

Administration of Medicine Policy

Including supporting pupils with
medical needs

Reviewed by Amanda Parker, Head Teacher

January 2024

Introduction

This policy has been drawn up with reference to the DfE's guidance on first aid for Schools, the DfE's statutory guidance on supporting children with medical conditions at school and the Statutory Framework for the Early Years Foundation Stage.

Legally schools are not compelled to administer medication to children, because of the risks involved and possible legal consequences. However, wherever possible, it is the school's policy to assist children and parents by administering medicines in school time.

Responsibilities

Head Teacher:

The Head Teacher will create and develop a policy for administration of medicine in school and supporting pupils with medical needs and will make sure all staff are aware of this policy and understand their role in its implementation.

The Head teacher will take overall responsibility for the development of Individual Healthcare Plans (IHPs) and will ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations.

The Head Teacher must ensure that all staff who need to know are aware of a child's condition and that systems are in place for obtaining up to date information about a child's medical needs.

Staff:

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Parents:

Parents are responsible for ensuring that their child is well enough to attend school and will be responsible for collecting their child from school if they are too ill to attend. Parents are required to provide emergency contact details before their child starts attending the school and are responsible for updating this information as soon as there are any changes.

Parents are responsible for providing the School with sufficient information about their child's medical condition, including any dietary requirements, allergies and treatment or special care needed at school either for short-term or long-term needs, ensuring the school is kept up to date with any changes.

Pupils:

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Where appropriate and considering the age of the child, pupils should be involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

Healthcare professionals:

Healthcare professionals, such as GPs and paediatricians, will liaise with the school and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

There are occasions when the school has to work closely with community partners such as Public Health England. Parents will be informed of the procedure for children and families should this happen.

Individual Healthcare Plans

The Head Teacher is responsible for making staff aware of pupils with medical conditions and alerting them to the need for prompt action. A list with photos of all children with medical needs containing essential information such as food allergies etc. is displayed in the staffroom and the kitchen.

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be appropriate and proportionate, based on evidence. Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The headteacher, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical

condition from a healthcare professional, and cover arrangements for when they are unavailable

- Who in the school needs to be aware of the pupil's condition and the support required
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- What to do in an emergency, including who to contact, and contingency arrangements

IHPs vary as appropriate to the condition and support needed and often follow a format provided by healthcare professionals rather than using a school form. Exemplar plans for common medical conditions, such as allergy plans, are available digitally if needed.

Copies of a child's IHP will be kept in the medical file and in their classroom, with emergency medication.

Administration of Medication

Medication will only be administered by appropriately trained members of school staff with written consent from parents.

Non-Prescription medication

Non-prescription medication includes *General Sale* medication and *Pharmacy* medication (which can only be sold by a pharmacist.) Children may require non-prescription medication to support them at school, such as hayfever medication or painkillers.

The school holds a stock of paracetamol suspension for children (e.g. Calpol) and anti-histamine suspension (e.g. Piriton) which we can administer to children when needed. Consent from parents must be sought on each occasion before administration.

Non-prescription medication provided by parents must be accompanied by a signed short-term or long-term medication consent form. Medication must be provided in its original packaging, clearly labelled with the child's name, and will be administered according to the original packaging instructions. Any changes to these instructions can only be made in writing from a doctor or medical professional.

We reserve the right not to administer non-prescription medication from countries other than the UK or with instructions in a language other than English.

Prescription medication including controlled medications

Medication prescribed by a doctor should be administered according to the instructions on the individual medication and only given to the named pupil for whom it has been prescribed. Medication should be kept in the original container which is clearly marked with the original dispensary label.

Prescription medicines can only be administered to a person in accordance with the directions of the prescriber. The dispensary label is a copy of the prescription and therefore the member of Staff's legal authority to administer the medication, as it contains the prescriber's instructions.

No member of staff may administer prescription medication if:

- The pharmacy label is not present
- The label is defaced or altered

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

When the pharmacy label gives variable instructions, for example: *Take one or two when required*, the following information must be agreed and noted in writing, on the consent form or IHP:

- When to give one measure or when to give two
- How often the dose should be repeated
- What is the maximum dose in a 24hr period

Parents will be informed on the same day, or as soon as reasonably practicable, when medication that is kept in the school for long term medical needs has been administered. In the case that the medicine is taken on a regular basis, parents will only be informed if there is any change to the normal pattern, e.g. if a child has refused to take the medication.

