

St John & St James Church of England Primary School



SUPPORTING PUPILS WITH MEDICAL CONDITIONS AND THE ADMINISTRATION OF MEDICINES

Document Information			
Policy Number:	2	Created by:	P Cuncarr
Reviewed by:	P Cuncarr	Responsibility:	Headteacher
Last Review:	Sept 2019	Next Review:	Sept 2020
Review Cycle:	Yearly	Ratified by FGB:	October 2019
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National legislation and guidance

As of 1st September 2014, Section 100 of the Children and Families Act 2014 placed a statutory duty on school governing bodies to make arrangements for supporting pupils with medical conditions.¹

The Department of Education document, 'Supporting Pupils at School with Medical Conditions'² contains both statutory guidance and non-statutory advice and is intended to help school governing bodies meet their legal responsibilities and sets out the arrangements they will be expected to make, based on good practice. Governing bodies should ensure that all schools develop a policy for supporting pupils with medical conditions that is reviewed regularly and is readily accessible to parents and school staff.

The aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

This statutory guidance applies to:

Governing bodies of maintained schools (excluding maintained nursery schools), i.e. those that are funded and controlled by the local education authority

1. Introduction

- 1.1 The Governing Body and staff of **St John & St James CE** wish to ensure that pupils with medical conditions and/or short or long term medication needs can attend school regularly, can participate in a full and rich curriculum and receive appropriate care and support. The Headteacher accepts responsibility in principle for members of staff giving or supervising pupils taking prescribed medication or need support due to their medical conditions during the day, where those members of staff have volunteered to do so.
- 1.2 St John and St James have identified those responsible for supporting pupils with medical conditions and for the administration of medicines. Any decision to agree to administer medicines has to be a matter of individual choice and judgement. If in doubt about any procedure, staff will not administer the medicines but check with the parents or a health professional before taking further action.

2. Parent/Carers' Responsibility

- 2.1 **Please note that parents/carers should keep their children at home if acutely unwell or infectious.**
- 2.2 Parents are responsible for providing the Headteacher with comprehensive information regarding their child's condition and/or medication requirements, including additional advice from healthcare professionals as they receive it.
- 2.3 Parents are responsible for meeting with school designated staff annually to update and agree to information held in the Medical needs care plan.
- 2.4 Prescribed or over the counter medication will not be accepted in school without complete written and signed instructions from the parent.
- 2.5 Only reasonable quantities of medication should be supplied to the school for the administration by staff (for example, a maximum of four weeks supply at any one time).
- 2.6 It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
- 2.7 For staff administration - each item of medication must be delivered to an Authorised Person, in normal circumstances by the parent, **in a secure and labelled container as originally dispensed**. Each item of medication must be clearly labelled with the following information:

- Pupil's Name
- Name of medication
- Dosage
- Frequency of administration
- Date of dispensing
- Storage requirements (if important)
- Expiry date

3. Responsibility of School

- 3.1 The Headteacher will ensure that individual Healthcare plans are shared with all employees responsible for caring for/supervising a child with a care plan or medical need, including agency and supply teachers.
- 3.2 Staff will not give a prescription only medication or over the counter medication to a pupil unless there is specific prior written permission from the parents. (See Appendix i)
- 3.3 The school will not accept items of medication in unlabelled containers.

- 3.4 Medication will be kept in a secure place, out of the reach of pupils, other than Asthma inhalers. Unless otherwise indicated all medication to be administered in school will be kept in a locked medicine cabinet or fridge.
- 3.5 The school will keep records of administration of all medicines, which they will have available for parents.
- 3.6 If the pupil refuses to take their medication, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day.
- 3.7 In this situation the medication record should note the refusal and the parental contact made.
- 3.8 If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.
- 3.9 It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased.
- 3.10 The school will not make changes to dosages on verbal parental instructions.
- 3.11 Staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.
- 3.12 For each pupil with a long-term or complex medical condition, the Headteacher, will ensure that an Individual Healthcare Plan (IHCP) is drawn up, in conjunction with the pupil's parents and appropriate health professionals.
- 3.13 Some pupils with a medical condition will also require the administration of medicines. The Headteacher will therefore ensure that all appropriate consent forms are completed and appropriate review periods set.
- 3.14 The school will make every effort to liaise with a school nursing service to ensure that pupils with medical conditions are supported.
- 3.15 Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in school.
- 3.16 Staff who assist in the administration of medication will be able to receive appropriate training/guidance through arrangements made with the School Nursing Service.
- 3.17 The school will make every effort to continue the administration of medication whilst on trips away from the premises, even if additional arrangements might be required. If the school are unable to ensure administration of medicines during school visits, parents will be invited to accompany them.
- 3.18 NB. Some children with medical needs are protected from discrimination under the Disability Discrimination Act (DDA) 1995/Equality Act 2010. Responsible bodies for schools must not discriminate against pupils in relation to their access to education and associated services. This covers all aspects of school life including: school trips, school clubs, and activities.

Enfield CCG Guidance

Administration

Prescription only medicines (POMs) must not be administered unless they have been prescribed for a child by an 'Appropriate Practitioner', which includes a doctor, dentist, nurse or pharmacist. However, non-prescription (over the counter) medicines do not need an Appropriate Practitioner's prescription, signature or authorisation in order for a school to give them.

