

# **St. Peter's Primary School**



## **School Policy Document**

### **Prescribed Medication Policy**

## **Introduction**

Children with medical needs have the same rights of admission to our school as other children. Most children will at some time have short-term medical needs, while other children may have longer term medical needs and may require medicines on a long-term basis to keep them well. Other children may require medicines in particular circumstances, such as children with severe allergies.

## **Aims of Policy**

- To explain our procedures for managing prescription medicines which may need to be taken during the school day;
- To explain our procedures for managing prescription medicines on school trips;
- To outline the roles and responsibilities for the administration of prescription medicines.

## **Legal requirements**

There is no legal obligation on any member of staff to administer medicines.

## **Non-Prescription Medicines**

The school will only consent to administer “over the counter” medicines, such as cough bottles, Paracetamol, Calpol etc if it is essential and only if the parents/guardians have completed a short term drugs administration form.

## **Prescribed Medicines**

Medicines should only be taken to 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 Principal / selected staff will administer medicines prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines will only be accepted in the original container as dispensed by a pharmacist and should include the prescriber’s instructions for administration. It is helpful if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. For example, medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime. If a parent wishes to adapt the timing of medicine administration, written confirmation of this must accompany the medication.

Please note that if a pupil’s needs are highly complex the staff may require additional support and training. This will be completed in a timely fashion. The Governors and school leadership, however, will not proceed until they are confident that the child will be safe. This will include some or all of the following:

- Have a care plan in place with the support of a medical professional;
- Train staff on the medical condition and how they should support the pupil;
- Seek additional advice and support from the Education Authority;
- Put in place additional staffing and resourcing;
- Draft and agree a robust risk assessment.

In most cases these measures are not required. However, our paramount responsibility is to care for each child’s safety. This means that we must always take all reasonable precautions to protect and allow each child to thrive. If we are not able to provide for a pupil’s needs we will not put them at risk but will put in place an action plan to meet their needs with the support of various stakeholders as a matter of urgency.

## **Staff Indemnification**

Our employees are not medical professionals. It is, however, a reflection of their caring attitude and professional standards that they are willing to support pupils' medical needs.

All employees must be confident that if they work within the framework of this policy that they are fully indemnified by the Education Authority. They will not be liable for any intervention if they have acted with the best of intentions and their actions were reasonable.

## **ROLES AND RESPONSIBILITIES**

### **Parent/Carer:**

- Should give sufficient information about their child's medical needs if treatment or special care is required;
- Must deliver all medicines to the school office or class teacher in person;
- Must complete and sign the medication form;
- Must keep staff informed of changes to prescribed medicines;
- Keep medicines in date - particularly emergency medication, such as adrenaline pens.

### **Principal**

- To ensure that the school's policy on the administration of medicines is implemented;
- There are members of staff within the school willing to volunteer to administer medication to specific pupils if required;
- Ensure that staff receive support and appropriate training when necessary;
- To share information, as appropriate, about a child's medical needs;
- Ensure that parents are aware of the school's policy on the administration of medicines;
- Ensure that medicines are stored correctly.

### **Staff**

- On receipt of medicines, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber should be checked;
- Ensure that the parent / carer completes a consent form for the administration of medicines following the prescriber's instruction;
- Ensure that medicines are returned to parents for safe disposal.

## **REFUSAL OF MEDICINES**

If a child refuses to take medicines, staff should not force them to do so, but should note this in the records and inform parents immediately or as soon as is reasonably possible.

## **RECORD KEEPING**

Medicines should be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. Staff should check that written details include:

- Name of the child;
- Name of the medicine;
- Dose;
- Method of administration;
- Time and frequency of administration;
- Any side effects;
- Expiry date.

A parental agreement form must be completed and signed by the parent/carer, before medicines can be administered. At the time of administering medicines, the member of staff must complete the medicines' record sheet.

## **CHILDREN WITH LONG TERM MEDICAL NEEDS**

It is important that the school has sufficient information about the medical condition of any child with long term medical needs. A health care plan will be written for children with long term medical needs, involving the parents and relevant health professionals.

## **CONFIDENTIALITY**

The staff should always treat medical information confidentially. It should be agreed with the child/parent who else should have access to records and other information about a child.

## **STAFF TRAINING**

Training opportunities are identified for staff with responsibilities for administering medicines.

## **RELATED POLICIES**

For more information see the health and safety policy and the school's first aid procedures.

## **MONITORING**

This policy should be reviewed annually in accordance with guidance.

