

# Richmond Hill Primary Academy



## Administration of Medicines

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## **Richmond Hill Primary Academy**

### **Policy document for: Administration of Medicines**

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#### **Introduction**

Richmond Hill Primary Academy has developed a policy on managing medicines and has put in place effective management systems to support individual children with medical needs. We believe that positive response to a child's medical needs will not only benefit the child directly, but can also positively influence the attitude of their peers.

All members of staff have a duty to maintain professional standards of care and to ensure that our pupils are safe. In response to the Equality Act 2015 we make reasonable adjustments for disabled school users, including those with medical needs, and we plan strategically to improve access over time. In response to the requirement to support pupils at school with medical conditions we also provide individual healthcare plans and make reasonable adjustments to enable pupils with medical needs to participate fully in all areas of school life including educational visits and sporting activities

The purpose of this policy is to put into place effective management systems and arrangements to support those children with medical needs in our school and to provide clear guidance for staff and parents/carers on the administration of medicines so that all children with a medical requirements can be cared for whilst in school.

Although regular school attendance is expected, if a child is ill they should remain at home until well enough to cope with the demands of the learning environment. Some children however, who have a long term illness/physical condition may require medication to be administered in school.

Governors and staff of Richmond Hill Primary Academy wish to ensure that pupils with medical needs receive the care and support in school that they need, subject to the guidelines outlined in this policy.

#### **Aim:**

- To provide an appropriate, safe policy in relation to the administration of medicine in school following national and local educational guidelines.
- In a partnership approach, to identify clearly the responsibilities of the school and parents/carers in respect of a child's medical need and the roles and responsibilities of staff who volunteer to administer medication in school.
- To ensure that members of staff know that there is no legal responsibility for non-medical staff to administer medication or to supervise medical procedures. The administering of medicines in Richmond Hill Primary Academy is entirely voluntary and not a contractual duty unless expressly stipulated within an individual's job description.
- To ensure that all staff know they must be adequately trained before undertaking this role.
- Ensure that we adhere to our accessibility duty

On 1 September 2014 a new duty came into force for governing bodies to make arrangements to support pupils at school with medical conditions. The statutory guidance in the document "Supporting pupils in school with medical conditions, DfE Sept 2014" is intended to help school governing bodies meet their legal responsibilities and sets out the arrangements they will be expected to make, based on good practice. The aim is to ensure that all children with medical conditions, in terms of both physical

and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

School staff may be asked to perform the task of giving medication to children but they may not, however, be directed to do so.

## **Staff Indemnity**

Governors fully indemnifies all staff against claims for any alleged negligence, providing they are acting within their conditions of service and following guidelines.

The indemnity covers situations where an incorrect dose is administered or where any other mistake in the procedure is made.

## **Staff training in dealing with medical needs**

- Staff will receive proper training and support where necessary. A record will be kept of training given
- Staff who have a child with medical needs in their class will be informed of the nature of the condition provided by the parent/carer and/or health professionals and when and where the child may need extra attention
- All staff will be made aware of the likelihood of an emergency arising and what action to take if one occurs
- Teachers' conditions of employment do not include giving or supervising a pupils taking medicines. Agreement to do so must be voluntary

## **Support for Children with Medical Needs**

Parents have the prime responsibility for their child's health and should provide school with information about their child's medical condition. Parents, and the child if appropriate, should obtain details from their child's General Practitioner (GP) or paediatrician, if needed. The school doctor or nurse or a health visitor and specialist voluntary bodies may also be able to provide additional background support.

The school health service can provide advice on health issues to children, parents, education and early years staff, education officers and Local Authorities. NHS Primary Care Trusts and NHS Trusts, Local Authorities, Early Years Development and Childcare Partnerships and governing bodies work together to make sure those children with medical needs and school staff have effective support.

There is no legal duty that requires school to administer medicines. However, the school's policies are that school should manage medicines and there is a robust system in place to ensure that medicines are managed safely. There is an assessment of the risks to the health and safety of staff and others and measures put in place to manage any identified risks.

Some children and young people with medical needs have complex health needs which require more support than regular medicine. It is important to seek medical advice about each child or young person's individual needs.

## **Prescribed Medicines**

Medicines should only be brought to school when essential; that is where it would be detrimental to a child's health if the medicine was not administered during the school day. School will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.

Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. School will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents could be encouraged to ask the prescriber about this. It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime.

The Medicines Standard of the National Service Framework (NSF) for Children recommends that a range of options are explored including:

- Prescribers consider the use of medicines which need to be administered (where appropriate) for children and young people so that they can be taken outside school hours
- Prescribers consider providing two prescriptions, where appropriate and practicable, for a child's medicine: one for home and one for use in the school or setting, avoiding the need for repackaging or relabelling of medicines by parents

## **Non-Prescribed Drugs**

Staff should never give a non-prescribed medicine to a child unless there is specific prior written

permission from the parents. If in exceptional cases where the Principal agrees to administer a non-prescribed medicine, it must be in accordance with the employer's policy. The Principal will take overall responsibility for this action. Criteria, in the national standards, make it clear that non-prescription medicines should not normally be administered. Where a non-prescribed medicine is administered to a child it will always be recorded on a form and the parents informed. If a child suffers regularly from frequent or acute pain the parents should be encouraged to refer the matter to the child's GP.

Children will never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor. The school will not accept or administer:

- Medicines that are to be administered 3 times per day (unless the child is attending after school club and will not return home immediately after 3:30pm, or attending a residential visit)
- Anti-histamine e.g. Piriton
- Paracetamol e.g. Calpol or Aspirin
- Ibuprofen

Parents are welcome to come into school to administer medicines themselves.

On accepting any medication, a member of the office staff will ensure the parent signs a form disclosing all details and giving permission for the medication to be administered by the members of staff named to administer medicines.

- The medicine must be kept in the medical cupboard (except where storage in a fridge is required) and only accessed by named adults, or with the permission of the Principal.
- When administering, the named adult must complete a record showing the date and time and details/dosage of the medication. This must be counter-signed by another adult.
- In the case of the child being allowed to administer their own medication, this must again be added to the record and counter-signed by another adult.
- Under no circumstances should a parent send a child to school with any medicines, e.g. throat sweets/tablets, without informing the school. These could cause a hazard to the child or to another child if found and swallowed.

## **Controlled Drugs**

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children, e.g. Ritalin, methylphenidate.

Any member of staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions.

A child who has been prescribed a controlled drug may legally have it in their possession. It is permissible for school to look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed.

School will keep controlled drugs in a locked non-portable container and only named staff will have access. A record will be kept for audit and safety purposes.

A controlled drug, as with all medicines, will be returned to the parent when no longer required to arrange for safe disposal.

## **Short-Term Medical Needs**

Many children will need to take medicines during the day at some point during their time in school.

This will usually be for a short period only, perhaps to finish a course of antibiotics or to apply a lotion.

To allow children to do this will minimise the time that they need to be absent. However, such medicines should only be taken to school where it would be detrimental to the child's health if it were not administered during the school day.

## **Long-Term Medical Needs**

Where a child has long-term medical needs, a care plan must be written with the assistance of the GP/school nurse and in the presence of the parent/guardian of the named child. This may also result in an individual risk assessment also being required. The care plan must be followed and reviewed at least annually.

The overall management of medical treatment for children is the responsibility of the parent/carer and it is also their responsibility to provide the school with up to date information regarding their child's medical needs and to keep the school informed of any change.

The Principal must ensure that named staff are trained to administer or give the level of care required by the details of the care plan. As a school, we try to ensure that we have sufficient information about the medical condition of any child with long-term medical needs and will request meetings with parents and recognised medical practitioners regularly to provide the correct level of training.

Training should be specific to the individual child concerned.

There will also be regular/annual training for all staff on more generalised needs e.g. asthma awareness and epi-pen training, diabetes and epilepsy.

The school is well supported by the School Nurse who provides staff with advice and any relevant training on request.

## **Record Keeping**

Parents should tell the school about the medicines that their child needs to take and provide details of any changes to the prescription or the support required. However, staff should make sure that this information is the same as that provided by the prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions.

In all cases, it is necessary to check that written details include:

- name of child
- name of medicine
- dose
- method of administration
- time/frequency of administration
- any side effects
- expiry date

Parents will be given a medication administration form to record details of medicines in a standard format. Staff should check that any details provided by parents, or in particular cases by a paediatrician or specialist nurse, are consistent with the instructions on the container.

The form will confirm, with the parents, that a member of staff will administer medicine to their child. There is no similar legal requirement for schools to keep records of medicines given to pupils, and the staff involved.

## **Educational Visits**

It is good practice for schools to encourage children with medical needs to participate in safely managed visits. School will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This might include planning arrangements, which will include the necessary steps to include children with medical needs. It will also include risk assessments for such children. Sometimes additional safety measures may need to be taken for outside visits. It may be that an additional supervisor, a parent or another volunteer might be needed to accompany a particular child. Arrangements for taking any necessary medicines will also be taken into consideration. Staff supervising excursions will always be made aware of any medical needs, and relevant emergency procedures. A copy of any health care plans will be taken on visits in the event of the information being needed in an emergency.

## **Process for the Administration of Medicines during residential visits– all medical needs.**

- For the purpose of residential visits, there will be a named person with responsibility for the administration of medicines and care of children as above.
- Parents will be asked to complete a form and may be required to meet with the named staff to ensure that staff are aware of all medical requirements.
- In the case of higher levels of care e.g. intimate care, the named member of staff will also meet with the school nurse, or other recognised medical advisor to ensure that they are trained in dealing with the level of care required.

## **Sporting Activities**

Most children with medical conditions can participate in physical activities and extra curricular sport. Sufficient flexibility will always be available for all children 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 child's ability to participate in PE will be recorded in their individual health care plan. All adults will be made aware of issues of privacy and dignity for children with particular needs. Some children may need to take precautionary measures before or during exercise and may also need to be allowed immediate access to their medicines such as asthma inhalers.

## Home to School Transport

Local Authorities arrange home to school transport where legally required to do so. They must make sure that pupils are safe during the journey. Most pupils with medical needs do not require supervision on school transport, but Local Authorities should provide appropriate trained escorts if they consider them necessary. Guidance should be sought from the child's GP or paediatrician.

This can include:

- details of a child's condition
- special requirement e.g. dietary needs, pre-activity precautions
- side effects of the medicines
- what constitutes an emergency
- what action to take in an emergency
- what not to do in the event of an emergency
- who to contact in an emergency
- the role the staff can play

## Administering Medicines

No child under 16 should be given medicines without their parent's written consent. Any member of staff giving medicines to a child should check:

- the child's name
- prescribed dose
- expiry date
- written instructions provided by the prescriber on the label or container

If in doubt about any procedure, staff should not administer the medicines but check with the parents or a health professional before taking further action. If staff have any other concerns relating to administering medicine to a particular child, the issue should be discussed with the parent, if appropriate, or with a health professional attached to the school. School will arrange for staff to complete and sign a record each time they give medicine to a child. In some circumstances, for example, (the administration of rectal diazepam), the dosage and administration will be witnessed by a second adult.

It is to be noted that adrenaline pens include manufacturer's instructions. Self-Management It is our policy and good practice to support and encourage children, who are able, to take responsibility to manage their own medicines from a relatively early age and school encourages this. The age at which children are ready to take care of, and be responsible for, their own medicines, varies. As children grow and develop, they should be encouraged to participate in decisions about their medicines and to take responsibility.

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and follow agreed procedures. The procedures will be set out in an individual child's health care plan. Parents should be informed of the refusal on the same day. If a refusal to take medicines results in an emergency, the school emergency procedures should be followed.

## Confidentiality

Medical information should always be regarded as confidential by staff and personal data properly safeguarded.

- Records relating to the administration of medicines are health records and should be stored confidentially.
- Instructions should be shared on a "need to know" basis in order that a child's well-being is safeguarded and any individual treatment plan is implemented.

## First Aid Training

The school will ensure that there are always qualified first aiders in school

## Emergency Situations

Staff must never take any child to hospital in a car, it is safer to call an ambulance. Health professionals are responsible for any decisions on medical treatment in the absence of a parent/carer.

In the absence of a parent/carer and at the discretion of the Principal, a member of staff if available, may accompany the child to hospital and stay until the parent/carer arrives.

Any medical information including contact details should be taken with the child or given to emergency staff.

### **Emergency Medication**

Specific guidelines are in place for emergency medication within a child's individual Care Plan. A copy of this Care Plan plus a photograph is stored in the folder in the medical room; parents also have a copy.

### **Monitoring and evaluation**

The school will monitor and review the individual needs of pupils and administer medicines in order to meet the all-round needs of each child on an on-going basis. An annual report to governors of the administration of medicines throughout the school will be prepared and analysed by the Principal to monitor the efficiency of this policy and it will be evaluated in the light of its findings.

### Appendix 1

Administration of Medication Permission and Record Administration of Medication

Permission and Record



Appendix 1 - Administration of Medication Permission and Record Administration of Medication

Permission and Record

Name of child: \_\_\_\_\_

Class: \_\_\_\_\_ Date: \_\_\_\_\_

Details of illness:

\_\_\_\_\_

Medicine:

\_\_\_\_\_

Times and dosage of medicine:

\_\_\_\_\_

Relevant side effects to be observed if any:

\_\_\_\_\_

Medicine to be administered from :

\_\_\_\_\_ to: \_\_\_\_\_

Parent/Carer: I hereby give permission that the above medication, ordered by the doctor/dentist for my child

\_\_\_\_\_ be administered by school personnel.

I understand that I must supply the school with the prescribed medicine in the original container dispensed and properly labelled by pharmacist and will provide no more than a 5 day supply of said medication. I understand that this medication will be destroyed if it is not picked up on the day this order terminates.

Signature: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date	Time given	Dose given	Member of staff Initials