



The Administration of Medication in School Policy

Introduction

This policy has been developed by the school's Governing Board and is written in accordance with the Department for Education Guidance, 'Supporting Pupils at School with Medical Conditions' December 2015. It should be read in conjunction with the Special Educational Needs and Disability (SEND) Code of Practice.

The policy provides information on the administration of medicines in schools. This policy also applies to activities taking place off-site as part of normal educational activities. Most children with medical needs, are able to attend school regularly and with support from the school, take part in most routine activities, whilst others with more significant medical needs require an Individual Health Care Plan (IHCP) to be drawn up. The Review/update since July 2017 takes account of information about OTC (Over the Counter) medications and MHRA licences.

School Responsibilities

- The Governing Board should ensure that the school's policy is clear about the procedures to be followed for managing medicines. The Governing Board should ensure that staff are properly trained to provide the support that pupils need. The Governing Board must ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented.
- The Head Teacher accepts responsibility, for arranging and ensuring the administration of prescribed medication and medical care by a school nurse or appointed persons during the school day. The acceptance of responsibility may depend, however, upon the nature of any individual needs.
- Where the Head Teacher decides that she cannot meet the medical needs in individual cases, this decision will be notified to the parents/carers promptly. It is not acceptable to require parents/ carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child.
- The designated member of staff with key responsibility for medicines, Mrs Claire McGettrick medical lead, who will initiate Individual Health Care Plans in consultation the school nurses' team and parents/ carers. Care Plans will specify the pupils' resulting needs, including medication (dose, side effects,

storage, as appropriate). If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring. On a day-to-day basis there are two members of staff with designated responsibility for the administering of medicines. Any arrangements for children with medical needs participating in off-site school activities will be overseen by the Group Leader.

- **School Staff:** Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should consider the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. For example, where a child may have a severe allergic reaction, which may require the immediate administration of medicines, those staff who have volunteered will receive training.

- Notes from parents/carers concerning the administration of medicines will be received by class teacher/TA and in turn passed on to the Schools Medical Lead who will keep a record of medicines administered and will ensure medicines are stored appropriately. The Schools Medical Lead will inform parents/carers of any expired/unwanted medicine and arrange safe return via hand-to-hand contact with transport. In practice, where the school nurse is not available, these responsibilities will belong to/ be overseen by the Deputy Head/ member of SLT.

- The school nurse/appointed person will notify parents/carers where their child refuses to take medication prescribed. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents/ carers should be informed so that alternative options can be considered.

- No child under 16 will be given prescription or non-prescription medicines without their parent/carer's written consent. Verbal consent will not be accepted in any circumstances.

The Responsibilities of Parents/Carers

- Parents/carers should try to ensure that their child's medication is taken out of school hours wherever possible. If this is unavoidable, parents/ carers should provide the medicines and equipment necessary.

Please note prescribed medicines can only be given if these are in-date and in their original packaging in accordance with the original pharmacy dispensing label. Instructions for administration, dosage and storage should be included. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container. Other loose medicines will not be given.

- Parents/ carers will provide written permission for medication to be administered by a member of staff or self-administered by the pupil during school hours. The parent/ carer should complete the Administering Medication in School Parent Consent Form prior to any person within the setting administering the medication. Without the completed consent form then medication WILL NOT be administered.

- Where children are required to take medicines during school time, parents/carers must pass all medication over to the school's office staff along with the completed consent form. Should the school staff have any concerns surrounding the medication then they should seek advice from the school's medical lead Claire McGettrick or in her absence a member of SLT.

- Paganel Primary School recognises that GPs would not normally prescribe simple OTC (Over the Counter) medications for any patients, including children, and a doctor's prescription will not therefore be required before administering such medicines to a child. The MHRA licenses all medicines and

classifies them as OTC when it considers it safe and appropriate that they may be used without a prescription. Therefore, OTC medicines may be given, or authorised, by parents/ carers when they consider it necessary. This however will only be administered within school should the child require the medication 4 times a day and the Administering Medication in School Parent Consent Form for Short Term Medication must be completed. Exceptions to this would be of a child on their menstruation and suffering from stomach cramps whereby a separate authorisation consent form would be signed to agree to the administering of paracetamol at a lunchtime.

