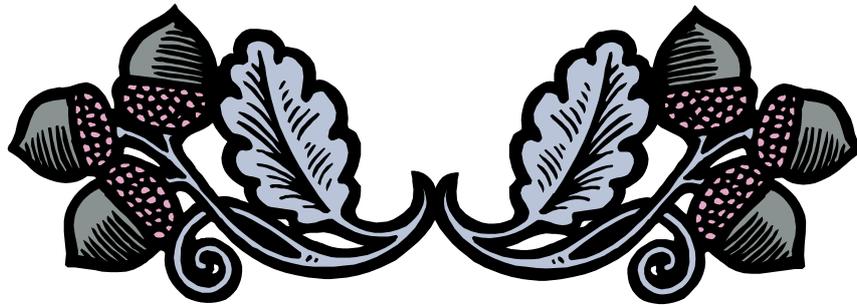


# EDENDERRY PRIMARY SCHOOL

## ADMINISTRATION OF MEDICATION IN SCHOOL



SEPTEMBER 2018  
SEPTEMBER 2019

## **Administration of Medication in School**

This policy has been drawn up for the staff of Edenderry Primary School using the guidance supplied in the DENI document. Supporting Pupils with Medication Needs 2008. It should be noted that there is no legal duty to administer medication and all staff have the right to withdraw from a duty that requires the administration of medication. The administration of medication should be viewed as a necessary but voluntary duty.

The Board of Governors and staff of Edenderry Primary School wish to ensure that pupils with medication needs receive appropriate care and support at school. The principal will accept responsibility in principle for members of the school staff giving or supervising pupils taking prescribed medication during the school day when the member of staff volunteers to do so. However, members of staff will not be expected to administer medication for more complex needs e.g. for invasive medication without appropriate training from recognised medical professionals and in situations in which the potential administration would adversely affect the efficient discharge of the curriculum to the other pupils in the classroom.

**The Board of Governors expect parents to keep their children at home if acutely unwell or if they have an infectious illness.**

### **Summary**

The Board of Governors would request that the following guidelines be adhered to:

- Parents provide comprehensive written information on the child's condition and medication. This should be supplied at the first instance to the class teacher.
- Prescribed medication will not be accepted in school without complete written and signed instructions from the parent. Medication must be delivered and collected from school by a parent or EA employed escort.
- The school will only hold reasonable quantities of medication for a child. In the majority of cases this will be the amount prescribed in the initial prescription or the portion of the prescription to be taken during the school day.
- Staff will not give a non-prescribed medicine to a child unless there is specific prior written permission from the parents/guardians.
- All pupils, where possible, will be encouraged to self-administer medication under the direct supervision of the class teacher or an assigned assistant.
- School staff will not dispose of medicines. In date and out of date medication will be returned to the parent. Parents should ensure that all medication is collected safely from school following the period of use.
- For pupils with long term or complex medication needs the school will ensure that a Medication Plan and Protocol is drawn up by appropriate health professionals.

- The school will make every effort to continue the administration of medication to a pupil whilst on trips away from school premises. This will require additional arrangements. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate access to medication and supervision cannot be guaranteed.
- In situations in which a member or members of the class have medical needs teachers may have to review certain class activities in order to take appropriate precautionary measures. Before or during exercise pupils should be allowed immediate access to their medication if necessary, e.g. pupils with asthma may need to take reliever inhaler before exercise.
- All staff will be made aware of the procedures to be followed in the event of an emergency. (See Appendix 1)

### **Storage of Medication**

Edenderry Primary School will store medication that has been prescribed for a named child. The school will only accept medication contained in the original container issued by the pharmacist. Members of staff will not transfer medication from its original container to a second container.

### **Short Term Administration of Medication**

All medication to be administered on a daily basis for a specified time period will be stored within a secure location in the pupil's classroom. This location should be shared with other members of staff and be out of reach of children. This storage facility should remain unlocked. If storage area is to be locked, then all staff should know where to find the key in an emergency.

The school does not have the facility to store medicines that require refrigeration. If a child requires such medication on a short term basis e.g. one week or 10 days, arrangements with the parents should be made for the child to receive medication from home. If the medication is required on a longer term basis, then the individual case will be reviewed. Medication, whilst it can be stored safely in a refrigerator containing food, should not be stored in a staffroom refrigerator.

Emergency or "second" epipens are kept in the principal's office along with a copy of care plans and a sharps box.

Sharps boxes should always be available within school. A sharps box is located in the principal's office and in the SLSC.

### **Request from Parent**

STEP 1 - Issue 'Request for a School to Administer Medication' form.

STEP 2 - On receipt of form discuss with principal/vice principal.

If complex Medication Plan should be drawn up in conjunction with health professional/parents.

STEP 3 - Return copy of form signed by member of staff – teacher/vice principal/principal.

STEP 4 - On completion of “script” or specified period requested, parents will be notified of the need to come to school to collect containers.

### **Pupils Requesting Non-Prescription Medication**

School staff should never give non-prescribed medication to pupils unless there is specific prior written permission from the parent. Non-prescribed medication should be supplied by parents and collected by parents when period of need elapses. School staff should not administer non-prescribed medication held for named pupils to other pupils requesting medication.

### **Long Term Administration of Medication**

If a child enrolls with, or develops during their school career, a medical condition that requires long term medication it is essential that parents liaise with appropriate staff class teacher/SENCO/designated staff member to inform school of the child’s condition and longer term medical requirements. These needs should be laid down in a Medical Plan devised by parents and relevant health professionals and endorsed by school. In all situations the child must have an understanding of the plan or the need for a plan.

