



Be the Best We Can

# Administration of Medicines Policy

Members of staff responsible: Date approved by the full Governing body: Date to be reviewed: Mr J Mollard Summer 2018 Summer term 2020

At Buglawton School we recognise that parents have the prime responsibility for their child's health and that it is their responsibility to provide school with information about their child's medical condition. Parents should obtain details from their child's General Practitioner (GP) or paediatrician, if needed. The school nurse or a health visitor and specialist voluntary bodies may also be able to provide additional background information about specific conditions.

We also recognise that we as a school have a responsibility to care for pupils' health, welfare and attendance.

# Aims

It is the aim of this policy to provide information on:

- 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 policy on assisting children with long-term or complex medical needs;
- advice 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.

At Buglawton School, we recognise that there is no legal duty that requires school or staff to administer medicines. We expect that generally, parents will either come into school to administer medicine themselves or nominate a friend or relative to do so. It is helpful, where clinically appropriate, for medicines to be prescribed in dose frequencies which enable it to be taken outside school hours. Parents should always be encouraged to ask the prescriber about this.

However, where it is deemed necessary or appropriate to administer medicines, staff should follow the following guidelines:-

- Parents must fully complete a 'Request for the School to Give Medication' form and return to the school office before any medication will be administered.
- Medicines should only be bought to school when absolutely essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day.
- The school should only accept medicines that have been prescribed by a doctor, dentist, nurse or pharmacist. However, as part of our 'in loco parentis' role we may also administer various creams, anti-histamines and mild analgesics such as Calpol provided by parents. A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.
- Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. No child should be given medicines without their parent's written consent.
- Any member of staff giving medicines to a child should check the child's name, prescribed dose, expiry date and written instructions provided by the prescriber on the label or container.
- If in doubt about any procedure, staff should not administer the medicines but check with the parents or a health professional before taking further action. If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent, if appropriate, or with a health professional attached to the school.
- The school should also arrange for two staff to complete and sign a record each time they give medicine to a child one to administer and one to double check.

# **Educational Visits**

It is good practice to encourage children with medical needs to participate in safely managed visits. The 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 individual risk assessments for such children. Pupils should not be prevented from taking part in educational visits due to medical reasons where practicable.

Occasionally 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. Arrangements for taking any necessary medicines will also need to be taken into consideration. Staff supervising excursions should always

be aware of any medical needs, and relevant emergency procedures. A copy of any health care plans should be taken on visits in the event of the information being needed in an emergency.

Travel sickness medication is administered in the same way as other medication at Buglawton School – parents should fill in a form and medication should be in the original packaging.

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.

### **Sporting Activities**

Most children with medical conditions can participate in physical activities. Any restrictions on a child's ability to participate in PE and extra-curricular sport should be recorded in their individual health care plan. If a child is unable to participate in PE, a letter should be sent to the class teacher. All adults should be aware of issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers. Staff supervising sporting activities should consider whether risk assessments are necessary for some children, be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

#### Long - Term Medical Needs

The school will support pupils who have long term medical needs such as asthma, allergies which require epipen use or diabetes where it would be inappropriate to expect a parent to come into school to administer medicine for an extended period or on an emergency basis.

It is important to have sufficient information about the medical condition of any child with long-term medical needs. The 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 advisable to develop a written health care plan for such children, involving the parents and relevant health professionals.

#### Self - Management

It is good practice to support and encourage children, who are able, to take responsibility to manage their own medicines from a relatively early age and the school should encourage this. The age at which children are ready to take care of, and be responsible for, their own medicines, varies. As children grow and develop they should be encouraged to participate in decisions about their medicines and to take responsibility.

Older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent and in consultation with the school. There may be circumstances where it is not appropriate for a child of any age to self-

manage. Health professionals need to assess, with parents and children, the appropriate time to make this transition.

If children can take their medicines themselves, staff may only need to supervise.

### **Refusing Medicines**

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records. Parents should be informed of the refusal on the same day. If a refusal to take medicines results in an emergency, then the school's emergency procedures should be followed.

## Storing Medicines

Large volumes of medicines should not be stored. Staff should only store, supervise and administer medicine that has been prescribed for an individual child. Medicines should be stored strictly in accordance with product instructions and in the original container in which dispensed. Staff should ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration. This information is also noted on the form completed by the parent and kept in the office. This should be straightforward if medicines are only accepted in the original container as dispensed by a pharmacist in accordance with the prescriber's instructions. Where a child needs two or more prescribed medicines, each should be in a separate container. Staff should never transfer medicines from their original containers.

The headteacher is responsible for making sure that medicines are stored safely. All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and should not be locked away. Other non-emergency medicines should generally be kept in a secure place not accessible to children. Some medicines need to be refrigerated. They can be kept in a refrigerator containing food but should be in an airtight container and clearly labelled. There should be restricted access to a refrigerator holding medicines.

# Access to Medicines

Children may need to have immediate access to their medicines when required. The school may want to make special access arrangements for emergency medicines that it keeps. However, it is also important to make sure that medicines are only accessible to those for whom they are prescribed.

# **Disposal of Medicines**

Staff should not dispose of medicines. Parents are responsible for ensuring that dateexpired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each term. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal. Sharps boxes should always be used for the disposal of needles.

# Hygiene and Infection Control

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff have access to protective disposable gloves and should take extreme care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

### **Emergency Procedures**

As part of general risk management processes there are arrangements in place for dealing with emergency situations. All staff should know how to call the emergency services.

All staff should also know who is responsible for carrying out emergency procedures in the event of need. The office staff are usually responsible for calling emergency services at Buglawton. There are instructions in place in the office and staff room for pupils who have previously been identified as high risk pupils. A member of staff should always accompany a child taken to hospital by ambulance, and should stay until the parent arrives. Health professionals are responsible for any decisions on medical treatment when parents are not available.

#### Training

In certain circumstances, a child's ongoing medical problems may require school staff to have specific training or support from relevant qualified health professionals. This will be discussed between the parents, health professionals and the school to come to a suitable resolution.

This policy should be read in conjunction with the Health and Safety Policy.

### Signatures

Headteacher: John Mollard

Date: 06.06.18

Chair of Governors: George Hayes

Date: 06.06.18