



Hope Primary School

Administration of Medicines in School Policy

Purpose of this policy

The purpose of this policy is to ensure the safe and appropriate administration of medication to pupils with medical needs within the school. Most children will at some time have a short-term medical need, perhaps entailing finishing a course of medicine such as antibiotics. Some children may have longer-term medical needs and may require medicines on a long-term basis to keep them well, for example children with cystic fibrosis. Other children may require medicines in particular circumstances, for example severe allergies or asthma.

Supporting pupils with long-term health needs

The school will aim to minimise any disruption to the child's learning as far as possible and work with parents/carers and health professionals to ensure this. Where a pupil needs to take medication in school for an extended period or has a chronic ongoing condition a Health Care/Emergency plan will be put in place. This will be agreed jointly by the school and parents/carers with the advice of health professionals. Parents should provide school with all the necessary information about their Child's condition and will sign appropriate agreement forms for the administration of medication.

Managing medicines during the school day

Non-prescription medicines - Medicines that have not been prescribed by a medical practitioner will **only** administered in school if absolutely necessary (e.g. Paracetamol, Ibuprofen, throat lozenges). Parents/carers will be encouraged to give medicines outside the school day. A consent form must be completed by the parent (Form 2 - Available from school office/Entrance Hall).

Prescription medicines - Prescription medicines should only be taken during the school day when essential. Parents/carers will be encouraged to request from doctors, where possible, medicines which can be administered outside of the school day. Medicines will only be administered in school where the dosage frequency requires them to be taken **four** or more times a day or where they must be taken at specific times. Medication must be in its original container with the original pharmacy label intact, medication will not be accepted without these. **Medicines will only be administered according to the instructions on the pharmacy label.** A consent form must be completed by the parent (Form 2 - Available form school office/Entrance Hall).

Storing Medicines

The school will keep the medication securely in the school office, which may only be accessed by authorised staff. Where medicines need to be refrigerated, they will be stored in a designated fridge in the school office. Prescription drugs will be returned to parents when

no longer required. It is the parent's responsibility to collect and dispose of out of date or unused medication. It is the parent's responsibility to ensure that medicines sent to school are 'in date'. If new supplies are needed it is the responsibility of the parents to supply medication, school staff will inform parents when there is 5 days' worth of medication left to allow plenty of time for repeat prescription to be fulfilled.

Epipens and other Emergency Medication

All staff will be given appropriate training in administration of emergency medication where necessary in conjunction with the school nurse. Form 4 will be completed to show evidence of who has been trained. Arrangements will be made for immediate access to any emergency medications for example:

- Epipens to be kept with or near pupils who need them at all times;
- Asthma medication will be kept in its original packaging in a labelled asthma box in the child's classroom.

Emergency medication will always be taken if the child goes out on a trip.

Labelling of medicines

On the few occasions when medicines have to be brought into a school or service, the original or duplicate container, complete with dispensing label should be used.

The label should clearly state:

- Name of pupil
- Date of dispensing
- Dose and dose frequency
- The maximum permissible daily dose
- Cautionary advice/special storage instructions.
- Name of medicine
- Expiry date - where applicable.

The information on the label should be checked to ensure it is the same as the parental consent form. Where the information on the label is unclear, such as "as directed" or "as before" then it is vital that **clear instructions are given on the parental consent form**. If the matter is still not clear, then the medicine should not be administered and the parents should be asked for clarification.

Disposal of Medicines

Medicines, which have passed the expiry date, must **not** be used.

Creams and lotions will have both a manufacturers expiry date, which must be observed and should considered to have expired 28 days after been opened. Pump dispensers have a longer life, usually about 3 months. Expired medicines need to be disposed of properly by arrangement with the child's parents, either by return to, or collection by, the parents or return to the pharmacy for safe disposal.

Provision for safe disposal of used needles will require appropriate special measures, e.g. a "sharps box", to avoid the possibility of injury to others. A "sharps box" must be secure with no access for pupils or unauthorised persons. This should be disposed of in a safe way using a specialist licensed contractor.

Hygiene and Infection Control

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

Employee Medicines

If an employee needs to bring medicine into school, they have the responsibility to ensure that their medicines are kept securely and that children have no access to them. Adequate safeguards must be taken by employees, who are responsible for their own personal supplies, to ensure that their medicines are not issued to any other employee, individual or pupil.

Confidentiality

Medical Information should always be regarded as confidential by staff and personal data properly safeguarded.

- Records relating to administration of medicines are health records and should be stored confidentially.
- Instructions should be on a "need to know" basis in order that a child's well-being is safeguarded and individual treatment plan is implemented.

Key responsibilities

Staff must always check:

- The child's name;
- The prescribed dose;
- The expiry date;
- The written instructions provided by the prescriber on the label or container; the individual treatment plan where one exists;
- Whether or not it is a controlled drug;
- Any requirements for refrigerated storage;
- Prior to administration, the administration record (Form 3) to ensure that a dosage is due and has not already been given by another person.

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 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.

Written records must be kept each time medicines are given (Form 3).

The administration of **controlled drugs requires 2 people**. One should administer the drug, the other witness the administration.

Refusal to take medicines

Staff can only administer medicines with the agreement of the child. Any specific instructions to assist the administration of a medicine should be recorded in the child's individual treatment plan as should any instruction in the event of refusal.

- If a child refuses to take medicine, staff should not force to do so, but should note this in the records and follow agreed procedures.

