



Managing Medicines Policy

Date Agreed by Governors:

Review Date: Spring 2027

Introduction

This policy has been developed and agreed by the whole staff and pupils including the before and after school club, and has the full agreement of the Governing Body and is intended to ensure that children with medical needs receive proper care and support in school, and that for such children attendance is as regular as possible.

Aim

This policy includes:

- Procedures for managing prescription medicines which need to be taken in the school day
- Procedures for managing prescription medicines on outings and trips
- Roles and responsibilities of staff administering medicines
- A clear statement of parental responsibilities in respect of medicines
- Written permission from parents for medicines
- Circumstances in which children may take non-prescription medicines
- Assisting children with long term medical needs
- Staff training
- Record keeping
- Safe storage of medicines
- The school's emergency procedures
- Risk assessment and management procedures

In all instances the school will do all it can to persuade the parent to come into school to administer medicines.

Prescribed Medicines

We will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions, unless the bottle is clearly marked with the prescribed dose and the child's name.

It is helpful when clinically appropriate that medicines are prescribed in dosages that enable it to be taken outside of school hours. We will encourage parents to discuss this with the prescriber.

Prescribers should be encouraged to issue two prescriptions, one for home and one for school, thus avoiding the need for repackaging of medicines.

Any child with regular or on-going prescribed medicine in school must have a healthcare plan, except for asthma pumps.

All pupils with an asthma pump will be allocated with an asthma card in order to record the use of their reliever in school.

All asthma inhalers will be readily available and not locked away.

Controlled Drugs

These should never be administered unless cleared by the Head. Reference is made here to the DfES document *Managing Medicines in Schools and Early Years Settings (2005)* and *Supporting Pupils at School with Medical Conditions (September 2014)*.

Non – Prescription Drugs

Staff should never give non-prescribed drugs to a child unless there is specific written permission from the parent. This will be an exceptional situation rather than the norm.

A child should never be given aspirin or medicines containing Ibuprofen by a member of staff unless prescribed by a doctor, and received in school in a labelled, prescribed dose.

Short Term Medical Needs

In order to reduce the time a child is away from school, the school will administer medicines, for example the end of a course of antibiotics, but only for a short course of up to 5 days, and only when previous avoidance strategies have been examined. ***Note the exceptional terms in the previous section.***

Long Term Medical Needs

The school will be fully informed of the child's needs before admittance. It is essential to have sufficient information in order for the child's medical needs to be adequately supported. (Reference should be made to the 2005 DfES document in order to devise a care plan.)

Administering Medicines

No child under 16 should be given medicines without written consent. Appendix C must be completed by the parent giving permission for medicine to be administered by staff. (All forms are available from the main school office)

Members of staff giving medicines should check:

- The child's name
- Prescribed dose
- Expiry date
- Written instructions on the packaging

Members of staff giving medicines will be trained appropriately for the task. If in doubt, then do not administer medicines without checking with the school office staff who will then contact parents or the medical practitioner.

There must be a healthcare plan in place for each child that has on-going medication in school.

All pupils who have medication administered on a less regular basis must have a completed Appendix C or D.

A record is kept in a written form each time medicines are administered (Appendix F, or Individual Asthma Cards)

Self Management

Children who are able will be encouraged to manage their own medicines. This will generally apply to relief treatments for asthma. Other medicines should be kept in secure storage or refrigerated as appropriate. Each year group has a lockable medicine cupboard. When medication is given it is important to have a second person to verify that you have given the correct dosage.

Appendix J must be completed in order to permit a child to carry their own medicine.

Asthma pumps will be kept in a known location within the classroom and should accompany the class during PE or off site education activities. Please be aware that any child who we know has a diagnosis of Asthma can use a Ventolin inhaler from another child in the event of an emergency.

Record Keeping

Parents should inform school of the medicines their child needs. Schools will check that the medicine is in its original container and that the dispenser's instructions are clear.

A written record of medicines administered will be kept and a copy of the school's consent form will also be kept centrally. For Early Years, parents will sign their child's medicine in each day.

Educational Visits

All medicines required by children on such undertakings will be part of the overall risk assessment for the visit. Medicines not self-managed by pupils will be in the care of a nominated member of staff, or the Visit Leader identified on the risk assessment. This colleague should be one who is willing to carry the responsibility. Complex medical needs for a specific pupil may necessitate a health plan for the visit. At least one member of staff must hold a current First Aid certificate.

Sporting Activities

Risk assessment of medical needs of individual children, including those who may suffer from an asthma attack, should be undertaken. Asthma relievers not self-managed should be taken to the location of the event in a suitable container, supervised by a member of staff.

Responsibilities

The Headteacher will ensure that all staff receive appropriate support and training and are aware of this policy. The Head teacher will inform parents of this policy and implications for them. In all complex cases the Head teacher will liaise with the parents and agree a health care plan.

All staff should be aware of the possible medical risks attached to certain pupils. They should be aware of possible emergency action and emergency contacts. (Appendix M)

All staff administering prescribed medicines should be in receipt of appropriate training.

Storing Medicines

Medicines should be stored away from children, be in their original packaging and refrigerated when necessary. Fridges are lockable. Children should know where their medicine is stored and who is responsible for administering it.

Emergency medicines such as asthma inhalers and adrenaline pens should not be kept locked away but always in the vicinity of the relevant pupils.

Any problems or issues arising shall be initially referred to Managing Medicines in Schools and Early Years Settings 2015 DfES, a copy of which is available on the school online record storage facility.

Changing Children

If a child soils themselves staff will phone the main carer or parent to come into school to clean and change their child on or off the premises, although if more appropriate and agreed by the parent or carer, permission will be sought to shower and change the child appropriately by 2 qualified and familiar members of staff on the school site. (See also the Safeguarding Policy and Intimate Care Policy)

For Early Years this document should be read in conjunction with the 'Statutory Framework for the Early Years Foundation Stage' and the Early Years Inspection Update March 2017.

APPENDIX OF FORMS

Appendix A: Individual Healthcare Plan

Appendix B: Headteacher agreement to administer medicine

Appendix C: Parental agreement for setting to administer a Prescribed medicine

Appendix D: Parental/Carer Agreement to Administer an 'Over the Counter' (OTC) Medicine

Appendix E: Record of medicine administered to an individual child

Appendix F: Record of medicine administered to all children

Appendix G: Staff training record – administration of medicines

Appendix H: Contacting the Emergency Services

Appendix I: Model letter inviting parents to contribute to an Individual Healthcare Plan

Appendix J: Request for a Child to carry his/her medicine

Appendix K: Use of Emergency Salbutamol Inhaler

Appendix L: Specimen letter to inform parents of emergency Salbutamol inhaler use

Appendix M: School's HCP – Contact Details

Appendix N: Temperature Recording Sheet for Medical Fridge