

CHELLINGTON CHURCH OF ENGLAND FEDERATION



Happiness Through Wisdom

“Gold there is, and rubies in abundance, but lips that speak knowledge are a rare jewel.”

Proverbs 20:15

**St. Lawrence VA Primary School /
Christopher Reeves VA Primary School**

Administration of medicines and supporting pupils with medical conditions

May 2021

Review Date: May 2023

The purpose of this policy is to ensure that any medicines administered within school are done so in a safe and monitored environment. It has been written using guidance from the DFES notes Managing Medicines in Schools and Early Years Settings from August 2008 and Supporting pupils at school with medical conditions April 2014

Pupils with Medical Needs

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many this will be short-term; perhaps finishing a course of medicine. Other pupils have medical conditions that, if not properly managed, could limit their access to education, affect their quality of life and may be life-threatening.

Support for pupils with Medical Needs

Parents or guardians have the prime responsibility for their children's health and should provide the school with information about any medical condition. This should be done upon admission or when their child first develops a medical need.

There is no legal duty which requires school staff to administer medicine; this is a voluntary role.

The Executive Headteacher is responsible for assessing training needs on an annual basis and ensuring that:-

- Sufficient staff are suitably trained to ensure someone is always available in case of staff absence
- All relevant staff are made aware of children's conditions, including supply teachers
- Risk assessments are in place for school visits and activities both within and outside of the normal school day
- Individual healthcare plans are in place and monitored

Short Term Medical Needs

Medication should only be taken to school when absolutely essential. It is helpful if, where possible, medication can be prescribed in dose frequencies which enable it to be taken outside school hours. ***Parents should ask the prescribing doctor or dentist about this.***

However, the school recognises that sometimes children do need to take medicines in school time, usually if 4 or more doses are required in a 24 hour period. If this is the case, there has to be prior written agreement, on the request form, from parents for any medication to be given to a child. This written agreement must also include the dosage. Christopher Reeves Primary School and St Lawrence Primary School can only accept medicines that have been prescribed by a doctor, or nurse prescriber. Medicines should always be provided in the original container as dispensed by the pharmacist and include the prescriber's instructions for administration.

The class teacher or teaching assistant are the authorised volunteer personnel who can administer medicines (apart from inhalers and the medicines to treat Anaphylaxis and Diabetes). Any dose given is noted on the back of the request form and initialled by the staff member.

If in doubt about any procedure, staff should not administer the medicines but check with the Parents/Carers or a health professional before taking further action. If the staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the Parent/Carer, if appropriate, or with a health professional attached to the school.

Parents/Carers should make arrangements to collect the medicine at the end of the school day, week, term, upon a child ceasing to attend the school or if the medication is changed. Medicines will not be handed to a child to bring home unless alternative arrangements have been made with the Parent/Carers and school staff.

Non-Prescription Medication

The school is unable to administer any pain relief medicines such as Ibuprofen or Aspirin. The school will administer non prescribed drugs such as Calpol in special circumstances for example on a residential trip where the Parent/Carer has signed a consent form.

Long term Medical Needs

Integration and reintegration back into school after a long term medical condition should be properly supported so that children fully engage with learning and do not fall behind when they are unable to attend. Short term and frequent absences, including those for appointments connected with a pupil's medical condition, (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the SEN code of practice.

The school needs to know about any medical needs before a child starts school, or when a pupil develops a condition. The school will need to know:

- Details of the condition
- Special requirements
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the school can play

Self Management

It is good practice to allow pupils who can be trusted to do so to manage their own medication from an early age. With this aim in mind, and for reasons of immediacy, children with inhalers will be expected to administer the required dose themselves and record in the class medical book. At the teacher's discretion, KS2 children may also carry their inhaler or keep it in their drawer, with parental consent. Other inhalers should be kept in the classroom in a safe place known and accessible to the children. All inhalers must be named. Children are reminded not to share inhalers.

Refusing Medication

If pupils refuse to take medication, the school will not force them to do so and will inform parents immediately. If a refusal to take medicines results in an emergency then our emergency procedures will be followed.

Record Keeping

Parents are responsible for supplying information about medicines and for letting the school know of any changes to the prescription or the support needed. Parents/carers are responsible for ensuring any medication kept in school is contained in the original packaging, within the expiry date and to replace any medication with a replacement before

expiry. A record will be kept of the date and time any medication is administered and made available to parents (with inhalers, this will be kept in the child's pack in the classroom and parents/carers should check regularly whether replacement is required/child's usage). Parents should provide an Asthma Management Plan, available from the GP, for use in school.

School Trips

Pupils with medical needs are encouraged to participate in visits. Staff are made aware of any medical needs and arrangements for taking any necessary medication are put in place.

Sometimes an additional adult might accompany a particular pupil. There may also be the need to undertake a risk assessment for a particular child.

Sporting Activities

Our PE and extra-curricular sport is sufficiently flexible for all pupils to follow in ways appropriate to their own abilities. Some pupils may need to take precautionary measures before or during exercise and be allowed immediate access to their medication if necessary, inhalers for example. Teachers supervising sporting activities are made aware of relevant medical conditions.

Storing Medication

Any medication should be provided in the original container that is labelled with the name of the pupil, name and dose of the drug and frequency of administration and within expiry date. Where a pupil needs two or more prescribed medicines, each should be in a separate container. Non health care staff should not transfer medicines from their original containers.

Medicines are kept in the medicine cabinet or when necessary in the staffroom fridge, in a clearly labelled container with restricted access, apart from Inhalers which will be kept in the classroom or with the child.

Disposal of Medicines

The school does not dispose of medicines. Parents should collect medicines held at school and are responsible for the disposal of out-of-date medicines.

Hygiene Control

Staff are familiar with normal precautions for avoiding infection and should follow basic hygiene procedures. Staff have access to protective disposable gloves and take care when dealing with blood or other bodily fluids and disposing of dressings or equipment.

Emergency Procedures

Staff know how to call the emergency services. A pupil taken to hospital by ambulance will be accompanied by a member of staff in the absence of a parent.

Health Care Plans

Some children require an individual health care plan to identify the level of support that is needed at school. The principal First Aider is responsible for ensuring that Health Care Plans are drawn up if required and identify specific training needed by volunteer staff. Staff should not give medication without appropriate training.

Training is given on an individual child basis, by the local health authority (usually the school nurse) for administering epipens.

Agreeing to administer intimate or invasive treatment is entirely up to each individual member of staff. No pressure is put on staff to assist in treatment.

Two adults should be present for the administration of intimate or invasive treatment, unless there are exceptional circumstances.

This policy will be reviewed every 2 years, or sooner if circumstances change.

Signed:
Chair of Governors

Date:
Date of next review: May 2023