

# ASHURST CE AIDED PRIMARY SCHOOL

## MEDICINES IN SCHOOL POLICY



**Applicable**  
**from March 2017**

## INTRODUCTION

This policy will be reviewed in response to changing circumstances in school and guidance and advice issued by LA and DfE

This Policy is the responsibility of the Full Governing Body, in consultation with the Headteacher.

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## MEDICINES IN SCHOOL POLICY

### Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. The governing body of Ashurst CE Aided Primary School will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting pupils at school with medical conditions' December 2015'. Appendix 1

Establishment staff do not have a statutory duty to give medicines or medical treatment. However prescribed medicines will be administered to enable the inclusion of pupils with medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care - this might mean giving medicines or medical care.

Signed Mrs A Woods Chair of Governors

Date March 2017

## **Organisation**

The governing body will develop policies and procedures to ensure the medical needs of pupils at Ashurst CE Aided Primary School are managed appropriately. They will be supported with the implementation of these arrangements by the Head teacher and school staff.

The lead for the management of medicines at Ashurst CE Aided Primary School is Mrs J A Williams or in their absence Mrs S Smith. In their duties staff will be guided by their training, this policy and related procedures.

## **Implementation monitoring and review**

All staff, governors, parents/carers and members of Ashurst CE Aided Primary School community will be made aware of and have access to this policy. This policy will be reviewed annually and its implementation reviewed and as part of the Head teacher's annual report to Governors.

## **Insurance**

Staff who follow the procedures outlined in this policy and who undertake tasks detailed in the WSCC medical audit are covered under WSCC insurance. The medical audit is available to view on West Sussex Services for Schools under 'guide to insurance for schools'.

Claims received in respect of medical procedures not covered by the insurers will be considered under the Council's insurance fund.

## **Prescription Medicines**

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime.

Occasionally a GP may prescribe a medicine that has to be taken during the school day. Parents may request that a member of school staff

administers the medicine. When school staff administer medicines, the parent or guardian must supply the medicine in the original pharmacist's container clearly labelled including details of possible side effects to the school office and must complete a 'Parental Agreement for School to Administer Medicine' form. On no account should a child come to school with medicine if he/she is unwell.

### Asthma

The school recognises that pupils with asthma need access to relief medication at all times. The school will manage asthma in school as outlined in the Asthma Toolkit, available from School Office.

Pupils with asthma will be required to have an emergency inhaler and a spacer (if prescribed) in school. The school may ask the pupils parent or guardian to provide a second inhaler. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required.

The school will follow the emergency treatment as detailed on the Asthma Information Form that can be found within the Asthma Toolkit. The school will develop Individual Health Care Plans for those pupils with severe asthma, and an Asthma Information Form completed for pupils with mild asthma.

### Non-prescription Medicines

Only 2 non-prescription medications will be administered in school, all other non-prescription medication will not be administered at school and pupils should not bring them to school for self-administration. The majority of medication lasts 4-6 hours, therefore non-prescription medication can be administered at home prior to the start of the school day and it will last the duration of the school day.

**Only non-prescription travel sickness medication and antihistamine (Piriton) can be administered in school. Antihistamine can only be administered where a GP/Consultant has prescribed antihistamine for the treatment of a mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes.)** The school can administer 1 standard dose of antihistamine (appropriate to age and weight of the pupil) and it is very important that symptoms are monitored for signs of further

allergic reaction. During this time pupils must never be left alone and should be observed at all times. *If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms then an adrenaline auto injector should be administered without delay and an ambulance called.*

### **Mild Allergic Reaction**

Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the school population. Antihistamine will be administered for mild reactions as detailed above.

### **Severe Allergic Reaction**

An adrenaline auto injector should be used immediately in a severe reaction (see Pupils Individual Health Care Plan for details). If in doubt about the severity of an allergy reaction, administer the adrenaline auto injector and call an ambulance immediately.

**Hay fever** - Piriton for the treatment of hay fever, parents should administer antihistamine before the pupil starts school, it is not necessary for schools to administer antihistamine for the treatment of hay fever.

These 2 non-prescription medications will be administered by staff providing they are supplied in the original packaging and accompanied by a 'Parental Agreement for School to Administer Medicine' form available from School Office and on the school's website. Medication must be suitable for the pupil's age, supplied by the parent (not the school) and in its original packaging, with manufacturer's instructions. Staff will check that the medicine has been administered without adverse effect to the child in the past and parents must certify this is the case - a note to this effect should be recorded on the consent form. The use of antihistamine will be detailed on the pupils Individual Health Care Plan. The medication will be stored and administration recorded as for prescription medicines. The school will inform the parent / guardian the time and dose of the non-prescription medication that has been administered.

