



Barlow Church of England Primary School

Administration of medicine

16 September 2019

Author : Penny Watkin

Approved : David Barnes

Purpose of this policy

The purpose of this policy is to ensure the safe and appropriate administration of medication to pupils with medical needs within the school. Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children may have longer term medical needs and may require medicines on a long-term basis to keep them well, for example children with cystic fibrosis. Other children may require medicines in particular circumstances, for example severe allergies or asthma.

Supporting pupils with long-term health needs

The school will aim to minimise any disruption to the child's learning as far as possible and work with parents/carers and health professionals to ensure this. Where a pupil needs to take medication in school for an extended period or has a chronic ongoing condition a Health Care/Emergency plan will be put in place. This will be agreed jointly by the school and parents/carers with the advice of health professionals. Parents should provide the school with all necessary information about their child's condition and will sign appropriate agreement forms for the administration of medication.

Managing medicines during the school day

Non-prescription medicines - Medicines which have not been prescribed by a medical practitioner will only be administered in school if absolutely necessary (e.g. Paracetamol, ibuprofen, throat lozenges). Parents/carers will be encouraged to give the medicines outside the school day. A consent form must be completed by the parent.

Prescription medicines - Prescription medicines should only be taken during the school day when essential. Parents/carers will be encouraged to request from doctors, where possible, medicines which can be administered outside of the school day. Medicines will only be administered in school where the dosage frequency requires them to be taken four or more times a day or where they must be taken at specific times. Medication must be in its original container with the original pharmacy label intact, medication will not be accepted without these. Medicines will only be administered according to the instructions on the pharmacy label. A consent form must be completed by the parent.

Storing Medicines

The school will keep the medication securely in the school office which may only be accessed by authorised staff. Where medicines need to be refrigerated they will be stored in a designated fridge. Prescription drugs will be returned to parents when no longer required. It is the parent's responsibility to collect and dispose of out of date or unused medication. It is the parent/carer's responsibility to ensure that medicines sent to school are 'in date'. If new supplies are needed it is the responsibility of the parents to supply medication, school staff will inform parents when there is 5 days' worth of medication left to allow plenty of time for a repeat prescription to be fulfilled.

Epipens and other Emergency Medication

All staff will be given appropriate training in the administration of emergency medication where necessary in conjunction with the School Nurse. Arrangements will be made for immediate access to any emergency medications for example: Epipens will be kept easily accessible in the office. Asthma medication will be kept in the First Aid bags in each classroom. Emergency medication will always be taken if the child goes out on a trip.

Labelling of medicines

On the few occasions when medicines have to be brought into a school or service, the original or duplicate container, complete with the original dispensing label should be used. The label should clearly state the method of dispensing – where applicable. The information on the label should be checked to ensure it is the

same as on the parental consent form. Where the information on the label is unclear, such as “as directed” or “as before” then it is vital that clear instructions are given on the parental consent form. If the matter is still not clear, then the medicine should not be administered and the parents should be asked for clarification.

Disposal of Medicines

Medicines which have passed the expiry date must not be used. Creams and lotions will have both a manufacturer’s expiry date which must be observed and should also be considered to have expired 28 days after having been opened. Pump dispensers have a longer life, usually about 3 months. Expired medicines need to be disposed of properly by arrangement with the child’s parents, either by return to, or collection by, the parents or return to the pharmacy for safe disposal. Provision for safe disposal of used needles will require appropriate special measures, e.g. a “sharps box”, to avoid the possibility of injury to others. A “sharps box” must be kept secure with no access for pupils or unauthorised persons. This should be disposed of in a safe way using a specialist licensed contractor.

Hygiene and Infection Control

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

Employee Medicines

If an employee needs to bring medicine into school they have a responsibility to ensure that their medicines are kept securely and that children do not have access to them. Adequate safeguards must be taken by employees, who are responsible for their own personal supplies, to ensure that such medicines are not issued to any other employee, individual or pupil.

