



# Hady Primary School and Nursery

## Medicines in School Policy

Governor minute number	
Date agreed	4 December 2017
Revision date	
Reviewed signature	J Gray

## 1. Introduction

This policy is based on the Derbyshire guidelines The Administration of Medicines and Associated Complex Health Procedures for Children, April 2013. The Derbyshire guidelines for specific treatments or medications should be consulted alongside this policy as they have been produced to support and protect staff to undertake the administration of medicines and to enable staff to act in an emergency.

The administration of medicine is the responsibility of parents/carers. However, school staff have a professional and legal duty to safeguard the health and safety of pupils. At Hady Primary School, we wish to do all we can to enable children to gain the maximum benefit from their education and to participate as fully as possible in school life.

### **Participation in the administration of medicine in school is on a voluntary basis.**

The following paragraph in the LA guidelines indemnifies staff against claims for alleged negligence.

*'The Council fully indemnifies its staff against claims for alleged negligence, providing they are acting within the scope of their employment, have been provided with adequate training, and are following the Local Authority's guidelines. For the purposes of indemnity, the administration of medicines falls within this definition and hence staff can be reassured about the protection their employer provides. The indemnity would cover the consequences that might arise where an incorrect dose is inadvertently given or where the administration is overlooked. In practice, indemnity means the Council and not the employee will meet the cost of damages should a claim for alleged negligence be successful.'*

## 2. Medicine in school

### 2.1 Reasons for having medicine in school

Pupils who are ill should not be sent to school. However some pupils need to attend school while taking prescribed medicine for the following reasons:

- they suffer from a chronic illness – (in this instance a Care Plan will be drawn up with advice from all professionals supporting the child and their family).
- they are recovering from a short-term illness and are undergoing or completing a course of treatment using prescribed medicines.

Parents /guardians should be aware that three-times-daily dosage can be spaced evenly throughout the day to avoid a lunchtime dose. GPs will usually adjust medication to avoid school time doses. However, if this is not possible, parents (or their representative) should come to school to administer medicine at lunchtime.

In exceptional cases where medicine is administered voluntarily by a member of staff by prior agreement with the head teacher, we will follow the agreed LA procedures outlined below.

- All prescribed medicines that are to be administered in school must be accompanied by written instructions from the parent and/or the GP on a form provided by school.
- Prescribed medicine must be in its original container and should be clearly labeled with the pharmacist's sticker and with the correct size spoon for administration (or syringe)

## **2.2 Controlled Drugs**

Some children in school may require medication to assist with long-term or complex medical needs. Controlled drugs likely to be prescribed which may need to be administered in school are for example, methylphenidate or dexamphetamine for ADHD or morphine/fentanyl for pain relief.

Any controlled drugs needed for children in school will be stored in a locked non-portable container and only administered by trained staff.

A record will be kept for audit and safety purposes and two members of staff will always be present to witness when the drug is administered.

The supervision/administration of prescribed drugs to pupils will be carried out as outlined in the guidance in the attached flowchart. Much of this guidance is explained further under 'Non prescription Medicines' and will also apply here.

## **3 Storage**

### **3.1 Prescription Medicines**

Medicines will be stored strictly in accordance with product instructions and in the original named container in which dispensed.

Medicines which need to be refrigerated will be kept in a refrigerator in the Staff Room. Controlled drugs will be kept stored in a lockable container. Non-emergency medicines will be kept in the cabinet in the office.

### **3.2 Emergency Medicines**

These include asthma inhalers and adrenaline ('Epi') pens.

#### **Inhalers for children with asthma**

Asthma inhalers are stored in the pupil's classroom as they must have immediate access to them at all times. They **must** be taken to swimming lessons, sports events and educational visits.

Parents/guardians have the responsibility to ensure that inhalers are clearly labelled with the child's name.

School holds 4 non-prescribed salbutamol inhalers for use in the event of an

asthma attack where a child's prescribed inhaler is unavailable, out of date, or malfunctions. These inhalers may only be used for children whose parents have given written consent; in any other circumstances where the use of an inhaler is thought to be required, staff will take advice from emergency services by dialing 999. These emergency inhalers will be stored with copies of the consent forms in the First Aid cupboard in the entrance foyer.

### **Epipens**

Where children suffer from severe allergic reactions and require the use of an Epipen, they must have an Individual Health Care Plan completed by health professionals. This should detail the condition, symptoms and appropriate action needing to be taken following onset and give appropriate permissions for administration of medication e.g. diabetes.

All staff will be made aware of the condition and what to do.

