

# **Takeley Primary School**

*'Learning and Achieving Together'*

## **ADMINISTRATION OF MEDICINES POLICY AND SUPPORTING CHILDREN WITH MEDICAL CONDITIONS**

### **Introduction**

This policy is based on Section 100 of the Children and Families Act 2014 which places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. The guidance issued to schools by the DFES in 'Managing Medicines in Schools and Early Years Settings' (Reference 1448-2005DCL-EN) issued March 2005 and the Essex Code of Practice on the Administration of Medicines.

**This school is an inclusive community that welcomes and supports pupils with medical conditions. This school provides all pupils with any medical condition the same opportunities as others at school.**

This school understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood. This school understands the importance of medication and care being taken as directed by healthcare professionals and parents.

Children with medical needs have the same rights of admission to our school as other children. Most children will at some time have short-term medical needs, while other children may have longer term medical needs and may require medicines on a long-term basis to keep them well. Other children may require medicines in particular circumstances, such as children with severe allergies or children with asthma who need daily inhalers and additional doses during an attack.

### **Support for Children with Medical Needs**

Parents/carers have the prime responsibility for their child's health and should provide the school with full information about their child's medical condition and needs, both before the child begins school and if a condition develops whilst the child is attending. Parent/carers should obtain details from their child's Doctor (GP) or paediatrician if needed. Staff should also report any concerns they may have about a child's health to the parent/carers and the Headteacher.

### **Aims of this Policy**

- To explain our procedures for managing medicines which may need to be taken during the school day.
- To explain our procedures for managing medicines on school trips.
- To outline the roles and responsibilities for the administration of medicines.
- To make parents and pupils feel confident in the care their children receive at school.

**In general, school staff cannot legally be required to administer medication or supervise a pupil taking it.** However, all staff in school have a duty to act as any reasonable prudent parent/carer would (loco-Parentis), to make sure that pupils in their care are healthy and safe and this might extend to administering medicine or taking action in an emergency.

All school staff, including temporary or supply staff, are made aware of children's medical conditions in their care and understand what to do in an emergency

All children with a medical condition at this school have an individual healthcare plan (IHP), which explains what help they will need in an emergency. The IHP should accompany the child should they need to attend hospital. If a child needs to be taken to hospital, a member of staff (preferably known to the pupil) will accompany them and stay with them until a parent arrives.

**We will:**

- administer prescribed medicines during the school day if absolutely necessary (i.e. in cases where it would be detrimental to the child's health if it were not administered during the school day);
- require parent/carers to complete a consent form detailing doses and times, medicines must be supplied in the original container they were dispensed in;
- devise Individual Medical Care Plans, with the parent/carer, for managing long-term medical needs;
- appoint a 'named person' for the administration of medication that requires specialist training (e.g. Epipens and Insulin);
- keep inhalers in the medical room, where a child's administration can be supervised;
- store prescribed medication safely;
- document administration of medicine.

**We will not:**

- administer medication unless written consent has been given by the parent/carer;
- administer any medicine prescribed by a doctor to be given 3 times a day;
- administer inhalers - children should be taught to self-administer.

**Prescription Medicines**

Medicines should only be taken to school when essential, that is where it would be detrimental to a child's health if the medicine were not administered during the school day. Staff will only accept medicines prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.

Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.

**We are unable to accept medicines that have been taken out of their original container or make changes to dosages on parent/carer instructions.**

**Non-Prescription Medicines**

Staff should never give a non-prescribed medicine.

**We are unable to give children aspirin or medicines containing aspirin unless prescribed by a doctor.**

We cannot administer non-prescribed paracetamol to primary school pupils. If there are extreme circumstances then the parent/carer will be contacted to come into school and supply and administer the paracetamol themselves.

### **Storage of Medicine**

All medicines should be delivered to the school office by the parent/carer. In no circumstances should medicines be left in a child's possession. Teachers and Learning Support Assistants should not take receipt of any medicines. All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines will normally be kept in the school office or staffroom fridge and should not be kept in classrooms. The medicine will only be given to the parent, not the child at the end of the school day.

All medicines must be stored in the supplied container and be clearly labelled with the name of the child; the name and dose of the medicine and the frequency of administration.

### **Administering Medicines**

No child under 16 should be given medicines without their parent/carer's written consent. Any member of staff giving medicines to a child should check;

- the child's name
- prescribed dose
- expiry date
- written instructions provided by the prescriber on the label or container

Written records **must** be kept each time medicines are given, staff must sign the record each time they give medicine to a child.

