



All Saints' C.E (A) First School

Guidelines for Administration of Medicines in School

Success Indicators

The following indicators will demonstrate the level of compliance with this policy and its procedures:

- a) The school has effective local procedures in place to administer medicines.
- b) Staff who are required to administer medication have received suitable training;
- c) Administration of medication is effectively recorded and children who have specific medical needs have individual care plans.
- d) Health and Safety leader and senior leaders monitor medication arrangements to ensure local procedures are working effectively.
- e) No adverse incidents have occurred and when they do occur they are reported, suitably investigated and action taken to prevent reoccurrence.

Administration of medication is always best done by the parent of the child and parents are welcome to come in at the appropriate time to do so. However, we know this is not always possible.

Most pupils will at some time have a medical condition that may affect their participation in school activities.

There are other pupils who will have medical conditions that, if not properly managed could limit their access to education. Such pupils are regarded as having medical needs. Most children with medical needs are able to attend school regularly and we will ensure a care plan is put in place following consultation with parents and professional services.

School staff have no legal obligation to administer medicines to pupils unless they have been specifically contracted to do so. It is generally accepted, and stated in LA policies, that all staff are acting voluntarily. Staff may volunteer to assist in administering medicines to pupils but must be given training and guidance. Staff who provide support for pupils with medical needs or who volunteer to administer medication only do this with the support of the Headteacher and parents. However, the LGB has a legal duty to ensure arrangements are in place to support pupils with medical conditions.

It is the responsibility of the Headteacher to ensure that all staff are trained appropriately and should have read and understood the current medication policy and this guidance document.

The Headteacher must ensure that staff have: -

- been authorised to administer medication
- parental consent
- full knowledge of the Medication Policy and Guidance and any local arrangements or procedures.
- received training where this is required
- attended refresher training as required

All staff who give medicine to children must have read this document.

When a parent request that medicine be administered to their child at school the circumstances will be considered by the Headteacher and the decision will have regard to the best interests of the child and implications for the staff.

There are two main sets of circumstances in which requests may be made to the head teacher to deal with the keeping and handing out of medicines to pupils at school: -

- Cases of chronic illness or long-term complaints, such as asthma, diabetes, fibro-cystitis, hay fever, or severe allergic reactions.
- Cases where children recovering from short-term illness are well enough to return to school but are receiving a course of antibiotics, or basic prescribed medication.

Only prescribed medication or children's paracetamol based suspensions (e.g. Calpol) will be administered by staff.

We will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions without confirmation from the original prescriber.

If you need us to administer medication to your child please contact the Headteacher/School Office to agree the support to be provided by the school. Written permission must be given before medication can be administered.

Paracetamol Based Suspension

If a parent asks for a paracetamol based suspension to be administered during the day, parents must clearly state the time of the last dose on the administration of medicine form.

The school will inform parents by text of the time further doses are administered. It is the responsibility of the parent to ensure that the school has an up to date mobile number, and that the parent checks this information before further doses are administered at home.

Staff must never give a child under 16 aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Guidelines on Medicine Administration

If medicines are to be administered by staff in school we must bear in mind the county's guidelines on such matters which are:-

- The medicines must be kept safely and the containers clearly labelled with
 - Name of pupil
 - Date of dispensing
 - Dose and frequency
 - Cautionary advice/special storage instructions
 - Name of medicine
 - Expiry date
- There are written instructions
- A form of consent "Administration of Medicines/Treatment has been filled in and signed.
- The Parent/carer has brought in the medicine.
- The necessity for the child to take the medication during school hours should be established either with the parent or ideally with a doctor's note.
- Where possible the medicine should be self-administered under adult supervision.
- Office staff will record the administration of the medicine on the school medicine sheet.
- The medicine will be stored in the medicine cabinet or medicine fridge as appropriate.

Medicines will not be administered by staff if:

- They do not wish to do so. No member of staff can be asked to do this against their will, unless they have been specifically employed to do so.
- Some technical or medical knowledge or experience is required and training has not been given

The school may refuse to accept responsibility for keeping and handing out of medicine under the following circumstances: -

- Where medicines or tablets are dangerous.
- Where the timing and nature of the administration are of vital importance and where serious consequences could result if a dose is not taken.
- Where technical medical knowledge or expertise is required.
- Unless appropriate training has been received and named staff agree to administer the medicine, where intimate contact is necessary.

Minimising the need for medication in School hours

It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents should be encouraged to ask the prescriber about this.

It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime, and would not normally need to be administered in school unless, for example, the child was staying at Kids Club.

Early Years settings

There is a requirement in Early Years settings for children under 5 years of age or 5 before the 31st August for the setting to ensure any medication and or personal care needs are accommodated when required.

Where settings do not have a sufficient amount of staff to volunteer to undertake these tasks, the school or Early Years management must take relevant action to ensure the children's / pupil's needs are met.

General Principles

- A young person's privacy and dignity is paramount and medicines should always be administered in an area where this will not be compromised. This will usually be the school office, or space away from children if required, e.g. headteacher's office, Meeting Room, or empty classroom etc.
- In all circumstances the medication administered must be recorded.
- Under no circumstances must medicines prescribed be given to anybody except the person for whom it was prescribed.
- Medicines should be administered directly from the dispensed container.
- Medication must never be secondary dispensed for someone else to administer to the child at a later time or date.
- The school must ensure that staff are appropriately trained and receive refresher training at suitable intervals where this is required.
- In some cases training must be by a suitable provider (e.g. health practitioner such as a nurse) and recorded.
- The name (or initials) of the member of staff responsible for administering the dose of the medicines must be included on the medicines administration record.
- Medication must not be given to young persons covertly (e.g. hiding in food) without consultation with GP/Parents and the agreement documented.
- Crushing or dissolving medication can destroy the medication properties reducing its effectiveness. Crushing or dissolving of medication is not permitted unless a child or young person's health or wellbeing would be detrimentally affected. GP and parental approval must be sought and documented in the Care Plan and on a risk assessment to crush or dissolve medication.
- All records of requests for and administration of medicine must be in writing.
- All records of administration of medication to a young person must be retained in line with document retention schedules.
- Where temporary or relief staff are required to administer medication, the school must ensure they have received instruction/training and that they are assisted by a member of staff who is able to recognise each young person to whom medication is being dispensed.

