St Mildred's Primary Infant School

The Administration of Medicines Policy

Reviewed Annually

Senior Team Responsibility: Business Manager

Governors' Review Date of Meeting: January 2025

Next Review Date: January 2026

St Mildred's Primary Infant School Policy for

The Administration of Medicines

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1. Managing medicines during the school day

Prescription medicines should only be taken during the school day when essential. **They must be in the original container including prescriber's instructions.**

Parents should be encouraged to look at dose frequencies and timing so that if possible medicines can be taken out of school hours.

Medicines fall into two types:

a) Prescription medicines and b) Non-prescription medicines

a) *Prescription*

- Named member of staff may administer such a drug for whom it has been prescribed, according to the instructions
- The school will keep the drug safely with access only by named staff and record keeping for audit and safety
- Ritalin, a prescription drug known as a "controlled drug" needs to be kept in a more secure environment than suggested above e.g. in a cupboard attached to a structural wall.

b) *Non-prescription*

- The school staff may give paracetamol aspirin or ibuprofen if necessary, and with parental permission or request.
- Parents/Carers may come to the school to administer a non-prescription medicine if they wish

2. Managing medicines on trips and outings

Children with medical needs will be encouraged to take part in visits. The Class teacher along with other members of staff involved with the day-to-day care of the child will carry out a specific and additional risk assessment will be drawn up considering parental and medical advice. This will allow reasonable adjustments to be made. The international emergency number should be on the care plan (112 is the EU number and works for mobiles in UK when out of reach of a signal.)

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known, and copies of care plans (where they exist) will be taken by the responsible person.

<u>PE / Sports</u>

Any restriction to PE / sports activities must be noted in the care plan. Flexibility will be planned to allow pupils to benefit in ways appropriate to them (this constitutes differentiation of the curriculum).

3. Roles and responsibilities of staff managing or supervising the administration of medicines

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and acting in an emergency, according to the care plan.

Advice and guidance will be provided by the Schools Nursing Service, when needed, to carry out the actions in a care plan. Where a condition is potentially life-threatening all staff will need to be aware what action to take.

Specific advice and support from the Schools Nursing Service will be given to staff who agree to accept responsibility, as delegated by the Headteacher, for administering medicines and carrying out procedures.

In the event of legal action over an allegation of negligence, the employer rather than the employee is likely to be held responsible. It is the employer's responsibility to ensure that the correct procedures are followed; keeping an accurate record in school is helpful in such cases. Teachers and other staff are expected to use their best endeavor at all times particularly in emergencies. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

The Heads of School are responsible for day-to-day decisions, such as:

- Ensuring staff receive advice, support and awareness raising training
- Ensuring all relevant information about pupil needs is shared
- Ensuring that emergency plans are in place when conditions may be life-threatening
- Ensuring staff are aware of their common law duty of care to act as a prudent parent.

The Heads of School and/or Family Liaison Officer

- Liaising with parents about agreement of care plans

Teaching staff and other staff should:

- Be aware of emergency plans where children have life-threatening conditions and
- Receive appropriate documented training and support from health professionals, where they are willing to administer medicines.

4. Children's medical needs – parental responsibilities

The school will liaise closely with parents, carers or those who hold this responsibility (such as in the case of Looked after Children) so that information is shared and the care plan reflects all information.

The care plan will be agreed jointly by the school and parents, and agreed with the advice of health professionals.

The school will seek parents' written agreement about sharing information on their children's needs where information needs to be shared outside of school. However, in cases of emergency the health and safety needs of the child and the people affected must take precedence.

Parents should provide the school with information about their child's condition and be part of the health care plan arrangements, in all cases Parents know their child best. They should sign the appropriate agreement forms for the administration of medicines (see Appendix 1a).

5. Parents' written agreement

The attached form (Appendix 3) is to be completed and signed by the parents for the administration of the care plan and medicines to their child.

It is the responsibility of parents to ensure that medicines sent to school are 'in date'. All medicines should be collected by parents at the end of term 2, 4 and 6. If new supplies are needed it is the responsibility of the parents to supply medication as needed.

6. Supporting children with complex or long-term health needs

The school will aim to minimise any disruption to the child's education as far as possible, calling on the Health Needs Education Service for support and advice as needed, on the impact on learning and supportive strategies.

The school will carry out a risk assessment and a care plan, with the agreement of parents, and advice from health professionals (Appendix 2).

The school will call on the Community Nursing Service to deliver advice and support and receive appropriate documented training on procedures such as tube feeding or managing tracheotomies.

7. Policy on children taking and carrying their own medicines

When administered by staff, drugs will be kept in a locked secure place and only named staff will have access. When drugs are administered, the school will keep records.
Epipens need to be kept with or near the pupils who need them.
Where younger pupils have their insulin administered by staff then records will need to be kept.

Asthma medication to be kept in or near children's classrooms until children can use it independently. It must be taken on school trips (see Appendix 9a).

