

Administration of Medicines Policy

Background

- This policy is drawn up in consultation with staff, with reference to guidelines from the DFE publication 'Supporting Pupils with Medical Needs" (2015)
- Parents have the prime responsibility for their child's health and should provide the School with information about their child's medical needs; including details on medicines their child has been prescribed. This would apply to long and short term illness and medication.
- There is no legal duty that requires School staff to administer medicines. Where this is done, it is on a voluntary basis. At Hatton Hill the Staff listed in Appendix A typically manages and administers medicines in accordance with this Policy.
- This Policy has been developed to ensure that children with medical needs receive proper care and support at School (including breakfast and after-school club). It is also intended to help support the School and Parents to ensure regular attendance.

Managing Medicines in School

- 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 under 16 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.
- where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

- schools should only accept medicines if these are in-date, labelled, provided in the original container and include instructions for administration, dosage and storage.
- all medicines should be stored safely. Children should know where their medicines are at all
 times and be able to access them immediately if they self-administer. Where relevant, they
 should know who holds the key to the storage facility. Medicines and devices such as asthma
 inhalers, blood glucose testing meters and adrenaline pens should be always readily
 available to children and not locked away. This is particularly important to consider when
 outside of school premises, e.g. on school trips

Administration of Medicines

- The School will only administer prescribed medicines provided in the original container as
 dispensed by a pharmacist and include the prescriber's instructions. In all cases it is
 necessary to check that written details include:
 - name of child
 - name of medicine
 - dose
 - method of administration
 - time/frequency of administration
 - any side effects
 - expiry date
- 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.
- In addition, parents are required to complete a "Permission to Dispense Form" (Appendix B) confirming details of the medicine provided and the authority of the School to administer the medicine to their child.
- Staff should check that any details provided by Parents in the "Permission to Dispense Form" (Appendix B) are consistent with the instructions on the container. In particular, staff should check:
 - the child's name
 - prescribed dose
 - expiry date
 - written instructions provided by the prescriber on the label or container (NB: adrenaline pens include manufacturer's instructions)
- If in doubt about any procedure Staff shall not administer the medicines but check with the Parents before taking further action. If Staff have any other concerns related to

administering medicine to a particular child, the issue should be discussed with the parent or carer, if appropriate, with an appropriate health professional.

- Staff shall complete and sign a record each time they give medicine to a child. Parents will be required to countersign this at the end of the day. (see Appendix B).
- At times, it may be necessary to administer pain relief to ensure a child can attend school
 for a maximum period of three days. Whilst a prescription label is not needed, all other
 requirements must be in place.

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 or unused medicines. If Parents do not
 collect medicines within a reasonable time frame then the School should return them to the
 dispensing pharmacist for disposal.
- Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained by parents on prescription from the child's GP or paediatrician. Collection and disposal of the boxes should be arranged with the Local Authority's environmental services.

Controlled Drugs

- The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act, these are known as 'controlled drugs'. Some may be prescribed as medicine for use by children, e.g. methylphenidate.
- Controlled Drugs may be administered in accordance with this Policy and strictly in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual children, 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 noted in School
- Controlled Drugs should be returned to the Parent when not required for safe disposal. If this is not possible then the School should return the Controlled Drugs to the dispensing pharmacist (as set out on the label).
- Controlled Drugs shall be kept in a locked, non-portable container and only named staff shall have access. A record will be kept for audit and safety purposes.
- Misuse of a Controlled Drug is a criminal offence. This would include passing it to another child for use.

Non-Prescription Medicines

- The School will not generally give non-prescribed medication to the children unless it forms part of a Individual Health Care Plan (IHCP).
- If a child regularly suffers from acute pain, such as migraine, parents are encouraged to discuss the matter with their GP. If necessary, they should supply and authorise appropriate pain killers for their child's use, with written instructions and completion of the "Permission to Dispense Form".
- On residential visits, the school will send a letter prior to the visit to ask permission from parents to administer children's pain killers, such as Calpol, should the need arise whilst the child is away from home.
- A child under 16 should never be given aspirin-containing medicine; or Nurofen without prescription

Asthma

The Human Medicines (Amendment) (No. 2) Regulations 2014 will allow schools to buy salbutamol inhalers, without a prescription, for use in emergencies.

Keeping an inhaler for emergency use will have many benefits. It could prevent an unnecessary and traumatic trip to hospital for a child, and potentially save their life. Parents are likely to have greater peace of mind about sending their child to school. Hatton Hill holds an emergency inhaler and disposable spacers.

The emergency salbutamol inhaler should only be used by children for whom written parental consent for use of the emergency inhaler has been given. They must also have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

The inhaler can be used if the pupil's prescribed inhaler is not available (for example, because it is broken, or empty). Parents will be informed by letter if the emergency inhaler is used.

Please refer to the school's Asthma Policy for further details.