Copies of Care Plans will be available in the office, staff room and disabled toilet.

'Epipens' are stored in labelled containers in the medical locker in the staffroom and will only be used for the named child. They are readily available for immediate use in and out of lesson times. The Epipens will be always be taken on school visits.

Parents are responsible for ensuring that medication is within date.

Staff will receive training information on the use of an Epipen at least annually by the School Nurse.

Photographs of children who may require the use of an Epipen will be on display for staff in the First Aid cupboard and Stockroom.

School holds 4 non-prescribed adrenaline autoinjectors (aai), 2 of 150mcg dose and 2 of 300mcg dose, for use in the event of an anaphylactic reaction where a child's prescribed aai is unavailable, out of date, or malfunctions. These aai's may only be used for children whose parents have given written consent; in any other circumstances where the use of an aai is thought to be required, staff will take advice from emergency services by dialing 999. These emergency aai's will be stored with copies of the consent forms in the First Aid cupboard in the entrance foyer.

### **3.3 Liquid paracetamol and chlorphenamine maleate for use in school**

The school will keep a stock of over the counter liquid paracetamol and liquid chlorphenamine maleate to give to children who have written consent from their parent or guardian on file, which will be renewed annually. In the event that a member of staff believes a child would benefit from a dose of paracetamol or chlorphenamine maleate, the medicine will only be given where there is written permission on file and following a phone call to parents during which time oral consent will be obtained and confirmation given that the child has not already had a dose of paracetamol or chlorphenamine maleate in the preceding four hours.

#### 4 Administration of Medicines

There are two possible situations which apply to the administration of medicines in schools:

- i) The pupil self-administers the medication but someone supervises the pupil. The school will ensure that medicines for pupils are stored appropriately to prevent any unsupervised administration. The medication taken must belong to the named child and is within the expiry date. Trained staff will record on the appropriate form that the session was supervised and that the medicine was self-administered by the pupil.
  
- ii) A trained volunteer at school administers the medicine. An up to date list will be kept of volunteer staff and cover will be provided during periods of absence. Staff who administer medication will routinely consult the record form before medication is given to avoid the risk of double dosing. The record forms will be held in the office.

Where necessary, staff who administer medicines will receive training. All relevant staff will be made aware of pupils who are taking medication and refer the child to the office in the event of the child becoming unwell. Other trained staff, e.g. First Aider, will be summoned if the child's symptoms mean that emergency action is required.

A record will be kept of all relevant and approved training received by staff.

Each trained person who administers medication will:

- Receive a copy of these guidelines and code of practice;
- Read the written instructions/parental consent form for each child prior to supervising or administering medicines, and check the details on the parental consent form against those on the label of the medication;
- Confirm the dosage/frequency on each occasion and consult the medicine record form to ensure there will be no double dosing;
- Be aware of symptoms which may require emergency action, e.g. those listed on an Individual Treatment Plan where one exists; (*these are completed by a School Nurse*)
- Know the emergency action plan and ways of summoning help/assistance from the emergency services;
- Check that the medication belongs to the named pupil is within the expiry date;
- Record on the medication record form all administration of medicines as soon as they are given to each individual;
- Understand and take appropriate hygiene precautions to minimise the risk of cross-contamination;
- ensure that all medicines are returned to safe storage;
- ensure that they have received appropriate training/information;

- ensure that supply staff know about any medical needs.

### **Arrangements for the administration of medicines**

- Agreement for the administration of medicine must be made with the school. This will only be for prescribed medication.
- 'Over the counter' medicines will **not** be administered with the exception of liquid paracetamol and liquid chlorphenamine maleate, which will be held in the school office and administered on in cases where signed permission from a parent or guardian is on file and a parent or guardian verbally consents immediately prior to the administration of the dose.
- All medicines must be brought to the school office where forms detailing dosage etc will be completed and signed by the parent
- One of the designated first- aiders will administer the dose. When the dose has been administered the member of staff will sign that the dose has been given and these records will be kept in school.
- Any long term medicines must be checked by parents to ensure that they have not passed their expiry date. These medicines will not be sent home with pupils.
- All staff who participate in administering medicine will receive appropriate information and training for specified treatments in accordance with the code of practice. In most instances this will not involve more than would be expected of a parent or adult who gives medicine to a child.

## **5 Staff Training**

The school will work with the School Health Service and St John's Ambulance to provide training for Staff who administer First Aid and supervise and/or administer medicines to pupils. A record of training will be kept.

## **6 Confidentiality**

Medical information about a pupil will be treated as confidential and only shared after agreement with the child or their parents.

