



Co-op Academy Oakwood

Medicines in School Policy

These guidelines are taken from Education Leeds Policy PG505, which forms part of the Education Leeds Health and Safety File. To be read in reference to the DFE documentation 'Supporting pupils at school with medical conditions' (2015) and also the school policy for supporting pupils with medical conditions.

Aims of this policy:

- To outline the roles and responsibilities for the administration of prescription medicines.
- To explain our procedures for managing prescription medicines which may need to be taken during the school day.
- To explain our procedures for managing prescription medicines on school trips.

Legal advice states that it is a matter for the Headteacher's discretion whether or not to administer medicines to pupils. We are a caring staff and recognise that from time to time pupils do have additional medical needs. We also acknowledge that pupils may need to take long term medication during the school day. Some children with medical needs are protected from discrimination under the Equality Act 2010.

Under the DFE guidance 'Supporting pupils at school with medical conditions' (2015) school procedures for managing medicines on school premises will reflect the following details:

- medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- no child under 16 should be given prescription or non-prescription medicines without their parent's written consent – except in an emergency
- a child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed
- where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- schools should only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. 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
- all medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips
- when no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharp boxes should always be used for the disposal of needles and other sharps
- a child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held



- school staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school.

Definitions:

Short Term Medication is medication which is needed to allow the pupil to return to the school for a few days or whose administration is for two weeks or less. An example might be completing a short course of antibiotics.

Emergency Short Term Medication is medication which parents may approve of for administration as part of a school trip. Examples might be for medication for headaches, insect bites etc.

Long Term Medication is medication required to manage a long term medical need, i.e. asthma, epilepsy etc., where the medication will be required for extended periods. Children requiring long term support will usually have a Health Care Plan.

1. PARENT'S SECTION

What happens if you consider your child is well enough to attend school, but needs medication?

Children on medication, if necessary, should be kept at home until the course of treatment is complete. However, the school realises that there are circumstances when children attending school need to be given medicine during the school day.

We are mindful of hazards involved in the storage and administration of medicines and tablets during the school day at the request of parents. Whenever possible, parents should accept the administering of medicines as their own responsibility.

Parents should be aware that:

- a) Medicines which need refrigeration can now be kept in the medicinal fridge.
- b) School staff may agree to give medicine but cannot be requested to do so.

There may well be occasions when, for whatever reason, the request from parents for staff to administer medicine cannot be met.

For reasons of health and safety as few medicines as possible should be brought to school. **Only those prescribed by a doctor will be given at school and after the parent has completed a consent form** (which is available from the school office). **All medicines should be in the original packaging and not dispensed into another bottle.**

Medicines should be clearly labelled with the child's name, class, date and directions for giving the medicine.

We would ask that medicines be kept at home wherever possible. For instance, where it is to be taken "three times a day" it is possible for a child to have a dose immediately before school, another after arriving home from school and a last one at bedtime.

Where medicine needs to be taken more often or at a specific time of the day, it would be preferable for a parent to come into school to administer it. Otherwise, staff may be prepared to give it, providing the above procedures are followed.



Children are not allowed to administer medicines themselves unless supervised by one of the delegated First Aiders. This does not apply to inhalers which are to be kept with the children in class to be taken as required, supported by an adult if necessary. An adult must be aware that a child has taken their inhaler. Under no circumstances should parents include medicines with packed lunches. With the exception of inhalers, children must hand **all** medicines to a member of staff on arrival at school.

Disposal

It is the responsibility of the parent to dispose of any medication that is finished with or is out of date. If the parent does not collect the medication, school will dispose of them using the local disposal facilities.

Record Keeping

Parents should tell the school about the medicine that their child needs to take and provide details of any changes to the prescription or the support required. Parents will complete a "Parental agreement form" for school to administer medicine. Staff will complete and sign the record book each time they give medicine to a child.

Inhalers

Many children in school are asthmatic and need inhalers. Children who use them need a named inhaler for school (Doctors will prescribe these). Again, inhalers can only be kept in school when parents have filled in the appropriate form from the school office. It is the parent's responsibilities to regularly check the condition of inhalers and make sure they are in date ensuring inhalers are replaced when necessary. Inhalers must be taken on all school visits/trips. Inhalers can be taken as required by the child supported by an adult if necessary an adult must be aware that a child has taken their inhaler.

