Administration of Medicine and Medical Needs Policy

Aims

Sandal Primary School endeavours to ensure that all its pupils achieve success in their academic work, social relationships and day-to-day experiences at school. It is an inclusive community that aims to support and welcome pupils with medical conditions.

All children will experience illness in the course of their school careers, most commonly transient self-limiting infections, but some will have more chronic or longer-term medical needs that will require additional support at school to ensure they have full access to the curriculum and to minimise the impact of their medical conditions. Staff working with pupils who have specific medical needs should understand the nature of children's medical problems and will endeavour to work with the family and other professionals to best support the individuals concerned.

Sandal Primary School will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy. This includes the safe storage and administration of pupils' medication.

The school is committed to ensuring that parents feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

Roles and responsibilities

The governing board is responsible for:

- The implementation of this policy and procedures, and all corresponding procedures.
- Ensuring that this policy, as written, does not discriminate on any grounds, including the protected characteristics as defined by the Equality Act 2010.
- Ensuring that there is a sufficient number of trained staff available within the school to administer medication based upon the school's risk assessments.
- Ensuring the correct level of insurance is in place for the administration of medication.
- Ensuring that members of staff who administer medication to pupils, or help pupils self-administer, are suitably trained and have access to information needed.
- Ensuring that relevant health and social care professionals are consulted in order to guarantee that pupils taking medication are properly supported.
- Managing any complaints or concerns regarding this policy, the support provided to pupils, or the administration of medication in line with the school's Complaints Procedures Policy.

The headteacher is responsible for:

- The day-to-day implementation and management of this policy and relevant procedures.

- Ensuring that appropriate training is undertaken by staff members administering medication.
- Ensuring that staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system.
- Organising another appropriately trained individual to take over the role of administering medication in case of staff absence.
- Ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.

All staff are responsible for:

- Adhering to this policy and supporting pupils to do so.
- Carrying out their duties that arise from this policy fairly and consistently.

Parents are responsible for:

- Keeping the school informed about any changes to their child's health.
- Completing an administering medication parental consent form prior to them or their child bringing any medication into school.
- Discussing medication with their child prior to requesting that a staff member administers the medication.

It is both staff members' and pupils' responsibility to understand what action to take during a medical emergency, such as raising the alarm with the school nurse or other members of staff. This may include staff administering medication to the pupil involved.

Training staff

The headteacher will ensure that a sufficient number of staff are suitably trained in administering medication. All staff will undergo basic training on the administering of medication to ensure that, if exceptional circumstances arise where there is no designated administrator of medication available, pupils can still receive their medication from a trained member of staff. The headteacher will also ensure that a sufficient number of staff have been trained in administering medication in an emergency by a healthcare professional.

Where it is a necessary or vital component of their job role, staff will undertake training on administering medication in line with this policy as part of their new starter induction.

Staff will be advised not to agree to taking on the responsibility of administering medication until they have received appropriate training and can make an informed choice. The school will ensure that, as part of their training, staff members will be informed that they cannot be required to administer medication to pupils, and that this is entirely voluntary, unless the supporting of pupils with medical conditions is central to their role within the school, e.g. the school nurse.

Training will also cover the appropriate procedures and courses of action with regard to the following exceptional situations:

- The timing of the medication's administration is crucial to the health of the child

- Some technical or medical knowledge is required to administer the medication
- Intimate contact with the pupil is necessary

Staff members will be made aware that if they administer medication to a pupil, they take on a legal responsibility to do so correctly; therefore, staff will be encouraged not to administer medication in the above situations if they do not feel comfortable and confident in doing so, even if they have received training.

Training for administering AAIs

The school will arrange specialist training for staff on a **yearly** basis where a pupil in the school has been diagnosed as being at risk of anaphylaxis. Designated staff members with suitable training and confidence in their ability to use AAIs will be appointed to administer this medication. As part of their training, all staff members will be made aware of:

- How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
- Where to find AAIs in the case of an emergency.
- How to respond appropriately to a request for help from another member of staff.
- How to recognise when emergency action is necessary.
- Who the designated staff members for administering AAIs are.
- How to administer an AAI safely and effectively in the event that there is a delay in response from the designated staff members.
- How to make appropriate records of allergic reactions.

There will be a sufficient number of staff who are trained in and consent to administering AAIs on site at all times.

