

Fairhouse Primary School



Administering of Medicine Policy

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Purpose:

This policy sets out the circumstances in which we may administer medicines within school and the procedures that we will follow.

Introduction

Most pupils will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other pupils have medical conditions that, if not properly managed, could limit their access to education. Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. Fairhouse Primary School is committed to ensuring that children with medical needs have the same right of access as other children.

There is no legal duty that requires schools and staff to administer medication, this is a voluntary role. The 'duty of care' extends to administering medication in exceptional circumstances, and therefore it is for schools to decide their local policy for the administration of medication.

The Role of Parents/Carers

Parents/carers should, wherever possible, administer or supervise the self-administration of medication to their children. This may be by spacing the doses so that they are not required within school hours, or by the parent/carer coming in to school at lunch time to administer the medication. However, this might not be practicable and in such a case parents/carer may make a request for medication to be administered to the child at school.

If medicine needs to be administered during school time, then a parent or carer must bring it to the school office and fill in the Administration of Medication Permission and Record form (Appendix 1). Medication **MUST NOT** be given to the class teacher, or brought into school by the child themselves. If medication is for a short term condition, any remaining medication must be collected from the office by a parent or carer at the end of the school day.

Prescription Medication

Prescription medicines should be administered at home wherever possible, for example medicines that need to be taken 3 times a day can usually be taken before school, after school and at bed time. Parents are encouraged to ask the GP as to whether this is possible. Prescription medicines will only be administered by the school where it would be detrimental to a child's health if it were not done. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The exception to this is insulin which must still be in date, but will generally be available to school inside an insulin pen or a pump, rather than in its original container. Schools should never accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.

In all cases it is necessary to check:

- Name of child
- Name of medicine
- Dosage
- Written instructions provided by prescriber
- Expiry date

When administering the medication, the administrator **MUST** check that the information on the sheet matches the information on the prescribed medicine e.g. child's name, dose, and medication type. They must also check that the child they are administering it to is indeed the same child that the medication is prescribed to.

An Administration of Medicine Permission & Record form (Appendix 1) must be completed and signed by the parent / carer. No medication will be given without the parent's written consent.

Prescribed medication, other than emergency medication, will be kept in a locked cupboard in the finance office or the refrigerator as appropriate.

Controlled Drugs

Any controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act. Therefore it is imperative that controlled drugs are strictly managed between the school and parents. Ideally controlled drugs will be administered at home, where possible. Where controlled drugs need regular intervals that requires administering during the school day, the controlled drugs should be brought in on a daily basis by parents, but there should certainly be no more than a week's supply and the amount of medication handed over to the school should always be recorded.

Controlled drugs should be stored in a locked non portable container, such as a safe, and only specific named staff allowed access to it. Each time the drug is administered it must be recorded, including if the child refused to take it. 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. If necessary, the school should call the emergency services. The person administering the controlled drug should monitor that the drug has been taken. Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

As with all medicines any unused medication should be recorded as being returned back to the parent when no longer required. If this is not possible it should be returned to the dispensing pharmacist. It should not be thrown away.

Non Prescription Medication

Where possible, the school will avoid administering non-prescription medicine. However, we may do so, if requested by the parent, if it will facilitate the child attending school and continuing their learning. This will usually be for a short period only, such as to apply a lotion or the administration of paracetamol for toothache or other pain. However, such medicines will only be administered in school where it would be detrimental to a child's health if it were not administered during the day.

A child under 16 should never be given aspirin-containing medicine, unless prescribed by a doctor. If non-prescription medication is to be administered, then the parent/carers must complete an Administration of Medicine Permission and Record form (Appendix 1), and the same procedure will be followed as for prescription medication. The medicine must be provided in its original container, with dosage information on it. The parent's instructions will be checked against the dosage information, and this will not be exceeded. A label with the child's name **MUST** also be attached to the packaging/medication so that it is clear who the medication belongs to.

