

# ADMINISTERING OF MEDICINES POLICY AND PROCEDURES

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# St Michael's CE Academy

# ADMINISTERING OF MEDICINES POLICY AND PROCEDURE

#### **Value Statement**

To provide a safe and healthy working environment for all children, staff and visitors which facilitates effective teaching and learning. We take our duty of care very seriously and endeavour at all times, particularly in emergencies, to secure the welfare of all the children and adults in school.

Our policy and procedures will be reviewed regularly and updated and amended as necessary in line with any new legislation or local or national guidance.

Our procedures apply to long term medical needs and short term medical needs.

#### **GENERAL GUIDANCE**

#### Children with medical needs

- The Governors and staff at St Michael's CE Academy wish to ensure that children with medical needs receive appropriate care and support whilst in school. This policy and guidance is to ensure all children with medical conditions, in terms of both physical and mental health, are properly supported so that they have full access to education, including school visits and physical education and can play a full and active role in school life, remain healthy and achieve their academic potential.
- Some children with medical conditions may be considered to be disabled under the definition set
  out in the Equality Act 2010 and the school will ensure such children are not discriminated against
  in their access to education. Some may have a statement of special educational needs (SEN), or an
  Education, Health and Care (EHC) plan which brings together health and social care needs, as well
  as special educational provision.
- Children with medical needs have the same right of admission to school as other children in line with the LA admissions policy. However, in line with their safeguarding duties, the governing body must ensure that children's health is not put at unnecessary risk from, for example, infectious diseases. We therefore do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.



- This policy and guidance is based on and is in line with the DfES document 'Supporting pupils at school with medical conditions' (Dec 2015) and gives regard to the statutory duty of schools to make arrangements for supporting pupils with medical conditions (Section 100 of the Children and Families Act 2014). In addition, advice from LA and other healthcare professionals is sought and implemented as necessary when managing complex health needs.
- School, health and social care professionals, children and parents need to collaborate so that the needs of children with medical conditions are properly understood and effectively supported.
- All relevant staff are made aware of this policy and guidance through the Academy's staff induction arrangements.
- Parents have a prime responsibility for their child's health and should provide school with relevant information about their child's medical needs and any relevant medical history.
- Parents should inform school of any changes to medical needs and/or the medication. If medication
  is discontinued or the dose or administration method changes, they should notify the school
  immediately.
- We recognise that most children may at some time have short term medical needs i.e. finishing a
  course of prescribed medication which cannot be taken entirely outside of school hours i.e. where
  4 doses are required within a day. Such medicines should only be taken in school where it would be
  detrimental to a child's health if it were not administered during the school day.
- Where children have **long term medical needs**, or require medicines in particular circumstances, the school will liaise with home and other professionals to ensure that we have sufficient information about the medical condition. Where appropriate, a health care plan will be drawn up to clarify the situation.

#### **COMMUNICATION WITH PARENTS**

#### Use of MedicalTracker

At St Michael's CE Academy, we use *MedicalTracker* as an online system for recording the administration of medicines. This will be recorded by staff members supervising.

*MedicalTracker* automatically sends an email notification to the parents recorded on our management information system to ensure they are kept informed.



#### ADMINISTRATION PROCEDURES

#### **Prescribed Medication**

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- Medicine will only be accepted in school where it has been prescribed. Prescribed medicines are
  defined as medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist
  prescriber.
- Medicine should be in date, in the original container as dispensed and include the prescriber's
  instructions for administration, dosage and storage. Any alterations to dosage must be
  accompanied by written instructions provided by the prescriber. The exception to this is insulin,
  which must still be in date, but will generally be available to schools inside an insulin pen or a
  pump, rather than in its original container.
- A written agreement form must be completed by a parent for school to administer prescribed medicine. (See Appendix 1)
- A record will be kept (on MedicalTracker) each time medicine is administered.
- A record will be kept and parents informed as soon as possible if a child refuses medication.
- Controlled drugs may be prescribed as medication for use by children.
- Prescribed medication will only be given if it cannot be taken wholly out of school hours i.e. where
  4 doses are required within a day or where within the prescriber's instructions, it is to be
  administered as necessary for regular pain relief. In the latter case, in order to ensure an
  appropriate dosage within the 24-hour period usually specified, parents must also complete the
  record of medication given prior to school hours (Appendix 2).

#### Non-prescribed medication

- Staff should never administer a non-prescribed medicine to a child at school. However, it may be administered where written parental consent has been given for specific circumstances e.g. travel sickness tablet, hay fever tablet, Calpol, antihistamine cream whilst on a residential visit or if it is part of a temporary risk assessment or the child's health care plan.
- A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor. Please note: the DfE's statutory guidance Supporting Pupils at School with Medical Conditions states a child under 16 should never be given medicine containing aspirin unless prescribed by a health care professional.



#### SELF ADMINISTRATION

- Where appropriate, children will be encouraged to take responsibility for managing their own medicines and procedures and to self-administer their own prescribed medicine, under staff supervision, unless they are deemed too young or unable to do so.
- School must be aware of any children carrying and administering their own prescribed medication.

#### INDIVIDUAL HEALTH CARE PLANS (IHCP)

- If the need for a health care plan is identified, the school will lead the development of this in
  consultation with school nursing service, other healthcare professionals involved with the child,
  parents and the child if appropriate. All staff will be made aware of any such cases and the
  provision for these.
- The plan will set out what needs to be done, when and by whom.
- The format and level of detail will depend on the complexity of the child's condition and the key information and actions that are required to support the child effectively. (See Appendix 3: Process for developing an individual healthcare plan and Appendix 4: What to consider and include in a plan).
- Plans will be easily accessible to all who need to refer to them, while preserving confidentiality.

