

# BLACKROD PRIMARY SCHOOL



## Administering Medicine Policy

**Approved by:** HR Finance H&S Committee

**Last reviewed on:** December 2022

**Next review due by:** December 2024

## Version History

Version No.	Summary of change	Author	Date
V1		Julie Ramsden	Spring 2017
V2	Adapt to incorporate non prescribed medication	Julie Ramsden	March 2018
V3		Julie Ramsden	November 22

### Introduction

This document is a statement of the aims, principles and strategies associated with administering medicines to pupils. It was developed through a process of consultation between all members of the school community.

***It is worth noting that there is no legal duty which requires school staff to administer medication; this is a voluntary role.***

### Purpose of the Policy

This Policy should be read in conjunction with the School's Health and Safety Policy.

### Aims

Our aims for this policy:

- To provide guidelines and procedures on the administering of medicines to pupils. Children who are, however, acutely unwell should be kept at home.
- To provide a statement on medicines in school which outlines their storage and accessibility.

### Aims

Our aims for health and safety are to:

- Provide a safe and healthy environment for children, teaching and non-teaching staff and all other people who come onto the premises during school hours;
- To ensure that all members of the school community understand their own responsibilities in maintaining a healthy and safe environment.

### Procedures for administering medication to pupils

1. Short term medical needs
2. Long term medical needs
3. Administering medication
4. Refusing medication
5. Record keeping
6. Administering medication on school trips
7. Administering medication at sporting activities

### 1. Short term medical needs

Many pupils will need to take medication (or be given it) at school at some time in their school life. Mostly this will be for a short period only; to finish a course of antibiotics or apply a lotion. To allow pupils to do this will minimize the length of time taken off school. Medication should only be taken to school when absolutely essential.

It is helpful if, where possible, medication can be prescribed in close frequencies which enable it to be taken outside school hours. Parents are encouraged to ask the prescribing doctor or dentist about this.

### Non prescription medication

Staff will not administer non prescribed medication.

### 2. Long term medical needs

It is important that school has sufficient information about the child's medical condition. A written health care plan, drawn up by all agencies involved, may be necessary (see Appendix 1).

### 3. Administering medication

***No pupil should be administered medication without written parental consent. Any member of staff administering medication to a pupil should check:***

- The pupil's name
- Written procedures provided by parent(s)/doctor/dentist
- Prescribed dose
- Expiry date

If in doubt about any procedures the member of staff should check with the parents or a health professional before taking any further action.

The member of staff administering the medication must complete and sign the school record each time they administer medication to a pupil (see Appendix 2). This form is kept in the School office cupboard. In certain circumstances it is good practice to have the dosage and administration witnessed by another member of staff.

### 4. Refusing medication

If pupils refuse to take medication, school staff should not force them to do so. The school should inform the child's parents as a matter of urgency and if necessary call the emergency services.

### 5. Record keeping

The parents are responsible for supplying information about medication that their child needs to take at school and for letting the school know of any prescription changes. Written details should be provided which include:

- Name of medication
- Dose
- Method of administration
- Time and frequency of administration
- Other treatment
- Any side effects.

This information is recorded on the “Medicine Consent” form (Appendix 3) which is kept, along with the “The School Record” (Appendix 2) in the School office cupboard.

#### 6. Administering medication on school trips

Staff supervising excursions must be aware of any medical needs and any relevant emergency procedures. Arrangements for taking any necessary medication will need to be taken into consideration. Sometimes an additional adult or supervisor might accompany a pupil.

#### 7. Administering medication at sporting activities

Some pupils may need to take precautionary measures before or during exercise, and/or be allowed to immediate access to their medication if necessary. Teachers supervising sporting activities should be aware of relevant medical conditions and emergency procedures.

