

Medication & Management Procedures

Whitwick St John the Baptist CE Primary School

Date Reviewed 22/11/2017

Signatures:

Name of Head Teacher: Christine Killip

Signature of Head Teacher: _____

Date: _____

Name of Chair of Governors: Paul Siddals

Signature of Chair of Governors: _____

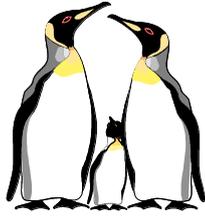
Date: _____

This policy will be reviewed annually. Date of next review: September 2018

This document is produced in conjunction with the Leicestershire Partnership Trust. We would like to acknowledge input from professional bodies and services with Leicestershire County, City and Rutland. This policy document is required to be made site specific for your establishment and signed off by the Senior Management Team as current and valid.

An annual review is required.

Please note additional information is available in the appendices listed on the schools website www.leicestershiretradedservices.org.uk relating to Individual Care Plans and specific medical needs/conditions.



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Appendices:

- A Medical Consent Form for Parents
- B Individual Health Care Plan Template
- C Epilepsy Health Forms
- D Additional information & Emergency Action Plans for Anaphylaxis
- E Diabetes Guidance
- F DFE Guidance
- G Guidance on the use of emergency salbutamol inhalers in schools
- H In Flow School Chart
- I Record of Medicine Administered
- J Individual Health Care Plan Letter to Parents
- K Template letter for purchase of emergency asthma inhalers

1.0 Introduction

- 1.1. This document is revised in line with the current Department for Education 'Supporting pupils at school with medication conditions' (September 2015) which replaces the previous 'Managing medicines in schools and early years settings' (2005).
- 1.2. The Children and Families Act (Section 100) places a duty on governing bodies of maintained schools, proprietors of academies and management committees of Pupil Referral Units to make arrangements for supporting pupils with medical conditions.
- 1.3. This policy covers the general administration of prescribed and non-prescribed medication. Such medications could be on a temporary, short term or one off basis or for a longer term or continual period for pupils with ongoing support needs. Pupils who have longer term support needs should have an individual health care plan developed, recorded and reviewed at least annually.
- 1.4. Guidelines and information on administration of specific medicines for specific conditions are included in the appendices of the Leicestershire Traded Services website www.leicestershiretradedservices.org.uk under 'A': Administration of medicines and Medication and Management Procedures.

2.0 General Principles

- 2.1 The Board of Governors and staff of Whitwick St John the Baptist CE Primary School wish to ensure that pupils with medication needs receive appropriate care and support while at school so that they have full access to education.
- 2.2 The head teacher accepts responsibility for members of the school staff giving or supervising pupils taking prescribed or non-prescribed medication during the school day.
- 2.3 Where possible, pupils will be encouraged to self-administer their own medication.
- 2.4 When medication is administered by staff, it shall be by those members of staff that have **volunteered and been trained to do so**, unless medically qualified staff are employed on site. **It will not automatically be assumed that a qualified first aider will fulfil this role.**
- 2.5 Staff will not give prescription or non-prescription medication unless there is specific written consent from a parent or guardian.
- 2.6 No child under 16 should be given prescription or non-prescription medicines without a parent or guardian's written consent, except in exceptional circumstances where the medicine has been prescribed without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents, while respecting his or her right to confidentiality.
- 2.7 Medication must be in its original packaging.

- 2.8 Non-prescription medicines such as hay fever treatment or cough/cold remedies will be treated in the same way as prescription medicines in that they should be in a clearly labelled original container with a signed consent form detailing the pupil's name, dose and frequency of administration.
- 2.9 Prescribed medicines should be in original containers labelled with the pupil's name, dose, and frequency of administration, storage requirements and expiry date.
- 2.10 Generally, it is not necessary for an over the counter medicine to be prescribed by a medical practitioner in order to be administered in the school setting. The exception is where the child may already be taking prescribed medication and there may be an interaction between prescribed and non-prescribed medicines. In this instance all medications should be prescribed. Aspirin should not be given to children under 16 years of age unless prescribed.
- 2.11 Pupils that have ongoing, long term or potentially emergency medication requirements should have an individual care plan completed and reviewed regularly. Pupils who require temporary, short term medication only require a consent form to be completed.