### **Controlled Drugs**

The school does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves. Controlled drugs will be stored securely in a non-portable container and only named staff will have access. Controlled drugs for emergency use must also be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug held in school.

### **Pupils with Long-term or Complex Medical Needs**

Parents or carers should provide the head teacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents, head teacher, school nurse and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. For pupils with significant needs, arrangements will be documented in an Individual Healthcare Plan (IHP) or Educational Health and Care plan (EHC). These plans will be reviewed by the school annually or following a significant change in a pupil's medical condition.

### **Admissions**

When the school is notified of the admission of a pupil with medical needs the Lead for Managing Medicines will complete an assessment of the support required. This might include the development of an IHP and additional staff training. The school will endeavour to put arrangements in place to support that pupil as quickly as possible. However the school may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place.

### **Pupils taking their own medication**

For certain **long-term** medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the pupil's individual health care plan and parents should complete the relevant section of

'Parental Agreement for School to Administer Medicine' form available from School Office and on the school's website.

### **Staff Training**

The school will ensure that the staff who administer medicine to control specific chronic conditions are trained to administer those specific medicines, for example, Anaphylaxis (adrenaline auto injector), Diabetes (insulin), Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

The school will also ensure that other staff who may occasionally need to administer a prescribed medicine supplied by the parent with a valid consent form and, or an IHP, are trained in the procedure adopted by the school by the person who has completed the Managing Medicines course. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

The school will ensure that a record is made in the 'Record of Medicine Administered to an individual child' book, of every dose of medicine administered in school. This record is completed by the person that administers the medicine.

### **Storage and Access to Medicines**

All medicines are kept in the First Aid area in a cupboard except for emergency medication (inhalers, adrenaline auto injector, etc.) these are kept in a First Aid Trolley in the First Aid area. Medicines are always stored in the original pharmacist's container. Pupils are told who holds the key and staff will be fully briefed on the procedures for obtaining the medication in an emergency.

Emergency medicines such as inhalers and adrenaline auto injector are held in a clearly identified container in the First Aid area. Parents will be asked to supply a second adrenaline auto injector for each child and they

will be kept in the school First Aid area cupboard. Staff must ensure that emergency medication is readily available at all times i.e. during outside PE lessons, educational visits and in the event of an unforeseen emergency like a fire.

Medicines that require refrigeration are kept in the staffroom fridge, clearly labelled in an airtight container.

### **Record Keeping**

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. A parent or guardian will be informed if their child has been unwell during the school day. Records will be kept in the 'Record of Medicine Administered to an individual child' book kept in the First Aid area cupboard and in the pupil's own record file.

### **Emergency Procedures**

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a pupil who has an IHP, the emergency procedures detailed on the plan are followed, and a copy of the IHP is given to the ambulance crew. IHP's will also be given to those companies and staff providing transportation of pupils to and from school, in order that the IHP can be passed to the ambulance crew in the event of an emergency.

### **Medicines on Educational Visits**

Staff will administer **prescription medicines** to pupils when required during educational visits. Parents should ensure they complete a 'Parental Agreement for School to Administer Medicine' form and to supply a sufficient supply of medication in its pharmacist's container. Non-prescription medicines (apart from travel sickness medication and antihistamine for mild allergic reaction) cannot be administered by staff and pupils must not carry them for self-administration.

Pupils with medical needs shall be included in educational visits as far as this is reasonably practicable. School staff will discuss any issues with

parents and/or health professionals in suitable time so that extra measures (if appropriate) can be put in place for the visit.

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

### **Medicines on Residential Visits**

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the care plan.

Occasionally it may be necessary to administer non-prescription medicines i.e. paracetamol, anti-histamine etc. to pupils suffering acute pain from things like migraine, period pain, toothache. Parents must give written consent prior to the residential visit using a 'Parental Agreement for School to Administer Medicine' form before non-prescription medication can be given. Staff will check that the medicine has been administered without adverse effect to the child in the past and parents must certify this is the case - a note to this effect should be recorded on the consent form.

The medication will be stored and administration recorded as for prescription medicines. Pupils should not bring paracetamol (or other types of painkillers) on the residential visit for *self-administration*.

### **Travelling Abroad**

Children with medical needs will be encouraged to take part in visits. The responsible member of staff will carry out a specific and additional risk assessment and a care plan will be drawn up considering parental and medical advice. Best practice would be to translate these documents to the language of the country being visited. The international emergency number should be on the care plan (112 is the EU number). European Health Insurance Cards (EHIC) should be applied for by parents and supplied to the school prior to travel for all pupils that travel abroad.

### **Complaints**

Issues arising from the medical treatment of a pupil whilst in school should in the first instance be directed to the Head teacher. If the issue cannot easily be resolved the Head teacher will inform the governing body who will seek resolution.