

RICHMOND HILL PRIMARY ACADEMY



Administration of Medicines

Version 1

**Approved & Adopted by Board of Directors
on**

Signed..... (Chairperson)

Signed (Principal)

Richmond Hill Primary Academy

Policy document for: Administration of Medicines

Approved: July 2016

Review Date: October 2017

Introduction

Richmond Hill Primary Academy has developed a policy on managing medicines and has put in place effective management systems to support individual children with medical needs. We believe that positive response to a child's medical needs will not only benefit the child directly, but can also positively influence the attitude of their peers.

All members of staff have a duty to maintain professional standards of care and to ensure that our pupils are safe. In response to the Equality Act 2015 we make reasonable adjustments for disabled school users, including those with medical needs, and we plan strategically to improve access over time. In response to the requirement to support pupils at school with medical conditions we also provide individual healthcare plans and make reasonable adjustments to enable pupils with medical needs to participate fully in all areas of school life including educational visits and sporting activities

The purpose of this policy is to put into place effective management systems and arrangements to support those children with medical needs in our school and to provide clear guidance for staff and parents/carers on the administration of medicines so that all children with a medical requirements can be cared for whilst in school.

Although regular school attendance is expected, if a child is ill they should remain at home until well enough to cope with the demands of the learning environment. Some children however who have a long term illness/physical condition may require medication to be administered in school.

The Board of Directors and staff of Richmond Hill Primary Academy wish to ensure that pupils with medical needs receive the care and support in school that they need, subject to the guidelines outlined in this policy.

Aim:

- To provide an appropriate, safe policy in relation to the administration of medicine in school following national and local educational guidelines.
- In a partnership approach, to identify clearly the responsibilities of the school and parents/carers in respect of a child's medical need and the roles and responsibilities of staff who volunteer to administer medication in school.
- To ensure that members of staff know that there is no legal responsibility for non-medical staff to administer medication or to supervise medical procedures. The administering of medicines in Richmond Hill Primary Academy is entirely voluntary and not a contractual duty unless expressly stipulated within an individual's job description.
- To ensure that all staff know they must be adequately trained before undertaking this role.
- Ensure that we adhere to our accessibility duty

On 1 September 2014 a new duty came into force for governing bodies to make arrangements to support pupils at school with medical conditions. The statutory guidance in the document "Supporting pupils in school with medical conditions, DfE Sept 2014" 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. 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.

School staff may be asked to perform the task of giving medication to children but they may not, however, be directed to do so.

Staff Indemnity

The Board of Directors fully indemnifies all staff against claims for any alleged negligence, providing they are acting within their conditions of service and following Board of Directors guidelines.

The indemnity covers situations where an incorrect dose is administered or where any other mistake in the procedure is made.

Medicine in School:

Legally, schools are not compelled to administer medication to children or to supervise a child taking it because of the risks involved and possible legal consequences.

This is purely a voluntary role. Medicines should only be brought into school where it would be detrimental to a child's health if the medicine were not administered during the school day.

If possible all medicine should be taken at home, with the exception of doses prescribed four times a day by a doctor. The administration staff at this school have volunteered to administer medicines that meet this requirement and have been trained to do so.

Medical Conditions:

It is important that school is made aware of any medical conditions your child may have. Please record this on the pupil information sheet at the beginning of each school year and advise the school office of any in year changes.

The exception to this is the support of our children with more complex health needs (in receipt of an EHC plan) as part of our accessibility planning duties. In these cases we aim to assist the smooth integration of children into the life of the school or setting.

Only prescribed medicines should be brought into school. These should only be requested to be administered where it would be detrimental to a child's health if the medicine was not administered (e.g. prescribed four times a day) during the school day.

Managing medicines on school premises

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- No child should be given prescription or non-prescription medicines without their parent's written consent
- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed
- Richmond Hill Primary Academy will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include 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

- All medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens should be always readily available to children and not locked away (kept in the classrooms or on their person where age appropriate) This is particularly important to consider when on school trips
- In the case of chronic illness or disability, i.e. asthma, diabetes, syndromes such as ADHD etc. pupils may need to take prescribed drugs or medicines on a regular basis during school hours in order to lead a normal life within a mainstream school setting. Only those members of staff already named should administer the medication and a record kept. We aim to ensure that all pupils have equity of access to school setting and trips.

Parents have the prime responsibility for ensuring a child's health and for deciding whether they are fit to attend school. Parents should also provide all necessary information about their child's medical needs to the school.

This policy may be superseded by a child's EHC plan or Individual Care Plan, or may be used in conjunction with them.

Roles and Responsibilities – school staff

Teachers have no legal obligation to administer medicines to pupils nor supervise them while they take medicine, unless contracted to do so. Staff may volunteer to assist in the administration of medicines but must be given appropriate training and guidance.

Roles and Responsibilities: Parents/Carers

Medicines should normally be administered at home and only taken into school when absolutely necessary (where it would be detrimental to the child's health, or would greatly impact on a child's school attendance, if the medicine were not taken during the school day).

Medicines will therefore only be administered between 12 noon and 12:30 pm.

The Principal, in consultation with the Board of Directors, staff, parents/carers and health professional will decide how Richmond Hill Primary Academy can assist a child with medical needs. The Principal is responsible for:-

- Implementing the policy on a daily basis
- Ensuring that the procedures are understood and implemented
- Ensuring appropriate training is provided
- Making sure there is effective communication with parents/carers, staff, pupils and all relevant health professionals concerning pupils' health needs
- Determining if medication is to be administered in the Academy and by whom, following consultation with staff. Ensuring that all members of staff are aware of the Academy's emergency procedures in the event of medical needs.