Long Term Medical Needs

It is important for the school to have sufficient information regarding the medical condition of any pupil with long term medical needs. The school will draw up a health care plan for such pupils, involving the parents and the relevant health professionals. Refer to the "Supporting Pupils at School with Medical Conditions Policy" for more information.

Appropriate training will be arranged for the administration of any specialist medication (e.g. adrenaline via an Epi-pen, Buccal midazolam, insulin etc.) Staff should not administer such medicines until they have been trained to do so.

Administering Medicines

Medicines will only be administered by members of staff who are aware and have checked the consent form. These are usually office staff, but in their absence another appropriately responsible member of staff may carry it out. Appropriate training will be arranged for the administration of any specialist medication (e.g. adrenaline via an Epi-pen, Buccal midazolam, insulin etc.) Any specific training for specific administering of medicine will be detailed in a child's medical care plan and should only be administered by those who have received the specific training. Staff should not administer such medicines until they have been trained to do so. The SENCo will maintain a record of staff trained in specialist medication for children with Educational Health Care Plans.

When a member of staff administers medicine, they will check the child's Administration of Medication Permission and Record form against the medication, to ensure that the dose and timing are correct. They must then check the exact medication that they are giving/handling is indeed the same medication that is on the permission sheet and that the medication belongs to the child. They must also check that the child they are administering the medicine to is the correct child as named on the permission sheet and the prescribed medicine. They will then administer the medicine as required, and record this on the form. For long-term medication, an Administration of Medication Continuation Sheet (Appendix 2) will be used as necessary.

Self-Management

It is important that as children get older they should be encouraged to take responsibility and manage their own medication such as an inhaler. This should be clearly set out in the child's health care plan in agreement with the parents, bearing in mind the safety of other pupils.

Staff should be aware of the need for asthmatics to carry medication with them (or for staff to take appropriate action). Children should know where their medicines are stored. No child should self-administer any other medication that requires a careful dose. All self-administered medication **MUST** be overseen by an adult and recorded on the log.

Refusing medication

If a child refuses to take medication staff should not force them to do so, but note this in the records and inform parents of the refusal. If the refusal leads to a medical emergency, the school will call the emergency services and inform the parents.

Offsite visits

It is good practice for schools to encourage pupils with medical needs to participate in offsite visits. All staff supervising visits should be aware of any medical needs and relevant emergency procedures. Where necessary, individual risk assessments will be completed. A member of staff who is trained to administer any specific medication will accompany the pupil and ensure that the appropriate medication is taken on the visit. Inhalers must be taken for all children who suffer from asthma.

Travel Sickness - Tablets can be given with written consent from a parent but the child's name, dosage, time of dose and any possible side effects (the child must have had the travel sickness preventative at home before the trip in case of side effects) should be clearly marked on the container, which must be the original packaging. Parents will need to complete an Administration of Medication Permission and Record form.

Residential visits – All medicines which a child needs to take should be handed to the teacher in charge of the visit. The only exception is asthma inhalers, which should be kept by the child themselves. The parents will sign a consent form for any medicines which they need to take during the visit, plus consent of emergency treatment to be administered – see example form in Appendix 3.

Disposal of Medicines

The appointed person/ primary first aider will check all medicines kept in school each term to ensure that they have not exceeded their expiry date. Parents/carers will be notified of any that need to be replaced. Parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the disposal of needles. If any child requires regular injections (eg. Insulin), they will have their own sharps box which can be taken offsite with them on trips etc. The parents will be notified when the box is almost full so that they can bring in a new box and take the full box for disposal.



Appendix 3

Administering Medication during Residential Activities Consent Form

Child's name _____ Class _____ Date of birth _____

Parental Consent for Trip to: _____

Date/s of visit _____

My child has a medical condition that requires medical treatment: Yes/No

My child has the following medical conditions: _____

Doctor's name and address _____

I give permission for staff to administer the following medicines for my child:

Name of medicine	To be taken when	Dosage to be taken	Route (How it should be taken)	Purpose of the medicine (medical need)

Signed _____ (parent/Carer) Date: _____