



## Medicines in School Procedures Policy

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## **ADMINISTRATION OF MEDICINES POLICY**

Administration of Medicines and Healthcare Needs in Schools

The administration of medicines by staff remains a *voluntary activity*.

### **GENERAL**

1. Medicines should only be taken to schools when essential – that is where it would be detrimental to a child's health if the medicine were not administered during the school day.

2. Only medicines that have been prescribed by a doctor, dentist and nurse prescriber or pharmacist prescriber should be administered. Medicines from any other source, e.g. over the counter medicines, will not be administered by staff. It will be necessary for parents/carers to administer this prior to the child's attendance at the school.

Medication will be kept in a locked medical cabinet in the medical room in lower school. In the cabinet is a Medication Log Book. This must be filled in and signed (each time medication is given). Also in the cabinet there is a Log Book for receiving medication. The medication must be 'signed in' and when necessary 'signed out' and witnessed by 2 qualified First Aiders. By adhering to this procedure all medicines can be accounted for at all times.

When medication initially comes into school it must be handed over to Mark Jarred in the office.

3. Medicines must always be provided in the original container as dispensed by the pharmacist and include the prescriber's instructions for administration. The school will not accept any medication that has been taken out of the original container.

4. Children who are acutely ill and who require a short course of medication e.g. antibiotics, will normally remain at home until the course is finished. If it is felt by a medical practitioner that the child is fit enough to return to school, the dosage can be adjusted so that none is required at lunchtime.

5. No Medicine will be administered unless clear written instructions to do so have been obtained from the parents or legal guardians and the school has indicated that it is able to do so. If for any reason the school is unable to administer the medication, you will be contacted.

6. All medicines must be clearly labelled with the child's name, mode of administration i.e. oral, the dosage, frequency and name of medication being given – this should be on the printed label from the prescriber.

The parents or legal guardians must take responsibility to update the school of any changes in the administration for routine or emergency medication and maintain an in-date supply of the medication.

7. Any unused or out of date medication will be handed back to the parents/carers of

the student for disposal.

8. Medicines will be administered by named members of school staff with specific responsibility for the task in order to prevent any errors occurring. These staff members will all be First Aiders.

9. If a student refuses to take medicines, staff will not force them to do so, a note will be made in the first aid book and the parents/carer informed on the same day. If the refusal to take medicines results in an emergency, the school emergency procedures will be followed, this is likely to be calling an ambulance to get the child to hospital.

### **SCHOOL TRANSPORT**

As soon as a child with medical difficulties enters the school or develops a new illness a Care Plan will be instigated by school. Parental permission will be sought in order to divulge necessary medical information to Drivers, Escorts and Transport Section at County Hall. Any medication brought in school by transport must be signed in and signed out by Mark Jarred and must not be left in bags or pockets.

### **RECORD KEEPING**

1. The school must keep written records of all medicines administered to students.
2. Incorrect Administration of Dosage – individual protocols/health plans will contain emergency actions in respect of this happening. In the event of an excess dose being accidentally administered or the incorrect procedure being carried out, the child concerned must be taken to hospital as a matter of urgency.

### **LONG TERM MEDICATION**

1. It is important to have sufficient information about the medical condition of any child with long term medical needs.
2. Schools need to know about any particular needs before a child is admitted, or when a child first develops a medical need. For students who attend hospital appointments on a regular basis, special arrangements may also be necessary. A healthcare plan should be in place for children with more severe and complex conditions.

### **RECTAL/BUCAL DIAZAPAM STESOLID AND OXYGEN**

Due to the invasion and nature of this medication, trained staff only will be allowed to administer Rectal/Bucal Diazepam. See the attached sheet for persons trained to use Rectal/Bucal Diazepam

Rectal/Bucal Diazepam is stored in medical cabinet in the Medical Room.

If the use of Rectal/Bucal Diazepam is required then an ambulance will be called for immediately. The attending First Aider will accompany the child to hospital. The child's care plan and pupil information sheet must be taken to hospital.

### **ASTHMA INHALERS**

Inhalers should be kept as near to the child as possible particularly during PE sessions.

### **ILLNESS DURING THE DAY**

Parents/Carers will be contacted should their child become unwell. The child should be collected as soon as possible. In some cases it may be impossible for the child to be collected – when the problem arises the child may be taken home by the first aider and another member of staff.

### **EMERGENCY TREATMENT / PROCEDURES**

1. As part of general risk management processes the school has an arrangement in place in dealing with emergency situations. Other students know what to do in the event of an emergency, such as telling a member of staff. All staff know how to call the emergency services and who is responsible for carrying out emergency procedures in the event of need. A member of staff should always accompany a student to hospital by ambulance and should stay for as long as is reasonably practicable. In the event of an emergency/accident which requires the child to be treated by health professionals (doctors/paramedics) or admitted to hospital, the latter are responsible for any decision on medical grounds when and if the parents are not available.

2. Staff should never take students to hospital in their own car. When emergency treatment is required, medical professionals or an ambulance should always be called immediately. On those occasions where an injury is not life threatening but staff consider that medical treatment is required, parents/carers should always be informed.

### **HEALTH CARE PLANS**

The main purpose of an individual Health Care Plan for a student with medical needs is to identify the level of support that is needed. Not all children who have medical needs will require an individual plan. Health Care Plans will be written up in conjunction with the School Nurses (assigned to Coppice school), parents/carer and where possible, the student. Where parent/carer expectations appear unreasonable, the Headteacher should seek advice from the School Nurse before the plan is finalised.

## **CONTACT NUMBERS**

All pupils information and home telephone numbers including parents work numbers, relatives/friends numbers as well as emergency numbers are kept in the office. Always return information to the correct file as soon as possible.

## **TRIPS**

1. The school will encourage and make reasonable adjustments to allow students with medical needs to participate in safely managed visits.
2. Staff supervising the excursions need to be aware of any medical conditions and the relevant emergency procedures. This information must be given to the school prior to participation in any school trip. Any medical condition must be highlighted by the parents/carer on the consent form.

Arrangements for taking any relevant medicines will also be taken into consideration. A named person will be identified to supervise the storage and administration of medication if required. A copy of individual health care plans, where available, will be taken on trips in the event of the information being needed in an emergency.

3. For residential trips, details of storage, record keeping and administration of medicines will be provided at the time. The group leader will be responsible for ensuring medication is administered appropriately.