Short-term illness

- Children who are suffering from short-term ailments and who are clearly unwell should not be in school and head-teachers are within their rights to ask parents/carers to keep them at home.
- Some parents may send children to school with non-prescribed medicines (e.g. cough mixture) –Many of these are not effective treatments, and as a general rule we discourage this practice. If a non-prescribed medicine is requested, parental permission is required and recorded in the **Administration of Medicines Written Form. See appendix A**
- It is the responsibility of the parents that the medicine is appropriate to the need and permission is granted for a responsible First Aider, or designated member of staff, in school to administer the medicine.
- There are recommended times away from school to limit the spread of infectious disease. Please contact the school office for advice on particular illnesses or search Guidance on infection control in schools and other childcare settings - Public Health Agency See Appendix B
- Note, children who have had sickness and/or diarrhoea should be kept off school until 48 hours symptom-free.

Chronic illness/disability

It may be necessary for children with long term conditions to take prescribed medicines during school hours. Many health advisers encourage children to take control of their medical condition, including taking responsibility for managing their medical care (with help,) from very young. This can include self administration of medicines eg. using an inhaler or giving own insulin injections. We support this practice wherever appropriate.

Where young children or those with special needs require medication, adult support will be needed. Whilst responsibility for the medical care of children rests with parents and their health professionals, it may not be feasible for these individuals to come to school to administer medicines, and such repeated attendances could slow the personal development of a child.

Children with Complex or 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. Schools and settings need 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 individual health care plan for such children, involving the parents and relevant health professionals. The Headteacher is responsible for their development and review.

Individual health care plans can include:

- Details of a child's condition
- Special requirement e.g. dietary needs, pre-activity precautions and any side effects of the medicines
- What constitutes an emergency
- What action to take in an emergency
- What not to do in the event of an emergency
- Who to contact in an emergency
- The role that staff can play

Acute illness

The teaching profession has a general duty of care towards children in schools. Legally this duty cannot require teachers to administer medicines, but it is expected that teachers react promptly and reasonably if a child is taken suddenly ill. In these cases, clear procedures must be followed, particularly in life threatening situations.

As appropriate:

- Seek First Aid advice from a certified First Aid staff member school
- Call Emergency Paramedic support – 999. Inform parents/carers of the situation and actions.

Medical Records

Medical Tracker is used to securely record children's health records including allergies, mediation administration, care plans and accident recording. Automatic notification of the details of any accident is sent to parents/carers.

Receiving, storing and disposing of medication

Receiving prescribed medication from parents

The parents of pupils who need medication administered at school will be sent an administering medication parental consent form to complete and sign; the signed consent form will be returned to the school and appropriately filed before staff can administer medication to pupils under the age of 16. A signed copy of the parental consent form will be kept on record, and no medication will be administered if this consent form is not present. Consent obtained from parents will be renewed **annually**.

In exceptional circumstances, where a medicine has been prescribed to a pupil without the knowledge of the parents, the school will work with healthcare professionals to determine appropriate action.

The school will store a reasonable quantity of medication, e.g. a maximum of **four weeks'** supply at any one time. Aspirin will not be administered unless the school has evidence that a doctor has prescribed it.

Parents will be advised to keep medication provided to the school in the original packaging, complete with instructions, as far as possible, particularly for liquid medications where transfer from the original bottle would result in the loss of some of the medication on the inside of the bottle. This does not apply to insulin, which can be stored in an insulin pen.

Storing pupils' medication

The school will ensure that all medications are kept appropriately, according to the product instructions, and are securely stored. Medication that may be required in emergency circumstances, e.g. asthma inhalers and AAIs, will be stored in a way that allows it to be readily accessible to pupils who may need it and can self-administer, and staff members who will need to administer them in emergency situations. All other medication will be stored in a place inaccessible to pupils, e.g. a locked cupboard.

The school will ensure that pupils know where their medication is at all times and are able to access them immediately, e.g. by ensuring that the identities of any key holders to the storage facilities are known by these pupils.

Medication will be:

- Stored safely and in accordance with the manufacturer's instructions.
- Stored in a location that is known to pupils at all times and is immediately accessible, including when outside the premises.
- Carried by pupils for self-administration if deemed suitable by a healthcare professional or required due to their condition.

Medicines and devices which may be required in an emergency situation will always be readily available. They will never be locked away.

