

# Managing Medicines in School Policy



## Redbridge Community School

To provide clear guidance that is understood and accepted by all staff and parents to support children with medical conditions so that they can receive proper care and support in school.

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## Requirements

Procedures for managing prescription medicines which need to be taken in the school day  
Procedures for managing prescription medicines on outings and trips  
A clear statement on the roles and responsibilities of staff managing the administration of medicines  
A clear statement of parental responsibilities in respect of a child's medical needs  
Written permissions from parents for medicines to be given to a child  
Circumstances in which children may take non-prescription medicines  
Procedures for assisting children with complex medical needs  
Procedures for allowing children to carry and take their medicine themselves  
Staff training  
Record keeping  
Safe storage of medicines  
Access to school's emergency procedures  
Risk assessment and management procedures

## Prescribed Medicines

It is helpful when clinically appropriate that medicines are prescribed in dosages that enable it to be taken outside of school hours. We will encourage parents to discuss this with the prescriber  
The school will not accept medicines that have been taken out of the container as originally dispensed by the pharmacist or make changes to dosages from the prescriber's instructions based on parental instructions

If the student does not take prescribed medication, the school will inform the parents of this

A written record should be kept of the administration of medication. In all cases it is necessary to check:

- \_ Name of child
- \_ Name of medicine
- \_ Dosage
- \_ Written instructions provided by prescriber
- \_ Expiry date

Large volumes of medication should not be stored. Prescribed medication held by the school should be kept in lockable storage that is readily accessible when required. Children should know where their medicine is stored and who holds the key

All emergency medicines (asthma inhalers, epi-pens etc) should be readily available and not locked away

If medication needs to be kept in the refrigerator, arrangements must be made to ensure it is secure and available as required

Medicines must not be kept in first aid boxes

Any unused medication must be recorded as unused and returned to parents. If this is not possible it should be taken to a pharmacy but must not be thrown away

Rectal diazepam must not be administered unless Form 9 has been completed

It is good practice to have a dosage/administration witnessed by a second adult

Staff will be given training

## **Educational Visits**

Staff supervising off site visits should be made aware of any medical needs of the students attending the trip/journey

If a student requires specific medication e.g. epipen, a member of staff trained in the administration of the medication should accompany the student on the visit

Medicines should be kept in their original containers. However, if a single dose is required it is acceptable to put this into an envelope that is clearly labelled

Where necessary an individual risk assessment should be conducted

The Off Site Visits Manual Part B sections 4.7, 6.8 provides further guidance

## **Roles and Responsibilities of staff**

A named member of the Administration team will be responsible for administering medicines to students and for keeping a record of this medication

Training will be provided if necessary

Depending on the nature of the illness, the Administration staff will meet with parents to agree the administration of the medication

If the condition is long term or more complex the SENCO or Healthy Living Advisor (HLA) will support the Administration staff by providing a Healthcare Plan in conjunction with the parents

## **Parental Responsibilities**

Parents/carers will meet with the named staff/ SENCO/HLA to discuss the medical needs of their child

Medication will not be administered unless written consent is given by the parent

The parent/carer will contact the school immediately if there are any changes to the child's condition/medication

## **Non-Prescription Drugs**

Staff should not administer non-prescription drugs to students without specific written permission from the parent/carer

A child under 16 should never be given aspirin containing medicine unless prescribed by a doctor

If a child suffers regularly from acute pain, such as migraine, the parents should authorize and supply appropriate painkillers for their child's use, with written instructions about when the child should take the medication

A member of staff should notify the parents that their child has requested medication and supervise the student taking the medication if the parents have agreed to it being taken.

## **Longer Term/Complex Medical Needs**

Parents/carers must fully inform the school if their child has long term medical needs. A Healthcare Plan will be prepared involving the parents and the relevant health professionals to ensure that the child's medical needs are adequately supported

## **Controlled Drugs**

Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act and must therefore be strictly managed between the school and parents

Ideally controlled drugs should be brought into school on a daily basis by parents but certainly no more than a week's supply should be stored and recorded by the school

If a student refuses to take medication the school should not force them to do so

The school should inform the child's parents immediately

All unused medicines should be recorded as being returned to the parents when no longer required

## **Self-Management**

In some cases such as asthma, older students should be encouraged to take responsibility and manage their own medication. This should be clearly set out in the child's health care plan in agreement with the parents

## **Sporting Activities**

Any restrictions on a student's ability to participate in PE and extra-curricular sport should be recorded in their healthcare plan. If there are restrictions, individual risk assessments should be conducted

PE staff should be aware of all relevant medical conditions and emergency procedures. Some students may need to take precautionary measures before or during exercise and may need to be allowed immediate access to their medicines (e.g. asthma inhalers)

## **Emergency Procedures**

Individual health care plans should include instructions as to how to manage a child in an emergency, and who has responsibility

Staff should never take children to hospital in their own car; it is safer to call an ambulance. A member of staff should always accompany a child taken to hospital by ambulance and should stay until the parent arrives

Other children should know what to do in the event of an emergency, such as telling a member of staff. All staff should know how to call emergency services

The school has a defibrillator for use in case of emergencies

## **Management Procedures**

A register of students with medical needs is maintained by the SENCO

The SENCO will be responsible for coordinating and sharing this information with staff

The SENCO/Progress Leader/ Hearing Impairment Manager or HLA as appropriate is the first point of contact for the parent and is responsible for liaising with external agencies

First aid arrangements are included in the school's health and safety policy and all staff are made aware of these including the location of equipment, facilities and first aiders.