



# **Swinemoor Primary School**

## **Policy for Managing Medicines in School**

Date Written: September 2017

Many students will need to take medication, or be given it at school at some time in their school life. For most this will be for a short period to allow them to finish a course of antibiotics. In some cases there may be a long term need for students to take medication. To allow students to take medication at school minimises the disruption which could be caused by illness and allows their education to proceed at a steady rate alongside their peers.

### **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 outings and 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 and Asthma Register
- Safe storage of medicines
- The school's emergency procedures
- Working with parents

### **Working with Parents**

School will work in partnership with parents, students and fellow professionals to ensure that students who require medication during school time are able to receive it in a safe and secure environment which allows them to continue to make progress at school and further their education.

School will work with parents to ensure that all relevant information with regard to a medical condition which may affect a student at school is passed on to all concerned. Information will only be requested from parents when it is necessary to ensure the health and safety of the individual student and/or his peers at school. The confidentiality of a student's medical records will be respected.

All parents will be informed of school policy and procedures for addressing the medical needs of students. Where appropriate a Health Care Plan will be drawn up and the School Nurse will be involved.

Parents should provide school staff with adequate information about their child's medical condition, treatment, or any special care needed at school. They should, in partnership with the school reach an agreement on the school's role in helping to address their child's medical needs.

Parents will be asked for the following information about medication:

- name of medicine
- dose
- method of administration, time and frequency
- other treatment which may involve school staff or affect the child's performance during the school day
- side effects which may have a bearing on the child's behaviour or performance at school

Parents should advise the school of any changes in the medication administered to their child at the earliest opportunity.

### **Administering Medicines**

No Student under 16 should be given medicines without written parent consent. Form 'Request for Medicine to be given in School' must be completed by the parent giving permission for medicine to be administered by staff. (See Appendix 1)

Members of staff giving medicines should check:

- **The Child's name**
- **Prescribed dose**
- **Expiry date**
- **Written instructions on the packaging**

Members of staff giving medicines will be:

- Willing to perform such tasks
- Trained where necessary for the task

**If in doubt then do not administer medicines without checking with Parents.**

A record must be kept in a written form each time medicines are given. (See Form 6).

If a Student refuses to take the medication the school will record this and inform the Child's Parents. If the medication is essential to the child's continued wellbeing, the school will seek advice from the Parent and/or School Nurse.

## **Prescribed Medicines**

School staff will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions. It is helpful when clinically appropriate that medicines are prescribed in dosages that enable it to be taken outside of school hours. We will encourage parents to discuss this with the prescriber. Prescribers should be encouraged to issue two prescriptions, one for home and one for school, thus avoiding the need for repackaging of medicines.

Controlled drugs should never be administered unless cleared by the Head. Reference should be made to the DfES document *Managing Medicines in Schools and Early Years Settings 2005*.

## **Non-Prescription Drugs**

Staff should not give non-prescribed drugs to a pupil unless there is specific written permission from the parent. This will be an exceptional situation rather than the norm.

A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

## **Storing Medicines**

Medicines should be stored away from Students, be in their original containers and refrigerated where necessary. This will be the responsibility of the School Administrator.

Children should know where their medicines are kept and who is responsible. This should be an exceptional duty and be only used when medical advice dictates that no other course of action is possible. Emergency medicines such as asthma inhalers and adrenaline pens should not be kept locked away but always in the vicinity of the relevant pupils. Any problems or issues arising shall be initially referenced to *Managing Medicines in Schools and Early Years Settings 2005* DfES, a copy of which is kept in the Head Teachers office

Out of date medicines or medicines which are no longer required are to be returned to Parents for disposal.

Sharps boxes used for the safe collection of used needles should be provided by the Students GPs or Paediatrician. Parents should ensure that School have these items available. School should dispose of the boxes using the LA environmental service.

## **Record Keeping**

Parents should inform the school of the medicines their child needs. School will check that the medicine is in its original container and that the dispenser's instructions are clear. A written record of medicines administered will be kept. A copy of consent form 'Request for Medicine to be given in School' will be kept in the child's individual file.

## **Short Term Medical Needs**

In order to reduce the time a pupil is away from school the school will 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.

## **Long Term Medical Needs**

The school will be fully informed of the pupil's needs before admittance. It is essential to have sufficient information in order for the pupil's medical needs to be adequately supported. (Reference should be made to the 2005 DfES document in order to devise a care plan.)

## **Self Management**

Children who are able will be encouraged to manage their own medicines. This will generally apply to relief treatments for asthma, however form 'Request for Medicine to be given in School' must be completed. Other medicines should be kept in secure storage so access will only be by Class Teacher.

## **Educational Visits**

All medicines required by pupils on such undertakings will be part of the overall risk assessment for the visit. Medicines not self managed by pupils will be in the safe care of a nominated member of the staff. This colleague should be one who is willing to carry this responsibility. Complex medical needs for a specific pupil may necessitate a health care plan for the visit. If any member of staff is concerned they should seek advice from the Educational Visits Co-ordinator or a member of the Senior Management Team.

## **Sporting Activities**

Asthma relievers not self managed should be taken to the playground in a box or container and be supervised by a member of staff.

## **Staff Training**

The School Nurse will provide training upon request on the safe administration of medicines, Asthma and Anaphylaxis in School and will give guidance on individual health conditions and medication.

## **The Governing Body**

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

## **Teachers and Other 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 support member of staff agreeing to administer prescribed medicines should be in receipt of appropriate training. The training shall be commensurate with the situation.

## **Emergency Procedures**

In an emergency pupils should have prompt access to their medicine through a recognised procedure.

All staff should be familiar with the emergency procedure. This includes how to call the emergency services. All staff should know who is responsible for carrying out emergency procedures in the event of particular need and first aid system.

A child who is taken to hospital by ambulance should be accompanied by a member of staff who will remain until the parent arrives at the hospital. The child's medication, Home/School Medication Agreement and record of administration should be taken to the hospital with the child.

## **Staff supporting the administration of Medicines at Swinemoor Primary School**

Mrs Julie Robinson

Mrs Louise Hudson

Miss Michelle Dyble

## **KEY POINTS**

- ANY STAFF MEMBER ADMINISTERING MEDICINES WILL DO SO WILLINGLY AND WITH APPROPRIATE TRAINING
- ALL MEDICINES WILL BE NOTIFIED TO MRS ROBINSON AND KEPT UNDER HER SUPERVISION. This includes asthma relievers and adrenaline pens.

The Asthma Register shall be updated annually and as and when new children come to school.