"As Required" – PRN Medication

Instructions such as “when required” or “as necessary” are discouraged, but when they appear on prescribed medication, advice from Parents/Carers and GPs with a knowledge of the young person should be documented.

The protocol will identify any signs, symptoms and advice and will outline the necessity for administration of the medication when the young person is unable to do so. A signed record must be kept of all advice and decisions made using form HSF34.

PRN medication must be dispensed with a standard label with the “as required” medication details. This alerts the person administering the medication that the preparation is PRN (pro re nata or “as required”). The decision on whether the PRN medication is needed must be based on the individual’s PRN protocol.

When a PRN medication is administered a record of the administration must be made using the Medication Administration Record (MARS) HSF 55.

Consent Arrangements

No medication should be given to a young person without written consent obtained from the person with parental responsibility for the child. This may take the form of a :

- Parental Consent Form; or;
- Included as part of an individual healthcare plan regime.

In the event of life threatening consent for administration may not be necessary, but accurate documentation must be completed. A young person’s parents/carer should be informed if they have required any form of medication in an emergency whilst they are in school.

First Aid

Within school there are staff that will regularly undergo training to update their qualifications regarding First Aid.

Asthma

Children with asthma need to have immediate access to their reliever inhalers when they need them. Children who are able to use their inhalers themselves should be allowed to carry them with them. If the child is too young or immature to take personal responsibility for their inhaler, staff should make sure that it is stored in a safe but readily accessible place, and clearly marked with the child’s name. Inhalers should always be available during physical education, sports activities and educational visits.

Emergency Inhalers

Emergency salbutamol inhalers should only be used by children:

- who have been diagnosed with asthma and prescribed a reliever inhaler;
- OR who have been prescribed a reliever inhaler

AND where written parental consent has been given for the use of the emergency inhaler. This information should be recorded in the child's individual healthcare plan.

Incident Reporting

Procedures must be in place for the reporting of adverse reactions or errors in administration of medication.

This procedure must cover:-

- a. The facts of the incident,
- b. Persons involved,
- c. Reason for the incident,
- d. Details of any ill health or injuries sustained (if this is the case an accident/incident report form must be completed and forwarded to the Directorate Health and Safety Team),
- e. Witness Statement.
- f. Details of persons informed (Parents/Carers, Pharmacist, GP, NHS Direct, Governing bodies),
- g. Corrective and Remedial action taken.
- h. Outcome of Investigation by senior manager.

Parents are asked annually to inform the school of any changes to their child's medical status, this is particularly relevant to off-site residential trips.

If children fall ill during the school day parents will naturally be expected to make arrangements to take the child home. It is therefore vitally important that the school is kept advised of up to date contact numbers.

Reviewed: Spring Term 2013

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Reviewed: Autumn Term 2017

Reviewed: Spring Term 2019



HSF 34 Prescribed PRN Medication

PRN medication must only be administered in strict accordance with the following protocol.

Pupil		Date of Birth	
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GP name and number	
Prescribed PRN Medication	
Dosage	
Conditions under which the use of PRN medication is recommended	
Any known triggers	
Any warning signs	
Time expected for the medication to take effect	
Action required if effect does not occur as expected	

Parent /Carer	
Name	
Signature	

On each occasion PRN Medication is administered, this should be clearly recorded on the children's medication sheet.



CONFIRMATION OF MEDICATION Administration

Please Read Carefully: Medication is administered by school staff voluntarily, on the understanding that no absolute guarantee can be given that doses and/or times can be adhered to as a result of the pressures of daily routine within a school. Should you wish to ensure your child gets the correct dose at the proper time you should come into school to administer your child's medication yourself.

Child:	Date of Birth	Telephone Number
GP Name	GP Telephone Number	
Details of any allergies or other special instructions		

Name of Medication	Strength of Dosage	Number/Amount of Medication & time to be given	Start Date	End Date

If the details above are correct, please sign and return,

Signed (Parent/Carer)

Relationship to child:

Important Note

Should there be any amendment to the following: -

1. Medication or dosage
2. Address or telephone number
3. Doctor or Doctor's telephone number

Please inform the school, in writing, immediately.



Medication Incident Report Form

Child	Date of Birth
Address	

Details of Incident	
Date of Incident –	Time of Incident-
Member of Staff Reporting Incident-	
Detail of Incident-	
Reason for Incident (Pharmacy Error, Wrong Medication Administered, Overdose, Missed Medication, etc) -	
Detail of any injuries/ill health effects-	
Detail of any Treatment Given-	
Admission to Hospital Yes/No If yes what was the outcome-	
Who has been informed of the incident (Carers, Pharmacist, GP, NHS Direct, CSCI) –	
Any Additional Information	
Statement Taken from relevant Parties – Detail whom and attach a copy.	
Corrective/Remedial Action Taken-	

This incident must be reported to the Headteacher immediately, and a copy of the report forwarded.

Signature Reporting Officer _____

Date _____