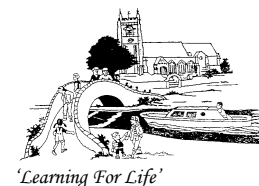


## Cheswardine Primary and Nursery School



### **Policy Document: Health & Safety: Policy for Administration of Medication in Schools and Early Years Settings** **2017**

Monitor: Headteacher

Governors: Health and Safety Committee

#### **General Guidance:**

- The Governors and staff at Cheswardine Primary and Nursery School wish to ensure that pupils with medical needs receive care and support. Pupils should not be denied access to a broad and balanced curriculum simply because they are on medication or need medical support, nor should they be denied access to school visits.
- Children with medical needs have the same rights of admission to a school or setting as other children. Most children will at some time have short-term medical needs i.e. finishing a course of medicine. Medicines should only be taken to school or settings when essential. (paras 25 – 28 Managing Medicines in Schools and Early Years Settings – MMSEYS).
- With regard to pupils with long term medical needs schools should ensure that they have sufficient information about the medical condition. A Health Care Plan may clarify for staff, parents and the child the help that can be provided. The Council for Disabled Children's Publication 'Including me' provides advice on managing complex health needs in schools and early years settings.
- Some children with medical needs are protected from discrimination under the Equality Act 2010. Schools and Early Years Settings must not discriminate against disabled pupils in relation to their access to education and associated services. (paras 8 –12 MMSEYS).
- The Head Teacher will accept responsibility for members of school staff giving or supervising pupils taking prescribed medication during the school day. (para 16 MMSEYS).
- Staff who assist in the administration of medication will receive appropriate training and guidance where necessary identified by the Head Teacher in liaison with Health professionals.
- Unless otherwise indicated, all medication to be administered will be kept in the school office away from children under staff control.
- Information and guidance on health related issues can be obtained from the school nurse. All staff should be aware of the difference between 'training' and 'instruction'.

## **Prescribed Medication**

- Medicines should only be taken to school or settings when essential; that is where it would be detrimental to a child's health. (paras 25 –28 MMSEYS).
- Schools and settings should never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions (secondary dispensed). Alteration to the label is not acceptable. Any alteration to dosage must be accompanied by written instructions provided by the prescriber.
- Medicines can only be accepted in a school where it has been prescribed by a doctor, dentist, nurse prescriber or pharmacist and include the prescriber's instructions for administration.
- Where the possible side effects of medicines have been communicated by the prescriber or pharmacist to a member of staff they must ensure that this information is shared with all staff and recorded in the child or young person's file and individual health care plan. If a member of staff notices side effects they must report this to the Head Teacher or senior teacher on duty who will notify the prescriber and ask for advice. Information regarding side effects can also be obtained from the Patient Information Leaflet, which must be supplied with every medicine.
- Crushing of tablets (or opening of capsules unless specified) is not advocated, as it is an unlicensed use of the medication. If the patient is unable to take oral medication in the solid dosage form it should be referred back to the prescriber/pharmacist for amendment to a suitable liquid/soluble preparation.
- Medicines must not forcibly be given. This includes the crushing of tablets etc. into food or drinks in order to deceive. Where children and young people refuse to take medication that is essential to their health, a multi-disciplinary meeting must be held which must include the children and young person (where appropriate), the G.P., parents/persons with parental responsibility and representative (if applicable) to decide how to proceed. Any decision must be reached after assessing the care needs of the individual and the decision must be recorded in the individual health care plan. A written procedure must be developed that is specific to the child or young person.

## **Non-Prescribed Medication**

- Staff should never give a non-prescribed medicine to a child unless there is specific prior written permission from the parents. The Head Teacher must approve the administration of the medicine.
- Criteria in the National Standards for under 8's day care providers, make it clear that non-prescription medicines should not normally be administered. Where a non-prescribed medicine is administered to a child it should be recorded on the administering medicine form.
- A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

## **Administering Medicines**

Cheswardine Primary and Nursery School should incorporate managing the administration of medicines into their health and safety policy and fully adopt the guidance provided in Chapter 2: Role and Responsibilities provided in Managing Medicines Guidance.

No child under 16 should be given medicine without their parent's written consent.

- Any member of staff giving medicines should check:

Child's name

Prescribed dose

Expiry date

Written instructions provided by the prescriber on the label or container.

- Cheswardine Primary and Nursery School must keep written records each time medicines are given. Staff should complete and sign a record each time they give medicine to a child. (paras 42-44 MMSEYS).

The administering of medicines is a voluntary role, however schools should ensure they have sufficient members of support staff who are appropriately trained to manage medicines as part of their duties. (paras 16, 17, 18 81 –85 and 89 – 90. MMSEYS) .

## **Educational Visits**

Schools should put in place procedures for managing prescription medicines on trips and outings. (paras 56-59 MMSEYS).

## **Record Keeping**

Written details from the parent/carer will be kept with the medicines. Parents will complete the appropriate parental Agreement form.

We will use our record keeping forms. Such records offer protection to staff and provide proof that agreed procedures have been followed, as well as ensuring that a child is not given extra doses of medicine by mistake. The following details should be checked:

Child's name

Name of medication

Dose

Method of administration

Time/frequency of administration

Any side effects

Expiry date

It is the parent/carer's responsibility to monitor when further supplies of medication are needed in the school/setting.

### **Safe Storage And Disposal Of Medicines**

Where a school agrees to administer any medicines the employer must ensure that the risks to the health of others are properly controlled. (Detailed advice is provided in Chapter 3 MMSEYS).

