



St Joseph's Catholic Primary School  
Banbury

# **ADMINISTRATION OF MEDICATION POLICY**

## PRESCRIBED MEDICINES

- Medicines will only be taken in school when essential, i.e where it would be detrimental to a child's health if the medicine were not administered during the school day.
- The school will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Such medicines must always be provided in their original container as dispensed by a pharmacist and must include the pharmacist's instructions for administration.
- Prescribed medicines will be stored under lock and key in the medical room in the care of the appointed medical administrator.
- The school WILL NOT accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.
- Parents will be encouraged to ask prescribers to enable dose frequencies which can be accommodated outside the school day.
- The administration of prescribed medicines will be formally recorded to include details of date, time, dosage, the name of the student and the name of the person who administers the medicine.
- **In general**, named staff including the Headteacher, Deputy Headteacher and Office staff will administer prescribed medication, e.g. when the prescription is for a relatively short period of time.
- **In specific circumstances**, a TA or class teacher may be the named person to administer medication, e.g. when a medication is ongoing and part of a child's personal care plan.
- **In rare circumstances**, a **team** of staff will be trained to administer an epi-pen or similar so that the medication can be given in an emergency.

## CONTROLLED DRUGS

Some medicines are controlled by the Misuse of Drugs Act ('controlled' drugs) and there may be occasions when such a drug is prescribed as medication for use by children.

- A child who has been prescribed a controlled drug may legally have it in their possession. If required, the school will look after a controlled drug if there is agreement that it will be administered to the child for whom it has been prescribed.
- Where storage is required, this will be in a locked, non-portable container to which only named staff have access.

- A controlled drug will be returned to the parent when it is no longer required and the parent will be responsible for its safe disposal.

Misuse of a controlled drug will be an offence and will be dealt with under the terms of the school's drugs policy.

### **NON-PRESCRIPTION MEDICINES**

- No students will be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.
- Non-prescription medication must be administered by a parent at a previously agreed time during the school hours.
- *Only in rare circumstances* would the Headteacher agree to delegate the administration of non-prescribed medication to a child; however this might occur if attendance is a cause for concern or if there are other safeguarding concerns.

### **LONG-TERM MEDICAL NEEDS**

- The school expects that parents/carers will provide sufficient information about the medical condition of any child with long term medical needs
- The school will need to know about any particular needs before a child is admitted or when a child first develops a medical need.

### **ADMINISTERING MEDICINES**

- As part of the admission procedure, parents will be required to furnish details of medical needs on the pupil admission form.
- No student will be given medicines without their parent's/carer's written consent.
- Where consent is in place, the member of staff involved will check the child's name, the prescribed dose, the expiry date and the written instructions provided by the prescriber on the label or container.
- If there is any element of doubt, staff will not administer the medicines but check with parents or a health professional before taking further action.
- Medicines which are left in storage after they are needed and not collected by parents and those which have reached their expiry date will be safely disposed of by the school health nurse team.

## **SELF-MANAGEMENT**

- It is good practice to support and encourage students, who are able, to take responsibility to manage their own medicines.
- If a student is able to take their medicine themselves, staff may only need to supervise. Where this is the case, the medicine will be stored safely and parental consent will be required. Medicines should only be carried around school with parental consent and when medication is self-managed.

## **REFUSING MEDICINES**

- If a child refuses to take medicine, they will not be forced to do so. The situation must be placed on record and parents informed immediately.
- If the refusal results in an emergency, then appropriate emergency help will be sought from health professionals or the emergency services.

## **RECORD KEEPING**

- Parents will be expected to inform the school about medicines that their child needs to take and to provide details of any changes to the prescription.
- Medicines must always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. There will be a check that written details include; the child's name, the name of the medicine, the dose, the method of administration, any side effects and the expiry date.
- A record will be kept of the medicines given to students and the staff involved.

## **ROLES AND RESPONSIBILITIES**

### **Parents and Carers**

- It only requires one parent to agree to or request that medicines are administered. As the norm, the named first contact will be this person.
- The school will maintain a record of who has parental responsibility for a child and this record will be retained on the school's administration system.
- Parents will be given the opportunity to provide the Principal with sufficient information about their child's medical needs if treatment or special care is needed. This information will be gathered from the common admission form and the accompanying sheet which requests specific and detailed medical information. They should jointly, with the Principal, reach agreement on the school's role in supporting their child's medical needs.

### **The Headteacher**

- The Headteacher is responsible for putting this policy into practice and for developing detailed procedures.

- The Headteacher has a contractual duty to ensure that staff receive appropriate training.
- The Headteacher is responsible for ensuring that all parents and staff are aware of this policy statement and for making sure that appropriate systems for information sharing are available. It will be made clear that parents should keep children at home when they are acutely unwell.
- For a child with medical needs, the Headteacher will be responsible for agreeing with parents exactly what support can be provided. Where parental expectations appear unreasonable, the Headteacher will seek advice from the school nurse or doctor, the child's GP or other medical adviser and, if appropriate from the LA.
- In following documented procedures, staff should be fully covered by the site public liability insurance should a parent make a complaint. The Headteacher will ask the insurer to provide written confirmation of the insurance cover for staff who provide medical support.

### **Teachers and other Staff**

- Staff with children with medical needs in their class or group will be informed about the nature of the condition. This information will be provided by the child's parents and relevant health professionals.
- Staff will be made aware of the likelihood of an emergency arising and what action to take if one occurs. ALL staff likely to be responsible for children will receive this information.

### **Staff Giving Medicines**

- The school will ensure that there are sufficient numbers of staff who are either employed or trained to manage medicines as part of their duties.
- Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child will have appropriate training and guidance.

### **TRIPS/RESIDENTIAL VISITS**

The school will consider what reasonable adjustments might be made to ensure that students with medical needs can participate safely on visits/trips.

In order to carry out an informed assessment on the student:

- The first aider/appointed person and group leader must know of the medical condition/allergies of the children taken out of school on trips or residential visits. These must be completed on the confidential information form by parents/guardian (OA2)
- All rules of prescribing and administering medication will remain the same as within school.

- A first aider/appointed person must always be present on any trip/residential visit and must be trained to deal with emergency medication such as an adrenaline pen.
- Copies of the OA2 form will be taken on trips in the event of the information being needed in an emergency.

## **TRAINING**

- First aiders and appointed persons are trained in accordance with HSE guidelines and with St John's Ambulance on a regular basis.
- Specific training or advice for a particular medical requirement such as epilepsy, diabetes, anaphylaxis is carried out by the local health services via school nurse who will advise on further training needs where necessary.
- Staff shall not administer medicines without appropriate training.

## **ASTHMA**

Details of all children in the school who have an asthmatic condition are contained in the school medical register to which all staff have access. All staff members should familiarise themselves with the guidelines for dealing with an asthma attack, be aware of the location of each child's inhaler and where spares are kept, usually in the green boxes marked 'Asthma Inhalers'.

Reviewed February 2020  
Review Date ...February 2025.....  
Head Teacher ...Clare P Smith.....  
Chair Of Governors Mary Cronin