A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Over the counter medicines, e.g. for pain relief, should not be administered without first checking maximum dosages and when the previous dose was taken.

Medicine (both prescription and non-prescription) must only be administered to a child under 16 where written permission for that particular medicine has been obtained from the child's parent or carer.

Schools will only accept prescribed medicines if these are in-date, labelled, including with the correct child's name, provided in the original container as dispensed by a pharmacist (or dispensing doctor) and include the date of dispensing and 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.

Storage

Medicines should be stored securely within the school in lockable facilities, but children should know where their medicines are; medicines and devices such as asthma inhalers and adrenaline pens should be always readily available to children and not locked away.

A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so. It is permissible for the school to look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed. Controlled drugs should be kept in a locked non-portable container and only named staff should have access. A record should be kept for audit and safety purposes of any doses used and the amount of the controlled drug held.

For medicines that require refrigeration, an appropriate refrigerator with restricted access, should be identified and the medication should be placed in a closed, clearly labelled plastic container. This container should then be kept on a separate shelf in the fridge.

Where appropriate, pupils should be allowed to be in charge of their own medication, either keeping it securely on their person or in lockable facilities. It is advisable for a risk assessment to be completed in order to minimise the potential for harm to occur. This will depend on the child's age, maturity, parent/carer and school consent.

When no longer required, medicines should be returned to the parent or carer to arrange for safe disposal if necessary and parents/carers should routinely collect medicines held by the school at the end of each term. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal. Records should be kept for audit purposes.

Record keeping

Schools and nurseries must keep a written record each time a medicine is administered to a child 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 documented in school. If a child spits out or refuses the dose, the school should record this and contact the parent/carer to advise them as soon as possible.

Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents should be informed if their child has been unwell.

Salbutamol inhalers in schools

From 1st October 2014, legislation on POMs changed to allow schools to buy salbutamol inhalers, without a prescription, for use in emergencies.

This change applies to all primary and secondary schools in the UK. Schools are not required to hold an inhaler. At St John and St James, procedures are in place to prevent cross contamination should these need to be used.

The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication and where this is recorded in the child's individual healthcare plan. The inhaler can also be used if the pupil's prescribed inhaler is not available (for example, because it is broken, empty or out-of-date).

Adrenaline auto-injectors in schools

From 1st October 2017, legislation on POMs changed to allow schools to buy adrenaline auto-injector (AAI) devices, without a prescription, for use in emergencies.

Schools are not required to hold AAIs – this is a discretionary power enabling schools to do this if they wish. Schools that choose to keep spare AAIs should establish a protocol for their use.

Any AAI(s) held by a school should be considered a spare or back-up device and not a replacement for a pupil's own AAI(s). Current guidance from the MHRA is that anyone prescribed an AAI should carry two of the devices at all times.

The school's spare AAI should only be used on pupils known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for use of the spare AAI has been provided. The spare AAI can also be used if the pupil's prescribed AAI is not available, not working (for example, because it is broken, empty or out-of-date), or cannot be administered correctly without delay. At St John and St James, procedures are in place to prevent cross contamination should these need to be used.

Parental/carer consent to administer a prescribed medicine

- All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included on the pharmacy label.
- A separate form is required for **each medicine**.

Child's name	
Child's date of birth	
Class/form	
Name of medicine	
Strength of medicine	
How much (dose) to be given. For example: One tablet One 5ml spoonful	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry their own salbutamol asthma inhaler/Adrenaline auto injector pen for anaphylaxis [delete as appropriate].	Yes	
	No	
	Not applicable	
I give permission for my son/daughter to carry their own salbutamol asthma inhaler and use it themselves in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

I give permission for my son/daughter to carry and administer their own medication in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

Mobile number of parent/carer	
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Daytime landline for parent/carer	
Alternative emergency contact name	
Alternative emergency phone no.	
Name of child's GP practice	
Phone no. of child's GP practice	

- I give my permission for the headteacher /senior nursery staff member (or his/her nominee) to administer the prescribed medicine to my son/daughter during the time he/she is at school/nursery. I will inform the school/nursery immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school/nursery activities, as well as on the school/nursery premises.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school/nursery, if necessary.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carer name	
Parent/carer signature	
Date	

Parental/carer consent to administer an 'over-the-counter' (OTC) medicine

- All over the counter (OTC) medicines must be in the original container.
- A separate form is required for **each medicine**.

Child's name	
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Child's date of birth	
Class/form	
Name of medicine	
Strength of medicine	
How much (dose) to be given. For example: One tablet One 5ml spoonful	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry and administer their own medication in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

Mobile number of parent/carer	
Daytime landline for parent/carer	
Alternative emergency contact name	
Alternative emergency phone no.	
Name of child's GP practice	

Phone no. of child's GP practice	
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- I give my permission for the Headteacher/senior nursery staff member (or his/her nominee) to administer the OTC medicine to my son/daughter during the time he/she is at school/nursery. I will inform the school/nursery immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is no longer needed.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school/nursery activities, as well as on the school/nursery premises.
- I confirm that the dose and frequency requested is in line with the manufacturers' instructions on the medicine.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal. If the medicine is still required, it is my responsibility to obtain new stock for the school/nursery.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carer name	
Parent/carer signature	
Date	