- If parents/carers prefer to administer medication themselves to their children during school time, they should discuss this with a member of the SLT.
- Parents/carers should ensure that they provide the school with emergency contact(s) where they or a nominated person can be contacted always should their child become ill/ or if advice is needed.
- The Schools Medical Lead will periodically check medicines held at the school for expiry - parents/carers will be contacted, and unused medications returned to parents/ carers for disposal.
- Where a pupil has a significant medical need and health professionals advise that an Individual Health Care Plan is required, parents/carers will be expected to fully participate in providing information in relation to the medical condition/ need for medicines, agreeing and signing the plan for their child.
- Parents/carers should inform the school and school nurse as soon as possible of any changes in their child's condition or treatment/ medication that impacts on school.

The Responsibilities of Pupils

- Where a child has an enough understanding of their medical need which requires an Individual Health Care Plan, the child will be invited to participate in drawing up and agreeing the plan.
- The Medical Lead/Designated persons to individual children will supervise the taking of medications. Children who are competent to manage their own health needs and medicines: after discussion with parents/ carers, children who are competent should be encouraged to take some responsibility for managing their own medicines, under the supervision of the school's medical lead/designated person
- Asthma: children should be able to access their medicines for self-medication quickly and easily at Reception, with an appropriate level of supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them. If a child administers their inhaler, then this should be observed by the adult to ensure the correct use as well as the adult recording the self-administration within the child's asthma diary.
- Children should never ask other children to take care of their medication. Children should never give their medicine to anyone else.

Storage of Medication

- All medicines should be handed in to the receptionist at school, who will supervise the transferring of all medicines to the school's medical lead
- To maintain a secure environment, only staff members identified by the Head Teacher are able to access medications.
- In accordance with guidance, drug cabinet keys MUST be securely stored in a locked area. This area must have restricted access. The drug cabinet key to be secured in the treatment room. ONLY APPOINTED PERSONS CAN ACCESS THE DRUG CABINET. The Medical Room door MUST

ALWAYS be shut unless it is being used by appointed persons/first aiders. It is ALL staff members responsibility to make sure that the medical room door is locked when it is not being in use. Medicines and devices such as asthma inhalers (+ masks and spacers), blood glucose testing meters and adrenaline pens should be always readily available and not locked away. They should be stored in an appropriate place in which the responsible staff are able to access should they be needed.

- Medication will be returned to parents/carers at the end of the day and records updated.
- Administration of inhalers will be in accordance with the school Asthma Policy.

Controlled Drugs in Schools

School will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access. Controlled drugs should be easily accessible in an emergency. Rescue Medication (e.g., Buccal Midazolam, IM Hydrocortisone plus protocol) and ADHD medication for certain pupils will be stored securely also. A record is kept of any doses used and the amount of the controlled drug held/administered. Only the School Medical Lead/SLT/Designated staff may administer a controlled drug to the child for whom it has been prescribed. When administering the controlled drug this must be witnessed by a second member of staff to which both signatures will be recorded within the

All other medications will be locked in the medication cupboard, secured in the KS2 medical room.

The School's Emergency Procedures

- For non-emergency situations advice will be sought from the school's medical lead and in her absence a relevant first aider when available.
- Pupils who have rescue medication (Buccal Midazolam) in school have individual Epilepsy Care Plans, which include the names of staff authorised to deliver, and the protocol for delivery, signed by a parent/ carer. This will be followed in the event of a seizure.
- Where a child requires urgent medical attention, the medical lead should be in attendance and in their absence a member of SLT who will in turn call an ambulance unless it is a child with an individual care plan and their process should be followed. However, the medical lead and SLT should be made aware of the incident.
- The caller will refer to the Individual Health Plan and provide details of the child's known condition and symptoms. Where possible, they will give the name and date of birth of the child etc.
- Where urgent medication is required, and staff have received training, e.g. EpiPen, the school will endeavour to administer the medication and call for an ambulance simultaneously.