At Richmond Hill Primary Academy we train specific named staff for the purpose of the administration of medicines:-

- Mrs J Found
- Mrs C Hepworth
- Mrs L Jones
- Miss S Gorman
- Miss Z Thomas

Process for the Administration of Medicines in School – short term medical needs

The school will only accept:

- Medicines prescribed by a medical practitioner
- Medicines that are in date
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- Medicines in their original container, as dispensed by a pharmacist
- Containers with labelling identifying the child by name and with original instructions for administration, dosage and storage.
- If a child refuses to take medicine, staff must not force them to do so, but should note this in the records along with the reasons for refusal and any action then taken by the staff members. Parents will be informed of the refusal as soon as possible on the same day. If a refusal to take medicines results in an emergency, the Academy's emergency procedures should be followed.

The school will **not** accept or administer:

- Medicines that are to be administered 3 times per day (unless the child is attending after school club and will not return home immediately after 3:30pm, or attending a residential visit)
- Anti-histamine e.g. Piriton
- Paracetamol e.g. Calpol or Aspirin
- Ibuprofen
- Parents are welcome to come into school to administer medicines themselves.
- On accepting medication, the parent must sign a form disclosing all details and giving permission for the medication to be administered by the members of staff named to administer medicines.
- The medicine must be kept in the medical cupboard (except where storage in a fridge is required) and only accessed by named adults, or with the permission of the Principal.
- When administering, the named adult must complete a record showing the date and time and details/dosage of the medication. This must be counter-signed by another adult.
- In the case of the child being allowed to administer their own medication, this must again be added to the record and counter-signed by another adult.
- Under no circumstances should a parent send a child to school with any medicines, e.g. throat sweets/tablets, without informing the school. These could cause a hazard to the child or to another child if found and swallowed.

Process for the Administration of Medicines in School – long term medical needs

Where a child has long-term medical needs, a care plan must be written with the assistance of the GP/school nurse and in the presence of the parent/guardian of the named child. This may also result in

an individual risk assessment also being required. The care plan must be followed and reviewed at least annually.

The overall management of medical treatment for children is the responsibility of the parent/carer and it is also their responsibility to provide the school with up to date information regarding their child's medical needs and to keep the school informed of any change.

The Principal must ensure that named staff are trained to administer or give the level of care required by the details of the care plan. As a school, we try to ensure that we have sufficient information about the medical condition of any child with long-term medical needs and will request meetings with parents and recognised medical practitioners regularly to provide the correct level of training.

Training should be specific to the individual child concerned.

There will also be regular/annual training for all staff on more generalised needs e.g. asthma awareness and epi-pen training, diabetes and epilepsy.

The school is well supported by the School Nurse who provides staff with advice and any relevant training on request.

Process for the Administration of Medicines during residential visits– all medical needs.

- For the purpose of residential visits, there will be a named person with responsibility for the administration of medicines and care of children as above.
- Parents will be asked to complete a form and may be required to meet with the named staff to ensure that staff are aware of all medical requirements.
- In the case of higher levels of care e.g. intimate care, the named member of staff will also meet with the school nurse, or other recognised medical advisor to ensure that they are trained in dealing with the level of care required.

Staff training in dealing with medical needs

- Staff will receive proper training and support where necessary. A record will be kept of training given
- Staff who have a child with medical needs in their class will be informed of the nature of the condition provided by the parent/carer and/or health professionals and when and where the child may need extra attention
- All staff will be made aware of the likelihood of an emergency arising and what action to take if one occurs
- Teachers' conditions of employment do not include giving or supervising a pupils taking medicines. Agreement to do so must be voluntary

Record Keeping

If a medicine is administered by staff, there must always be a witness present, the date and time must be recorded, signed by the administrator and the witness and the parent informed straightaway..

Any reason why a medication is not given must also be recorded. Staff must not force a child to accept medication but must record any refusal to do so and inform the parents as soon as possible.

When a child requires an individual Care Plan this is in collaboration with parents, staff and the relevant health professional i.e. School Nurse, Consultant, GP, and Specialist Nurse.

Confidentiality

Medical information should always be regarded as confidential by staff and personal data properly safeguarded.

- Records relating to the administration of medicines are health records and should be stored confidentially.
- Instructions should be shared on a “need to know” basis in order that a child’s well-being is safeguarded and any individual treatment plan is implemented.

First Aid Training

The school will ensure that there are always qualified first aiders in school

Emergency Situations

Staff must never take any child to hospital in a car, it is safer to call an ambulance. Health professionals are responsible for any decisions on medical treatment in the absence of a parent/carer.

In the absence of a parent/carer and at the discretion of the Principal, a member of staff if available, may accompany the child to hospital and stay until the parent/carer arrives.

Any medical information including contact details should be taken with the child or given to emergency staff.

Emergency Medication

Specific guidelines are in place for emergency medication within a child’s individual Care Plan. A copy of this Care Plan plus a photograph is stored in the folder in the medical room; parents also have a copy.

Monitoring and evaluation

The school will monitor and review the individual needs of pupils and administer medicines in order to meet the all-round needs of each child on an on-going basis. An annual report to governors of the administration of medicines throughout the school will be prepared and analysed by the Principal to monitor the efficiency of this policy and it will be evaluated in the light of its findings.