



MANAGING MEDICINES IN SCHOOL

AIMS

A clear policy that is understood and accepted by all staff, parents and children providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that for such children attendance is as regular as possible.

The policy is to include:

- 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 permissions 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. Form 3B to be completed by parents / carers.

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.

**Controlled drugs** should never be administered unless cleared by the Head. Reference should be made to the DfES document Managing Medicines in Schools and Early Years Settings 2005. Which is kept in the medical room.

### Non-Prescription Drugs

Staff should **never** give non-prescribed drugs to a child unless there is specific permission from the parent / carers. Administration of the medicine will be witnessed and counter signed by a second member of staff. Telephone permission then written confirmation / permission will be sort by sending home a copy of Form 3B, Parental agreement for school / setting to administer medication. This will be an exceptional situation rather than the norm.

A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

The school maintains a stock of Paracetamol tablets, the stock levels of which are recorded as they are signed in and out.

## 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 or apply a lotion, 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 paragraph. Form 3B will be completed by parents / carers**

## 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.)

## Administering Medicines

No child under 16 should be given medicines without written parent / carer consent. Form 3B must be completed by the parent giving permission for medicine to be administered by staff.

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 not be teaching members of staff but support staff who are:

- Willing to perform such tasks
- Trained where necessary for the task

If in doubt then do not administer medicines without checking with one of the schools 3/4 day First Aiders who will then contact parent / carer.

**A record must be kept in a written form each time medicines are given.** (Form 6 from the DfES 2005 doc. should be used to record.)

### 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 so access will only be through the medical room.

### Record Keeping

Parents should inform the school of the medicines their child needs. School 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 in the Medical Room and copy of consent form 3B will also be kept in the Medical Room.**

### 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 safe care of a nominated member of the support staff. This colleague should be one who is willing to carry this responsibility. If any member of staff is concerned they should seek advice from the School First Aiders.

### Residential Visits

If a pupil requires medicines which he / she takes at home only i.e. not during the school day, then form 3B must be completed by parents / carers before departure for the medicine to be administered during the residential. To be administered by a member of support staff who is willing to carry out the task and witnessed by a second member of support staff. These should be two members of staff willing to accept this responsibility. Form 6, record of medicines administered to be completed.

## Sporting Activities and Off-site Venues

Given the distance between the school and many off-site sporting / venues it would be advisable to prepare a risk assessment of medical needs of individual children, where needed, including those who may suffer from an asthma attack. Asthma relievers not self managed should be taken to off-site and be supervised by a support member of staff who is willing to accept this responsibility. Staff are made aware of pupils who have medical needs, ie Asthma.

### Request for child to carry his / her medicine form 7

Where deemed applicable by staff, a pupil can carry his / her own inhaler when offsite i.e. sporting activities and offsite venues, residential visits and educational visits. This must be returned to the first aider when they come back into school. Form 7 must be completed by parent / carer beforehand.

### Inhalers

Mouth pieces to be rinsed to avoid any blockages and expiry dates checked each half term.

### The Governing Body

The governing body will be made aware of this policy and its role in being generally responsible for all school policies.

### The Head Teacher

The Head Teacher will ensure that all staff receive appropriate support and training and aware of this policy. Likewise the Head Teacher will inform the parents of the policy and its implications for them. In all complex cases the Head Teacher will liaise with the parents and where parent expectation is deemed unreasonable then the Head will seek the advice of the school nurse or some such medical advisor.

## Teachers and Support Staff

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. Teachers' conditions of employment do not include the giving or supervising of pupils taking medicines. Any support member of staff agreeing to administer prescribed medicines should be in receipt of appropriate training. The training shall be commensurate with the situation.

## Storing Medicines

Medicines should be stored away from children, be in their original containers and refrigerated where necessary. This will be the responsibility of the First Aiders. Children should know where their medicines are kept and who is responsible. This should be an exceptional duty and be only used when medical advice dictates that no other course of action is possible.

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 referenced to Managing Medicines in Schools and Early Years Settings 2005 DfES, a copy of which is kept in the Medical Room.

## KEY POINTS

- THE SCHOOL WILL NOT NORMALLY AND REGULARLY ADMINISTER MEDICINES TO CHILDREN UNLESS THE ABOVE POLICY APPLIES
- NO TEACHING STAFF WILL ADMINISTER MEDICINES OR SUPERVISE CHILDREN SELF ADMINISTERING MEDICINES
- ANY STAFF MEMBER ADMINISTERING MEDICINES WILL DO SO WILLINGLY AND WITH REGARD TO RESIDENTIAL STAFF, APPROPRIATE TRAINING HAS BEEN UNDERTAKEN
- ANY AND ALL MEDICINES WILL BE NOTIFIED TO THE FIRST AIDERS AND KEPT UNDER THEIR SUPERVISION. This includes asthma relievers and adrenaline pens. The School First Aiders will know where these medicines are in school and the asthma register shall be updated as and when new children come in to school, or a pupil is deemed to be no longer Asthmatic by their G.P. (For which a signed letter from parents / carers is required). Asthma registers are displayed in staff areas around the school.
- FORM 3B, PARENTAL AGREEMENT FOR SCHOOL / SETTING TO ADMINISTER MEDICINES. FORM 6, RECORD OF MEDICINE ADMINISTERED