8. Advice and Guidance to Staff

The school will arrange and facilitate staff training for children with complex health needs, calling on:

- The School Nursing Service
- Community Children's Nurses
- Paediatric Diabetes Nurse Specialists
- Paediatric Epilepsy Nurse Specialists
- The Health Needs Education Service
- The Specialist Teaching Service (about potential impact of medical / physical conditions and the implications on teaching and learning)

9. Record keeping

See Appendices

1a. Health Care / Emergency Plan (translate when taken abroad on school trips)
1b. Contacting Emergency Services (translate when taken abroad on school trips)
2. Risk assessment forms
3. Parental agreement for the administration of medicines
4. Headteacher agreement to administer medicines
5. Record of medicine administered
6. Record of advice and support to School
7. Authorisation for the administration of rectal diazepam
8. Buccal Midazolam or Insulin: Agreed individual care plan
9. Asthma Appendix – sample letter to parents

These forms can be amended to fit individual circumstances with the advice of relevant nursing staff and therapy colleagues.

NB: All risk assessments and care plans must be updated at least annually or when needed by a change in a pupil's condition.

10. Storing medicines

The school will keep medicines in a locked secure place, (not asthma pumps or epipens) with access only by named staff. Where refrigeration is needed the medicine will be kept in the locked fridge located at the office reception.

11. Emergency procedures

The school will agree any procedures with parents and health care partners and the plan will be signed by all parties.

All staff will be made aware of the plans in order to discharge their common law ‘duty of care’ should the need arise.

12. Risk assessment and arrangement procedures (Care Plans)

Where a pupil has a complex health need or requires long term medication, risk assessments and care plans will be drawn up and signed by parents, class teachers and health professionals as needed (Appendix 2 and 3). Samples are available from the Health Needs Education Service and Specialist Nurses.

St Mildred's Primary Infant School Policy for the Administration of Medicines in Schools Appendix 1a

Health Care / Emergency Plan

Child's Name: **Date of Birth:**

Condition:

Class: **Date:**

Contact Information:

Contact 1:
Home No:
Mobile:

Contact 2:
Home No:
Mobile:

Relationship: **Relationship:**

Contact 3:
Home No:
Mobile:

Relationship:

Clinic **GP**

Hospital **Number**

Describe Condition and give details of pupil's individual symptoms

Daily Care Requirements (e.g. before sport/at lunchtime)

Describe what constitutes an emergency

Follow Up Care

Who is responsible in an emergency?

Follow up Care

Who is responsible in an Emergency: (state if different on/off site activities).

Form Copied to:

Parents

School

St Mildred's Primary Infant School Policy for the Administration of Medicines in Schools
Appendix 1b

This form is to be kept by the telephone

CONTACTING EMERGENCY SERVICES

<u>To request an ambulance</u>:

Dial 999 and be ready with the following information:

1. **Your telephone number**
2. **Your location (school/setting address)**
3. **Your postcode**
4. **Exact location (brief description e.g. next to church)**
5. **Your name**
6. **Child's name and brief description**
7. **The best entrance for ambulance crew and advise crew will be met and taken to child**

St Mildred's Primary Infant School Policy for the Administration of Medicines in Schools
Appendix 2

Risk Assessment Form

CONTACT DETAILS

Name of person completing the form _____

Date: _____

Child's Name: _____

Age: _____ **Year Group:** _____

School: _____

Medical Condition: _____

List significant hazards	Who is at risk?	Existing controls	List additional controls needed	Date of assessment	By Whom (e.g. Parent, School, Doctor)

St Mildred's Primary Infant School Policy for the Administration of Medicines in Schools
Appendix 3

Parental agreement for the administration of long term medicines

The school will not give your child medicine unless you complete and sign this form and the school has a policy that staff can administer medicine

Date: _____Childs Name_____

School: _____

Age _____Yr Group & Class _____ DOB _____

Condition / Illness _____

Name and Strength of Medicine _____

Where Medicine Kept: _____

Side Effects: _____

Expiry date: _____

How much (dose) to give: _____ Date of Provision_____

When to give it _____

Number of tablets given to school _____

Note: MEDICINES MUST BE IN THE ORIGINAL CONTAINER AS DISPENSED BY THE PHARMACIST.

Daytime contact number of parent or adult contact

_____

Name and contact number of GP

_____

Agreed review date _____

This information is, to the best of my knowledge, accurate at time of writing and I give consent to the school staff, to administer the medicine in accordance with the school policy. I will inform the school immediately in writing if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent/Guardian signature _____
Print name _____
Date _____

St Mildreds Primary Infant School Policy for the Administration of Medicines in Schools Appendix 4

Head of School agreement to administer medicine where a Risk Assessment or Health Care Plan are not needed (e.g. asthma)

It is agreed that _____will receive_____
(Quantity and name of medicine)

Every day at :_____

_____ (Name of child) will be given their medicine or supervised in taking it by

_____ (Name of member of staff)

This arrangement will continue until _____
(either end date or until instructed by parents)

Signed _____ Date:
_____
(Head of School/ named member of staff)

St Mildred's Primary Infant School Policy for the Administration of Medicines in Schools
Appendix 5

Record of medicines administered to an individual child

To ensure:

- **The right medicine**

For

- **The right child**

At

- **The right time**

At

- **The right dose**

Name of Child: _____

Class _____

Name and Strength of medicine

_____

Date Medicine provided by Parent _____ Quantity Received

_____

Dose and frequency of medicine

_____

I understand that I must deliver and collect the medicine personally and accept that the school will endeavour to administer the medicine at the specified time.

