



Burrsville Infant Academy

Administration of Medicines

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**BURRSVILLE INFANT ACADEMY
ADMINISTRATION OF MEDICINES POLICY**

Introduction and background

Children with medical needs have the same rights of admission to our school as other children. Furthermore it is now expected that a child should not miss school where administration of medication would avoid such an outcome. This applies whether the child is on regular medication or requires occasional doses of prescribed medication to avoid interruption of that child's education. The School therefore has a duty of care to ensure that the need for a child to take or use medication does not interfere with their education.

The need to administer medicines should always be the exception rather than the rule and wherever possible, parents and prescribers are expected to agree a medication regimen that will avoid the need to involve the school if possible.

Aims of this policy

- To set out the procedures adopted by the school to ensure that medication is administered in a safe and appropriate manner.
- These procedures will cover
 - Prescribed medication for a child with a long term condition including both regular and occasional items (also known as rescue or "prn" medication) e.g. epilepsy or asthma.
 - Prescribed medication to treat an acute condition e.g. a course of antibiotics.
- To explain our procedures for managing prescription medicines on school trips
- To outline the roles and responsibilities of staff members involved in the administration of medicines
- To clearly state the circumstances governing the use of medication for minor ailments.
- To set out the role and responsibilities of parents or guardians.

Policy for prescribed medicines

Before any prescribed medicine can be administered within the school the following points must be in place:-

1. All medication to be administered must be prescribed by an authorised prescriber. This could be a doctor, dentist or non-medical prescriber e.g. nurse or pharmacist.
2. All medication must be supplied to the school in an original pack complete with a label giving clear directions or directions in writing.
3. All medication will be stored in the approved secure location as agreed by the Board of Governors.
4. Where rescue therapy is necessary clear guidance must be provided as to when this will be used. E.g. adrenaline for anaphylaxis
5. For prescribed medicines of all kinds parental consent must be provided in writing using the Parental Agreement Form
6. A treatment plan will be agreed identifying appropriate protocols.
7. All staff who are authorised to administer medicines will have received training and be approved by the head teacher who will retain a directory of approved staff.

Roles and Responsibilities

1. Parent/Carer

- 1.1. Must give sufficient information about their child's medical needs if treatment or special care is required.
- 1.2. Must deliver all medicines to the school office in person.
- 1.3. Must complete and sign the 'Parental Agreement Medical Form'
- 1.4. Must collect the medicine from the office at the end of the day.
- 1.5. Must keep staff informed of changes to prescribed medicines.
- 1.6. Must collect and dispose of unwanted / expired medicines as requested by staff.

2. Headteacher

- 2.1. Ensure that the school's policy on the administration of medicines is implemented.
- 2.2. Ensure that staff receive support and appropriate training where necessary.
- 2.3. Share information, as appropriate, about a child's medical needs.
- 2.4. Ensure that parents are aware of the schools policy on administration of medicines.
- 2.5. Consult with other professionals as necessary e.g. the school nurse.
- 2.6. Ensure that medicines are stored correctly.

3. Staff

- 3.1. On receipt of medicines, check the child's name; prescribed dose; expiry date and written instructions provided by the prescriber.
- 3.2. Ensure that the parent/carer completes a consent form for the administration of medicines (the 'Parental Agreement Medication Form') following the prescriber's instruction.
- 3.3. Supervise the pupils self-administer their medicines where appropriate.
- 3.4. A second member of staff will check the dosage of the medicine prior to it being administered.
- 3.5. Complete the 'Medicines Record Sheet' each time medication is given.
- 3.6. Ensure that medicines are returned to parents for safe disposal.

4. Governors

- 4.1. Ensure that this policy is implemented.
- 4.2. Ensure that this policy is reviewed on an annual basis.

Procedure for prescribed medicines

1. Children with long-term medical needs

- 1.1. It is important that the school has sufficient information about the medical condition of any child with long term medical needs.
- 1.2. A health care plan will be written for children with long term medical needs and agreed with parents and health professionals. This will include all necessary details of the medication to be administered.
- 1.3. The care plan will be reviewed on a regular basis at an interval agreed as part of setting up the original carer plan. If the review does not take place continuation of administration of medicines will be at the discretion of the Headteacher and an appropriate Health Professional.

