

RYHALL CE ACADEMY



part of a Multi Academy Trust
Peterborough Diocese Education Trust



POLICY STATEMENT ADMINISTRATION OF MEDICATION IN SCHOOL

Formulation date:	February 2016
Responsibility:	Headteacher
Reviewed:	December 2020
Next Review Date:	December 2021

Associated Documentation:

- [Guidance on the use of emergency inhalers in schools, Dept of Health, March 2015](#)
- [Supporting pupils at school with medical conditions, Gov.uk, updated 2017](#)
- Supporting Pupils with Medical Conditions Policy, November 2020 (Trust Policy)

Overview

To ensure that pupils with medical needs receive proper care and support at school. The Headteacher will accept responsibility in principle for those members of staff who have volunteered to give and supervise prescribed medicine during the school day.

1. Medicines in School: General

- a. Medicines will only be accepted in school if it has been prescribed by a doctor and the Headteacher will ensure the school's Health Team is informed of any pupil who has been prescribed a controlled medication e.g methylphenidate (Ritalin, Equasym, Concerta). Controlled drugs are subject to the prescription requirements of Drug Regulations. The prescribing doctor is responsible for informing the patient or family of the patient when a drug belongs to this group.
- b. Medication will not be accepted anywhere in school without complete written and signed instructions from a parent using the school form 'Request for School to Administer Prescribed Medication' (see procedures for administration – section 2). Each item of medication must be delivered in its original container/blister pack and handed directly to the Headteacher or School Office staff.
- c. All medication to be administered in school will be kept in a designated, clearly identified cupboard or refrigerator, except inhalers/adrenaline auto-injections which will be held by the class teacher.
- d. It is the responsibility of parents to notify the school if there is a change in medication, a change in dosage requirements, or the discontinuation of the pupil's need for medication.
- e. Staff who volunteer to assist in the administration of medication will receive all necessary training where appropriate through arrangements made with the relevant Service Health Provider.
- f. Every effort will be made to continue administration of medication to a pupil whilst on school trips away from the school premises, even if additional arrangements might be required. Separate formally agreed arrangements are acceptable on residential educational visits however there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed.

2. Procedures for the Administration of Prescribed Medication

- a. Parents will request the school to administer medication during school hours by completing the school's form 'Request for School to Administer Prescribed Medication'.
- b. Under **no circumstances** will verbal information from either parent or pupil be acted upon.
- c. Each item of medication must be clearly labelled by the pharmacist with the following information:
 - Pupil's name
 - Name of medication
 - Dosage
 - Frequency of dosage
 - Date(s) of dispensing
 - Storage requirements (if important)
 - Expiry date (if available)
 - Possible side effectsThe school will not accept items of medication which are in un-labelled containers.
- d. Medication will be stored in a secure location within the school (cabinet/fridge in the first-aid room). The medication will be administered according to the instructions given on the form 'Request for School to Administer Prescribed Medication'.
- e. A record will be kept of the details of when all medication has been administered in school whether this has been administered by a parent/carer or a member of the school staff. This includes paracetamol products e.g. Calpol (which will not be administered by school staff unless prescribed by a medical professional).
- f. A record of each dose will be kept on the form to avoid under/overdose.
- g. In complex cases, parents will be asked to visit the school during the day to administer the medicine in person.

Non-Prescription Medication

- h. **Under no circumstances** will any member of staff administer non-prescription medicine also known as general sale/over the counter medicine (except on a residential school trip (see section 7)).

- i. If parents wish for their child to receive non-prescription medicine during the school day, then they (or their nominated adult that will not be a member of school staff) will be invited to visit the school at an appropriate time to administer the medicine in person.
- j. If a child has regular symptoms that may benefit from the administration of analgesics, the school will contact the parents to ensure that a regular supply of prescribed medication is available in school and that the appropriate school form 'Request for School to Administer Prescribed Medication' is completed.

3. Refusal of Medication

If a child refuses to take medication staff should not force them to do so, but note this in the records and inform parents of the refusal. If the refusal leads to a medical emergency, the school will call the emergency services and inform the parents.

4. Injections

- a. With the exception of auto-injectors and agreed as part of a Health Care Plan, under **no circumstances** should any member of staff administer an injection.
- b. In an emergency and in accordance with the information given in both the DfE guidance and from the School's Health Care Team, an adrenaline injection such as an EpiPen/Jext can be administered for anaphylaxis by suitably trained staff.
- c. Where a child requires insulin during the course of the school day, it is the responsibility of the parent, in conjunction with an agreed Health Care Plan to determine how this support takes place.

5. Considerations by Parents for the Administration of Prescribed Medicines in School

- a. Whenever possible, parents are asked to encourage doctors to prescribe medication in 'dose frequencies' which enable the medicine to be taken outside school hours.
- b. Pharmacists should be asked to provide medication in separate containers (i.e. one for school use only) or it might be necessary for parents to request a separate prescription from the medical professional for medicines to be used in school.

