



Simonside Primary School

POLICY FOR MANAGING MEDICINES ON SCHOOL PREMISES

RATIONALE

Wherever possible children should be educated with their peers, regardless of short or long term needs for medication. This principle will result, from time to time, in the school agreeing to administer essential prescribed medication to pupils so that those children are able to attend school. Medicines should only be administered in school when it would be detrimental to a child's health or attendance not to do so.

AIMS

1. To enable those children who are well enough to attend school, but who require essential prescribed medication, to receive that medication.
2. To ensure that the administration of any medication which can be taken outside school hours is undertaken by parents/carers.
3. To clearly establish the responsibility of parents/carers in the administration of medication and what the school is prepared to undertake on a voluntary basis.

GUIDELINES

General

1. Parents/carers have prime responsibility for their child's health and should provide school with accurate and up to date information about any medical condition where treatment or special care is needed.
2. Parents/carers should ask doctors, wherever possible, to prescribe medication in dose frequencies which can be taken outside of school hours.
3. School will follow the LA policy and guidance within **the DfE 'Supporting pupils at school with medical conditions statutory guidance for governing bodies of maintained schools and proprietors of academies in England' April 2014.**
4. School does not administer to children any non-prescribed medication.
5. The parent/carer of a child who requires essential or prescribed medication during the school day brings the medication to the school office and completes a 'Medication Request Form'. Medication will only be accepted in the original container/packet (tablets must be in their original packet), correctly labelled with the prescription information including the child's name, pharmacist label, dosage and correct storage. The only exception may be insulin which must still be in date but will generally be inside an insulin pen or pump. Staff must not accept inhalers on the yard. Parents should be told to take medicines to the school office to complete relevant paperwork.
6. The Parent Support Advisor/Headteacher/Deputy Headteacher will then complete a form indicating that approval has been given. The forms are in the Management of Medication file in the school office locked cupboard (there are blank copies in the staff room) . This will then be filed in the Medical file in the school office locked cupboard.
7. An Individual Health Care plan is completed for long term medical needs including those children who need inhalers.
8. An individual record of medication sheet will be issued for each child.
9. The medication is stored in either the lockable safe on the wall in the parents kitchen, or if needs to be kept chilled, in the lockable safe in the fridge of the parents kitchen. The keys are kept by Parent Support Advisor or Deputy Headteacher. It is administered by a First Aider/PSA or member of the Senior Leadership Team. The person who administers the medication signs the

record to indicate they have done so and is countersigned by a witness. The Deputy Headteacher will check all medication stored in school every half term.

10. The parents or legal guardians must take responsibility to update (with a doctor's signature) the school of any changes in administration for routine or emergency medication and maintain an in date supply of medication. Any unused or time expired medication must be handed back to parents or legal guardians of the child for disposal.
11. Children who have asthma which is managed by the use of inhalers should keep the inhalers in their own classroom for ease of access. Inhalers should be taken out to P.E. sessions and on school visits. Staff will supervise the use of the inhaler and seek further advice if treatment appears to be ineffective. Epipens are kept in the child's classroom, school office and dinner hall and also taken out on school visits. Class teachers note expiry dates for inhalers.
12. School is allowed to hold a generic asthma inhaler, to be used on any child during an emergency situation where the child does not have an inhaler or has insufficient dosage to resolve their asthma attack. The emergency inhalers are located in key areas of school and all staff are aware of these areas and have received training in the use of these inhalers. Parents have been given the opportunity to authorise the use of an emergency inhaler should the situation arise.
13. Staff will undertake relevant training in both the managing and administering of medicines and in supporting individual children with specific medical needs.
14. School will enlist the support of health professionals to provide both generic and specific advice and training for school staff e.g. in diabetes, Epipen use, asthma, allergies and anaphylaxis.
15. School will work with and act upon the advice, including technical support, for children with complex and long-term medical needs and conditions and/or who are dependent on medical technology.
16. If there is any difficulty about the use of medicines, including injections or inhalers, the school nurse should be contacted for advice.
17. Staff asked to handle hazardous material eg "sharps" should request specific information regarding disposal.
18. Cough sweets are considered as sweets and therefore cannot be eaten in class.
19. The Office staff check the 'Medical Request Form' and confirm with the parent the time and dosage that is on the prescription. The forms are kept in the 'Management of Medication' file in a locked cupboard outside the Main Office. The office staff will communicate the medication details to the relevant first aider.
20. The Management of Medication File will be checked every half term by the Deputy Headteacher.
21. Children are not permitted to deliver or collect medication. Medication should be collected by the parent/carer at the end of the day or on the date specified. Any uncollected medication is kept locked in the medical cupboard in the kitchen in the parents' room and returned to the chemist for appropriate disposal.
22. Practices to ensure confidentiality of information will be maintained in all medical/health matters.
23. Supply teachers will be informed by class teachers of which children require medication. Any new staff will be informed of which children have medical conditions.

Emergency Treatment

1. No emergency medication should be kept in the school except those specified for use in an emergency.
2. Advice for school staff about individual children will be provided by the school nurse or school paediatrician on request.
3. In the event of trained staff, it is essential that emergency back-up procedures be agreed in advance between the parents, school and medical adviser. Information will be recorded on the Health Care Plan and filed in the locked cupboard inside the school office.

4. Storage must be in accordance with the General section (above). These medications must be clearly labelled with the child's name, the action to be taken, route, dosage and frequency and the expiry date.
5. If it is necessary to give emergency treatment, a clear written account of the incident must be given to the parents or the guardian of the child, and a copy retained in school.

School Visits

1. The leader of the visit should ensure that the medical needs of all the children participating in the visit have been identified.
2. A named person must supervise the storage and administration of medication.
3. If the student needs medication to be administered during the visit, a photocopy of the administration sheet should be made and left in the file. The appropriate amount of medication should then be taken on the visit with the original medical sheet. On return to school, the original sheet should be replaced into the file and the copy destroyed (The copy is made as a precaution).

All members of staff must sign to confirm that they have read and understood the Policy and Guidance for supporting pupils with medical needs.

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