



# Administration of Medicines Policy

# Huxley CE Primary School

## ADMINISTRATION OF MEDICINES POLICY

### Introduction

Children and staff with medical needs have the same rights of admission to our school as other children and the same right to work in our school as other staff. Most children and staff will at some time have short-term medical needs, while other staff/children may have longer term medical needs and may require medicines on a long-term basis to keep them well. Other staff/children may require medicines in particular circumstances, such as staff/children with severe allergies.

### Aims of this policy

- to explain our procedures for managing prescription medicines which may need to be taken during the school day by children or staff
- to explain our procedures for managing prescription medicines on school trips/residential
- to outline the roles and responsibilities for the administration of prescription medicines.

### Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

### PRESCRIBED MEDICINES

Medicines should only be taken to school when essential; that is, where it would be detrimental to a member of staff/child's health if the medicine were not administered during the school day. The Head teacher, first aiders, teachers, teaching assistants and admin staff at Huxley CE Primary School will only administer medicines prescribed by a doctor, and liquid paracetamol, if consent has been given. Forms are available on the school website or from the office. Medicines will only be accepted in the original container as dispensed by a pharmacist and should include the doctor's instructions for administration. It is helpful if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. For example, medicines that need to be taken three times a day could be taken in the morning, after school hours, and at bedtime. If a parent wishes to adapt the timing of medicine administration, written confirmation of this must accompany the medication.

Staff should be responsible for administering their own medicines but **MUST** inform the Headteacher if they are bringing medication onto school premises so secure storage can be arranged.

### Exceptions Prescribed medicine will not be given to children:

1. Where the timing of the dose is vital and where mistakes could lead to serious consequences.
2. Where medical or technical expertise is required.
3. Where intimate contact would be necessary.

## **CHILDREN/STAFF WITH ASTHMA**

Children and staff who have inhalers should have them available where necessary. Inhalers should be kept in a safe but accessible place. Depending on the needs of the individual, inhalers should be taken to all physical activities. Inhalers must be labelled and include guidelines on administration. It is the responsibility of parents to regularly check the condition of children's inhalers and for staff to check their own personal inhalers to ensure that they are working and have not been completely discharged.

*An emergency inhaler is kept in the school office and can be used as required if a child or adult does not have their own prescribed inhaler to hand.*

## **NON-PRESCRIPTION MEDICINES**

We are unable to administer medicines that have not been prescribed by a doctor. We are able to give children liquid paracetamol with the consent of parents which will be requested on the annual consent form in the autumn term.

Staff may take paracetamol/ibuprofen if required during the school day, such painkillers should be stored in the lockable cupboard in the staff room. If stronger painkillers are required staff should also inform the Headteacher, or Deputy in the absence of the Headteacher.

## **STORAGE OF MEDICINES**

All medicines should be delivered to the school office or class teacher by the parent or carer. In no circumstances should medicines be left in a child's possession. All medicines should be stored in accordance with product instructions (medicines that need to be refrigerated will be kept in a lockable box in the staff room fridge).

Medicines will be kept in the lockable cupboard in the school office and should not be kept in classrooms, with the exception of inhalers. All medicines must be stored in the supplied container and be clearly labelled with the name and dose of the medicine and the frequency of administration. All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and staff and kept in an agreed place in the staff room. Children may carry their own inhalers, when appropriate.

## **DISPOSAL OF MEDICINES**

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. They should collect medicines at the end of the agreed administration time period.

## **TRIPS AND OUTINGS**

Children/staff with medical needs are given the same opportunities as other children. Staff may need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This may include carrying out a risk assessment for such children. The school visit co-coordinator will be responsible for tabulating medical information for each child and one member of staff will be nominated as having responsibility for the administration of all medication. Roles and responsibilities of parents/carers as outlined below will apply.

## **ROLES AND RESPONSIBILITIES**

### **Parent/Carer**

- Should give sufficient information about their child's medical needs if treatment or special care is required.
- Must deliver all medicines to the school office in person.
- Must complete and sign the parental agreement form.
- Must keep staff informed of changes to prescribed medicines.
- Keep medicines in date – particularly emergency medication, such as adrenalin pens.

### **Headteacher**

- To ensure that the school's policy on the administration of medicines is implemented.
- There are members of staff within the school willing to volunteer to administer medication to specific pupils if required.
- Ensure that staff receive support and appropriate training where necessary.
- To share information, as appropriate, about a child's medical needs.
- Ensure that parents are aware of the school's policy on the administration of medicines.
- Ensure that medicines are stored correctly.

### **Staff**

- On receipt of medicines, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber should be checked and the medicines should be taken to the office.
- Ensure that the parent/carer completes a consent form for the administration of medicines following the prescriber's instruction.
- Ensure that medicines are returned to parents for safe disposal.
- Ensure the Headteacher is informed when they bring any medication onto the school site.
- Ensure all personal medication is kept in a secure place where children will not be put at risk.

## **REFUSAL OF MEDICINES**

If a child refuses to take medicines, staff should not force them to do so, but should note this in the records and inform parents immediately or as soon as is reasonably possible.

## **RECORD KEEPING**

Medicines should be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. Staff should check that written details include:

- name of the child
- name of the medicine
- dose
- method of administration
- time and frequency of administration
- any side effects
- expiry date

A parental agreement form must be completed and signed by the parent, before medicines can be administered.

### **CHILDREN/STAFF WITH LONG TERM MEDICAL NEEDS**

It is important that the school has sufficient information about the medical condition of any child or member of staff with long term medical needs. A health care plan will be written for children with long term medical needs, involving the parents and relevant health professionals. A referral to Occupational Health will be made for a member of staff for advice and guidance and a health care plan will be written.

### **CONFIDENTIALITY**

The Headteacher and staff should always treat medical information confidentially. The Headteacher should agree with the child/parent about who should have access to records and other information about a child.

### **STAFF TRAINING**

Training opportunities are identified for staff with responsibilities for administering medicines.

**Written by Cathy Davies  
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**Ratified by Governors  
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