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# ADMINISTERING MEDICINES POLICY NOVEMBER 2019

Staff Consulted: 8.11.19

Approved by Governing Body: 18.11.19

Next Review Date: November 2020

# Boreham Primary School Administering Medicines Policy

### Introduction

This policy has been formulated from local authority guidance, statutory guidance issued by the DfE 'Supporting pupils at School with Medical Conditions', by school staff in conjunction with the Headteacher and with approval by Governors. The aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so they can play a full and active role in school life.

# Aims of this Policy

- 1) To ensure the safe administration and storage of medicines to children where necessary and to help to support attendance.
- 2) To ensure the on-going care and support of children with long term medical needs via a Personal Care Plan.
- 3) To explain the roles and responsibilities of school staff in relation to medicines.
- 4) To clarify the roles and responsibilities of parents in relation to children's attendance during and following illness.
- 5) To outline to parents and school staff the safe procedure for bringing medicines into school when necessary and their storage.
- 6) To outline the safe procedure for managing medicines on school trips.

### Roles and Responsibilities

### Head Teacher

- To bring this policy to the attention of school staff and parents and to ensure that the procedures outlined are put into practice.
- To ensure that there are sufficient First Aiders and appointed persons for the school to be able to adhere to this policy.
- To ensure that staff who are responsible for administering medicines to pupils who are in need of a Personal Care Plan, receive appropriate support and training.
- To ensure that parents are aware of the school's Medicines Policy.
- To ensure that this policy is reviewed regularly.

### Staff

- To follow the procedures outlined in this policy using the appropriate forms.
- To ensure that a Personal Care Plan is completed in conjunction with parents and relevant healthcare professionals for children with complex or long term medical needs as soon as a diagnosis is made or when the child starts school. The plan should be updated when changes in the condition occur.
- To share medical information as necessary to ensure the safety of a child.
- To retain confidentiality where possible.
- To take all reasonable precautions to ensure the safe administration of medicines.
- To contact parents with any concerns without delay.
- To contact emergency services if necessary without delay.

- To keep the first aid boxes stocked with supplies.
- Educational Visits Leader see 'Medicines on School Trips' below.

### Parents/carers

- To give the school adequate information about their children's medical needs prior to a child starting school.
- To follow the school's procedure for bringing medicines into school.
- To only request medicines to be administered in school when essential.
- To ensure that medicines are in date and that asthma inhalers are not empty.
- To notify the school of changes in a child's medical needs, e.g. when medicine is no longer required or when a child develops a new need, e.g. asthma.

# School attendance during/after illness

- Children should not be at school when unwell, other than with a mild cough/cold.
- Symptoms of vomiting or diarrhoea require a child to be absent from school and not to return until 48 hours after the last episode.
- Children should not be sent to school with earache, toothache or other significant discomfort.
- Children should not be sent to school with an undiagnosed rash or a rash caused by any contagious illness.
- Any other symptoms of illness which might be contagious to others or will cause the child to feel unwell and unable to fully participate in the school day require the child to be absent from school.

# Safe Administration of Medicines at School

- Medicines should only be brought to school when essential, i.e. where it would be detrimental to the child's health if the medicine were not administered during the school day.
- Only prescribed medicines (including eye drops) in the original container labelled with the child's name and dosage will be accepted in school. Staff will not administer non-prescribed medicines. If a child suffers regularly from frequent or acute pain the parents/carers should consult the child's GP. Parents/carers should consult the School Business Manager if specific arrangements need to be put in place for the child concerned. The school would wish to work with parents/carers to ensure that the child is able to attend school regularly. A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by your doctor.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- All medicines must be brought to and collected from the school office by an adult.
   Medicines must NEVER be brought to or collected from school in a child's possession.
- The parent/carer is required to complete a parental agreement form at the school office for the medicine to be administered by school staff. Medicines will NOT be administered without this form being completed and signed by a parent/carer.

- Appointed school staff keep a record of the date and time medical treatment is given. For children in Year 1 and above with asthma pumps these forms are stored in the classroom, for Reception children these are stored in the school office.
- If a child has a particular condition which requires either regular administration of medicine or knowledge of administering medicine should the need arise (e.g. allergic reaction) a Personal Care Plan needs to be completed by the health care professionals and parents to ensure the child's needs are met. Pupils too should be involved in forming the Personal Care Plan as they are best placed to provide information about how their condition affects them. Personal Care Plans will be reviewed annually. Staff training needs are identified following the writing of the Personal Care Plan by the SENCo, and appropriate training given from trained professionals. An annual review of staff training needs is undertaken by office staff and the SENCo and discussed with the school nurse. Evidence of training is kept in the school office and dates of following training requirements.
- It is the responsibility of the parents and health care professionals to inform the school of pupils requiring medical support before the pupil starts school.
- The Local Authority supports the school in identifying medical training requirements through Health Needs Assessment provided by the NHS.
- The Head Teacher must be informed of any controlled drugs required by children, e.g. Equasym.
- Tablets should be counted and recorded when brought to the office and when collected again.
- Administration of medicines, other than asthma pumps, at school must be recorded in the Medicines Record by a First Aider. The Medicines Record is kept in the school office.
- Parents may come to the school office to administer medicines if necessary.
- Some children may self-administer medication, e.g. insulin, if this has been directed by the parents when filling in the medicine form or agreed by a health care professional.
- If a child refuses to take medicine, staff must not force them to do so. The refusal should be recorded in the Medicines Record and parents informed.

# Storage of Medicines

- Medications should be stored, following the instructions on packaging, in the family room fridge or in a locked cabinet in the school office as appropriate.
- Tablets must be stored in a locked cabinet in the first aid room.
- Epipens are stored in a box with a photograph of the child on, in a cabinet in the school office or classroom.
- Rescue medications for children with epilepsy are stored in a box with a photograph of the child on, in a cabinet in the school office.
- Asthma inhalers for children are stored in the child's classroom within the child's reach
  and labelled with their name and should be taken with the child during physical activities.
- Antihistamine and antihistamine eye drops for severe hay fever must be stored in the medical cabinet in the School Office.
- No medicines, other than asthma inhalers and epi-pens, may be kept in the classroom.

### Medicines on Educational Visits

Children with medical needs are given the same opportunities as others. Staff may need to consider what is necessary for all children to participate fully and safely on school trips. Staff should discuss any concerns about a child's safety with parents.

- The trip Leader is responsible for designating a school First Aider for the trip.
- The trip Leader is responsible for ensuring that arrangements are in place for any child with medical needs prior to a trip taking place, including ensuring that asthma inhalers are carried as required. A copy of any relevant personal care plan should be taken on the trip.
- The designated school First Aider on the trip will administer any medicines required and record the details in the School Trips Medical Book.
- The First Aider will return the form and any unused medicines to the office on return to school.

# Sporting Activities

Most children with medical conditions can take part in physical activities. Staff will take into account the need to adapt activities to meet the needs of all children. All staff will be aware of issues of privacy and dignity for children with particular needs. Some children will need to take precautionary measures before or during exercise and needs to be allowed access to medicines such as inhalers.

# Disposal of Medicines

Staff should not dispose of medicines. Parents/carers are responsible for ensuring that date expired medicines are returned to the pharmacy for safe disposal. They should also collect medicines at the end of each term.

### Policy Review

This policy will be reviewed annually.