

ST. PAUL'S
CHURCH OF ENGLAND
PRIMARY SCHOOL



ENGAGE - INSPIRE - ACHIEVE

**The Christian family of St Paul's... moving forward together.
A caring, exciting and happy school where everyone
succeeds!**

Administrating Medicine Policy
September 2017

POLICY STATEMENT

LINKS TO OTHER POLICIES

PSHE

The following national guidelines should also be read when working with this policy:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf DFE Dec 2015

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/270169/drug_advice_for_schools.pdf DFE Sept 2012

AIMS AND PRINCIPLES

This Policy will cover: -

- Procedures for managing prescription medicines, which need to be taken during the school day
- Procedures for managing prescription medicines on trips and outings
- A clear statement on the roles and responsibility of staff managing administration of medicines, and for administering or supervising the administration of medicines
- A clear statement on parental responsibilities in respect of their child's medical needs
- The need for prior written agreement from parents for any medicines to be given to a child
- The circumstances in which children may take any non-prescription medicines
- The school or setting policy on assisting children with long-term or complex medical needs
- Policy on children carrying and taking their medicines themselves
- Staff training in dealing with medical needs
- Record keeping
- Safe storage of medicines
- Access to the school's emergency procedures
- Risk assessment and management procedures

School will request that parents provide full and detailed information about their child's medical needs, including details on medicines their child needs.

PRESCRIBED MEDICINES

The school will only accept medicines which are essential; that is where it would be detrimental to a child's health if the medicines were not administered during the school day. School will only accept medicines that are prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.

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

The school will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instruction.

School request parents, wherever possible, to administer dosages outside of the school day e.g. if there are three dosages in one day, one first thing, one on return home and one at bedtime.

A controlled drug can be administered to a child, for whom it has been prescribed, by a member of the school staff.

Pupils will not be allowed to keep medicines themselves.

All medicines and prescribed drugs will be kept in a locked medical cupboard in the school office. If medication is needed daily, this can be kept in the classroom as long as it is in a locked cupboard.

The school will maintain a record of any dosage given and by whom.

Any medicines or controlled drug will be returned to parents when no longer required or out of date. It will be the responsibility of parents to replace and ensure any medicine is in-date.

NON-PRESCRIBED MEDICINES

Staff should **never** give a non-prescribed medicine to a child unless there is specific prior written permission from the parents. This must also be agreed by the head teacher. Criteria, in the national standards for under 8's day care providers, make it clear that non-prescription medicines should be recorded on a form and the parents informed. If a child suffers regularly from frequent or acute pain the parents should be encouraged to refer the matter to the child's GP.

SHORT-TERM MEDICAL NEEDS

Many children will need to take medicines during the day at some time during their time in a school or setting. This will usually be for a short period only, perhaps to finish a course of antibiotics or to apply a lotion. To allow children to do this will minimise the time that they need to be absent. However, such medicines should only be taken to school where it would be detrimental to a child's health if it were not administered during the school day.

LONG-TERM MEDICAL NEEDS

It is important to have sufficient information about the medical condition of any child with long-term medical needs. If a child's medical needs are inadequately supported this may have a significant impact on a child's experiences and the way they function in or out of school or a setting. The impact may be direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state. Some medicines may also affect learning leading to poor concentration or difficulties in remembering. The impact could also be indirect; perhaps disrupting access to education through unwanted effects of treatments or through the psychological effects that serious or chronic illness or disability may have on a child and their family.

School needs to know about any particular needs before a child is admitted, or when a child first develops a medical need. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. It is often helpful to develop a written health care plan for such children, involving the parents and relevant health professionals. (see Supporting Pupils at school with Medical Conditions policy)

ADMINSTRITING MEDICINES

No child will be given medicines without their parent's written consent.

When giving the medicine any member of staff should check:

- Child's name
- Prescribed dose
- Expiry date
- Any instructions

If staff do have any concerns they should bring them to the Headteacher or member of the SLT. If the Headteacher has any concerns he/she will bring them to the attention of then parent and/or health professional attached to the school.