Medication will not be kept in a first aid container.

Disposing of pupils' medication

The school will not store surplus or out-of-date medication. Where medication and/or its containers need to be returned to the pupils' doctor or pharmacist, parents will be asked to collect these for this purpose.

Needles and other sharps will be disposed of safely and securely, e.g. using a sharps disposal box.

The school will ensure that medicines are disposed of in accordance with relevant waste and environmental legislation. Medicines will be separated from general waste and disposed of via appropriate routes:

- Non-prescription medicines may be returned to a pharmacy.
- Prescription medicines will be disposed of via licensed waste facilities.
- Controlled drugs will be rendered irretrievable before disposal.

Medicines awaiting disposal will be stored securely in a tamper-proof container.

The school will comply with relevant legislation including the Environmental Protection Act 1990, Controlled Waste Regulations 2012, and Hazardous Waste Regulations 2005.

he school will ensure it is registered as a lower-tier waste carrier where required to support the safe disposal of pharmaceutical waste.

Administering medication

Medication will only be administered at school if it would be detrimental to the pupil not to do so. Only suitably qualified members of staff will administer controlled drugs. The administration of controlled drugs is permitted under the Misuse of Drugs Regulations 2001 where they have been prescribed for a pupil. Staff will check the expiry date and maximum dosage of the medication being administered to the pupil each time it is administered, as well as when the previous dose was taken.

Medication will be administered in a private, comfortable environment and as far as possible, in the same room as the medication is stored; this will normally be the school office.

Pupils will not be prevented from accessing and taking their prescribed or non-prescribed medication where this is necessary for their health and wellbeing.

Before administering medication, the responsible member of staff should check:

- The pupil's identity.
- That the school possesses written consent from a parent.
- That the medication name, dosage and instructions for use match the details on the consent form.
- That the name on the medication label is the name of the pupil being given the medication.
- That the medication to be given is within its expiry date.
- That the pupil has not already been given the medication within the accepted frequency of dosage.

Any member of staff may be asked to administer medication; however, no member of staff will be required to do so unless this forms part of their role.

If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.

If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.

Where appropriate, pupils will be encouraged to self-administer under the supervision of a staff member, provided that parental consent for this has been obtained. If a pupil refuses to take their medication, staff will not force them to do so but will follow the procedure agreed upon in their IHPs, and parents will be informed so that alternative options can be considered.

The school will not be held responsible for any side effects that occur when medication is taken correctly.

Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible. Records will be stored in accordance with the Records Management Policy.

Non-prescription medicines

The school is aware that pupils may, at some point, suffer from minor illnesses and ailments of a short-term nature, and that, in these circumstances, health professionals are likely to advise parents to purchase over-the-counter medicines, for example, paracetamol and antihistamines.

The school will work on the premise that parents have the prime responsibility for their child's health and should provide schools and settings with detailed information about their child's medical condition as and when any illness or ailment arises.

The school will permit the administration of non-prescription medication either by staff or pupils themselves, following written permission by parents. The school will not seek the authorisation of a GP for this purpose.

Pupils and parents will not be expected to obtain a prescription for over-the-counter medicines as this could impact on their attendance and adversely affect the availability of appointments with local health services due to the imposition of non-urgent appointments being made.

If a pupil is deemed too unwell to be in school, they will be advised to stay at home or parents will be contacted and asked to take them home.

When making arrangements for the administration of non-prescription medicines the school will exercise the same level of care and caution, following the same processes, protocols and procedures as those in place for the administration of prescription medicines.

The school will also ensure that the following requirements are met when agreeing to administer non-prescription medicines.

- Non-prescription medicines will not be administered for longer than is recommended. For example, most pain relief medicines, such as ibuprofen and paracetamol, will be recommended for three days use before medical advice should be sought. Aspirin will not be administered unless prescribed.
- Parents will be asked to bring the medicine in, on at least the first occasion, to enable the appropriate paperwork to be signed by the parent and for a check to be made of the medication details.

- Non-prescription medicines must be supplied in their original container, have instructions for administration, dosage and storage, and be in date. The name of the child can be written on the container by an adult if this helps with identification.
- Only authorised staff who are sufficiently trained will be able to administer non-prescription medicines.