#### STAFF RESPONSIBILITIES

- Any member of school staff may be asked to provide support to children with medical conditions, including the administering of medicines, although they cannot be required to do so.
- All relevant staff are made aware of a child with medical conditions and are given appropriate
  information or training so that they know what to do and how to respond accordingly if they
  become aware that the child needs help.
- There is no legal duty that requires school staff to administer medicines or first aid. At St Michael's CE Academy, some support staff administer medication in a voluntary role and are appropriately trained to manage medicines.
- The Academy has responsibility for trained staff administering or supervising the taking of prescribed medication or undertaking healthcare procedures during the school day.
- Any member of staff giving prescribed medicines or supervising a child taking their medicine will check the label for:
  - Child's name and date of birth
  - Prescribed dose



- Expiry date
- Written instructions provided by the prescriber on the label or container
- Children who are ill should not attend school. For children with short term illness, deemed fit
  enough to attend school but finishing a prescribed course of medicine, school cannot guarantee to
  administer medicines at an exact time of the school day and if this is considered to be essential, the
  child should not attend school until the course of treatment is finished. Alternatively, parents may
  wish to come into school to administer medicine at a specific time.

#### **SENCO RESPONSIBILITIES**

- Ensure sufficient staff are trained, competent and confident before they take on responsibility to support a child and are able to access information and support materials.
- Ensure the school nursing service are aware of any child with a medical condition who requires support at school.
- Liaise with healthcare professionals and parents to coordinate Individual Health Care Plans.
- Ensure children have the opportunity to share information about how their condition affects them, how their needs can best be met in school and any concerns they may have.
- Implement policy and procedure and ensure these reflect current legislation and good practice.

#### **EDUCATIONAL VISITS**

- Prescribed medicines will be taken on offsite activities if necessary and administered in line within the same guidelines as for in school.
- The risk assessments carried out as part of the school visits policy and procedures will take into account any reasonable adjustments that may need to be made to enable children with medical needs to take part in a safely managed visit. School will seek advice and parent views where they have any concerns about providing for a child or the safety of others on such a visit.

#### MANAGEMENT OF MEDICINES

- Unless otherwise indicated, all medication will be stored securely. Devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily accessible and available to children.
- It is parent/carer's responsibility to monitor and ensure that medication is in date and that school has appropriate supplies. Unused or out of date medicines will be returned to parents for disposal.



• Sharps boxes will be used for disposal of needles and collection and disposal arranged in line with Council environmental service arrangements.

#### **EMERGENCY PROCEDURES**

- In an emergency, first aid procedures will be followed and emergency services called if necessary. Health care plans will include specific details as appropriate to individual children.
- If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.
- Through the school's wider curriculum, other children in school will be made generally aware of the need to get adult help immediately in an emergency. If appropriate, they will be made aware of specific children's medical needs and emergency symptoms.

#### **ILLNESS**

Children who become unwell during the school day will be monitored and the decision to send
them home will be the responsibility of the SLT in conjunction with the class teacher or member of
staff who has monitored the child. Parents may be contacted to inform them and consult with
them if it is felt the child could improve and remain in school.



#### **APPENDIX 1 - RECORDS**



## **MEDICINE CONSENT FORM**

Student name \_\_\_\_\_ DOB \_\_\_\_\_ Class \_\_\_\_\_

All information in this section must be completed

Purpose of the medication				
Prescription Medication				
Name of medication Dosage				
Time to be administered				
Possible side effects				
Parent authorisation				
I hereby grant my permission for staff of St Michael's CE Academy to give (student name)  the above-named medication as prescribed. I agree to provide medication in the original bottle/packaging which is properly labelled by the pharmacy. The medication will be kept in the school office and should be handed in here. The student will report to the school office to receive medication. I am aware that students are not allowed, under any circumstances to have medications in their possession on school property.				
Parent/guardian signature Date				
Printed name				



## **APPENDIX 2**

# **MEDICATION RECORD**

Name of Child	Date	Type of Medicine	Dosage	Given by



#### **APPENDIX 3**

#### INDIVIDUAL HEALTH CARE PLANS (IHCP)

#### **Process for Developing Individual Health Care Plans**

(DfE Supporting pupils with Medical Conditions 2015)

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed



Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil



Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)



Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided



School staff training needs identified



Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed



IHCP implemented and circulated to all relevant staff



IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate



#### **APPENDIX 4**

#### INDIVIDUAL HEALTH CARE PLANS (IHCP)

#### What to consider and include in a plan

These will be developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption.

#### Where appropriate, Health Care Plans may include:

- What needs to be done, when and by whom;
- Names and contact details of healthcare professionals involved
- The medical condition, its triggers, signs, symptoms and treatments;
- The child's resulting needs, including medication and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons and break times;
- Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision
- The level of support needed some children will be able to take responsibility for their own health needs
- Who will provide support, their training needs, expectations of their role
- Specific support for the pupil's educational, social and emotional needs
- Who in the school needs to be aware of the child's condition and the support required;
- Describe what constitutes an emergency, and what to do in an emergency, including who to contact and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan
- Health care will be recorded and shared with parents as per 'Medication Records'

See templates below to be adapted as necessary



# Template for a Medical Care Plan (Individual Health Care Plan IHCP)

Name:	١	/ear	Clas	ss	
Medical diagnosis/condition:					
Medical needs symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc					
Medication dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision					
Daily care requirements					
Specific support for educational, social and emotional needs					
What is an emergency and action to take if it occurs					
Arrangements for specific activities eg PE, off site visits					
Member of school staff responsible for care					
Staff training needed/undertaken Who, what, when, how					
Care information and advice provided by:					
Date care plan drawn up and agreed by:					



# Implementation of Care Plan Record

Name o	Name of Child:						
Date	Time Care administered		Staff supporting care	Comments (as necessary)			