



Medical Policy

Category:	Inclusion
Approved:	Governing Body
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Policy owner:	
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Management of Medicines in School Policy And Procedure

Our fundamental aim at Northfield St. Nicholas Primary Academy is to provide the best possible education for all our pupils. It is the aim of the school to place a high value on diversity, treating every member of the school as an individual and meeting the needs of all, taking account of gender, ethnicity, culture, religion, language, sexual orientation, age, disability and social circumstance. In doing this, we aim, therefore to raise the achievement of all children in the school. At Northfield St. Nicholas Primary Academy we recognise that the safe practice with medicines is an important issue.

Prescribed medicines can only be taken in school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day.

Introduction:

There are an increasing number of children attending mainstream schools with medical conditions. Schools, acting in loco parentis, have a duty to take reasonable care of children which includes the possibility of having to administer medicines and/or prescribed drugs. This may be required by pupils for regular medication or those requiring occasional dispensing of medicines. The school will make every effort to safeguard the health and safety of those pupils who may be more at risk than their peers due to existing medical conditions.

Children with Medical Needs

Children with medical needs have the same rights of admission to school as other children. Most children will have at some time short term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children, however, have longer term medical needs and may require medicines on a long term basis to keep them well.

Others may require medicines in particular circumstances, such as children with severe allergies who may need an adrenaline injection. Children with severe asthma may have a need for daily inhalers and additional doses during an attack.

Most children with medical needs can attend school regularly and take part in normal activities, sometimes with some support. However, staff may need to take extra care

in supervising some activities to make sure that these children, and others, are not put at risk.

Where appropriate, individual health care plans can help staff identify the necessary safety measures to support children with medical needs and ensure that they and others are not put at risk.

Parents/carers are encouraged to give doses outside the school day if possible e.g. 3 times a day could be taken in the morning, after school and at bedtime.

The school procedure for the administration of medicine is outlined in the 'Request for Administration of Medicine in School' form which has to be completed by the parent/carer (see appendix).

1. Children recovering from a short-term illness/infection, who are clearly unwell should not be in school and the Headteacher can request that parents/carers keep the pupil at home if necessary.
 2. Only medicines prescribed by a doctor can be accepted in their original container with the pharmacy label intact.
 3. Medicines are only administered following a written request from parents/carers which clearly states the name and class of the pupil, together with the dose and time(s) of day at which it should be taken and any special conditions for storage of the medicine (i.e. kept in fridge).
 4. Medicines need to be clearly marked with the name and class of the pupil, together with the dose and the time(s) of the day at which it should be taken.
 5. Medicines are only accepted by office staff and they must be brought in by the parent/carer, rather than via the pupil.
 6. Medicines will be kept in a secure central position in the school (e.g. school office.)
 7. Children should never be given medicine to keep on their person; all medicines should be handed in to the office.
- An exception to this rule is made, however, for medicines provided for emergency treatment such as reliever inhalers for asthmatic pupils or glucosetables for diabetics, which will be kept close to the pupil(s) concerned for immediate use.
8. School cannot accept any medicine that has been taken out of the container as originally dispensed or make changes to dosages on parental /carer instructions.
 9. No over-the-counter remedies should be brought into school at any time – this includes throat sweets and nasal inhalers.
 10. No over-the-counter remedies will be administered by staff.

Pain killers (e.g aspirin, paracetamol, including junior forms such as Calpol) will never be administered to pupils, even at the request of parents/carers unless prescribed by a doctor or the condition is ongoing. Medical evidence must be

provided. They can mask the symptoms in the event of injury and it is possible to inadvertently administer too large a dose if a pupil had already taken some without the knowledge of the school (e.g. before leaving home).

Support for Children with Medical Needs

Parents have the responsibility for their child's health and should provide the school with information about their child's medical condition. The school doctor or nurse and specialist voluntary bodies may also be able to provide additional background information for staff.

There is no legal duty that requires school staff to administer medicines. At our school we have members of staff who, with appropriate training or instruction, may **under special circumstances** administer medicines to children. This is always and only upon receipt of written permission and instruction from the parent and with the prior consent of the Headteacher. The priority for the decision to administer medicine is that it facilitates regular attendance of the child concerned.

Short-Term Medical Needs

Many children will need to take medicines during the day at some time 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 a child's health if it were not administered during the school day. We will not accept medicines that have been taken out of the container as originally dispensed, nor will we make any changes to the dosage instructions made by the prescriber – this includes any informal instruction given by the parent.

Long-Term Medical Needs

As a school, we need to know about any particular needs before a child is admitted, or when a child first develops a medical need. In these cases, a written care plan is made through consultation between the school, parents and relevant health professionals. The plan provides clarity about what needs to be done, when and by whom. These should be reviewed at least annually. Where a child has a SEND identified in an EHC plan, the healthcare plan should be linked to the EHC and should consider pupil's needs, absences, level of support, who provides the support and what to do in an emergency.

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 children. In the event of these being prescribed, staff will follow the same procedure for administration as for 'Prescribed Medicines'.

Controlled drugs will be kept in a locked medication cupboard in the school office, and a record will be kept for audit and safety purposes.

Non-Prescription Medicines

Non-prescription medicines should not normally be administered. In exceptional circumstances, a non-prescribed medicine may be given with the prior permission of the Headteacher and with written permission and instructions from the parents.