Epi Pens

Epi Pens will be administered in school if required by staff that have volunteered and have received training. Parents must complete the appropriate form at the office and a care plan must be in place. We would encourage any parent whose child may need an Epi Pen to have two in school in case one does not work. They must be stored carefully following the recommendations as they can be easily damaged.

Children with Long Term or Complex Medical Needs

It is important that school has sufficient information about the medical condition of any child with long term or complex medical needs. These may be severe allergies or chronic conditions. The school will develop a written health care plan for such children, involving parents and relevant health professionals. At times school will develop an Individual Health Care Plan before a formal diagnosis has been made to ensure that the child is appropriately cared for in school.

Trips and Outings

School will make reasonable adjustments to enable children with medical needs to participate fully and safely on visits. Planning arrangements will include necessary steps to include children with medical needs and risk assessments for such children. It may be that additional supervision is needed for a particular child. Arrangements for taking any necessary medicine will need to be considered. Party leaders supervising visits should always be aware of any medical needs and relevant emergency procedures. A copy of any health care plans should be taken on visits in the event of the information being needed in an emergency.



If staff are concerned about whether they can provide for a child's safety, or the safety of other children on a visit, they should seek parental views and medical advice from the school health service or the child's GP. As previously stated, Asthma inhalers must be taken on trips with children.

Risk Assessment and Management Procedures

All medicines may be harmful to anyone for whom they are not appropriate. Where the school agrees to administer any medicines the risks to the health of all others need to be properly controlled and managed. This duty is set out in the Control of Substances Hazardous to Health regulations 2002 (COSHH). Large volumes of medicines will not be stored. Staff should only store, supervise and administer medicine that has been prescribed for an individual child. Medicines should be stored in accordance with the product instructions and in the original container in which dispensed. Staff should ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration. Where a child needs two or more prescribed medicines each should be in a separate container. Non-emergency medicines will be kept in a secure place not accessible to children. Emergency medicines, such as inhalers, should be readily available to children and not locked away. Medicines needing to be kept in a refrigerator will be kept in a cool bag in the main school office in the medical cupboard where children have no access.

Parents are responsible for collecting medicines disposing of them when they are no longer needed.

Parents/carers of children with identified medical conditions will be informed of any infectious diseases in school which may affect their child's health. It may be necessary for the child to stay off school for a period of time. In such cases school will provide work for the child to ensure continuity of their education.

Supply teachers and new members of staff will be informed of this policy during their induction.

Refusal

If a child refuses their medication, parent will be contacted immediately. We cannot force a child to take their medication.

2. SCHOOL STAFF SECTION

Administration of Medicine in School

The school's Policy on administering medicines, in line with Education Leeds Policy Guidelines (PG 505) is that no member of staff has any contractual obligation to give medicine, supervise a child taking medicine or assist in the treatment of a child requiring medicine.

We have identified members of staff in school who have agreed to administer medication.

Treatment procedures, such as giving rectal valium, suppositories, or intermittent catheterisation, must only be carried out by staff that have been formally trained and assessed as competent.

1. Where a child has an ongoing medical condition, the parents and child (if appropriate) will be asked to help complete a "Health Care Plan" with the SENDCo. A copy will be kept in the Medical File.
2. When a child needs medication, but is considered well enough to attend school, the parent must fill in a "**Parental Agreement for School to Administer Medicine**". The form will stay within the Medical File and



medicine will be stored in the Main Office. Details of medicines given will be listed in the "**Record Of Medicines Administered To All Children**" which can be found in the Medical file.

3. Asthma Inhalers

Advice suggests that children should keep inhalers with them whenever possible. Children will have their inhalers in the classroom under the supervision of the adults.

4. Epi Pens

Advice states that where possible two pens should be in school in case the first does not work. It also states they must be carefully stored, close to where the child is. In extreme cases the pen may need to be with the child at all times and this would be arranged and identified on a care plan.

5. Emergency Planning

The Medical File will be kept in the office, near the Emergency Contact Forms File. In the file there is an emergency planning sheet which will act as a prompt if staff have to call for an ambulance.

Delegated First Aiders September 18

Christine Cole and Tracey Hosty have both received full 3 day training.
See First Aid training log in Office/CPD for additionally trained staff.