- 1.4. Any changes to prescribed medication must be notified to the school immediately and in writing to ensure that such changes can be implemented. This may require supplying newly labelled items in line with such changes.

2. Children with short term medical needs

- 2.1. The school will need to be informed of the nature of the condition with expected time scales.
- 2.2. A care plan will be agreed for each episode of illness requiring medicines administration.
- 2.3. Medicine must be returned home on a daily basis e.g. a course of antibiotics. The parent is responsible for ensuring that both delivery and collection occurs.
- 2.4. Parents will have the opportunity to come into school to administer medication should they wish to do so.

3. Receipt and storage of medicines

- 3.1. All medicines must be delivered to the school office by the parent or carer in person together with
 - 3.1.1. A Parental Agreement Medication Form completed and signed by the parent.
 - 3.1.2. A medicines list which includes all medicines to be administered within the school including details of dose and frequency.
 - 3.1.3. Full details of rescue therapy including when to administer, the dose and frequency plus action to be taken if the treatment is not effective.
 - 3.1.4. The medicines to be used in the original containers as dispensed complete with original labels or associated written directions. **(The school cannot accept medicines that have been taken out of their original container or make changes to dosages on parental instructions.)**
 - 3.1.5. Details of any special storage requirements e.g. refrigeration required.
- 3.2. The member of staff receiving the medicines will check the items against the list and place the items in the approved secure storage location. It is the parent's responsibility to ensure that all medicines are in date and suitable for use. Failure to do so may result in missed doses.
- 3.3. Each child's medicines must be stored in separate containers clearly labelled with the child's name and date of birth.
- 3.4. Under no circumstances will medicines be left in a child's possession. Teachers and learning support assistants will not take receipt of any medicines.
- 3.5. The members of staff who will be required to administer the medication should be made aware immediately.
- 3.6. Where rescue medicines are included there needs to be a clear action plan that ensures rapid availability at all times when they are needed.

4. Documentation

- 4.1. All documentation will be stored in the school office for as long as is required by statute.
- 4.2. Where acceptable a scanned computer copy may be kept as the master copy.
- 4.3. All records of administration must be returned to the school office for retention.
- 4.4. All information relating to a child's medicine and condition is confidential and will be treated as such in line with the school's confidentiality policy

5. Disposal of Medicines

- 5.1. Parents are responsible for ensuring that date-expired and unwanted medicines are returned to the pharmacy for safe disposal.
- 5.2. They must collect all unused medicines at the end of the agreed administration period.
- 5.3. Staff will not dispose of medicines but if they see that medicines are out of date then they will contact the parent for them to come and collect it.

6. Trips and outings

- 6.1. Children with medical needs are given the same opportunities as other children.
- 6.2. Staff may need to consider what reasonable adjustments they must make to enable children with medical needs to participate fully and safely on visits.
- 6.3. This will include carrying out a risk assessment for such children.
- 6.4. Arrangements for taking any medicines on trips will be made and a copy of any health care plans will be taken on visits.
- 6.5. The principles for safe receipt and storage will apply

7. Administering medicines

- 7.1. All staff who are authorised to administer medicines will follow the procedure laid down.
- 7.2. Where the medicine requires specialist techniques e.g. Inhalers, Injections the member of staff will be required to demonstrate competence before taking on this role. Competency assessments and training will be done by a specialist nurse, as required.
- 7.3. Self administration e.g. inhalers held by the student. This will only apply during sporting events where a pupil may need immediate treatment.

8. Refusal to take medicines

- 8.1. If a child refuses to take medicines, staff will not force them to do so, but will note this in the records and inform parents immediately or as soon as is reasonably possible.

References and resources

<http://medicalconditionsatschool.org.uk>

<http://www.education.gov.uk/schools/pupilsupport/pastoralcare/b0013771/managing-medicines-in-schools>