3.0 Responsibilities

3.1 Training

- 3.1.1 Educational settings should ensure that members of staff who volunteer to administer medicines will be offered professional training and support as appropriate and required.

3.2 Storage

- 3.2.1 Medication should be kept in a known, safe, secure location. This may need to be a fridge depending on the medication and manufacturer requirements.
- 3.2.2 In certain instances, pupils may be in charge of storing their own medication. This will depend on the nature of the medication, the age and maturity of the pupil and whether parental/guardian consent has been received.
- 3.2.3 Prescribed emergency medication, such as epi-pens or asthma inhalers, should remain with the pupil at all times.
- 3.2.4 Parents/guardians are responsible for ensuring that the education setting has an adequate amount of medication for their child. As a general rule, no more than four weeks of medication should be stored at any one time.

3.3 Disposal of medication

- 3.3.1 Procedures using sharp items should be disposed of safely using a sharps bin. These are available on prescription where needed.
- 3.3.2 Parents/guardians are responsible for collecting remaining medication at the end of each day or term (as appropriate) and for re-stocking medication at the start of each term.
- 3.3.3 Parents/guardians are responsible for ensuring that medication is within its expiry date and that any expired medication is returned to the pharmacy for safe disposal.

3.4 Record keeping

3.4.1 Consent forms must be signed before any medication is given. The educational setting is responsible for storing copies of signed consent forms. Consent forms should include:

- The pupil's name, age and class
- Contact details of the parent/guardian and GP
- Details of any allergies the pupil may have.
- Clear instructions on the medication required, dose to be administered, frequency of dose and period of time medication will be needed for.
- Acknowledgement that the pupil has previously taken the required medication with no adverse reactions.
- A dated signature of the parent/guardian.

3.4.2 Changes to prescriptions or medication requirements must be communicated to the educational setting by the pupil's parent/guardian and a new consent form signed.

3.4.3 Individual care plans should be developed and reviewed for all pupils with needs that may require ongoing medication or support. Such care plans should be developed with parents/guardians, the educational setting and other professional input as appropriate.

3.4.4 A record of medication given or supervised being taken should be kept including the date, time and dose taken. Parents/guardians should be informed that medication has been taken on the same day or according to the individual care plan.

4.0 Medical Emergencies

4.1 In the event of a medical emergency, all relevant procedures should be activated and 999 dialled as appropriate.

4.2 A record of emergency medicines and their expiry dates should be kept and recorded each term for those educational settings which store such medications (for example epi-pens or asthma inhalers).

4.3 Emergency medicines should only be given to pupils with a signed consent form and following clear, agreed procedures detailed in the consent form or individual care plan.

5.0 Signatures

Please see front page of policy.

6.0 Further relevant information

Appendices for information and completion can be sought from the Schools website www.leicestershiretradedservices.org.uk system under 'A' for Administration of medicines and Medication and Management Procedures. This includes:

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- A Medical Consent Form for Parents
- B Individual Health Care Plan Template
- C Epilepsy Health Forms
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7.0 Summary of updates to this document

This document has been reviewed in line with current up to date legislation dated August 2015 and with the support of the Leicestershire Partnership groups/healthcare professionals.

- August 2014 Template of policy reviewed; to be made site/establishment specific
- August 2014 Appendices made available on the Schools intranet system (old EIS) for specific medical needs/conditions
- August 2015 Anaphylactic details updated; new fax number
- June 2016 Amendments regarding prescription and non-prescription medicines to enforce parental consent form
- June 2016 Anaphylactic forms from health updated to include Emerade EAP and email reporting address
- January 2017 Amendments regarding prescription and non-prescription drugs; addition of template letter to pharmacies for purchase of emergency inhalers.