Adverse reactions

Medications can cause adverse reactions in some people. If a pupil has an adverse reaction to the medication, no further doses will be given and their parents will be notified and advised to seek further medical advice. If a serious reaction occurs, medical attention should be sought immediately by dialling 999 to contact the emergency services.

Errors

If an error is made with any medication, it must be recorded and reported immediately to the Head Teacher. The parents must be notified. Medical advice must be sought by contacting 111 NHS helpline or 999 emergency services as appropriate.

Safe Storage of Medication

All medicines, with the exception of emergency medication, are kept safely locked away and out of reach of children. Most medicine, including the school stock of paracetamol/antihistamines and pupils' personal prescription and non-prescription medicines are kept in the medical cabinet in the cupboard to the rear of the office. Exceptions to this are outlined below.

Emergency medication

Children who have Adrenaline Auto Injectors (AAIs) and other lifesaving medication such as asthma reliever pumps will be asked to bring in two. One will be kept in the classroom, the other with the child at all times.

Refrigeration of medicines

Some medicines, such as some eye-drops and antibiotics, need to be kept refrigerated. These will be stored in a locked box in the kitchen refrigerator, with the temperature regularly monitored.

Controlled Medicines

Sometimes a doctor may prescribe a pupil a medication which is controlled under the Misuse of Drugs Act 1971 and its associated amendments. These medicines are clearly marked with a C on their pharmacy label and require strict control in a separate locked cabinet. These medicines may only be administered by staff members holding current training in the administration of medication. Any unused or expired medicines are returned to the pupil's parents for disposal.

Record Keeping

Each pupil has a Medical Profile which is kept in the medical folder in the office. This includes an overview of any medical information, including allergies, and any long-term medication used as well as space to record medicines administered.

Medicine administered to the child, such as school provided paracetamol, should be recorded on this form. Any prescription medication administered should be witnessed by a second staff member, although this would usually be recorded on a short- or long-term medical form (see below).

Should a child require a further page for their Medical Profile, either to update the information or because the administration record is full, the new profile will be clearly dated. A blank profile indicates that no medicine has been administered, other than those recorded on short- or long-term medication forms.

Short-term medicines

Parents may occasionally choose to provide short term medication to be administered in school, including non-prescription medications such as hayfever medication or prescription medicines such as antibiotics. All medications must be accompanied by a signed consent form, clearly stating the reason for the medicine and how it should be administered.

These medications should be stored and administered as directed on the packaging or pharmacy label, as outlined above. A record should be kept on the short-term medicine record form each time it is administered, witnessed by a second adult for prescription or controlled medication.

The amount of medication provided should be recorded and stock noted at the end of the course of treatment. A copy of the form should be returned to the parents along with any unused medication. The original form will be filed in the medical folder alongside the child's Medical Profile.

Long-term medicines

Some children may require long term medication to support them in school with ongoing medical conditions.

Parents should fill and sign a consent form when the treatment begins, consenting to ongoing use of this medication. These medications should be stored and administered as directed on the packaging or pharmacy label, as outlined above. A record should be kept on the long-term medicine record form each time it is administered, witnessed by a second adult for prescription or controlled medication.

The amount of medication provided should be recorded and stock noted as it is used or replenished, writing directly on the administration record to keep a running total. Any expired medication should be returned to parents for disposal, with the amount returned recorded on the form. Parents must inform the school immediately if there are any changes to the child's condition, medication or should they discontinue use of the medicine.

School Trips and Outings

The school encourages pupils with medical needs to participate in safely managed trips. The school will consider reasonable adjustments to enable all children to participate fully and safely on school trips. This might include a separate risk assessment for specific pupils, or including their needs on the trip's risk assessment.

Staff supervising excursions will always be aware of any medical needs and relevant emergency procedures. A copy of any health care plans will be taken on trips and all trips must have at least one member of staff who will be first aid trained, or trained as appropriate to handle the specific medical needs of individual children.

Managing medicines on trips and outings

If children are going on outings, staff accompanying the children must be fully informed about the individual children's needs and/or medication.

Medication for a child taken on a trip must be clearly labelled with the child's name and name of the medication. Short- and long-term medical forms should be taken on the trip if the medicine is likely to be administered. If medication is unexpectedly administered, the relevant form must be filled in immediately upon return to school. If a child on medication has to be taken to hospital, the child's medication should be taken with them and declared to paramedics.

Residential trips

The school will ensure that at least one member of staff attending a residential trip is trained in the administration of medicines.

