



## Luxulyan School

# MANAGING MEDICINES IN SCHOOL

Review Date:      May 2021

### AIM

A clear policy that is understood and accepted by all staff, parents and children providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that for such children attendance is as regular as possible. Ensure children receive their rights under the UNCRC - Specifically Article 24.

The policy is to include:

- \* Procedures for managing prescription medicines which need to be taken in the school day
- \* Procedures for managing prescription medicines on outings and trips
- \* Roles and responsibilities of staff administering medicines
- \* A clear statement of parental responsibilities in respect of medicines
- \* Written permissions from parents for medicines
- \* Assisting children with long term medical needs
- \* Staff training
- \* Record keeping
- \* Safe storage of medicines
- \* The school's emergency procedures
- \* Risk assessment and management procedures

### Medical Leads

Mary Fox is the school's lead first aider assisted by all Teaching Assistants who are first aid trained. Susan Grubb is the main medical administrator; all staff are permitted to administer prescribed medicine.



### Prescribed Medicines

We will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

It is helpful when clinically appropriate that medicines are prescribed in dosages that enable it to be taken outside of school hours. We will encourage parents to discuss this with the prescriber.

Prescribers should be encouraged to issue two prescriptions, one for home and one for school, thus avoiding the need for repackaging of medicines.

Controlled drugs should never be administered unless cleared by the Head. Reference should be made to the DfE document Managing Medicines in Schools. Paperwork should be in place before this begins and they will be locked away and signed in/out. Two members of staff should be present when the controlled drug is administered.

### Non-Prescription Drugs

Staff should never give non-prescribed drugs to a child unless there is specific written permission from the parent. **This will be an exceptional situation rather than the norm.**

Children are NEVER to self-administer medicines except for inhalers when appropriate.

A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

### Short Term Medical Needs

In order to reduce the time a child is away from school the school will administer medicines, for example the end of a course of antibiotics or apply a lotion, but only for a short course of up to 5 days, and only when previous avoidance strategies have been examined. Note the exceptional terms in the previous paragraph.

### Long Term Medical Needs

The school will be fully informed of the child's needs before admittance. It is essential to have sufficient information in order for the child's medical needs to be adequately supported. A care plan should be in place.

### Administering Medicines

No child under 16 should be given medicines without written parent consent. The 'administering medicines' consent form must be completed by the parent giving permission for medicine to be administered by staff.

Members of staff giving medicines should check:



- \* The child's name
- \* Prescribed dose
- \* Expiry date
- \* Written instructions on the packaging

Members of staff giving medicines are:

- \* Willing to perform such tasks
- \* Trained where necessary for the task

If in doubt then do not administer medicines without checking with the school office staff who will then contact parents or the medical practitioner.

A record must be kept in a written form each time medicines are given.

#### Self-Management

Children who are able will be encouraged to manage their own medicines. This will generally apply to relief treatments for asthma. Other medicines should be kept in secure storage so access will only be through the school office.

#### Record Keeping

Parents should inform the school of the medicines their child needs. School will check that the medicine is in its original container and that the dispenser's instructions are clear.

A written record of medicines administered will be kept in the school office and this will also be signed by the parents to acknowledge the entry. A copy of consent form will also be kept in the office.

#### Educational Visits

All medicines required by children on such undertakings will be part of the overall risk assessment for the visit. Medicines not self-managed by pupils will be in the safe care of a nominated member of the support staff. This colleague should be one who is willing to carry this responsibility. Complex medical needs for a specific pupil may necessitate a health plan for the visit.

#### The Governing Body

The governing body will be made aware of this policy and its role in being generally responsible for all school policies.



### The Head of School

The Head of School will ensure that all staff receive appropriate support and training and aware of this policy. Likewise the Head of School will inform the parents of the policy and its implications for them.

In all complex cases the Head of School will liaise with the parents and where parent expectation is deemed unreasonable then the Head will seek the advice of the school nurse or some such medical advisor.

### Teachers and Other Staff

All staff should be aware of the possible medical risks attached to certain pupils. They should be aware of possible emergency action and emergency contacts. Teachers' conditions of employment do not include the giving or supervising of pupils taking medicines. Any support member of staff agreeing to administer prescribed medicines should be in receipt of appropriate training.

### Storing Medicines

Medicines should be stored away from children, be in their original containers and refrigerated where necessary. This will be the responsibility of the school office. Children should know where their medicines are kept and who is responsible. This should be an exceptional duty and be only used when medical advice dictates that no other course of action is possible.

Emergency medicines such as asthma inhalers and adrenaline pens should not be kept locked away but always in the vicinity of the relevant pupils. Any problems or issues arising shall be initially referenced to Managing Medicines in Schools and Early Years Settings 2005 DfES.

### KEY POINTS

**\* THE SCHOOL WILL NOT NORMALLY AND REGULARLY ADMINISTER MEDICINES TO CHILDREN UNLESS THE ABOVE POLICY APPLIES**

**\* ANY STAFF MEMBER ADMINISTERING MEDICINES WILL DO SO WILLINGLY AND WITH APPROPRIATE TRAINING**

**\* ANY AND ALL MEDICINES WILL BE NOTIFIED TO THE SCHOOL OFFICE** - *This includes asthma relievers and adrenaline pens. The Office will know where these medicines are in school and the asthma register shall be updated annually and as and when new children come to school.*

*The medicine will be administered by one of the following members of staff:*

*Mr Gynn, Mrs Le-Doux-Lucas, Mrs Williams, Miss Teobald, Mrs Grubb, Mrs Fox, Mrs Squire,*

*Mrs Tonkin, Mr Heagney, Mrs Mullen, Mrs Mileham*