Paracetamol

The school is aware that paracetamol is a common painkiller that is often used by adults and children to treat headaches, stomach ache, ear ache, cold symptoms, and to bring down a high temperature; however, it also understands that it can be dangerous if appropriate guidelines are not followed and recommended dosages are exceeded.

The school is aware that paracetamol for children is available as a syrup from the age of 2 months; and tablets (including soluble tablets) from the age of 6 years, both of which come in a range of strengths.

The school understands that children need to take a lower dose than adults, depending on their age and sometimes, weight. The school will ensure that authorised staff are fully trained and aware of the NHS advice on how and when to give paracetamol to children, as well as the recommended dosages and strength.

Staff will always check instructions carefully every time they administer any medicine, whether prescribed or not, including paracetamol.

The school will ensure that they have sufficient members of staff who are appropriately trained to manage medicines and health needs as part of their duties.

The written consent of parents will be required in order to administer paracetamol to pupils.

Medical devices

Asthma inhalers

The school will ensure that spare inhalers for pupils are kept safe and secure in preparation for the event that the original is misplaced, unavailable or not working.

AAIs

The school will ensure that spare AAIs for pupils are kept safe and secure in preparation for the event that the original is misplaced, unavailable or not working.

Spare AAIs are not located more than five minutes away from where they may be required. The emergency AAIs can be found at the following locations:

- **School Office**

The school will ensure that risk assessments regarding the use and storage of AAIs on the premises are conducted and up to date.

Medical authorisation and parental consent will be obtained from all pupils believed to be at risk of anaphylaxis for the use of spare AAIs in emergency situations. The spare AAIs will not be used on pupils who are not at risk of anaphylaxis or where there is no parental consent. Where consent and authorisation have been obtained, this will be recorded in the pupil's IHP.

Pupils' and spare AAIs will be obtained, stored and administered in line with the school's Allergen and Anaphylaxis Policy.

IHPs

For pupils with chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the pupil, their parent, the headteacher, the SENCO and any relevant medical professionals. When deciding what information should be recorded on an IHP, the following will be considered:

- The medical condition and its triggers, signs, symptoms and treatments
- The pupil's resulting needs, such as medication, including the correct dosage and possible side effects, medical equipment, and dietary requirements
- The specific support needed for the pupil's educational, social and emotional needs
- The level of support needed and whether the pupil will be able to take responsibility for their own health needs
- The type of provision and training that is required, including whether staff can be expected to fulfil the support necessary as part of their role
- Which staff members need to be aware of the pupil's condition
- Arrangements for receiving parental consent to administer medication
- Separate arrangements which may be required for out-of-school trips and external activities
- Which staff member can fulfil the role of being a designated, entrusted individual to whom confidentiality issues are raised
- What to do in an emergency, including whom to contact and contingency arrangements
- What is defined as an emergency, including the signs and symptoms that staff members should look out for

The governing board will ensure that IHPs are reviewed at least **annually**. IHPs will be routinely monitored throughout the year by a designated staff member.

Procedures for Administering Medication on Educational Visits

It is good practice for school to encourage children with medical needs to participate in safely managed visits. School should consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This might include reviewing and revising the visits policy and procedures so that planning arrangements will include the necessary steps to include children with medical needs. It might also include risk assessments for such children. Sometimes additional safety measures may need to be taken for outside visits. It may be that an additional supervisor, a parent or another volunteer might be needed to accompany a particular child.

In the event of educational trips and visits which involve leaving the school premises, medication and medical devices will continue to be readily available to staff and pupils. This may include pupils carrying their medication themselves, where possible and appropriate, e.g. for asthma inhalers.

If the medication is of a type that should not be carried by pupils, e.g. capsules, or if pupils are very young or have complex needs that mean they cannot self-administer, the medication will be carried by a designated staff member for the duration of the trip or activity.

There will be at least one staff member who is trained to administer medication on every out-of-school trip or visit which pupils with medical conditions will attend. Staff members will ensure that they are aware of any pupils who will need medication administered during the trip or visit, and will ensure that they know the correct procedure, e.g. timing and dosage, for administering their medication.

If the out-of-school trip or visit will be over an extended period of time, e.g. an overnight stay, a record will be kept of the frequency at which pupils need to take their medication, and any other information that may be relevant. This record will be kept by a designated trained staff member who is present on the trip and can manage the administration of medication.