### **Dealing with medicines safely**

1. Safety management
2. Storing medication
3. Storing medication - inhalers
4. Disposal of medicines
5. Hygiene/infection control
6. Emergency procedures

#### 1. Safety management

Some medicines may be harmful to anyone to whom they are not prescribed. In order to ensure the control of risks to others the following procedures need to be followed:

- Medication (and consent forms) must be stored in the School office cupboard– they must not be kept in classrooms or cloakrooms.
- All medication must be clearly named and show the dosage.
- Medication that needs to be kept cool must be stored in the first aid fridge in the school LT room (the consent form will be kept in the school office).

#### 2. Storing medication

School should not store large quantities of medication. Parents should bring the required dosage for the day/week (whichever is most appropriate).

All supplied containers should be clearly labeled with the child’s name, name and dosage of the drug and frequency of administration. Where a pupil requires two or more medicines they should each be kept in separate containers. The Head/Deputy Head teacher is responsible for ensuring that all medicines are stored safely. Pupils should know where their medication is stored and who holds the key.

#### 3. Storing medication - inhalers

A few medicines, such as inhalers, need to be readily available to pupils and must not be locked away.

##### Procedures for inhalers

- It is the responsibility of parents to ensure that their child’s inhaler is in school and not out of date.
- Class teachers should maintain up-to-date information in their medical registers.
- All inhalers should be clearly named and labeled with the dosage and frequency with which it should be taken.

- Children should be encouraged to develop responsibility for their inhalers. However, it would be useful to remind children to take their inhalers with them when they leave the school premises for trips and sporting events.

#### Storage and accessibility of inhalers

- Inhalers are kept in classrooms in a zipped bag named bag with a record keeping book. It is the responsibility of the class teacher to store them sensible and make the children aware of the location.
- A School inhaler is kept in the school office cupboard for emergencies.

#### 4. Disposal of medicines

School staff should not dispose of medicines. Parents should collect medicines kept in school at the end of each term. Parents are responsible for disposal of date-expired medicines.

#### 5. Hygiene/infection control

All staff should be familiar with the normal precautions for avoiding infections and must follow basic hygiene procedures. Staff should have access to disposal gloves and take care when dealing with spillages of blood and other body fluids and disposing of dressings or equipment. Further guidance is available in the DFEE publication *HIV and AIDS:A guide for the education service*.

#### 6. Emergency procedures

All staff should know how to call the emergency services. In the event of need the Head teacher, DHT,AHT or nominee is responsible for carrying out emergency procedures in the event of need. A pupil taken to hospital by ambulance should be accompanied by a member of staff who should remain until the pupil's parent arrives.

Generally staff should not take children to hospital in their own car. However, in an emergency it may be the best course of action. The member of staff should be accompanied by another adult and have public liability insurance. They should also take a copy of the emergency contact form with them.

### **Monitoring and Evaluation**

The above policy and practices will be reviewed regularly by a representative group of members of the school in the light of the changing needs of the school and health and safety issues raised.

Appendix 1

**Blackrod Primary School**

**Example Healthcare Plan for a Pupil with Medical Needs**

Name	
Condition	

DOB	
Class	
Review Date	

**Contact Information**

**Family Contact 1**

Name	
Phone no: (work)	
Phone no: (home)	
Relationship	

**Family Contact 2**

Name	
Phone no: (work)	
Phone no: (home)	
Relationship	

**Clinic/Hospital contact**

Name	
Phone no:	

**GP**

Name	
Phone no:	

Condition and details of pupil's individual symptoms	
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Daily care requirements (eg. before sport/ at lunchtimes)	

Describe what constitutes an emergency for the pupil, and what action to take if this occurs	
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Follow-up care	
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Who is responsible in an emergency (state if different on off-site activities)	
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Form copied to	
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**BLACKROD PRIMARY SCHOOL**  
**PRESCRIBED MEDICINE CONSENT**



I give permission for a member of staff to administer my son/daughter the following medication as per instructions.

Name of Child: \_\_\_\_\_

Name of Medicine: \_\_\_\_\_

Time (s) of Dosage: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_