



## Chapel St Leonards Primary School Policy for the Administration of Medicines

### Aim

The aim of this policy is to effectively support individual children with medical needs and to enable pupils to achieve regular attendance.

### Overview

- Parents are strongly encouraged to administer medicines to their children outside of the school day.
- **Medicines will only be administered on the school site when there is no other alternative**, and when failure to do so would be of detriment to the child's health.
- Non-prescription medicines will **never** be administered by a member of staff.
- Parents must complete the school request form (administration of medication) before any medicines are administered on site.
- Staff must keep a record of any medicines administered on site using the record book in the first aid room.
- Medicines must be kept in the labeled containers in the first aid room locked cupboard or first aid room refrigerator (where refrigeration is necessary).

### Procedures for managing prescription medicines which need to be taken during the school day:

- Medicines should only be taken into school when 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 will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.
- Medicines will always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.
- **The school 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, where clinically appropriate, if medicines are prescribed in dose frequencies which enable them to be taken outside school hours. Parents are encouraged to ask the prescriber about this. **It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime.**

### Procedures for managing prescription medicines on trips and outings:

- The school encourages children with medical needs to participate in safely managed visits. The school will consider reasonable adjustments to enable children with medical needs to participate fully and safely on visits. This might also include risk assessments for specific children.

- Staff supervising excursions will always be aware of any medical needs, and relevant emergency procedures. A copy of any health care plans will be taken on visits in the event of the information being needed in an emergency.

### **Procedures for managing prescription medicines during sporting activities:**

- Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. All adults will 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. Children may also need immediate access to necessary specific medicines, such as inhalers during specific lessons. Please see Appendix A – school procedures for pupils who have inhalers.

### **Roles and responsibility of staff managing administration of medicines:**

- Medicine will only be administered by the school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school 'day'.
- No child will be given medicines without their parent's written consent (it is only necessary to seek consent from one parent)
- Any member of staff giving medicines to a child will check:
  - the child's name
  - prescribed dose
  - expiry date
  - written instructions provided by the prescriber on the label or container

If in doubt about any procedure staff will 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 will be discussed with the parent, if appropriate, or with a health professional attached to the school.

**Staff administering medicine will complete and sign a record each time they give medicine to a child. Form B will be used for this purpose.**

### **Parental responsibilities in respect of their child's medical needs:**

- Parents should not send a child to school if he/she is unwell.
- Parents must inform the school about any particular needs before a child is admitted or when a child first develops a medical need.
- It must be a parent (includes any person who is not a parent of a child but has parental responsibility for or care of a child) who gives consent for medicines to be administered.
- **Parents should make every effort to arrange for medicines to be administered outside of the school day, or to come into school and administer medicines themselves.**
- Parents must inform the school about any medicine that is to be administered during the school 'day'.
- Parents must complete **Form A** before any medicine can be administered by a member of staff.

### **Assisting children with long-term or complex medical needs:**

- Where a child has a long term medical need, a written health care plan will be drawn up with the parents and health professionals.

- Parents must inform the school about any particular needs before a child is admitted or when a child first develops a medical need. **The school and setting need separate notifications.**

### **Children carrying and taking their medicines themselves**

- Where it is advised by GPs (or other medical experts) school will encourage children to take responsibility for their own medication. Where this is the case older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent. Children develop at different rates and so the ability to take responsibility for their own medicines varies. This is borne in mind when consulting with parents and medical experts regarding making a decision about transferring responsibility to a child.
- Where a decision to transfer responsibility to a child has been made, the parent must complete the correct section on **Form A** return it to school. This form is a record that the parent consents to the child carrying and managing their own medicine
- If children are able to take their medicines themselves, staff may only need to supervise, though the medicine should still be stored by the school.

### **Staff training in dealing with medical needs**

- Where necessary staff have access to regular training on the use of epi-pens (adrenaline) in the event of severe allergic reactions.
- New members of staff are made aware of the medicines policy and procedures during a health and safety induction meeting, held within the first month of employment.
- The school always has at least 10 members of staff that are the first-aiders, and have undertaken a one day first aid training course. All staff are aware of who the first-aiders are.
- In the event of a child with specific medical needs joining the school, the school will seek advice on staff training needs from the LA.

### **Record keeping**

- Parents must tell the school or setting about the medicines that their child needs to take and provide details of any changes to the prescription or the support required. However, staff should make sure that this information is the same as that provided by the prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions.
- In all cases where medicine is to be administered by a member of staff, parents must complete and return **Form A** to ensure that details of medicines are recorded in a standard format. Staff should check that any details provided by parents, or in particular cases by a paediatrician or specialist nurse, are consistent with the instructions on the medicine container.
- The school will keep a record of any medicines administered by staff **Form B**. This record will be completed by the member of staff administering the medicine.
- **All records** relating to medicines **will be kept in the first aid room** with the first aid boxes, accident/near miss records, emergency medicine and 'medicine to be administered on site' container.

### **Safe storage of medicines**

- Large volumes of medicines should not be stored.
- Staff will only store, supervise and administer medicine that has been prescribed for an individual child.
- Medicines will be stored strictly in accordance with product instructions (paying particular note to temperature) 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 should be easy 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. Non-healthcare staff should never transfer medicines from their original containers.
- 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 are kept in a labeled box with the medicine records folder in the school office. Those medicines which need to be refrigerated are kept in an airtight container, which is clearly labeled, in the first aid room refrigerator.**
- Any medicine to be administered by staff must be given to the school office at the start of the day and taken to the medicine cabinet or refrigerator in the first aid room (in the case of medicines which need to be refrigerated). **Children are not usually permitted to carry medicine themselves.** Pupils will only be allowed to do so should medical experts, parents and the school be in agreement about the necessity for this to happen.
- There may be other specific cases where medication is needed throughout the school day and it is more practicable for the child to carry the medicine with them. If this is the case, the headteacher's permission must be sought, and **the correct section on Form A** must be completed by the parent.

### **Adrenaline pens (epi-pens)**

Adrenaline pens are kept in the **first aid room and relevant child's classroom medical box.**

### **Emergency procedures**

The nominated first-aiders are should be called upon in the event of a medical emergency.

If a child needs hospital treatment, a member of staff should always accompany the child, and should stay until the parent arrives.

Staff should **never take children to hospital in their own car**; it is safer to call an ambulance.

### The use of inhalers in school

At Chapel St Leonards Primary School we have a number of pupils who need access to their inhalers during the school day. The following procedures are to be followed:

- Inhalers will be stored in the inhaler box within the classroom.
- The class boxes will be taken out on all play times and PE sessions to ensure that inhalers are readily available should they be needed.
- Inhalers will be clearly labeled so that there is no confusion about to whom they belong.
- Children will be allowed to go to the inhaler box to use their inhaler at any time of the day, they will be accompanied by an adult who will record the inhaler use in the record book which is stored in the class inhaler box.
- It is the parents' responsibility to ensure that the inhaler is not empty and is in date; however inhalers will be checked on a termly basis to see if they are low or coming to their end date. The designated person for first aid will inform the class teacher in either case and inform the parent/carer.

Pupils will be allowed to carry their inhalers on their person when:

- The medical condition requires a child to have instant access at all times. This will be agreed between the doctor, parents and the school.
- Parents have completed, understood and signed the relevant documentation for self-medication.
- The pupil is of a level of maturity where the risk of losing the inhaler is minimized.

At present most pupils do not carry their inhalers on their person. This is because inhalers are often misplaced and lost so are not easily accessible when needed. Children have been known to allow their friends to have a go with their inhaler. The school needs to be sure that the inhaler is in school at all times.