When an emergency call is made, the caller will give their name and provide details of the school's location to aid the Ambulance Service. Paganel Primary School, Swinford Road, Selly Oak B29 5TG.

- Parents/carers will be contacted as soon as possible where emergencies arise.
- If off site, staff should contact the school office as soon as possible.
- A pupil taken to hospital by ambulance should be accompanied by a member of staff who should remain until the parents/carers arrive.

School Visits

- In accordance with guidance from the Medical Lead, medication will be taken on school trips and administered by trained appointed persons, as directed by the group leader and counter signed by a volunteering appropriately trained staff member. Separate permission is required for school trips or other school activities for medication to be administered outside of the normal school hours that will ensure the child can participate and should be noted on a risk assessment.

- Records will be kept of medication leaving and returning to school and should be signed by two members of staff (the receiver and authorised person). The medication will be checked at the point of handover by the authorised person and the receiver will check that they have all the information/details needed in order to administer the medication outside of the school premises. When the medication is taken out of school it should be stored in portable medication boxes. Risk assessments will name person(s) who will administer the medication. Medication should be taken on school trips in the original packaging with a dispensing prescription label. Throughout the school visit ALL medication should be securely stored. On return to school, the medication should be returned directly to the medical lead who will store the medication in the KS2 medical room until it can be returned to the parents/carers.

Medical Lead Offsite

- Class teachers/TA/Other adults within the school should pass any information regarding pupil's health and medication issued to the admin team who will then pass the information to the school's medical lead.

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- Any medical concerns about a young person should be in the first instance be brought to the attention of the class teacher. The need for further support can then be brought to the attention of a member of SLT who will have the appropriate contact details for the School Nurses Team.

- Emergency procedures should be dealt with as normal practice.

- Where support from the health care team is required, contact should be made via the SLT or admin team.

Current staff members authorised by the Head Teacher to administer medications are:

- SLT Members
- Medical Lead
- **ADHD Medication – always two people – designated persons SLT/Medical Lead needs to be administered by someone trained within administering medication as of being a controlled drug. (currently no children are required ADHD medication to be administered in school.**
- Buccal Midazolam trained staff
- Asthma medication – all trained staff
- All other staff that are first aid trained.

Medical Lead off site – Routine Medication Administration

- Members of staff have been appointed and are willing to administer medications in accordance with information provided by the Medical Lead.
- Administration of medication must be witnessed by two members of staff ensuring medication is double checked for correct child, dosage and frequency.
- Signatures and confirmation of checks must be recorded, and copies kept in the KS2 Medical Room within the designated medical file.

Training

- Any member of school staff providing support to a pupil with medical needs should have received suitable training. The medical Lead (in consultation with the Senior Leadership Team) will assess and specify training needs related to particular medication. Training should be sufficient to ensure that staff are competent and have confidence in their ability to deliver the medication and to fulfil the requirements as set out in individual health care plans. They will need an understanding of the nature of the medication they are delivering, their implications and risk factors. In some cases, written instructions from the parent/carers or on the medication container dispensed by the pharmacist may be considered sufficient. This will be decided by the headteacher in consultation with the medical lead, having taken into consideration the training requirements as specified in pupil's individual healthcare plans.
- Requests for school/staff training will be notified to the medical lead who will advise how training is to be pursued.
- A record of who delivered the training and who received the training will be kept by the school. A date for review and further training will be agreed by the Medical Lead and Headteacher.

Confidentiality

- Whilst the school will endeavour to maintain confidentiality, in some cases in the interests of the pupil's safety, information about their condition/treatment/medication may be required to be made available to staff at school. This may include information displayed to staff in areas pupils do not normally have access. In these cases, the permission of the parents/carers and the pupil, where appropriate will be sought. This will be discussed when drawing up the individual Healthcare Plan.

Monitoring and Reviewing the Policy

- The Headteacher will ensure that this policy is implemented and monitored and is made known to all relevant persons.
- The Governing Board will receive an annual report on the implementation and monitoring of the policy.
- The policy will be reviewed September 2023