Confidentiality

Medical information should always be regarded as confidential by staff and personal data properly safeguarded. Records relating to the administration of medicines are health records and should be stored confidentially. Instructions should be shared on a “need to know” basis in order that a child’s wellbeing is safeguarded and any individual treatment plan is implemented. Key responsibilities of staff: Staff must always check the administration record to ensure that a dosage is due and has not already been given by another person. If in doubt about any procedure staff should not administer the medicines but check with the parents or a health professional before taking further action. If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent, if appropriate, or with a health professional attached to the school. Written records must be kept each time medicines are given. The administration of controlled drugs requires 2 people. One should administer the drug, the other witness the administration.

Refusal to take medicines

Staff can only administer medicines with the agreement of the child. Any specific instructions to assist the administration of a medicine should be recorded in the child’s individual treatment plan as should any instructions. In the event of refusal, note this in the records and follow agreed procedure from the plan, staff should inform parents the same day; where refusal may result in an emergency, emergency services and parents will be called.

Record Keeping

Records must include: the names of medication given, the amount that has been prescribed and a written request from a parent to administer the medication. has been confirmed in writing; For children with ongoing or complex needs, a care plan that states whether the child needs support to look after and take some or all medicines or if care workers are responsible for giving them. Staff must make a record straight after the medicine has been accepted and taken. Records should show who has made the record and be able to

account for all of the medicines managed for an individual.

Pupils with complex health needs

As technology develops, growing numbers of children with complex health needs receive their education in mainstream schools. This group of children and young people require additional support in order to access the curriculum to the maximum extent. Some examples of care of health needs for which children might require additional support in schools and services are: difficulty in breathing e.g. a child with a tracheostomy who requires regular airway suctioning during the day; assistance with bladder emptying and needs catheterisation at each break time or to follow a toileting plan to aid continence of bladder and bowels. Staff dealing with children with complex needs will receive training from the school nurse/health professional so that clinical procedures can be carried out correctly. A detailed Individual Health Plan should be completed for the child.

Emergency Procedures

Where children have conditions which may require rapid intervention, parents must notify the Head teacher/designated person of the condition, symptoms and appropriate action following onset. They should also share any individual treatment plan. The Headteacher/designated person must make all staff aware of any child whose medical condition may require emergency aid and staff should know: condition and take appropriate action i.e. summon the trained person, call for ambulance if necessary etc. and the emergency instructions contained within them; to call the emergency services; Other children should also know what to do in the event of an emergency, such as telling a member of staff.

When a child needs to go to hospital

Staff should not normally take children to hospital in their own car - it is safer to call an ambulance. A member of staff should travel with the child and should stay until the parent arrives. Health professionals are responsible for any decisions on medical treatment when parents are not available.

Residential Visit

Parents must complete a medical consent form for any residential visit with the school so that staff in charge of the school visit are given consent to administer medicines and first aid.

First Aid Training

The school will ensure that there are always qualified first aiders in school and that all staff . For children in Reception, there will always be a person on site who holds a Paediatric first aid qualification.

Staff Name	Last Open	Signature Date
Gemma Phipps	23-09-2019	23-09-2019
Natalie Baker	09-03-2021	09-03-2021
Heather Morton	23-09-2019	23-09-2019
David Barnes	21-09-2019	21-09-2019
Vicky Noble	23-09-2019	23-09-2019
Nicholas Shaw	Not Yet	Not Yet
Paul Ryan	Not Yet	Not Yet
Graeme Forth	Not Yet	Not Yet
Liam O'Connell	Not Yet	Not Yet
Sarah Colver	Not Yet	Not Yet
Helen McElhattan	04-10-2021	04-10-2021
Penny Watkin	Not Yet	Not Yet
Natalie Vick	Not Yet	Not Yet
Rebecca Ryan	Not Yet	Not Yet
Vicky Wilson	22-09-2019	22-09-2019
Charlotte Mawby	Not Yet	Not Yet
Caroline Feeney	02-09-2020	02-09-2020
Claire Rowbottom	Not Yet	Not Yet
Sue Durnall	Not Yet	Not Yet