Eccleston Mere Primary School

Administration of Medicines Policy



Approved by:	R. Mugan / V.Atherton
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1. Rationale

Children who have prescribed medications by a doctor or health care professional may need ongoing treatment in school and therefore medication will need to be administered during the school day. Our policy is to ensure that children who need medication during the school day should have their needs met to allow them to retain full access to school life. Procedures have been put in place to meet safety needs and to meet the individual needs of the child.

It is important to note that union guidance does state that:

"There is no legal or contractual obligation on teachers to administer medicine or to supervise a pupil taking it."

Administration of medicines by any staff member is undertaken purely on a voluntary basis and individual decisions will be respected. This policy has been written in accordance with the NEU checklist for the administration of medicines.

2. Aims

- To outline the procedures for administering prescribed medicines to pupils.
- To work with the local authority to share good practice in order to improve this policy.

*This policy is about the administration of medicines on a prescribed basis, or where a child has a time-limited health concern. Where a medical condition is diagnosed, please refer to the 'Supporting Pupils with a Medical Condition Policy'.

3. Roles and Responsibilities

The Governing Body:

- Delegate powers and responsibility to the Headteacher to ensure that all personnel are aware and comply with this policy.
- Are responsible for the checking of this policy, and to ensure that it is updated regularly.
- Ensure that this policy is made available to parents.

The Headteacher:

- Is responsible for ensuring that permissions have been sought regarding administering medicine.
- Is responsible for the safe storage of medicines on the school premises.
- Takes responsibility for staff members who are administering medicines.
- Ensures that the details on medication are correct: the name and date of expiry in particular.
- Is responsible for the co-ordination and arrangement of healthcare plans.
- Facilitates training where needed / requested, in the case of complex medical needs.

Teachers / Support Staff:

- Should follow instructions accurately in terms of dosage / how to administer.
- Need to accurately record when medication has been administered.
- Should inform parents if a child has refused to take medication, when appropriate (at the end of the school day, unless urgent).
- Should monitor side effects, record them and inform parents at the earliest opportunity.

Parents / Carers

- Must complete a medical information form
- Are responsible for the collection / retrieval of medicines at the end of the day.

4. Prescription Medication

Only medication administered by a doctor, or authorised health care worker, will be administered in school.

Parents must complete a permission form (Appendix A) before staff can administer medicine.

Where medication is to be taken three times a day, this responsibility should be that of the parent (before school, upon collection and in the evening/at night). <u>School will only</u> <u>administer medicine where this is required more than three times per day / where there is a specific time requirement as to when the medication is taken (as expressly written by a medical professional).</u>

In the event of a long-standing illness or condition, written instructions/ notification from a doctor / the school nurse is required and a Healthcare Plan will be put into place. Parents should meet with the Headteacher to discuss this. **Please see the 'Supporting Pupils with Medical Conditions Policy'.**

5. Permission

- The following information should be provided by the parent / carer:
 - Name and date of birth of the child
 - o Name and contact details of the parent or carer
 - Name and contact details of the GP
 - Name of medicines
 - Details of prescribed dosage
 - Date and time of last dosage given (as school cannot administer the first dose of medication).
 - Consent given by parent / carer for staff to administer medication.
 - Expiry date of medication.
 - Storage details.

6. Safe Storage of Medicines

All medicines must be delivered to the school office by the parent or carer. In no circumstances should medicine be left in a child's possession. When received, the class teacher or class teaching assistant will be notified of the medicine and arrangements made for its administration. If support is needed as to who administered, a member of SLT should be consulted.

- Where a medicine is to be stored in the fridge, a member of office staff will place this into the staff room fridge and will request a member of teaching staff / support staff to collect the medical information form.
- Where a medicine can be stored at room temperature, this will kept in the office, until a member of teaching staff / support staff have collected the medication and form. It is the staff members responsibility thereafter to store the medication safely, in a locked cupboard.

All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines should not be kept in classrooms.

All medicines must be stored in the supplied bottle / box and be clearly labelled with the name of the child. The name and dose of the medicine and the frequency of administration should be included on the parental agreement form and kept with the medication.

All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and staff and kept in an agreed place in the corresponding medical cupboard (depending on key stage).

7. Staff Members Administering Medication

Where staff members administer medication, they should only do so in accordance with instructions / written consent.

Records should be kept when medicines are administered. The log for this is on the reverse of the medical information form, completed by parents.

Where a staff member is not able to administer medicines for any reason, they should speak to a member of SLT immediately, who will ensure an alternative arrangement is reached.

8. Managing Medication on School Trips

When on a school trip, prescribed medication will be administered to children in accordance with details provided on the medical information form, supported by the label on the medication.

Where an issue arises over the administration of prescription medicines on a school visit, guidance from a member of SLT will be sought.

9. Refusal of Medicine or Medicine which is not Administered

If a child refuses to take medicines, staff should not force then to do so, but should note this in the records and inform parents immediately or as soon as is reasonably practicable. Whilst we endeavour to do administer medicines accurately and as requested, there may be occasions where this does not occur.

10. Record Keeping

As in the above section, a written log should be made, so that no errors in the administration of medicine can occur. This should be recorded on the reverse of the medical information form, completed by parents.

Records should be kept for the remainder of the school year. These should be stored in a cardboard folder within the medical cupboards after use (EYFS/KS1 or KS2).

11. Non-Prescription Medicines

Parents are welcome to come into school to administer such medicines (e.g. calpol or ibuprofen), by visiting the school office.

There may be rare exceptions, where it is deemed appropriate for non-prescription medication to be administered. This would only be with the approval of the Headteacher / Deputy Headteacher and would be a short-term measure.

When on school trips or residential visits, and where prior consent has been sought and approved by the Headteacher, non-prescription medicines may be administered by agreed members of staff.

12. Controlled Drugs

Controlled drugs (as defined by the Misuse of Drugs Act 1971) will be stored securely in a non portable container and only named staff will have access. Controlled drugs for emergency use (e.g. midazolam) will not be locked away and will be easily accessible.

Records of administration of controlled drugs should include, but is not limited to (see appendix 1):

Name of the person Date and time of the dose administered Name, formulation and strength of the controlled drug administered Dose of the controlled drug administered Name and signature, or initials of the person who administered the dose Name and signature, or initials of any witness to administration.

Records of administration of controlled drugs should be easily accessible to ensure continuity of care, that doses are not missed or duplicated and that treatment is not delayed. Records should be kept for 2 years following the date of last administration.

When a child is no longer required to take a controlled drug or the expiry date is reached, parents/carers are required to collect the unused medication and arrange safe disposal, the child's controlled drug administration record should then be updated (signed by parent/carer and a member of SLT) to reflect the change.

Where controlled drugs are/may be required on a school trip or residential, school will ensure that the medicines are transported safely and securely and administration logs are kept up to date.

Appendix 1

Controlled Drug Medication Administration Chart

Insert Name and DOB Insert Medication Name, Dose and Frequency* Insert medication strength (e.g. 20mg tablet)

Insert Quantity and Date new supply handed into school (e.g. 30 tablets supplied 14/6/22)

□ Parent/Guardian to be contacted when 10 doses or 2 weeks supply remaining

Date	Time	Dose	Administered by	Checked by	Quantity remaining	Expiry Date

*To be checked against prescription details issued by medical professional