Administering Medicines

Written records must be kept of all medicines administered to children.

When administering medicines, the following will be checked:

- the child's name
- name of medicine
- prescribed dose
- method of administration
- time/frequency of administration
- expiry date
- written instructions provided by the prescriber on the label or container

Please note that medicines should always be in the original container as dispensed by the pharmacist and include the prescriber's instructions.

If staff are in any doubt at all about any of the above or any other matter concerning the medication, it will not be given, and we will make every effort to contact the parents to advise them of this. If there are any other concerns related to the administering of medicine to a particular child, the issue will be discussed with the parent if appropriate, or with a health professional attached to the school.

Records are kept of all medication given.

If a child refuses to take medicine, he/she will not be forced to do so. A note will be made and parents informed.

Sporting Activities

Most children with medical conditions can participate in physical activities and extra-curricular sport. Any restrictions on a child's ability to participate in PE are recorded in their individual health care plan.

Some children may need to take precautionary measures before or during exercise, and may need to be allowed immediate access to their medicines. All inhalers are taken out with the children for PE activities and are available for their use at all times.

Educational Visits

Children with medical needs, particularly of a long term nature, are encouraged to take part on trips and where necessary risk assessments are carried out for these children. The administration of medicines follows the same procedures as for administration in school. A copy of health care plans will be taken on visits in the event of information being needed in an emergency.

The administration of medicine should not be a barrier for a child's participation on an educational visit. Prior to any visit made by the child, a care plan for the day will be drawn up to ensure that a member of staff has responsibility for the administration of the medicine with all the necessary permission, instruction and procedure as outlined above. Details will also be included in the risk assessment.

Storage of Medicines

Unless needing refrigeration, medicines are kept in a locked cupboard in the school office during the school day, and are to be taken home each night by the child's parent.

If refrigeration is needed, medication is kept in an airtight container in the staff room fridge.

Children who have inhalers keep them in specified places in their classrooms, to which they and their class teacher have access. They must be labelled.

Parents are responsible for the safe disposal of all medicines and monitoring when medicines become out of date.

Parental/Carer Responsibilities in respect of their Child's Needs

Parents/carers should provide the Headteacher with sufficient information about their child's medical needs if treatment or special care is required. Information about a medical condition should be included as recorded by the child's G.P. Parents/carers and the school will then reach an agreement on the school's role in supporting the child's medical needs. Parents/carers should be aware that sharing information with other staff will ensure the best care for the child.

Staff Training in Dealing with Medical Needs

Each year lists are compiled for each class informing staff of known medical conditions. These lists are distributed to all staff so that they are aware of any incidents that may occur. When the condition is of a more serious nature an individual health care plan is created which contains the child's photograph and is distributed to relevant staff and displayed in the register so that staff are aware of the likelihood of an emergency arising and what action to take should one occur.

All staff who agree to accept responsibility for administering prescribed medicines to a child will be given the appropriate training and guidance. Governors should ensure that sufficient staff have received suitable training. Staff must not give prescription medicine or undertake health care procedures without appropriate training.

Emergency Procedures

In the event of an Emergency, an ambulance will be called and a child will be accompanied to hospital by a member of staff and the parents/carers will be notified. A staff member will stay with the child until a parent/carer arrives.

School nurse

School nurses should notify school when a child is identified as having a medical condition and provide support.

In all cases, administration of medication and/or treatment to a pupil will be at the discretion of the Headteacher and Governors of the school. However, ultimate responsibility remains with the parents/carers.

As with all policies, it is the responsibility of the Governors to evaluate the effectiveness of this policy and the practice that it describes. On a day to day basis this responsibility is delegated to the Headteacher who will report back to the governing body as appropriate. The governing body must ensure that arrangements are in place to support pupils with medical conditions so they can access and enjoy the same opportunities at school as any other child. They must ensure the focus is on the needs of each individual child and how their condition impacts on school life.

It is not acceptable to:

Prevent children from easily accessing their inhalers and administering medication when and where necessary.

Ignore the views of the child or their parents.

Send children with medical conditions home frequently or prevent them from staying for normal school activities, unless this is specified in their individual health care plan.

Penalise attendance record if their absences are related to their medical condition eg. hospital appointments.

Prevent pupils from drinking, eating or taking toilet breaks whenever they need in order to manage their condition effectively.

Prevent children from participating in any aspect of school life, including trips.

Liability and indemnity.

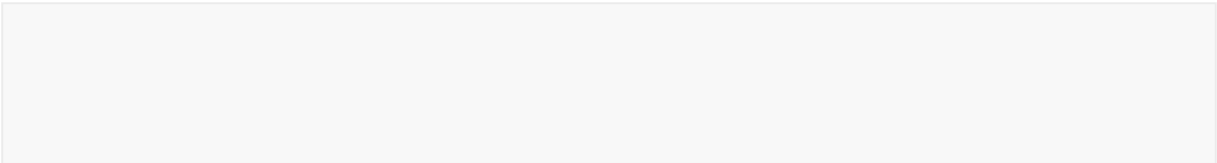
The governing body should ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

Complaints

Please see the school's complaints policy.

This policy has been formulated using the guidance, *'Managing Medicines in Schools and Early Years Settings' DfES 2005 and Supporting pupils at school with medical conditions, April 2014.*

This policy is a working document, and will be reviewed annually.



End of policy

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