Parent/Guardian Signature_____

Date	/ /	/ /	/ /
Time given			
Dose given/Number of puffs			
Name of Staff Member			
Staff Initials			

Date	/ /	/ /	/ /
Time given			
Dose given/Number of puffs			
Name of Staff Member			
Staff Initials			

Date	/ /	/ /	/ /
Time given			
Dose given/Number of puffs			
Name of Staff Member			
Staff Initials			

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Appendix 6
(To be completed for each member of staff involved in a care plan)

Record of advice, awareness raising, support and guidance to the school

Name of school / setting: _____

Name of staff _____

Type of awareness rising received _____

Date of Session: _____

Training provided by: _____

Profession: _____ Title: _____

I confirm that _____

Has received awareness training detailed above and is competent to carry out the appropriate procedures

I recommend that the training is updated _____ (State frequency)

Signature of health professional _____

Date _____

I confirm that I have received the awareness training as detailed above

Staff signature _____

Date _____

St Mildred's Primary Infant School Policy for The Administration of Medicines in Schools Appendix 7

Authorisation for the administration of Rectal Diazepam

Name of school _____

Child's name _____

Date of birth _____

Home address _____

GP name and address _____

Hospital name and address _____

_____ (name) should be given Rectal Diazepam _____mg if:

He/she has a prolonged epileptic seizure lasting over _____ minutes

OR

Serial seizures lasting over _____ minutes

OR

If the seizure has not been resolved after _____ minutes (please delete as appropriate)

Doctors signature _____

Parents signature _____

Date _____

St Mildred's Primary Infant School Policy for the Administration of Medicines in Schools Appendix 8

Buccal Midazolam

Agreed Individual care plan to prevent status epilepticus
Agreed between parent/carer and school

Child's name _____

Date of birth _____

Name of Parent / Carer _____

Contact details _____ (Home / Work) _____(mobile)

Alternate contact name _____(number)_____

Condition _____

Known allergies Current medication

_____
_____
_____

For Seizure type: _____

Buccal Midazolam, ___ mg in: _____ ml may be given by a trained individual if

(Name) _____ has either a seizure lasting longer than FIVE (5) minutes, or….has one seizure after another without recovery in between lasting longer than FIVE (5) minutes or…has THREE (3) seizures) in HALF (1/2) an hour, (give at onset of 3rd seizure)

This should result in the seizure stopping within TEN (10) minutes. If the seizure does not stop within TEN (10) minutes a second dose of Buccal Midazolam ____mg in ____ml may / may not be given. If the seizures do not stop after TEN (10) minutes of the first / second dose **CALL AN AMBULANCE ON 999** and inform the operator that you have someone who may be in **Status Epilepticus**

An ambulance should also be called if:

- It is the child's first seizure
- The child has injured themselves badly
- They have breathing problems after a seizure

It is recommended that no more than 2 doses may be given in any 24 hour period. If more seizures occur within this 24 hour period then it would be wise to seek a medical opinion.

IF IT IS THE FIRST TIME THAT THIS CHILD IS HAVING THE MEDICINE AN AMBULANCE SHOULD BE CALLED, AFTER IT HAS BEEN GIVEN, IN CASE THERE ARE ANY UNEXPECTED REACTIONS TO IT

Date of first ever dose*	**/**	**/**

*****

Buccal Midazolam and the agreed individual care plan to prevent status epilepticus should be carried with the person at all times

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The child's **main carer** is responsible for the safe storage of Buccal Midazolam ensuring that it is not out of date or gone off (turned milky) during storage.

Current expiry date is _____

Locations where this care plan may be found include:
……..
……..
……..
……..
……..
……..

This agreed care plan is due to be reviewed in _____

Signed _____date _____ Dr prescribing medication

Signed_____ date _____ Parent / Carer

Signed_____ date _____ School

St Mildred's Primary Infant School Policy for the Administration of Medicines in Schools Appendix 9

Asthma Pumps in Primary Schools

Dear

Asthma Pumps

Your child _____ has an asthma pump in school.

I am writing to inform you of the School's guidelines with regard to asthma pumps in school.

1. All asthma pumps will be kept in personal zipped bag which is kept in the child's classroom.
2. All asthma pumps will be named.
3. With the pump there will be written evidence of the frequency of usage necessary for each individual child. This is to ensure that if a child appears to need their pump rather too frequently, then the parent can be informed.
4. You will need to see our Family Liaison Officer, Mrs Cliff, to complete a School Asthma Card.

If you wish to see the School Medical Policy, please make a request to the school office.

Would you please sign and return the slip below indicating your agreement to these guidelines.

Yours sincerely

J Williams

Executive Headteacher

Form 9

Asthma Pumps

I agree and accept the above guidelines regarding asthma pumps in school

Signed _____ Parent/Guardian

Date _____ Child's name _____