6. Storage of Medicine

- a. At school, all medication, other than asthma inhalers/adrenaline auto-injectors, should be stored in a designated, clearly identifiable cabinet or refrigerator. This should be accessible to all staff members but inaccessible to pupils.
- b. Asthma inhalers and adrenaline auto-injectors i.e. EpiPen/Jext and any other medication needed in an emergency will be kept in the child's classroom (but out of reach of pupils). Staff will make themselves aware of children's medical needs via the folder stored in the first-aid room in the cabinet – and will be reminded to review this at the start of each term.
- c. Controlled drugs such as Ritalin must be kept in a locked non-portable container to which only named staff should have access.
- d. Medicines must be kept away from first aid boxes and a duplicate key to the medicine store must be available in case of emergencies.
- e. Medicines which need to be refrigerated will not be stored in the same refrigerator used for the storage of food. A separate medicines refrigerator is available in the first aid room.
- f. Medicines for external use should be kept separate from those for internal use.
- g. Medicine expiry dates should be regularly reviewed and all expired medicines returned to parents – a record of this is to be maintained by the school.
- h. Up to date contact telephone numbers for parents must be kept by the school so that they can be contacted at any time. Any changes in personal details must be passed on to the school immediately.
- i. Any surplus medicines will be handed back to parents at the end of a course of treatment.

7. Medicines on School Trips

- a. It may be necessary to administer medication to pupils whilst on school trips. In general, pupils with medical needs will not be excluded from school trips unless there are exceptional medical or health and safety reasons.
- b. Before taking children off the school premises, the member of staff in charge will check that any medication or equipment that needs to accompany pupils is safely packed.
- c. For the administration of prescribed medication on a day trip, staff will follow the parental instructions given on the school form 'Request for School to Administer Prescribed Medication'. These may include the administration of travel sickness medication.
- d. In more complex cases and where Health Care Plans are in operation, the Group Leader will have familiarised themselves with the details contained within their plan. Where appropriate, emergency details (especially for children with a Health Care Plan) must accompany each member of staff on each visit from school.

Residential Trips

- e. Pupils with medical needs will not be excluded from school trips unless there are exceptional medical or health and safety reasons.
- f. During the Parent's Information Evening, parents will be asked to complete all the necessary paperwork stating any medical needs for their child.
- g. It is recognised that on a residential trip there may be the need to administer a non-prescribed analgesic by the school staff members accompanying the trip.
- h. The administration of both prescribed and non-prescribed medication during the course of a residential trip will be controlled by the parents completing the school's form 'Request for School to Administer Prescribed Medication'.
- i. Non-prescribed medication will only be given to a child if the required form is complete and will directly follow a confirmation telephone call with the child's named parent/carer.
- j. Responsibility for the collection and administration of all medicines on a residential trip will be given to a named member of staff accompanying the trip. This includes asthma inhalers.
- k. A separate meeting will be held with families of pupils whose medical needs are subject to an individual Health Care Plan. Where necessary, external health care professionals will also be invited to this meeting to ensure that the child's medical needs can be met by the teaching staff during the residential trip.

8. Emergency Procedures

- a. In extreme emergencies i.e. an anaphylactic reaction or diabetic coma, certain medicines can be administered or supplied without the direction of a medical practitioner for the purpose of saving life.
- b. School staff are aware of the emergency procedures in administering such medication and where possible will be trained (and will have given their permission) to administer emergency medicine for the purpose of saving life.
- c. Emergency medicines will be kept in the child's classroom but out of reach of pupils. The location of emergency medicines in the classroom should be 'uniform' in every classroom and class teachers will ensure that support/casual staff are aware of the location.
- d. All staff will be aware of how to contact the emergency services and have access to information about the child's condition.

9. Individual Healthcare Plans

- a. Where a child's medical needs go beyond the normal practice of completing the school's form 'Request for School to Administer Prescribed Medication', the Headteacher will convene a meeting to agree a Health Care Plan with parents, the pupil and professionals from the school's Health Team.
- b. Responsibility for drawing up a Health Care Plan rests with the Headteacher.
- c. The Health Care Plan will be child specific and detail:
 - i. Procedures to be followed in an emergency
 - ii. Medication (full drug name and dosage instructions)
 - iii. Day to day care – food management and information about blood sugar levels etc
 - iv. Consent and Agreement by:
 - Parents/Carers

- The appropriate Health Care Professional
 - The Headteacher or nominated representative such as the SENDCO
 - The child (if appropriate)
- d. Following the completion of the Health Care Plan, the named Health Care Professional may be asked to raise awareness of the condition to the school staff.
- e. If associated training is required to support a child with specific medical needs, then the parents hold responsibility until such time as that training has been delivered in school.

10. Duty of Care

- a. There is a legal requirement to exercise reasonable care to avoid injury when administering medication.
- b. Staff who administer or oversee the administration of medication would be considered to be discharging their duty of care 'in loco parentis' i.e. the degree of care exercised as that undertaken by the average careful parent in the same circumstances.
- c. Providing the administration of medication is controlled, for instance by following the guidelines of this policy and the parental instructions in the school form 'Request for School to Administer Prescribed Medication', the risk of injury will be minimised and the member of staff administering medication may therefore be considered to have exercised reasonable care.

11. Training

- a. All staff likely to come into contact with a pupil who has a medical condition and who may require urgent medical attention will receive sufficient information and/or awareness training to enable them to recognise symptoms of the condition and take appropriate action in the event of an emergency.
- b. All staff will receive training on the use of adrenaline auto-injectors and awareness training relating to asthma and this will be refreshed on an annual basis (or sooner if required) by a suitably qualified medical professional. However, staff are not obliged to administer adrenaline auto-injectors. A school register is kept with the names of staff who have volunteered to administer emergency medication via an Epipen/Jext.

12. Safeguarding

Ryhall CE Academy is committed to safeguarding and promoting the welfare of all children and young people. We expect all staff, volunteers and parents to share this commitment. All safeguarding concerns should be reported immediately to the Designated Safeguarding Lead (DSL), Ms Walker (also Headteacher) or one of the Deputy Designated Safeguarding Leads (DDSLs – Mrs Jibb, Mrs Jesson) in her absence.