### **Emergency Procedures**

As part of the general risk management processes all schools and settings should have arrangements in place for dealing with emergency situations. This could be part of the school's first aid policy and provision. (paras 115-116 MMSEYS).

### **Risk Assessment And Management Procedures**

Schools and settings should ensure that risks to the health of others are properly controlled. This may involve undertaking individual risk assessments for pupils with long term medical needs. Schools and settings should be aware of the health and safety issues of dangerous substances and infection.

### **Parental Responsibilities**

Parents have a prime responsibility for their child's health and should provide schools and settings with information about their child's medical condition. Parents are responsible for making sure their child is well enough to attend school. Where a child is acutely unwell it is advised that the child be kept at home by the parent/carer. (Detailed information regarding the parents and carers responsibilities can be found in paras 66-72 MMSEYS).

The school/setting will not give medicine unless a parent completes and signs the written agreement form.

### **Self Administration of Medication**

Whilst DfE guidelines state that it is good practice to encourage children and young people to take responsibility for the self administration of medication the LA view is that schools should give serious consideration to whether this is appropriate in all cases. Each case should be considered individually taking into account the age and needs of the child or young person. Schools should act as a "prudent parent" and should seek medical advice, written parental consent and undertake risk assessments to ensure the safety of children and young people in their care. The individual health care plan should detail arrangements for self administration of medication and the supervision for this.

All individual health care plans will identify whether and at what level child or young person requires help to take medicines as follows [the 3 A's]:

- **Advise** – to ask the service user if they have taken their medication and if not, to advise them that this is what they need to do. Staff will not be responsible for ensuring service users take their medication, this remains with the service user.

- **Assist** - to help service users who are cognitively able to retain responsibility their medication. In these circumstances staff will physically assist the service user to take their medication from the original container as instructed on the label. Staff will not be responsible for ensuring that service users take or have taken their medication; this remains with the service user.

- **Administer** – where a service user is not able to maintain responsibility for managing their own medicines, staff will be responsible for ensuring that the service user receives the correct medication at the right time.

### **Staff Training**

- The Head Teacher or SENCO will seek the advice of health care professionals on the type of training required for each authorised member of staff and what types of medication that training covers.

- Training for members of staff undertaking the administration of medicine is essential and advice and information from health colleagues should be sought.

- Training: can only be given by the Health Care professional authorised to assess the competence of the person being trained. This should be documented on the appropriate form (see example form for recording medical for staff). Examples of such procedures would include catheterisation, tube feeding, suction, rescue medication.

- Information/Instruction. Is the exchange of information needed to carry out basic personal care and hygiene procedures.

### **Health Care Plans**

- In order to ensure that all relevant information about the child's condition is available it is recommended that schools should complete an individual Health Care Plan as and whenever necessary. This should be in consultation with the school nursing service, parents and school staff. (Chapter 4 Drawing up a Health Care Plan paras 118 – 123 MMSEYS).

### **Key Issues**

1. The Head Teacher has a duty to arrange for all appropriate staff in the school to be briefed about (name of medical conditions) and about the contents of this document. All Cover Supervisors/Supply staff are fully briefed on any children's medical conditions prior to the start of session.

2. The school will safely store any necessary medication prescribed by a medical practitioner and to which the attached appropriate instructions for use are provided

3. The school will store any necessary equipment required to carry out procedure

4. The school will keep written records of medicines given to pupils.

Reviewed March 2017

To be reviewed March 2019

APPENDIX 2:

REQUEST FOR CHILD TO CARRY THEIR OWN MEDICATION

Name of school	
Child's name	
Class	
Address	
Name of medicine	
Procedures to be taken in an emergency	

Contact Information

Name	
Daytime phone no	
Relationship to Child	

I would like my son/daughter to keep their medicine themselves for use as necessary.

Signed \_\_\_\_\_

PRINT NAME \_\_\_\_\_

Relationship to pupil \_\_\_\_\_

Date \_\_\_\_\_

## APPENDIX 3

Dear Parent

Re: The School Asthma Health Care Plan

We see from your child's personal information form that your child has asthma/breathing condition and/or uses an inhaler.

As part of accepted good practice and with advice from the local PCT, hospital specialists, LA's and Department for Education & Skills, our school has recently established a new School Asthma Policy.

As part of this new policy, we are asking all parents/guardians of children and young people with asthma to help us by completing a School Asthma Health Care Plans for their child/children.

The completed School Asthma Health Care Plan will store helpful details about your child's current medicines, triggers, individual symptoms and emergency contact numbers. The Care Plan will help school staff to better understand your child's individual condition.

I look forward to receiving your child's completed School Asthma Health Care Plan.

Thank you for your help.

Yours sincerely

S W King  
Headteacher

## APPENDIX 4 PARENTAL AGREEMENT FOR SCHOOL TO ADMINISTER MEDICINE

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

Name of child	
Date of birth	
Class	
Medical condition or illness	
Name and phone no of GP	

Name/type of medicine (as described on the container)	
Dosage and method	
Are there any side effects that the school needs to know about?	
Procedures to take in an emergency	

Contact Details	
Name	
Daytime telephone No	
Relationship to child	
Address	

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 \_\_\_\_\_

**Please note:** It is your responsibility to ensure that the school is kept informed about changes to your child's medicines, including how much they take and when. It is also your responsibility to provide the school with medication that is clearly labelled and in date.