## **7 Refusing Medicines**

Should a child refuse to take medication parents will be informed and a note kept on the medication record form. If a refusal to take medicine results in an emergency then medical help will be sought from emergency services.

## **8 Hygiene and Infection Control**

Staff will be trained regarding normal precautions for avoiding infection and basic hygiene procedures. Staff will have access to protective disposable

gloves and will need to take care when dealing with blood or other bodily fluids and disposing of dressings or equipment.

## **9 Educational Visits**

The school will always consider what reasonable adjustments can be made to enable children with medical needs to participate fully and safely on visits.

Staff supervising excursions should always be aware of any medical needs and relevant emergency procedures and these should be recorded in the risk assessment. A copy of any health care plans should be taken on visits in the event of the information being needed in an emergency.

## **10 Sporting Activities**

It is recognised that most children with medical conditions can participate in physical activities and extra-curricular sport.

Any restrictions on a child's ability to participate in PE will be recorded in their Individual Health Care Plan.

When necessary children will be allowed to take precautionary measures before or during exercise and allowed immediate access to their medicines such as asthma inhalers.

Staff supervising sporting activities will, when necessary, carry out risk assessments for some children so that they are aware of relevant medical conditions and any preventative medicine that they may need to be taken and emergency procedures.

## **11 Employee Medicines**

All staff have a responsibility to ensure that any of their own medicines brought to school are kept secure and that pupils will not have access to them. Staff medicines should not be issued to pupils or any other employee.

## **12 Emergency Procedures**

All staff are made aware of emergency procedures in the school Health and Safety and Critical Incidents Policies.

A child taken to hospital by ambulance will always be accompanied by a member of staff who will stay until a parent arrives. Staff should never take children to hospital in their own car – an ambulance should be called if needed.

For children with certain medical conditions it may be essential that all staff (including supply staff and lunch time supervisors) are able to recognise the onset of the condition and take appropriate action i.e. summon trained staff.

### **13 Unusual Occurrences, Serious Illness or Injury**

Parents are informed of the school's policy concerning children who become unwell whilst at school, or on authorised educational visits, trips etc. in the school prospectus.

Staff escorting children out of school will carry emergency contact details for children in their charge.

If parents and relatives are not available when a pupil becomes seriously unwell or injured an ambulance will be called to transport the child to hospital.

**NOTE:** If the child is on medication the emergency services will be provided with a copy of the written parental consent form, the medicine itself and a copy of the last entry on the medication form.

### **14 Disposal of Medicines**

Any medication which has reached its expiry date will not be administered. Medicines which have passed the expiry date should be collected by parents for safe disposal at the pharmacy. Out of date medicines will not be sent home with children. If medicines are not collected by parents then they will be disposed of by a member of staff and a form to show this will be completed.

This policy has been formally adopted by the Governing Body of Hady Primary School. It will be reviewed bi-annually by the Governors (or earlier if there is an emergency or new information)

Signed: (Chair of Governors)

Dated:

## Parental Consent for Schools/Setting to Administer Medicine

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

**Note: Medicines must be in the original container as dispensed by the pharmacy**

Name of School/Setting

Date

Childs name

Date of birth

Class

Medical condition or illness

### Medicine

Name/type of medicine/strength  
*(as described on the container)*

Date dispensed

Expiry date

Agreed review date to be initiated by  
(name of member of staff)

Dosage and method

Timing – when to be given

Special precautions

Any other instructions

Number of tablets/quantity to be given to  
School/Setting

Are there any side effects that the  
School/Setting needs to know about?

Self administration

Procedures to take in an emergency

### Contact Details – First Contact

Name

Daytime telephone number

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Relationship to child

Address

I understand that I must deliver the medicine personally to (agreed member of staff)

**Contact Details – Second Contact**

Name

Daytime telephone number

Relationship to child

Address

I understand that I must deliver the medicine personally to (agreed member of staff)

Name and phone number of G.P.

The above information is, to be the best of my knowledge, accurate at the time of writing and I give consent to School staff administering medicine in accordance with the School policy. I will inform the School immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

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(s) \_\_\_\_\_

Parent's signature \_\_\_\_\_

Print name \_\_\_\_\_

Date \_\_\_\_\_

If more than one medicine is to be given a separate form should be completed for each one.

