be two members of staff willing to accept this responsibility. A record of medicines administered should be completed.

# **Sporting Activities and Off-site Venues**

Given the distance between the school and many off-site sporting / venues it would be advisable to prepare a risk assessment of medical needs of individual children, where needed, including those who may suffer from an asthma attack. Asthma relievers not self managed should be taken to off-site and be supervised by a member of staff who is willing to accept this responsibility. Staff should be made aware of pupils who have medical needs, i.e. Asthma.

# Request for child to carry his / her medicine

Where deemed applicable by staff, a pupil can carry his / her own inhaler when offsite i.e. sporting activities and offsite venues, residential visits and educational visits. This must be returned to the class teacher/TA when they come back into school.

# Inhalers

Any mouth pieces used should be rinsed to avoid any blockages and, although it is ultimately the parent/carer responsibility to do so, expiry dates should be checked each half term. The asthma register should be updated as and when new children come in to school, or a pupil is deemed to be no longer Asthmatic by their G.P. (For which a signed letter from parents / carers is required).

# The Governing Body

The governing body should be made aware of this policy and its role in being generally responsible for all school policies.

#### **The Head Teacher**

The Head Teacher should ensure that all staff receive appropriate support and training and be aware of this policy. Likewise, the Head Teacher should inform the parents of the policy and its implications for them.

In all complex cases, the Head Teacher should liaise with the parents and where parent expectation is deemed unreasonable then the Head should seek the advice of the school nurse or some such medical advisor.

# **Teachers and Support Staff**

All staff should be aware of the possible medical risks attached to certain pupils. They should be aware of possible emergency action and emergency contacts. Teachers' conditions of employment do not include the giving or supervising of pupils taking medicines. Any member of staff agreeing to administer prescribed medicines should be in receipt of appropriate training. The training shall be commensurate with the situation.

#### **Storing Medicines**

Medicines should be stored away from children, be in their original containers and refrigerated where necessary. Children should know where their medicines are kept and who is responsible. Emergency medicines such as asthma inhalers and adrenaline pens should **not** be kept locked away but always in the vicinity of the relevant pupils.

# **KEY POINTS**

• THE SCHOOL WILL NOT NORMALLY AND REGULARLY ADMINISTER MEDICINES TO CHILDREN UNLESS THE ABOVE POLICY APPLIES

• ANY STAFF MEMBER ADMINISTERING MEDICINES SHOULD DO SO WILLINGLY AND WITH APPROPRIATE TRAINING BEING UNDERTAKEN