



Medicines in School Policy

Last reviewed by key staff and Governors October '20

Next Review date: Autumn Term 2021

This policy has been developed utilising the guidelines from SCC Medication Guidance for Children and Young People (April 2017) and Medication (April 2017). Any issue not covered below please refer to the above documents. The policy also draws on the DfE Supporting Pupils at School with Medical Conditions – Statutory Guidance for Governing Bodies of Maintained Schools (Updated August 2017) and this policy should be read alongside the guidance.

1. The school's prospectus advises parents/guardians not to send pupils to school who are unwell.
2. To avoid unnecessary medicines being taken into school parents should be advised to request the prescriber considers the use of medications which need to be taken only once or twice a day so that they can be taken outside school hours. Two prescriptions should be requested: one for home and one for school. Decanted medication should not be accepted.
3. **Short term Medical Needs.**
Parents/Guardians of children whose child's medical needs are short term, or the use of non-prescription medicines, will need to discuss their child's individual case with the school. These cases will usually only be considered if it is detrimental to a child's health to not administer the medication during the school day. If administration of medication is agreed there must be specific written permission from parents. Parents/Guardians are able to take their child home at lunch time or come into school to administer medication.

Staff must never give a child under 16 aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Staff at St Michael's will not administer any over the counter medicines and these must not be brought into school. Should a child be found with such medication it will be locked away and parents asked to collect it from the school office. If a GP prescribes an over the counter remedy it will be treated as a prescribed medication and Parents / Guardians asked to come into school to administer the medication.

4. **Long term Medical Needs.**
Parents/Guardians of children with pre-existing or reoccurring medical issues may request that medicines are administered under the supervision of school staff or by child self-administration. They will need to fully complete a health care plan. These must be countersigned by the both the child's parents and the Headteacher. Parents are responsible to report any changes to the school.

'Under no circumstance should the school provide any medical care or treatment until a care plan has been agreed by the school.'

5. The head teacher and parents/guardian should agree who else has access to the child's medical information. This will normally include the office, kitchen staff and lead teaching assistant who oversees medicines in school.
6. The Head teacher will ensure that teaching assistants are aware of the County Council protocol for children needing inhalers in school, and trained in the treatment for severe allergic reactions such as:- Epipens and Piriton annually.
7. For health and safety reasons 'inhalers', eczema creams and Diabetes medication will be kept within the child's classroom. Staff and child must be aware of the storage place of the child's medication.
8. The head teacher will ensure that relevant training is made available to staff who have a child in their care with a specific medical condition.
9. If any medication may be required by a child during a school trip then an extra member of staff may be required. The 'Teacher in Charge' is responsible in ensuring that the First Aid kit and any medication for pre-existing medical conditions including a copy of the child's health care plan are taken on the trip. Medication should be stored in the green First Aid bag for the duration of the trip or the red bag for Diabetes.
10. Employees are responsible for their medications. The school will provide a lockable cabinet for this purpose. Staff must ensure that any personal medication brought into school is locked away securely in their personal locker.
11. Emergency aid in accordance with the schools Emergency Action Plan.
12. First Aid policy in accordance with the school's First Aid Policy.
13. Any unusual occurrences or serious illness or injury. An ambulance will be called if deemed necessary and parents / guardians informed. If this occurs whilst on a school trip the priority is the health of the child, the school can be notified and they will take responsibility of communicating with parents/guardians.
14. Any medications that have been bought into school must always be provided in the original container as dispensed by the pharmacist. This should be clearly marked with the young person's name, date of dispensing and the name of the medication and include the prescriber's instructions for administration. Schools and settings must never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions without confirmation from the original provider. It remains the parent's responsibility to ensure that the child has the correct, in date and fully labelled medication in school. However, a number of children have over the counter Piriton and antihistamine medicine. This is provided by parents as GPs don't prescribe it.
15. If a child refuses medication this should be documented and the parents/guardian informed.

16. In the event of an adverse reaction or error in administration of medication, the situation must be reported to the Headteacher, or their Deputy, immediately. The Headteacher will ensure that a report is collated containing:

- Facts of the incident
- Persons involved
- Reason for the incident
- Details of any health or injuries sustained (if this is the case an accident / incident report must be completed and forwarded to the Health, Safety and Well Being Service)
- Witness statement
- Details of persons informed (Parents / Carers, Pharmacist, GP, NHS Direct, Governing Body, CQC / OFSTED)
- Corrective and remedial action taken
- Outcome of investigation by senior leader

Administration of Medicines – General Principles

- A young person's privacy and dignity is paramount and medicines should always be administered in an area where this will not be compromised.
- If there are numerous children and young people requiring medication administration, e.g. residential special school, the use of a medicines trolley to transport medicines and associated paraphernalia should be considered as a last option.
- Prior to any administration of medication the following checks should be made:
 1. Right medication
 2. Correct route of administration
 3. Ensure correct time.
 4. Ensure correct child.
 5. Check dosage

Documentation

- It is recommended that two members of staff undertake the procedure for the administration of medication. Both members of staff should sign / initial the medicines administration record
- Under no circumstances must medicines prescribed be given to anybody except the person for whom it was prescribed.
- Medicines should be administered directly from the dispensed container. However, medication can be placed in a small pot after removing it from the dispensed container as a way of hygienically handing it to the child if necessary. Spoons may also be used.
- Medication must never be secondary dispensed for someone else to administer to the child at a later time or date.
- The setting management must ensure that staff are appropriately trained and receive refresher training at suitable intervals where this is required.
- In some cases training must be by a suitable provider (e.g. health practitioner such as a nurse) and recorded.
- All written records relating to medication must be completed in ink (preferably black).
- Medication must not be given to young persons covertly (e.g. hiding in food) without consultation with GP/Parents and the agreement documented.

- Crushing or dissolving medication can destroy the medication properties reducing its effectiveness. Crushing or dissolving of medication is not permitted unless a child or young person's health or wellbeing would be detrimentally affected. GP and parental approval must be sought and documented in the care plan and on a risk assessment to crush or dissolve medication.
- All records of requests for and administration of medicine must be in writing.
- All records of administration of medication to a young person must be retained in line with document retention schedules.
- Where temporary or relief staff required to administer medication the setting Manager must ensure they have received instruction/training and that they are assisted by a member of staff who is able to recognise each young person to whom medication is being dispensed.
- The administration of medication via an enteral feeding device such as peg feed or gastrostomies may be undertaken where suitable training has been undertaken and the medicine has been assessed as suitable. .
- Training is available on the correct administration of medications via an enteral feeding device. Training support can be provided to by the school nursing service for maintained Special Schools.