For School/Setting Use

Reviewed by	Date	Signature	Print Name

**To be reviewed annually or if dose changes**

## Record of medicine administered to an individual child

Name of School/Setting	HADY PRIMARY SCHOOL
Childs name	
Date of birth	Day / Month / Year
Group/Class/Form	
Date medicine provided by parent	
Quantity received	
Name and strength of medicine	
Expiry date	Day / Month / Year
Quantity returned	
Dose and frequency of medicine	
Staff signature	
Signature of parent	

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			

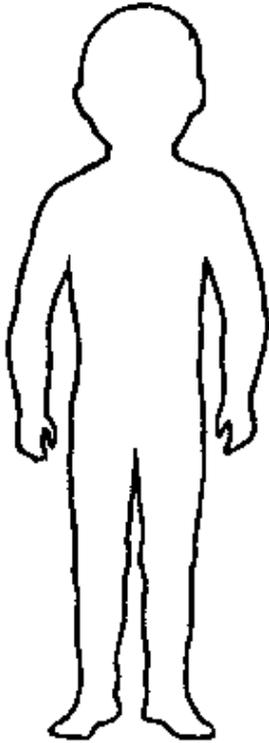
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Time given	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dose given	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of member of staff	<input type="text"/>	<input type="text"/>	<input type="text"/>
Staff initials	<input type="text"/>	<input type="text"/>	<input type="text"/>

Date	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>	<input type="text" value="/ /"/>
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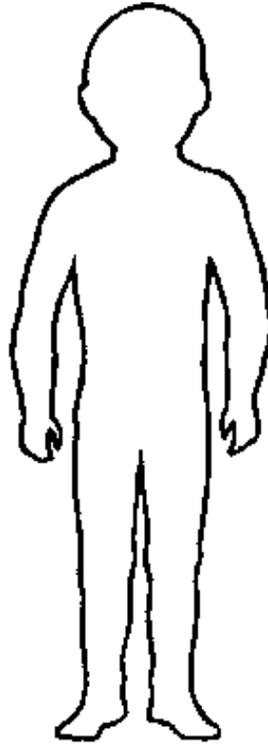
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Time given	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dose given	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of member of staff	<input type="text"/>	<input type="text"/>	<input type="text"/>
Staff initials	<input type="text"/>	<input type="text"/>	<input type="text"/>

**BODY MAPS FOR USE WITH CREAMS AND LOTIONS**

Child's Name \_\_\_\_\_



Child Posterior  
(Back) View



Child Anterior  
(Front) View



<b>8.</b>	<b>Who was contacted for advice?</b>					
	GP	Yes	No	NHS Direct	Yes	No
	Consultant	Yes	No	H&S Officer	Yes	No
	Nurse	Yes	No	Parent	Yes	No
	Pharmacist	Yes	No		Yes	
	Time of Contact	Advice received:				
	Time of Contact	Advice received:				
<b>9.</b>	<b>Advice and Action</b>					
	By whom - name and contact details			Time		
	Advice given					
	Action Taken					
	By Whom			Time		
	Advice given					
	Action Taken					
<b>10.</b>	<b>Who has been informed about the incident</b>					
					If no, give reasons	
	Child/young person	Yes	No			
	Parent/Person with PR	Yes	No			
	Other Carer	Yes	No			
	Manager	Yes	No			
	H&S Officer	Yes	No			
	Head of Quality Assurance	Yes	No		If child/young person is in care	
	Yes					
<b>11.</b>	<b>Type of incident</b>	<b>Detail</b>				<b>✓</b>
	Wrong service user					
	Wrong quantity given					
	Wrong strength of medicine administered					
	Wrong form of the medicine					
	Dose omitted					
	Wrong medicine given					
	Medicine out of date					
	Recording error					
	Medicine given at wrong time					
	Medicine refused/staff unable to administer					
	Other					

<b>12.</b>	<b>Cause of incident</b>	<b>Detail</b>	✓
	Unclear labelling caused confusion		
	Unclear instructions caused confusion		
	Wrong service user name		
	Product out of date		
	Interruptions		
	Service user refused		
	Staff/carer unable to administer Other cause		
<b>13.</b>	<b>Immediate action to be taken</b>		✓
	Investigation by manager		
	Investigation by Health and Safety Officer		
	Investigation under complaints procedure		
	Investigation by external body		
<b>14.</b>	<b>Action to prevent a recurrence</b>		✓
	Workplace procedures/systems review		
	Workplace training		
	Wider procedures/systems review		
	Wider training		
<b>15.</b>	<b>Additional Notifications – Major Incident Only</b>		✓
	Health & Safety Officer		
	Health & Safety Executive		
	Senior Departmental Manager		
	OFSTED		
	CQC		
<b>Name</b>		<b>Position</b>	
<b>Signed</b>		<b>Date</b>	