A medical folder containing the children's medical profiles and any IHPs should accompany the group on the trip. It is likely that children will require additional medication to that usually administered in school. This may include medicines usually administered at home or travel sickness medication for longer journeys. For any medication, the short-term medication forms should be used and any remaining medication returned to the parents, with a copy of the form, at the end of the trip. The original form and record of administration will be filed in the medical folder in school.

This procedure is to be read alongside the School Educational Visits Policy and the specific trip risk assessment.

Training

The staff in school who are trained in the administration of medicine are:

- Amanda Parker
- Nadine Lara
- Semira Asfaw
- Suzy Mercer
- Kais Alayej
- Kerry Barber
- Shirley Dutton

Staff who are responsible for supporting pupils with specific medical needs will receive suitable and sufficient training to do so. The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Head Teacher. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

Appendices

Appendix 1: Pupil Medical Profile

Appendix 2: Short term medical consent form and record of administration

Appendix 3: Long term medical consent form

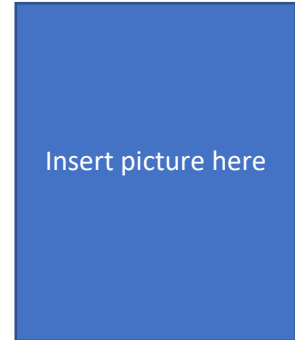
Appendix 4: Long term medicine record of administration



Pupil's Name:

Date of Birth:

Profile created:



Medical Conditions:	
Allergies/Intolerances:	
Ongoing medication (with dates):	
Additional Dietary requirements:	

Record of medicines administered

Date:	Time:
Medication:	Dose:
Consent given by:	
Administered by:	Witnessed by:
Signed:	Signed:

Date:	Time:
Medication:	Dose:
Consent given by:	
Administered by:	Witnessed by:
Signed:	Signed:

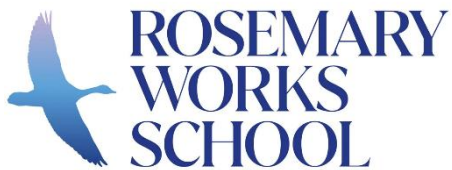
Date:	Time:
Medication:	Dose:
Consent given by:	
Administered by: Signed:	Witnessed by: Signed:

Date:	Time:
Medication:	Dose:
Consent given by:	
Administered by: Signed:	Witnessed by: Signed:

Date:	Time:
Medication:	Dose:
Consent given by:	
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Date:	Time:
Medication:	Dose:
Consent given by:	
Administered by: Signed:	Witnessed by: Signed:

Date:	Time:
Medication:	Dose:
Consent given by:	
Administered by: Signed:	Witnessed by: Signed:



Short Term Medicine Consent Form and Record of Administration

Please fill in this form to give consent for the school to administer medication to your child. Please fill in one form per medication.

For **prescription** medication, we require the **original pharmacy label** with administration instructions and your child's name. For **non-prescription medicine**, please include the **original packaging**, with administration instructions and label it with your child's name.

Name of child:	Medication:
Medical condition:	
Strength:	Amount provided:
Start date:	End date:
Type of medication: General Sale / Pharmacy / Prescription Only / Controlled Drug	
Administration instructions as per packaging or pharmacy label:	

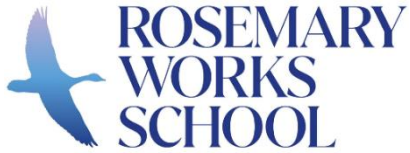
I confirm that my child has taken this medicine before, with no ill effects, and give permission for the school to administer this to my child according to the instructions.

Signed (Parent/Carer):

Print name:

Fill in immediately as medicine is administered, witnessed for Prescription or Controlled medication

Date	Time	Administered by (and sign)	Witnessed by (and sign)



Long Term Medicine Consent Form

Please fill in this form to give consent for the school to administer medication to your child. Please fill in one form per medication.

For **prescription** medication, we require the **original pharmacy label** with administration instructions and your child's name. For **non-prescription medicine**, please include the **original packaging**, with administration instructions and label it with your child's name.

Name of child:

Medical condition:

Long term medicine required:

Strength/dose:

Type of medication: General Sale / Pharmacy / Prescription Only / Controlled Drug

Administration instructions (as per packaging or pharmacy label):

I confirm that my child has taken this medicine before, with no ill effects, and give permission for the school to administer this to my child according to the instructions.

I will inform the school immediately should there be any changes to my child's condition or how the medicine should be administered.

Signed (Parent/Carer):

Print name:

