



# Skidby Church of England Primary School

## Medication in School Policy

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### Policy Statement

**Our School Vision: A Christian school in a small community, making a big difference.**

Thessalonians Chapter Five tells us; “*Encourage one another and build one another up*”

### Our School Values

There are many Christian values, but our school vision is underpinned by our core values:

- developing **Respect** for all,
- creating **Resilience** in the face of new and challenging circumstances and
- taking **Responsibility** for our thoughts and actions.

This document outlines our procedures for the management of any medication brought into the school, highlights any areas of risk, and outlines how we will address these.

### Linked Policies

This policy should be read in conjunction with the following school policies:

- The Health and Safety Policy
- Educational Visits Policy

### Aims

Our Medication in School Policy aims to:

- Ensure the safety of all children in the school.
- Outline the framework that our staff will follow to allow medication brought into school for children to be stored safely and administered correctly.
- Set guidelines for dealing with any staff medication in our school.

### Legal Framework

Our Policy has been written with due consideration given to the current legal framework pertaining to the management of medication in school. Some of the relevant legislation is outlined in brief below:

- **Disability Discrimination Act 1995:** (as amended by the SEN and Disability Act 2001). This makes it clear that our school must not unjustifiably discriminate against children with disabilities, including those with medical needs.

- **Health and Safety at Work Act 1974 and Management of Health and Safety at Work Regulations 1999:** This highlights that school managers must ensure that safety measures are in place to cover the needs of all staff, visitors and children in our school. This may mean conducting risk assessments and making special provision for children with specific health needs.
- **Control of Substances Hazardous to Health Regulations 2002:** These regulations cover the use and storage of hazardous substances. We recognise that some medication can fall into this category.
- **Medicines Act 1968:** This Act provides the legal framework for all aspects of the supply and administration of medication. It allows any adult to administer a medication to a third party if they have consent and the administration is in accordance with the prescriber's instruction. This can include the administration of some forms of injection (with appropriate additional training).
- **Misuse of Drugs Act 1971:** This act and its associated regulations cover the supply, administration and storage of controlled drugs. This would be relevant if our school has a child who has been prescribed a controlled drug.

### **Further information**

The DFES and Department of Health have jointly produced relevant statutory guidance for governing bodies of maintained schools and proprietors of academies in England entitled "*Supporting pupils at school with medical conditions*" (December 2015). This can be found at <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Our school recognises that whilst there is no legal duty requiring school staff to administer medication, we recognise that at times it will be in our children's best interests that we do so, for example to enable regular attendance at school. Our staff will undertake this task following the procedures outlined below.

## **Policy and Procedures**

This policy covers the following areas:

- Procedures for managing prescription medication that need to be taken during the school day.
- Procedures for managing prescription medication on trips and outings.
- Roles and responsibilities of staff managing and supervising the administration of medication.
- Responsibilities of parents in respect of their child's medical needs.
- The need for prior written agreement from parents before medication can be administered.
- The circumstances in which non-prescription medication can be administered.
- Policy on assisting children with long term and complex medical needs.
- Policy on children carrying and administering their own medication.
- Staff training.
- Record keeping.
- Safe storage.
- Risk assessment and management procedures.

## **Supply**

Please note our school will only accept medication that is in its original labelled container.

Parents should bring the medication into school and hand it to our School Business Manager who will then record details of what has been received.

Before any medication can be given to a child our staff must also have a written agreement to do so from the parents. This agreement must include:

- the child's name,
- the name of the medication,
- the required dose and agreed time of administration.
- clear instructions whether the medication is on-going or to be taken up until a particular date.
- the information leaflet that is normally supplied by the manufacturer and/or any possible side effects should be listed in the agreement

The person receiving the medication must check that the label indicates the name of the child; that the dose parents have stipulated coincides with that detailed on the label, and that the medication is 'in date'. Where the medication is in tablet or capsule form, they should if possible, check the quantity provided.

## **Storage**

The Schools Business Manager has responsibility for receiving / logging / storing / administering / checking parental consent for medication. In the event she is not available this duty falls to the Head Teacher.

Medication can be classed as substances hazardous to health and as such must be stored securely. It is also important to note that some need to be stored at particular temperatures or away from light. This information will be on the medication label and in the manufacturer's information leaflet. Most medication should be kept in a locked cupboard and the key should be kept safely but immediately accessible. Children should know where their medication is and who can access it.

If medication needs to be kept cool, then it should be placed in a fridge where children cannot freely access it. Store any medication in the fridge in a labelled airtight container to keep them separate from food products.

Some emergency medication such as adrenaline pens (for children who suffer from allergies) and asthma inhalers should not be locked away as children need quick access to these. However, storage arrangements for these must ensure that only those for whom they are prescribed have access to them.

## **Administration**

If there is any doubt about the correct procedure to be followed staff should not administer but seek advice from parents or health professionals.

Before administering medication to a child the staff member should:

- Wash their hands
- Ensure that a suitable drink is available if appropriate to assist in swallowing medication safely (e.g. some tablets can irritate and damage the throat and oesophagus if administered without a drink).
- Check the label on the medication: name of child, dose, route of administration (e.g. by mouth, into ear/eye, rubbed on the skin), any special instructions and expiry date.
- Ask the child his/her name and this name should be checked against the name on the medication container – even if the member of staff knows the child well.
- The appropriate form signed by the parent must be checked for the time the medication is required to be administered and the dosage.
- The Record Book must be checked to ensure that another member of staff has not already administered the dose.

It is normally considered poor practice to give medication covertly, although in rare cases where health professionals judge that it is in the child's best interests to do so, this is acceptable.

Some children do find tablets difficult to swallow so may be given them, with their full knowledge, in, for example, a spoonful of jam. Even in these circumstances parents must make a request to the school and the school will decide if they are to allow this.

If a child refuses to take the medication they must not be forced to take it. Staff can try to encourage them or perhaps get someone else to try.

Occasionally mistakes will happen. In most cases, whether it is a missed dose or a medication given in error there will be no harm done. Parents must be contacted and the mistake explained to them. In the case of a missed dose, you may be able to give it at a later time. Where a dose has been given in error, it is important that the child is monitored for any reactions and medical advice sought if staff are in any way concerned.

## **Disposal**

Tablets and capsules are occasionally dropped on the floor or spat out. In these cases place the tablet in a labelled envelope and return it to the parents. In no circumstances should it be flushed down the toilet or thrown in the bin.

When a child leaves the school, ceases to need medication or if a medication has passed its expiry date, return any that is unused to the parents. If this is not possible take it to a local pharmacy for disposal.

## **Record Keeping**

1. The date, name and class of the child, the type and dose of the medication and the time of administration of the medication, must be recorded in the Record Book together with the initials of the administrator.
2. If medication is administered on a school trip a record of administration must still be kept but the record book must not be taken out of school. A photocopy of a blank page must be used, and this should be glued into the record book on return to school.

## **Additional Notes and Guidance**

1. Parents should always keep children at home when they are acutely unwell.
2. Medication should only be taken to school for administration where it would be detrimental to a child's health if it were not administered during the school day.
3. Prescribed medication only will be given in line with this Policy. Over the counter medication will NOT be administered unless prescribed by a doctor.
4. Parents are welcome to come in and give their child's medication if they wish.
5. Children must not keep medication anywhere in school. They must be taken to the Office at the start of the school day.
6. Medication must not be self-administered by a child.
7. Medication required to be taken when a child is on a school trip will be administered by the child's class teacher or other designated person on the trip in accordance with the written instructions given by the parent on the appropriate form.
8. If the administration of prescription medication requires additional technical knowledge or medical understanding then individual training will be provided to staff by a qualified health professional before any administration can take place.

## Long Term/Complex Administration and Complex Medical Needs

If a child has medication that will require long term administration or where administration is not straight forward (e.g. if medication to be administered is beyond a tablet or spoonful):

- Consultation with the parent/guardian must take place prior to the administration. Specialist Nurses must be consulted if necessary.
- A written description of the correct procedure for all administration must be provided to the school and stored securely with all other records relating to the administration for the individual child.

For children with long term medical conditions and/or complex medical needs:

- A written description of the medical condition and needs will be developed jointly by parents and school. This will be issued to the Class Teacher and the TA at the start of the school year. A copy will be circulated to all office staff and kept in a special file in the office. These records will be updated annually in September.
- An up-to-date list of all children with on-going medical conditions will be kept in the school and stored securely in the office.

## Residential Trip / Holidays

Where children are staying away from home on a residential trip/holiday organised by the school, parents will be asked to sign a form giving permission for occasional medications (e.g. paracetamol, antiseptic cream, suncream or lipsalve) to be administered by staff if deemed necessary.

If a child requires any prescription medication during a residential/holiday the parents' consent must be gained separately in writing (**even if the school already has consent for in school administration of the medication**). The parents/ guardian and trip organiser should have a meeting before the trip and agree in writing:

- The child's name, the name of the medication, the required dose and agreed time of administration. It should also be clear whether the medication is on-going or to be taken up until a particular date. Any possible side effects should be listed and/or the information leaflet that is normally supplied by the manufacturer made available.
- Parents should bring the medication into school on the day of the trip departing and hand it to the trip leader, who should then record that it has been received.
- It is essential that medication is provided in its original labelled container.
- It is good practice for the person receiving the medication to check that the label indicates the name of the child, that the dose parents have stipulated coincides with that detailed on the label and that the medication is 'in date'. Where the medication is in tablet or capsule form, they should check the number provided.
- The trip leader is responsible for checking with the parents that the correct quantity of medication has been provided.
- Whilst the school will do everything in its power to ensure it is promoting inclusion and equality for all, the final decision on whether a child with more

complex medication needs goes on a residential trip rests with the headteacher. They will discuss this with the trip leader and the parents/guardians of the child at the stage of initial approval for the trip – in line with the schools' educational visits policy.

### **Adult Medication in School**

Where it is necessary for adults (e.g. members of staff, governors or volunteers) to bring medication of any kind onto the school premises it is essential that this is kept at all times beyond the reach of children. The adult must take appropriate steps to ensure this happens.

Medication must always be stored securely, for example in a staff locker or in a locked cupboard in the office. It is not acceptable to leave medication in any location where a child could potentially gain access to it, for example in a handbag or briefcase or in a desk drawer.

Adults must always consider the best time to administer their own medication and consider what children may think if seen taking a tablet/capsule or administering an injection in public.

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**Date adopted by the governing body:** \_\_\_\_\_

**Signed:**

**Chair of governors:** \_\_\_\_\_

**Headteacher:** \_\_\_\_\_