- Where there is no instruction in the child's plan, staff should inform parents the same day;
- Where refusal may result in an emergency, emergency services and parents will be called.

Record Keeping

Records must include:

- An up to date list of current medicines prescribed for each child that has been confirmed in writing;
- What needs to be carried out, for whom and when;

For children with ongoing or complex needs, a care plan that states whether the child needs support to look after and take some or all medicines or if care workers are responsible for given them.

Staff must make a record straight after the medicine has been accepted and taken.

- The records must be complete, legible, up to date, written in ink, dated and signed to show who has made the record.
- From the records, anyone should be able to understand exactly what the staff member has done and be able to account for all the medicines managed for an individual.

Pupils with complex health needs

As technology develops, growing numbers of children with complex health needs receive their education in mainstream schools. This group of children and young people require additional support in order to:

- Maintain optimal health during the day;
- Access the curriculum to the maximum extent.

Some examples of care of health needs for which children might require additional support in schools and services are:

- Restricted mobility e.g. a child with physical impairments who uses a wheelchair;
- Difficulty in breathing e.g. a child with tracheostomy who requires regular airway suctioning during the day;
- Problems with eating and drinking e.g. a child who requires a gastrostomy feed at lunchtime.
- Continence problems e.g. a child who requires assistance with bladder emptying and needs catheterisation at each break time or to follow a toileting plan to aid continence of the bladder and bowels.
- Susceptibility to infection e.g. a child who is receiving steroid therapy.

Staff dealing with children with complex needs will receive training from the school nurse/health professional so that clinical procedures can be carried out correctly. A detailed Individual Health Plan should be completed for the child.

Emergency Procedures

Where children have conditions which may require rapid intervention, parents must notify the Head teacher/Administration Officer of the condition, symptoms and appropriate action following onset. They should also share any individual treatment plan. The Head teacher/Administration Officer must make all staff aware of any child whose medical condition may require emergency aid and staff should know:

- Which children have individual treatment plans;
- Possible emergency conditions that might arise, how to recognise the onset of the condition and take appropriate action i.e. summon the trained person, call for ambulance if necessary etc. and the emergency instructions contained within them;
- Who is responsible for carrying out emergency procedures in the events of need;
- How to call the emergency services;
- What information for the individual treatment plan needs to be disclosed.

Other children should also know what to do in the event of an emergency, such as telling a member of staff.

When a child needs to go to hospital

Staff should not normally take children to hospital in their own car - it is safer to call an ambulance.

- 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.

First Aid Training

The school will ensure that there are always qualified first aiders in school.

This policy has been written using the guidelines for administration of medicines produced by Derbyshire County Council in April 2013. These guidelines will be referred to if further detail is needed about certain medical conditions.

Signed:

(On behalf of the Governors)

Date:

To be reviewed: This policy will be reviewed by the governing body every three years or when new legislation is introduced.

Form 1 – Individual Treatment Plan

Name of School/Setting:	
Child's Name:	
Date of Birth:	
Class:	
Address:	
Medical diagnosis/condition:	
Date:	
Review Date:	

First Family Contact Information:

Name:		
Contact Numbers:	Work	
	Home	
	Mobile	

Second Family Contact Information:

Name:		
Contact Numbers:	Work	
	Home	
	Mobile	

Clinic/Hospital Contact Information:

Name:	
Phone Number:	
G.P. (name):	
Phone Number:	

Describe medical needs and give details of child's symptoms:-

Daily Care requirements (e.g. before sport/at lunchtime):-

Describe what constitutes an emergency for the child, and the action to take if this occurs:-

Follow up care:-

Who is responsible in an emergency (state if different for off-site activities)

Form 2 – Parental Consent for School to Administer Medicine

The school will not give your child medicine unless you complete and sign this form, and has a policy that staff can administer medicine, and staff consent to do this.

Note: Medicines must be in original container as dispensed by the pharmacy.

Child's name:	
Date of birth:	
Class:	
Medical condition/illness:	
Medicine name/type:	
Date dispensed:	
Expiry date:	
Dosage & method:	
Timing (when to be given)	
Special precautions:	
Any other precautions:	
Number of tablets/quantity given to school:	
Are there any side effects that the School needs to know about?	
Self-administration:	YES NO (delete as appropriate)
GP contact number:	

Contact Information first contact:

Name:		Relationship to child:	
Contact numbers:	Work		
	Home		
	Mobile		

Contact Information second contact:

Name:		Relationship to child:	
Contact numbers:	Work		
	Home		
	Mobile		

The above information is, to be the best of my knowledge, accurate at the time of writing and I give consent to School staff administering medicine in accordance with School policy, I will inform the School immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped. I accept that this is a service the School is not obliged to undertake. I understand that I must notify the School of any changes in writing.

Parent/carers signature _____

Date _____

Form 3 – Record of medicine administered to an individual child

Child's name	
Date of Birth	
Date medicine provided by parent	
Quantity received	
Name and strength of medicine	
Expiry Date	
Dose and frequency of medicine	
Staff signature	
Signature of parent	

Date		Date		Date	
Time given		Time given		Time given	
Dose given		Dose given		Dose given	
Staff initials		Staff Initials		Staff Initials	

Date		Date		Date	
Time given		Time given		Time given	
Dose given		Dose given		Dose given	
Staff initials		Staff Initials		Staff Initials	

Date		Date		Date	
Time given		Time given		Time given	
Dose given		Dose given		Dose given	
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