## **TRIPS AND OUTINGS**

Children with medical needs are given the same opportunities as other children. Staff may need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This may include carrying out a risk assessment for such children. The school visit teacher leader will be responsible for tabulating medical information for each child and one member of staff will be nominated as having responsibility for the administration of all medication. If necessary an additional adult (or the particular parent) may need to accompany visits where a difficult situation might arise.

### **Taking Medication on School Trips**

It may be necessary to take medication for pupils on a school trip, i.e. Epipen, Inhalers or Epilepsy emergency medication. It is also necessary to take copies of any relevant care plans in case of an emergency. Emergency medication must be taken on all trips, even where a trained member of staff is not present. In this case medication should be given to the paramedics to administer when necessary.

## **Inhalers for Asthma**

Pupils in Key Stage 2 should assume responsibility for their own inhalers. Spare, individually named inhalers, can be kept by the class teacher but parents should complete a permission form. It is the responsibility of the parent to ensure that the inhalers are renewed and that the medication has not exceeded its expiry date. All inhalers should be collected at the end of the school year.

In the case of pupils in Foundation Stage and Key Stage 1 the school can supervise the child using the inhaler. The inhaler should be given to the class teacher and written instructions given. As before, all inhalers should be regularly renewed and collected at the end of the school year.

## **Antibiotics**

Pupils who are prescribed antibiotics can often recover very quickly and may well be fit enough to return to school, but it may also be essential that the full course of medication should be completed. In this case, the Principal / nominated teacher staff are to administer the antibiotics supplied by the parent or carer. A short term medication form should always be completed giving full instructions for administration of the medicine. It is the responsibility of the parent to ensure that the medication is collected each day and is not out of date.

## **Diabetes**

The school will monitor pupils with Diabetes in accordance with their care plan. A labelled emergency sugar box will be kept by the class teacher and will be taken on school trips. Pupils with diabetes must not be left unattended if feeling unwell, or sent to the office unaccompanied. Sharps boxes should always be used for the disposal of needles. Sharp boxes can be obtained by parents / carers from the child's GP or Paediatrician and returned to the parents/carers when full for replacement.

## **Maintenance Drugs**

A child may be on daily medication for a medical condition that requires a dose during the school day. As with all other medicines a form should be completed giving clear instructions to staff at the school. A record of all doses administered will be kept.

If it is suspected that a child who receives maintenance drugs at home has not taken or been given their medication the parents / carers will be contacted as soon as possible.

## **Unusual Medications**

In the case of unusual prescribed medicines, i.e. use of an Epi pen proper training will be provided by the Child Health service and parents will need to complete the relevant medication administration forms accepting responsibility. In cases of eczema or skin conditions it will be expected that the child will be able to use the cream/lotion on their own.

## **Nut Allergies/Anaphylaxis Procedures**

Medication for the treatment of nut allergies will be kept in easily identifiable and clearly labelled folders in individual classrooms. Children and parents will be reminded frequently that our school is a nut free zone.

## **Emergency Procedures**

In the case of emergency, the school will call an ambulance and contact the parents. When conditions require immediate emergency treatment, trained staff may volunteer to administer medication or emergency procedures such as resuscitation. Staff should never 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/carer arrives.

In all cases, administration of medication and/or treatment to a pupil will be at the discretion of the Principal and Governors of the school. However, ultimate responsibility remains with the parents/carers.

## **Hygiene and Infection Control**

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

## **Storage of Medication**

All medicines should be delivered to the school office by the parent or carer and a check made to ensure relevant administration forms have been completed. In no circumstances should medicines be left in a child's possession. All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines will normally be kept in the school office or staffroom fridge and should not be kept in classrooms, with the exception of adrenaline pens and inhalers. All medicines must be stored in the supplied container and be clearly labelled with the name of the child; the name and dose of the medicine and the frequency of administration. All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and staff and kept in an agreed place in the classroom. Children may carry their own inhalers, when appropriate.

## **Disposal of Medicines**

Staff should not dispose of medicines. Parents are responsible for ensuring that date expired medicines are returned to a pharmacy for safe disposal.

## **Summary of Procedure to Dispense Medication**

- Permission to administer short term or long term medication forms must be completed by the parent / carer.
- Medicine must be in original packaging clearly marked with name of child, class and dose to be administered.
- Recommended / prescribed dose will not be exceeded without written permission from a medical professional.
- All medication given must be recorded and witnessed in Medication Record.
- It will be the parent / carer's responsibility to collect medication at the end of each school day where necessary.
- Medication being taken out of school on trips or visits is the responsibility of a member of staff at all times.

**Accepted – October 2017**

**Review Date – October 2018**