### **Medication Planning**

Not all pupils who have medical needs will require a Medication Plan. For many pupils the ‘Request for a School to Administer Medication’ proforma will suffice. For those pupils who have serious conditions that do require a Medication Plan to clarify for staff the management of that condition, e.g. diabetes, severe allergies or asthma, these plans must be overseen by the School Nursing Service who work in conjunction with the parents, the medical carers involved with the child and the appropriate members of school staff. The plan must set out for school staff the measures needed to support the pupils in school including guidance for emergency situations. The plan must include the following information:

- Child’s name, date of birth, home address and telephone numbers
- Contact details for nominated family members
- Details of condition
- Special requirements, e.g. pre-activity precautions, dietary needs, feeding and toileting requirements
- Medication and side effects
- What constitutes an emergency
- Steps to be taken in an emergency
- Emergency phone numbers (G.P., School Nurse, Community Children’s Nurse, Craigavon Area Hospital, 999)
- Other health and care professionals involved

It is imperative that all relevant school staff in contact with the child are aware of the requirements of the Medical Plan.

The plan should be reviewed at least once a year, however for some pupils this review may be undertaken more frequently due to the nature of their condition.

For pupils with complex physical needs who have numerous medications which are administered via several routes, e.g. NG tube, gastronomy, a prescription sheet completed, signed and dated by the G.P. may be needed. This will include exact details of each drug including time of administration, route of administration, dosage, etc. This will be countersigned by person administering medication.

### **Refusing Medication**

If a child refuses to take medication, staff should not force them to do so, but should note this in the records and contact the parent immediately. In such situations the parent should be advised to collect the child and address the issue at home.

### **Self Medication**

In situations in which the pupil displays a competence to self-medicate, pupils should be allowed to do so. In these situations the pupil should return medication to adult for safe storage after use. Pupils should be supervised by a member of staff when doing so. It is imperative that written permission is given by parent for child to undertake this task. (See Appendix 2)

## **APPENDIX 1**

### **Emergency Procedure**

1. Seek support and advice from a trained First Aider (First Aid at Work).
2. Contact parent and monitor child until arrival of parent.
3. Request that child be taken by parent to medical facility – A&E or doctor's surgery.
4. If parent fails to arrive or in an emergency telephone 999 seeking A&E support.

**APPENDIX 2**

**EDENDERRY PRIMARY SCHOOL**  
**Request for School to Administer Medication**

This form must be completed by parent/guardian prior to the school consenting to administer medication. Only named medication will be administered.

**NAME OF PUPIL:** \_\_\_\_\_

**CLASS AND YEAR:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TEL. NUMBER (PARENT):** \_\_\_\_\_

**NATURE OF ILLNESS:** \_\_\_\_\_

**MEDICATION TO BE ADMINISTERED:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**PRESCRIBED MEDICATION/NON-PRESCRIBED MEDICATION:**

The medication supplied is \_\_\_\_\_  
(complete statement using either prescribed or non-prescribed)

**DOSAGE** (only to be changed on direct written instruction):

\_\_\_\_\_

**PROCEDURES TO BE TAKEN IN AN EMERGENCY:**

\_\_\_\_\_  
\_\_\_\_\_

**DURATION:** Please state the number of days the medication will be required to be administered \_\_\_\_\_

**START DATE/END DATE:** Please indicate the start and end dates for the duration above.

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**POTENTIAL SIDE EFFECTS (if any):** \_\_\_\_\_

\_\_\_\_\_

I \_\_\_\_\_ will deliver the medication to  
\_\_\_\_\_ (class teacher) and will collect the  
medication/container/apparatus on \_\_\_\_\_ from my child's  
class teacher.

**Please note that all medication should be delivered in original packaging or  
prescribed bottle/container.**

**SELF MEDICATION** (in presence of school member of staff):

My child \_\_\_\_\_ is able/not able to self-  
medicate.

I understand that I must notify the school of any changes in writing.

**SIGNED:** \_\_\_\_\_ (Parent/Guardian) **DATE:** \_\_\_\_\_

**AGREEMENT OF PRINCIPAL:**

I agree that a member of staff will undertake the instructions for the administration  
of medication relating to \_\_\_\_\_ supplied on this  
proforma dated \_\_\_\_\_. It is anticipated that \_\_\_\_\_  
will supervise the administration of this medication for the period requested.

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Principal/authorised member of staff)

**A copy of this agreement will be held by school on file.**

**APPENDIX 3**

**EDENDERRY PRIMARY SCHOOL**

**Request for a Pupil to Carry his/her Medication in School**

This proforma should be completed in conjunction with the Request for School to Administer Medication form.

**NAME OF PUPIL:** \_\_\_\_\_

**CLASS AND YEAR:** \_\_\_\_\_

**PARENT CONTACT DETAILS:**

NAME: \_\_\_\_\_ TEL. NO. \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**NAME OF MEDICATION:** \_\_\_\_\_

**PROCEDURES TO BE FOLLOWED IN AN EMERGENCY:** \_\_\_\_\_

**I would like my child to keep his/her medication on him/her for use as necessary.**

**SIGNED:** \_\_\_\_\_ (Parent/Guardian) **DATE:** \_\_\_\_\_

**AGREEMENT OF PRINCIPAL:**

I agree that \_\_\_\_\_ will be allowed to carry and self-administer his/her medication whilst in school and that this arrangement will continue until \_\_\_\_\_ (date determined by end of course of medication or as requested by parent/guardian).

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
(Principal/authorised member of staff)

**A copy of this agreement will be held by school on file.**