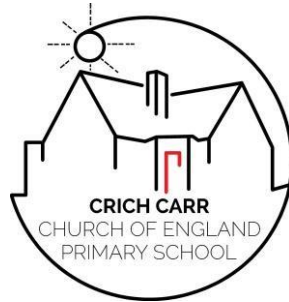


Crich Carr Church of England Primary School



ADMINISTRATION OF MEDICINES POLICY

	Date	Minute No.	Next Review date
Approved by Governors	January 2017	1414	January 2018
Approved by Governors	January 2021	1655	January 2022
Approved by Governors	October 2022		October 2023
Approved by Governors			
Approved by Governors			
Approved by Governors			
Approved by Governors			

To be reviewed: Annually

Nominated Governor responsible for review: I Robson

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 (form 1). This will be agreed mutually 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 (Form 2).

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 (Form 2).

Storing Medicines

The school will keep the medication securely in the locked cupboard in the small quiet room. This can 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. Form 4 will be completed to show evidence of who has been trained. Arrangements will be made for immediate access to any emergency medications for example:

- Epipens will be kept easily accessible in the quiet room locked cupboard.
- Asthma medication will be kept in the quiet room on the high shelf.

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:

- Name of pupil
- Date of dispensing
- Dose and dose frequency
- The maximum permissible daily dose
- Cautionary advice/special storage
- Name of medicine
- Expiry date 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 child’s name
- The prescribed dose
- The expiry date
- The written instructions on the label or container
- The individual plan where one exists
- Whether or not it is a controlled drug
- Any storage requirements
- The medicine administration form (form5) to ensure that dosage is due

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 (Form 5).

The administration of **controlled drugs requires 2 people**. One should administer the drug, the other witness the administration. Examples of controlled drugs:

- Morphine
- Pethidine

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.

If a child refuses to take the medicine, they should not be forced to do so but note this in the records and follow agreed procedures.

Where there are no instructions in 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:

- An up to date list of current medicines prescribed for each child that has been confirmed in writing.
- What needs to be carried out for whom and when.
- 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.

The records must be complete, legible, up to date, written in ink, dated and signed to show who has made the record.

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:

- Maintain optimal health during the day.
- Access the curriculum to the maximum extent.

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:

- Which children have individual treatment plans
- Possible emergency conditions that might arise, how to recognise the onset of the condition and take appropriate
- Who is responsible for carrying out emergency procedures?
- How to call the emergency services?
- What information from the individual treatment plan needs to be disclosed?

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 always accompany a child taken to hospital by ambulance, 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 (Form 5) so that staff in charge of the school 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.

The following staff have up to date paediatric first aid training:

Vicki Holmes

Anita Turtle

Helen Tomlinson

Kerry Brown

Sue Redgate

Elle-May Smith

Note

This policy has been written using the guidelines for administration of medicines produced by Derbyshire County Council in April 2014. These guidelines will be referred to if further detail is needed about certain medical conditions.

Signed.....Date.....

Chair of Governors: Mr J Moffat

Form 1 – Individual treatment plan

Name of School/Setting

Childs name

Date of birth Day / Month / Year

Group/Class/Form

Childs Address

Medical diagnosis or condition

Date

Review Date

Family Contact Information – First Contact

Name

Phone Number (work)

(home)

(mobile)

Family Contact Information – Second Contact

Name

Phone Number (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone Number

General Practitioner (G.P.)

Name

Phone Number

Describe medical needs and give details of child's symptoms

Daily care requirements (e.g. before sport/at lunchtime)

Describe what constitutes an emergency for the child, and the action to take if this occurs

Follow up care

Who is responsible in an emergency (state if different for off-site activities)

Form copies to

Form 2 - Parental Consent for Schools/Setting to Administer Medicine

The school/Setting will not give your child medicine unless you complete and sign this form, and has a policy that staff can administer medicine, and staff consent to do this.

Note: Medicines must be in the original container as dispensed by the pharmacy

Name of School/Setting

Date

Childs name

Date of birth

Group/Class/Form

Medical condition or illness

Medicine

Name/type of medicine/strength
(as described on the container)

Date dispensed

Expiry date

Agreed review date to be initiated by
(name of member of staff)

Dosage and method

Timing – when to be given

Special precautions

Any other instructions

Number of tablets/quantity to be given to
School/Setting

Are there any side effects that the School/Setting
needs to know about?

Self-administration Yes / No *(delete as appropriate)*

Procedures to take in an emergency

Contact Details – First Contact

Name

Daytime telephone number

Relationship to child

Address

I understand that I must deliver the medicine personally to (agreed member of staff)

Contact Details – Second Contact

Name

Daytime telephone number

Relationship to child

Address

I understand that I must deliver the medicine personally to (agreed member of staff)

Name and phone number of G.P.

The above information is, to be the best of my knowledge, accurate at the time of writing and I give consent to School/Setting staff administering medicine in accordance with the School/Setting policy. I will inform the School/Setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

I accept that this is a service that the School is not obliged to undertake.
I understand that I must notify the School of any changes in writing

Date _____ Signature(s) _____

Parent's signature _____

Print name _____ Date _____

If more than one medicine is to be given a separate form should be completed for each one.

For School/Setting Use

Reviewed by	Date	Signature	Print Name

To be reviewed annually or if dose changes

Form 4 - Staff Training Record – Administration of Medicines Emergency medicines e.g. Epipens, Asthma

Name of School/Setting	<input type="text"/>
Name	<input type="text"/>
Types of training received	<input type="text"/> <input type="text"/>
Date of training completed	<input type="text"/>
Training provided by	<input type="text"/>
Profession and title	<input type="text"/>

I confirm that (name of member of staff) _____ has received the training details above, is competent and has agreed to carry out any necessary treatment. *

** Use continuation sheet where more than one member of staff has been trained*

I recommend that the training is updated (please state how often) _____

Trainers signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Continuation sheet for staff team members who have received the training are competent and who have agreed to carry out the necessary treatment

I confirm that the following staff members _____ have received the training details above, are competent and have agreed to carry out any necessary treatment. *

Name	Post:	Signed to confirm receipt of training	Date

I recommend that the training is updated (please state how often) _____

Trainers signature

Date

Suggested review date

Signed.....Date.....

Chair of Governors: