

Managing Medicines Policy

Rosedale Primary



Status	Statutory
LGB Responsible	Full Local Board
Responsible Persons	Principal
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Version Control

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1. Introduction- Supporting Pupils with Medical Needs

Rosedale Primary's Managing Medicines Policy has been written to help the school draw upon specific guidance on managing medications in schools, and to put into place effective management systems to support children and young people with health needs who are able to come to school.

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many this will be short-term, perhaps finishing a course of medication. Other pupils have medical conditions that if not properly managed, could limit their access to education. Such pupils are regarded as having medical needs.

Most children with medical needs are able to attend school regularly and with some support from the school, can take part in most normal activities. However, school staff may need to take extra care in supervising some activities to make sure that these pupils and others are not put at risk.

2. Aims of the Policy

- To ensure that all pupils with medical conditions, in terms of physical and mental health, are supported in school so that they can play a full and active role in school life.
- To ensure the safe administration of medicines to children where necessary.
- To ensure the on-going care and support of pupils with long term medical needs via a health care plan
- To explain the roles and responsibilities of school staff in relation to medicines
- To clarify the roles and responsibilities of parents in relation to pupils' attendance during and following illness
- To outline to parents and school staff the safe procedure for bringing medicines into school when necessary and their storage
- To outline the safe procedure for managing medicines on school trips

A Medical Plan can help schools identify the necessary safety measures to support pupils with medical needs and ensure that they and others are not put at risk. A Personal Care Plan is included within this policy.

3. Support for Pupils with Medical Needs

Parents or carers have prime responsibility for their child's health and should provide the school with information about their child's medical condition. Wherever possible, self-administration of medication should take place or parents/carers should be actively encouraged to administer medicines to their children personally.

There is no legal duty, requiring school staff to administer medication. This is a voluntary role.

Staff who provide support for pupils with medical needs, or who volunteer to administer medication, need support from the Principal, parents, access to information, training and reassurance about their legal liability.

They should be given information and guidance in the form of:-

- Policy
- Health Care Plans
- Systems of work and reporting procedures
- Access to suitable training
- Clarification of their legal liabilities

4. Staff Indemnity

Exceed Learning Partnership has insurance in place to fully indemnify its staff against claims for alleged negligence providing they are acting within the scope of their employment, have been provided with adequate training.

The administration of medications falls under three categories:-

- Short term medical needs
- Non prescription medication
- Long-term medication

5. 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 (prescribed by a doctor/dentist). To support pupils with this will undoubtedly minimise the time they need to be off school. Medication should only be taken in school when absolutely essential.

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

Non Prescription Medicine

Pupils sometimes ask for painkillers (analgesics) at school, including ibuprofen or paracetamol. Staff should not give non-prescribed medication to pupils. They may not know whether the pupil has taken a previous dose or whether the medication may react with other medication being taken. A child under 12 should never be given aspirin, unless prescribed by a doctor.

If a pupil suffers regularly from acute pain such as migraine, the parents should seek advice from the doctor and obtain a prescribed medication that can be issued at school. No member of staff should administer any painkillers unless they have spoken with the parent/carer regarding their last dosage time etc, to prevent overdose. Throat lozenges are not permitted in school.

6. Long Term Medical Needs

It is important for the school to have sufficient information about the medical condition of any pupil with long-term medical needs. If a pupil's medical needs are inadequately supported this can have a significant impact on a pupil's academic attainments and/or lead to emotional and behavioural problems. The school therefore needs to know about any medical needs before a child starts school, or immediately should a child develop a condition. For pupils who attend hospital appointments on a regular basis, special arrangements may also be necessary.

It is at this stage that a Medical Plan for such pupils should be drawn up. This should involve the school, parents and relevant health professionals. This can include:

- Details of pupil's condition
- * Special requirements e.g. dietary needs, pre-activity precautions
- Medication and any side effects
- * What to do and who to contact in an emergency
- * The role the school can play

7. Administering Medicines

No pupil under 16 should be given medication without his or her parent/carers' written consent, this must be obtained on the "request to administer pupil medication" form. Only authorised members of staff may administer medication to pupils. The administration of medicine to a child will be done with 2 members of staff present. The form should include:

- The pupil's name
- Date of Birth
- Written instructions provided by parent/carers/doctor
- Prescribed dose/s
- Expiry date & prescribed date.

Once the medical form has been completed by the parent/carer the following steps must take place-

- The information given on the medical form must be triangulated using SIMS to verify the information relating to the pupil's full name, date of birth and class to ensure they match the details given on the form
- Then, the Class Teacher or Teaching Assistant, of the child named on the form, must verify the identity of the child against the details on the Prescription sticker on the medicine and sign the record sheet alongside 2 members of the office team
- The photograph of the child, held on SIMs, must be printed and attached to the Medical Form- this image must be kept in a locked file and destroyed once the medication has been completed. (The medical form is kept in the locked file).
- Only Office staff or a member of SLT is to administer medicines- apart from key staff who have been trained to administer medication to specific pupils as part of their healthcare plans. For any pupils who would require medicine to be administered whilst on a school trip the trip leader must discuss this prior to the trip with the SLT.
- Records of medicine being administered will be written on the medical form and the parent/carer will receive a text message to verify that the medication has been given and the time.

Refusing Medication

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

Record Keeping

Parent/Carers are responsible for supplying information about medicines that their child needs to take at school (Appendix C), and for letting the school know of any changes to the prescription or the support needed. The parent/carer or doctor should provide written details including: -

- Name of person the medication is prescribed for with DOB
- Dose
- Method of administration
- Other treatment
- Any side effects

OTHER CIRCUMSTANCES WHEN THE SCHOOL MAY NEED TO MAKE SPECIAL ARRANGEMENTS FOR PUPILS WITH MEDICAL NEEDS

8. School Trips

It is good practice for the school to encourage pupils with medical needs to participate in school trips, wherever safety permits.

Sometimes the school may need to take additional safety measures for outside visits. Arrangements for taking any necessary medication will also need to be taken into consideration. Staff supervising excursions should always be aware of any medical needs and relevant emergency procedures. Sometimes an additional supervisor or parent might accompany a particular pupil to offer one to one support. If staff are concerned about whether they can provide for a pupil's safety, or the safety of others on a trip, they should seek further advice from parents, schools Health Service or child's GP.

9. Sporting Activities

Most pupils with medical conditions can participate in extra-curricular sport or in the PE curriculum, which is sufficiently flexible for all pupils to follow in ways appropriate to their own abilities. For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a pupil's ability to participate in PE should be included in their individual Health Care Plan.

Some pupils may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary (especially medication for Asthma, Anaphylaxis - if you are on the sports field you need access to this medication immediately). All inhalers must be taken to PE activities, Assemblies etc. Teachers/Coaches supervising sporting activities should be aware of relevant medical conditions and emergency procedures.

10. Dealing with Medicines Safely

Some medicines may be harmful to anyone for whom they are not prescribed. Where the school agrees to administer this type of medicine, the employer has a duty to ensure that the risks to the health of others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations 1994 (COSHH).

Storing Medication

The School should not store large volumes of medications. All medications must be in the original packaging/ container and is clearly labelled by the pharmacy with the name of the pupil, DOB, the name and dose of the drug and the frequency of administration. Where a pupil needs two or more prescribed medicines, each should be in a separate container. Non health-care staff should never transfer medicines from their original containers. The Principal is responsible for making sure that medicines are stored safely.

Emergency and Preventative Medications

Medicines such as asthma inhalers or epi-pens should be easily accessible, these are securely kept within class so are close to the pupil at all times. The school holds an emergency inhaler which is located within the main school office. A register of pupils who require inhalers is kept within the class and the school office; these should be checked regularly by the TA/class teacher. Parents/carers must be notified if the inhaler is missing, empty or expired; they will be asked to provide one. It is essential that children have access to their inhalers at all times whilst in school.

Access to Medication

Pupils must have access to their medication when required. The school may want to make special access arrangements for emergency medication that it keeps. However, it is also important to make sure that medicines are only accessible to those for whom they are prescribed.

Children must be supervised at all times by a designated member of staff when medications are being administered.

Disposal of Medicines

The School staff will not dispose of medicines. Parents should collect medicines held at school at the end of each term. Parents are responsible for disposal of date expired medicines.

Hygiene/Infection Control

All staff are familiar with normal precautions for avoiding infection and must 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.

11. Emergency Procedures

The designated staff will contact the emergency services if required, however all staff are aware of the procedures for contacting emergency services. All staff are aware of who 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 parents/carers arrive.

Generally, staff should not take pupils to hospital in their own car, however, in an emergency it may be the best course of action. This will only be carried out if another member of staff accompanies the casualty and driver, and the car driver holds public liability vehicle insurance.

12. Individual Health Care Plan- Guidance

Purpose of a Health Care Plan

The main purpose of an individual Health Care Plan for a pupil with medical needs is to identify the level of support that is needed at our school. A written agreement with parents clarifies for staff, parents and the pupil the help that

the school can provide and receive. The School will agree with parents how often they should jointly review the Health Care Plan. It is sensible to do this at least once a year.

The school will judge each pupil's needs individually as children and young people vary in their ability to cope with poor health or a particular medical condition. However, the school's Medication Policy will be applied uniformly.

The Principal will not make value judgements about the type of medication prescribed by a medical or dental practitioner.

Drawing up a Health Care Plan should not be onerous, although each plan will contain different levels of detail according to the needs of the individual pupil.

A model Medical Plan is enclosed with this policy.

Those who may need to contribute to a Medical Plan are:

- Principal
- Parent/Carer
- Child (if suitably mature)
- Class Teacher/SENCO
- Special Needs Assistant/Teaching Assistant
- School staff who have agreed to administer medication or be trained in emergency procedures
- The school health service, the child's GP or other health care professionals

Co-ordinating Information

Co-ordinating and disseminating information on an individual pupil with medical needs, can be difficult. The Principal will give a member of staff specific responsibility for this role. This person can be a first contact for parents and staff and liaise with external agencies (Admin staff). The class teacher or TA must always understand the medical needs of pupils in their class and verify the identity of the pupil with administration staff.

Information for Staff and Others

Staff who may need to deal with an emergency will need to know about a pupil's medical needs. The Principal must make sure that supply teachers know about any medical needs.

Staff Training

A Health Care Plan may reveal the need for some school staff to have further information/training about a medical condition or specific training in administering a particular type of medication or in dealing with emergencies, eg: epipen: School staff will not give medication without appropriate training from health professionals. The local Health Authority will be able to advise further. Staff undertake training such as Diabetes training to ensure they understand how to administer specific medicines e.g. insulin.

Intimate or Invasive Treatment

Some school staff are understandably reluctant to volunteer to administer intimate or invasive treatment because of the nature of the treatment e.g. Rectal Diazapam for fears about accusation of abuse. Parents/carers and the Principal will respect such concerns and will not put any pressure on staff to administer medication unless they are entirely willing to do so.

The Health Authority will be able to offer specific advice. The Principal or Local Governing Body should arrange appropriate training for school staff willing to give medical assistance. If the school can arrange for two adults, one the same gender as the pupil, to be present for the administration of intimate or invasive treatment this will minimise the potential for accusations of abuse. Two adults often ease practical administration of treatment too. Staff will obviously protect the dignity of the pupil as far as possible, even in emergencies

Signed Principal

Jo Lancett

Date: March 23

Signed Chair of IEB

Mrs S Creighton

Date: March 23

13. Administration of Medication Policy

The policy aims to provide clear guidance and procedures to staff and parents. It forms the basis of a supportive environment in which pupils with medical needs may receive suitable medical care enabling their continuing participation in mainstream schooling.

- Each request for administration of medication to a pupil in school will be considered individually.
- The Principal is responsible for deciding, in consultation with staff, parent/carers, health professionals and the LA whether the school can assist a pupil with medical needs.
- No medication will be administered without prior consultation with, and written permission from the parent or guardian. Appendix c. (In addition a note from the family GP confirming the child is fit to attend school and the necessity for the child to take medication during school hours may be required).
- Medicines will only be administered by staff willing and suitably trained to do so and then only under the overall direction and responsibility of the Principal.
- Specific cultural and religious views on a pupil's medical care will be respected but must be made known to the school in writing.
- Medical Plan will be drawn up in consultation with the school, parents and medical professionals.

- A minimum amount of medication, required by the pupil, will be held in school to accommodate the needs of that pupil.
- Medication must be delivered to school by the parent or escort (not sent to school in the child's bag) and handed into the office (or designated person).
- Medicines brought into school should be clearly marked with:
 - a. the name of the medicine.
 - b. the pupil's name & dob
 - c. dosage (including method of administration and times)
 - d. special storage requirements
 - e. prescribed and expiry date

Prior to administering any prescribed medication, the identity of the child against the prescribed medicine must be verified by the class teacher or TA who knows the child best. The details of the child on the medical form, completed by the parent/carer, must be triangulated with the information on SIMS e.g. DOB, Class name to ensure it is accurate. Once an Identity check is carried out the class teacher or TA will sign the medical form to approve this check.

Records of medicine being administered will be written on the medical form and the parent/carer will receive a text message to verify that the medication has been given and the time.

During residential school trips and visits off school site, sufficient essential medicines and medical charts/health care plans will be taken and controlled by the member of staff leading the party. If additional supervision is required during activities such as swimming, the parent/carer may be required to assist by escorting their child.

The school will provide training for staff in order that they are equipped to administer emergency medical treatment to pupils with medical needs e.g. administration of rectal diazepam, epi-pen etc. Maintenance of staff training records and annual reviews will be the responsibility of the Principal.

The Principal will ensure all staff are aware of: -

- The planned emergency procedures in the event of medical needs
- Designated persons with responsibility for medical care (in order of priority)

Ms J Lancett - Principal Mrs J Temple – Admin officer Mrs C Dean– Office Manager

- The 'stand-in' person in charge should be the designated person available/in the event of absence S Proctor -Vice Principal
- All staff must be aware of the school's procedure for calling the emergency services (999) and conveyance of
 pupils to hospital by the safest and quickest means available as directed by the emergency services
 (car/ambulance). If pupils are conveyed by car, a trained member of staff will attend to escort the child.
- Some pupils carry their own medication (inhalers), this decision is based on wishes of parent/carers, age, maturity and ability of individual child

Appendix A

Named staff responsible for administering medicines

Governing Body

• Ensures that this policy is implemented and updated

Principal- Ms J Lancett

• Responsible for the implementation of this policy

SENDCO - Mrs S Protcor

Responsible for ensuring that:

- SENDCO and designated person have the necessary information needed to carry out their roles successfully.
- Staff have easy access to IHCPs of students.
- Staff have updated information on the medical needs of the students.
- Arrange for IHCP to be drawn up as necessary
- Work closely with the designated person, to ensure medical needs are regularly updated.
- Ensure that IHCPs are accessible to all staff.
- Ensure that medical information is updated and available to all staff.

Designated person responsible for overseeing the administration of medicines in school: Mrs J Temple, Mrs C Dean, Mrs R Hardy, Ms J Lancett

Responsible for:

- Checking validity of medicines
- Confirming identity of the pupil with the class teacher/TA
- Ensuring medicines are stored correctly
- Ensuring that only trained staff are administering medicines
- Recording the administration of medicines
- Contacting parent/carers to confirm administration of medicines.
- Contacting parent/carers about any issues concerning the administration of medicines

Risk Assessments: Mrs B Hardy

Responsible for ensuring risk assessments are regularly updated, including medical needs

Appendix B

Rosedale Primary Managing Medicine in Schools

Procedures to follow:

Only prescribed medication is permitted to be given to a pupil at the parent/carer's request.

The parent/carer must hand the medication into the school office and complete the administer medicines form, clearly stating:

- Name, date of birth and address
- Condition of illness
- Medication, Dosage and Frequency, date prescribed and expiry date.
- Possible side effects
- Emergency contact number

The form must be signed by parent/carer. It is the responsibility of the parent/carer to ensure that the medication is collected at the end of the day and returned to school the following day if required. The form and medication will then be handed to the office staff in order that she can process the request.

Administering Medicines

- Once the medical form has been completed by the parent/carer the following steps must take place-
- The information given on the medical form must be triangulated using SIMS to verify the information relating to the pupil's full name, date of birth and class to ensure they match the details given on the form
- Then, the Class Teacher or Teaching Assistant, of the child named on the form, must verify the identity of the child against the details on the Prescription sticker on the medicine and sign the record sheet alongside 2 members of the office team
- The photograph of the child, held on SIMs, must be printed and attached to the Medical Form- this image must be kept in a locked file and destroyed once the medication has been completed. (The medical form is kept in the locked file).
- Only Office staff or a member of SLT is to administer medicines- apart from key staff who have been trained to administer medication to specific pupils as part of their healthcare plans. For any pupils who would require medicine to be administered whilst on a school trip the trip leader must discuss this prior to the trip with the SLT.
- Ensure that hands have been washed prior to and following the administration of medication.
- Medication should be administered in the school office.
- Only authorised persons should administer medicines eg. J Temple, or in their absence the School Office Manager or a member of the senior leadership team.
- Once the medication has been administered, the form on the reverse of the Administering medication form should be completed clearly stating; time, dosage, name of medication and signed by the staff member.
- Send a text to the parent to confirm that medication has been given.
- If a child refuses to take medication, do not force them. Contact parent/carer to inform them.

If a pupil requiring medication is on a school visit, the medication must be taken and given with clear instructions as above to the Group Leader for them to supervise the administration of medication.

All medication must be handed back to the parent/carer to dispose of. Staff members must not dispose of any medication themselves.

Pupils with Asthma

All Inhalers are located within the class room and securely stored. These must be taken with the class whenever they leave to do activities such as Music, PE, Assemblies and school visits. A second inhaler may be kept within the school office which is kept locked when not staffed.

Parents will complete a form to allow school to supervise the administration of their child's medication clearly stating:

- Name, date of birth and address
- Condition of illness
- Medication, Dosage and Frequency, expiry date and date prescribed.
- Possible side effects
- Emergency contact number

In the event of a severe case of asthma it may be necessary to draw up a medical/care plan for the individual pupil.

Inhalers are checked weekly by TA's within class. It is the parent/carers responsibility to ensure that an inhaler is available in school, if however school notice that an inhaler is missing the parent/carer may be asked to bring one into school.

Each child must have a completed first aid form, and the following must be documented when a child administers their medication. The following details must be recorded on the slip.

- Name
- Number of sprays/puffs of Ventolin administered.
- Time
- Date
- Supervisors signature

Pupils who participate in swimming lessons must take their inhalers with them. Medication must also be taken on school visits.

Pupil Name: Date of Birth:

Rosedale Primary

Request for the academy to administer medication. Please note: only prescribed medication can be administered.

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PUPIL DETAILS

Class:			
GP surgery:			
Does the pupil have any allergies:			
	MEDICATION DETAILS		
Name of medication:			
Do you wish the academy to	Please circle:		
administer the medication or supervise whilst the child administers it themselves? (Please note; staff cannot apply any creams to pupils)	Administer	Supervise	
Amount to be administered:			
Time to be administered:			
How regular e.g. everyday:			
Start date:			
Please administer until:	End of medication	Specific date:	

Medicines must be in the original container as dispensed by the pharmacy. I understand that I must deliver the medication to the office.

I give consent to the academy to administer the above medication in accordance with the school policy. I agree to inform the school immediately if there is any change in dosage/frequency or if the medication is to be stopped.

Signea:	Date:
Relationship to child:	

OFFICE USE ONLY

Medication received by (signature):	
Print Full name:	
Information on medical form has	Date:
been triangulated on SIMS	Signed:
Identity of Child has been confirmed	Date:
against the prescribed medication by	Signed:
class teacher/ TA	

Request for the academy to administer medication. PAGE 2 OF 2 $\,$

PUPIL NAME:....

DATE	DOSAGE GIVEN	TIME GIVEN	GIVEN BY (name of staff member)	TEXT SENT (please tick)

Address: Telephone	Number:			
		Proce	edures to Follow	
Classroom Based Activities	d			
PE Activities				
Breaks and Lunc	htimes			
Afterschool Club	os			
Medication	n Required			
Name of Medication	Dosage	Time(s)/Frequency	Able to self- administer?	Any reactions
Wiedication			No No	reactions
Other information: uswhen this medica	· · · · · · · · · · · · · · · · · · ·	us informed of further med	dical appointments and v	will advise
Signed:		Parent/Carer	Date:	
Signed:		Class Teacher	Date:	
Signed:		Principal	Date:	

DOB:

Medical Plan

Name:

Personal Care Plan

Name: Class:		
Reason for Care Plan:		
Signs to watch out for	What to do	What to do afterwards
Classroom Based Activities		
Lunchtime/Breaktimes		
PE Activities		
After School Activities		
7 in cer osinoon 7 ieu maies		



Other Medical co	onditions that should be taken into account:
Additional infor	mation received from Parent
	ill be reviewed on an annual basis. Parent will inform school of any changes that I in the future to amend this care plan.
may be required	The factor of a mond this care plant
Signatures:	
(Principal)	date
(SENCO)	date
(Class Teacher)	date
(Parent) _	date
·/	