All staff members, volunteers and other adults present on out-of-school trips and visits will be made aware of the actions to take in a medical emergency related to the specific medical needs and conditions of the pupil, e.g. what to do if an epileptic pupil has a seizure.

Medical emergencies

Medical emergencies will be handled in line with the First Aid Policy.

For all emergency medication stored by the school, the school will ensure it is readily accessible to staff and the pupil who requires it and is not locked away. For all emergency medication kept in the possession of a pupil, e.g. AAIs, the school will ensure that pupils are told to keep the appropriate instructions with the medication at all times. A spare copy of these instructions will be kept by the school in the school nurse's office.

Related Policies
Asthma policy
Allergies and Anaphylaxis Policy
Health and Safety Policy
Safeguarding policy

ADMINISTRATION OF MEDICATION

Short Term (medication up to 14 days) inc non-prescribed for up to 5 days

REQUEST FORM FOR ADMINISTRATION OF MEDICATION IN SCHOOL
To be fully completed and signed by parent/carers

The school will be unable to give your child any medication unless you complete and sign this request form and the Headteacher has confirmed that school staff have agreed to administer the medication. Times/intervals and what dose of the medicine must be specified. It will not be possible for school staff to diagnose or decide when the medication is required or administered.

DETAILS OF PUPIL

Surname
Forename(s)
Class
Name/type of medication (as described on container)
Is the medication prescribed by a doctor? YES/NO
If not prescribed, has administration been approved by the Headteacher or other senior leader? YES/NO
Dosage and amount (as per instructions on container)
Times/intervals
Special storage instructions (refrigeration required/should remain in school or return home daily)
Any other information
I understand that I must deliver the medication personally to a member of the office staff and I request that authorised staff administer the above medication to my child. I accept that this is a service which the school is not obliged to undertake. I consent to medical information concerning my child's health to be shared with other school staff and/or health professionals to the extent necessary to safeguard his/her health and welfare. I confirm that the medication has been prescribed by a doctor/consultant and that this information has been provided in consultation with my child's doctor/consultant.

Signature		Date
FULL NAME OF PARENT/CARER (IN CAPITALS)		

ADMINISTRATION OF MEDICATION

Long Term Medication (Over 14 days)

REQUEST FORM FOR ADMINISTRATION OF MEDICATION IN SCHOOL
To be fully completed and signed by parent/carers

The school will be unable to give your child any medication unless you complete and sign this request form and the Headteacher has confirmed that school staff have agreed to administer the medication. Times/intervals and what dose of the medicine must be specified. It will not be possible for school staff to diagnose or decide when the medication is required or administered.

DETAILS OF PUPIL

Surname	
Forename(s)	
Address	**M/F**
	DATE OF BIRTH
	CLASS
Condition or Illness	
Medication	
Name/type of medication (as described on container)	
For how long will your child take this medication?	
Date dispensed	
Full directions for use	
Dosage and amount (as per instructions on container)	
Method	
Times/intervals	
Special storage instructions **(refrigeration required/should remain in school or return home daily)**	

Special precautions		
Action to be taken if pupil refuses to take the medication		
Side Effects		
Procedures to take in an emergency		
CONTACT DETAILS		
Name		
Daytime Telephone Numbers		
Relationship to Pupil		
Address during school hours		
I understand that I must deliver the medication personally to a member of the office staff and I request that authorised staff administer the above medication to my child. I accept that this is a service which the school is not obliged to undertake. I consent to medical information concerning my child's health to be shared with other school staff and/or health professionals to the extent necessary to safeguard his/her health and welfare. I confirm that the medication has been prescribed by a doctor/consultant and that this information has been provided in consultation with my child's doctor/consultant.		
Signature		Date
FULL NAME OF PARENT/CARER (IN CAPITALS)		

Each item of medication must be delivered in its original container and must be clearly labelled with the following information:

- ***pupil's name***
- ***name of medication***
- ***dosage***
- ***frequency of dosage***
- ***date of dispensing***
- ***storage requirements (if necessary) and expiry date***

Appendix B. Recommended absence period for preventing the spread of infection

This list of recommended absence periods for preventing the spread of infection is taken from nonstatutory guidance for schools and other childcare settings from Public Health England.
https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf

For each of these infections or complaints, there is further information in the guidance on the symptoms, how it spreads and some 'do's and don'ts' to follow that you can check.