REFUSING MEDICINE

If a child refuses their medicine staff should not force them. Staff will note this in the records. Parents will be informed of the refusal at that time. Parents may be requested to attend school to give the medicine. If refusal to take the medicine results in an emergency the school will put emergency procedures into practice.

KEEPING RECORDS

- School will provide parents with a Medicine in School Pro-forma.
- School will not administer medicine without the pro-forma being filled in by parents.
- School will check information on the pro-forma with the information on the medicine.
- School will keep a record of any medicine given. This will state child's name, staff name, dosage and name of medicine, date and time administered.
- Staff must fill in this record each time medicine is given.

EDUCATION VISITS

- School will make reasonable adjustments to the procedure of dealing with medicine whilst on a school visit. This is to enable children with medical needs to participate fully and safely on educational visits.
- If staff are concerned about whether they can provide for a child's safety, or the safety of other children on a visit, they should seek parental views and medical advice from the school health service or the child's GP. See DfES guidance on planning educational visits.

SPORTING ACTIVITIES

There will be sufficient flexibility for all children to take part in physical activities. Staff should be aware of issues relating to a child's medical needs and plan for privacy and dignity for the child.

Some children may need treatment before and after exercise. Staff will ensure the child has access to medicine appropriately.

HOME TO SCHOOL TRANSPORT

- All journeys using school transport will be supervised by escorts or school staff. Escorts will attend training courses which will deal with medical issues.

- Drivers and escorts will be informed about medical needs of pupils.
- They will have clear roles and responsibilities.

ADMINISTRATING MEDICINE FOR ASTHMA

Immediate access to a child's reliever is vital. Medication for asthma should be stored in the child's classroom in a clearly labelled cupboard. All children and staff in school need to be aware of the location. If a child has an inhaler in school and are working in another area of school other than their classroom, their medication should be taken with them and kept with an adult. **Inhalers should not be stored near heat sources.**

All inhalers need to be in their originally named packaging as dispensed by a doctor, nurse prescriber or pharmacist prescriber. Parents need to complete the administrating medicine forms and need to ensure school are made aware of any changes to their medication. Staff should record on the forms when children have taken their medication and should inform parents on the day. Children, particularly in EYFS and the infant unit or in the case of a serious attack, may need support in taking their inhaler. Children in the junior unit may be more able to administer the inhaler independently but may still need adult support. **Under no circumstance should children take their inhaler without a member of staff present.**

If a child has an asthma attack in school, they should be encouraged to sit up and keep calm. Asthma UK recommends that children take one puff of their blue reliever every 30 to 60 seconds and to take up to 10 puffs. If their symptoms do not improve or worsen, then a 999 call should be made.

A child's parent should always be informed even if their symptoms improve and their breathing returns to normal.

ADMINISTRATING MEDICINE FOR THE ADMINSTRATING EPIPENS

Immediate access to a child's EPIPEN is vital. Medication should be stored in the child's classroom in a clearly labelled cupboard. All children and staff in school need to be aware of the location. If a child has an EPIPEN in school and are working in another area of school other than their classroom, their medication should be taken with them and kept with an adult. **EPIPENS should not be stored near heat sources.**

All EPIPENS need to be in their originally named packaging as dispensed by a doctor, nurse prescriber or pharmacist prescriber. Parents need to complete the administrating medicine forms and need to ensure school are made aware of any changes to their medication. Staff should record on the forms when children have taken their medication and should inform parents immediately. Staff are regularly trained and must follow the training advice when dealing with an allergic reaction. **Once an EPIPEN is administered, you must seek medical attention.**

STAFF TRAINING

Staff are regularly updated in how to administer first aid care. Staff also receive yearly asthma and EPIPEN training.

POLICY REVIEW

The Administrating Medicine Policy will be reviewed every three years or sooner if needed

This policy will be ratified by the Governing Body in September 2017

Signed by Mr W Aitkin (Chair of Governors) Date

This policy will be reviewed on or before the following date: September 2020