Long Term Medical Needs

- It is important that the School has sufficient information about the medical condition of any child with long-term medical needs. If a child's medical needs are inadequately supported this may have a significant impact on a child's experiences and the way they function in or out of school or a setting.
- The School needs to know about any particular needs before a child is admitted, or when a child first develops a medical need. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary.

- For children with long term medical needs, the School will work with Parents and relevant health professionals to agree a written Individual Health Care Plan (IHCP). This can include:
 - details of a child's condition
 - special requirement e.g. dietary needs, pre-activity precautions
 - and any side effects of the medicines
 - what constitutes an emergency
 - what action to take in an emergency
 - what <u>not</u> to do in the event of an emergency
 - who to contact in an emergency
 - the role the staff can play and any training required.
- IHCPs will identify the level (if any) of support that is needed at the School. The plans may
 identify specific training needed by volunteer staff. Staff should not give medication or
 implement any other aspect of the IHCP without the identified training.
- Training is given on an individual child basis, by relevant health professionals (usually the school nurse) for the administration of Epipens. Specific training will be given to relevant members of staff.
- 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. Administration will follow the guidance of a IHCP.

Hygiene & Infection Control

 Staff are familiar with (and shall apply) 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.

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. 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. Other forms of medication, such as insulin and adrenalin pens, may require self-administration. School will liaise with the relevant health care professionals to formalise a plan.

Refusing Medicines

- If a child refuses to take medicine, Staff will not force them to do so, but will note this in the records and, where applicable, follow any agreed procedures as set out in the child's IHCP.
- Parents will be informed of the refusal on the same day. If a refusal to take medicines results in an emergency, the School's emergency procedures should be followed.

Storage of Medicines

- Medicines are kept in the locked medicine cabinet or when necessary in the staff fridge, in a clearly labelled air tight container. This fridge is restricted access. Controlled Drugs are kept in the locked cabinet.
- Large volumes of medicines shall not be stored and this will be monitored by the headteacher.
- Staff should only store, supervise and administer medicine that has been prescribed for an individual child.
- Medicines should be stored strictly in accordance with product instructions (paying
 particular note to temperature) and in the original container in which dispensed. Staff
 should ensure that the supplied container is clearly labelled with the name of the child, the
 name and dose of the medicine and the frequency of administration. The label provided by
 the pharmacist and attached to the original container would suffice for this purpose.
- Where a child needs two or more prescribed medicines, each should be in a separate container. Staff should never transfer medicines from their original containers.
- Children should know where their own medicines are stored and who holds the key.
- All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily
 available to children and should not be locked away. Where appropriate, children shall be
 permitted to carry their own inhalers. If this is not appropriate then they may be kept by the
 class teacher.

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.
- Generally staff should not take pupils to hospital in their own car. However, in an emergency it may be the best course of action. The member of staff should be accompanied by another adult and have public liability vehicle insurance.

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.
- Teachers should be aware of how a child's medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. School will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.
- School will consider what reasonable adjustments they might make to enable children with
 medical needs to participate fully and safely on visits. A risk assessment will be completed so
 that planning arrangements take account of any steps needed to ensure that pupils with
 medical conditions are included. This will require consultation with parents and pupils and
 advice from the relevant healthcare professional to ensure that pupils can participate safely.

Sporting Activities

The School's 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.

Policy Review

This Policy will be reviewed every two years or earlier if circumstances (e.g. change in law or guidance) require.

Appendix A: Authorised Staff

The following members of staff are, as at October 2020, authorised to administer medicines (excluding Controlled Drugs) in accordance with this Policy.

- Mrs A James;
- Mrs M Hickey;
- Mrs Privilege;

The following members of staff are, as at October 2020, authorised to administer Controlled Drugs in accordance with this Policy

- Mrs A James;
- Mrs M Hickey;
- Mrs Privilege

Any variations to the persons named in this Appendix, shall be recorded in writing and signed by the Headteacher and Chair of Governors. A variation may include a child with 1:1 support following an IHCP who has been specifically trained to support the needs of an individual child.

Childcare (Nursery; Breakfast and After School Club)

Within Childcare the child's key worker will administer non-controlled medicines, and in the case of absence the deputy.

Appendix B: Permission to Dispense Form Available from school office and website

Template B: parental agreement for setting to administer medicine Hatton Hill School will not give your child medicine unless you complete and sign this {qqqq, and the school or setting has a policy that the staff can administer medicine. Date for review to be initiated by Name of school/setting Name of child Date of birth Group/class/form Medical condition or illness Medicine Name/type of medicine (as described on the container) Expiry date Dosage and method Special precautions/other instructions Are there any side effects that the school/setting needs to know about? Self-administration -y/n Procedures to take in an emergency NB: Medicines must be in the original container as dispensed by the pharmacy **Contact Details** Name Daytime telephone no. Relationship to child Lunderstand that I must deliver the [agreed member of staff] medicine personally to

gnature(s)	 Date	