**If in doubt about any procedure staff should not administer the medicines but check with the parent/carer.**

### **Record Keeping**

Parents at the school are asked if their child has any health conditions or health issues in their starter booklet, which is filled out when their child starts school. At the beginning of each academic year parents are given the opportunity to update their details.

The school uses a Healthcare Plan to record important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Every child with a IHP has their plan reviewed yearly.

Medicines should be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. Staff should check that written details include:

- name of the child
- name of the medicine
- dose

- method of administration
- time and frequency of administration
- any side effects
- expiry date

A parent/carer agreement form must be completed and signed by the parent/carer, before medicines can be administered. At the time of administering medicines, the member of staff must complete the medicines record sheet, in the blue folder in the medical room.

### **Refusal of Medicines**

If a child refuses to take medicines, staff should not force them to do so, but should note this in the records and inform parent/carers immediately or as soon as is reasonably possible.

If a pupil misuses medication, either their own or another pupil's, their parents are informed as soon as possible. These pupils are subject to the school's usual disciplinary procedures.

### **Disposal of Medicines**

Staff should not dispose of medicines. Parent/carers are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. They should collect medicines at the end of the agreed administration time period.

Three times a year a member of staff will check expiry dates for all medication stored at school. All medication is sent home with pupils at the end of the school year. Medication is not stored in Summer holidays.

It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year.

Parents are also responsible for the disposal of sharp boxes and providing the school with a new one.

### **Trips and Outings**

Children with medical needs are given the same opportunities as other children. Staff may need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. Children with medical needs will be part of the risk assessment for each trip.

The administration of medicines whilst on trips must be in line with this policy, written records are to be kept and signed by the member of staff administering the medicine. A copy of any health care plans must be taken on visits.

If a trained member of staff, who is usually responsible for administering medication is not available the school will make alternative arrangements to provide this service. This will be addressed in the risk assessment for off-site activities.

## **Roles and Responsibilities**

### Parent/Carer

- Should give sufficient information about their child's medical needs if treatment or special care is required.
- Must deliver all medicines to the school office in person.
- Must complete and sign the parent/carer agreement form.
- Must keep staff informed of changes to prescribed medicines.

### Headteacher

- To ensure that the school's policy on the administration of medicines is implemented.
- Ensure that staff receive support and appropriate training where necessary.
- To share information, as appropriate, about a child's medical needs.
- Ensure that parent/carers are aware of the schools policy on the administration of medicines.
- Consult with other professionals as necessary e.g. the school nurse.
- Ensure that medicines are stored correctly.

### Staff

- Understand the importance of medication being taken and care received as detailed in the pupils IHP.
- On receipt of medicines, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber should be checked.
- Ensure that the parent/carer completes a consent form for the administration of medicines following the prescriber's instruction.
  - Complete the 'administration of medicines' record sheet each time medication is given.
- Ensure that medicines are returned to parent/carers for safe disposal.
- Teaching staff to ensure that children's inhalers/Epipens/blood glucose kits are taken swimming, on trips and onto the field for outdoor games lessons. All pupils have the appropriate medicine or food with them during physical activity and pupils take them when needed
- When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the IHP of pupils in their care.

## **Children with long term medical needs**

It is important that the school has sufficient information about the medical condition of any child with long term medical needs. A health care plan will be written for children with long term medical needs, involving the parents/carers and relevant health professionals. Photographs of children and details of their medication will be up in the medical room and staff room.

## **Inclusion**

The school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

All staff at this school are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try and prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.

The school ensures all classroom teachers, PE teachers and sport coaches understand that pupils should not be forced to take part in an activity if they feel unwell.

The school ensures all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for pupil's medical conditions when exercising and how to minimize these triggers.

The school ensures all pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

Teachers at this school are aware of the potential for pupils with medical conditions to have special education needs (SEN). Pupils with medical conditions who are finding it difficult to keep up with their studies are referred to the SEN coordinator.

### **Confidentiality**

The Headteacher and staff should always treat medical information confidentially. The Headteacher will agree with the parent/carer who else should have access to records and other information about a child.

### **Staff Training**

Training opportunities are identified for staff with responsibilities for administering medicines.

Reviewed at the IEB Meeting February 2015