



ST. OSWALD'S RC PRIMARY SCHOOL

Managing Medicines & Medical Needs Policy

Managing Medicines and Medical Needs in St Oswald's School.

Please note:

*In this document the term 'child/children' will be used to refer to children and young adults. The term **parent(s)** is used to refer to parents and legal guardians or carers.*

Rationale

There is no legal or contractual duty on school staff to administer medicine, supervise a child taking it, or carry out personal care tasks required to support children with medical needs. Teachers' conditions of employment do not include these tasks.

However, teachers and other staff in schools have a common law duty to act as any reasonably prudent parent would to make sure that children are healthy and safe in school. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

Medicines should only be taken to school where it would be detrimental to a child's health if it were not administered during the school day.

Sometimes, to minimise the time children need to be off school, it may be necessary for a course of antibiotics, for instance, to be taken in school or for a cream or lotion to be applied.

School can only administer medicine where prescribed 4 times a day. Whenever possible, parents / carers should be encouraged to ask doctors to prescribe medication in dose frequencies which can be taken outside of school hours.

Long Term Needs

It is very important for school to have sufficient information about the medical condition of any child with long term medical needs. We should know about the child's medical needs before they start school or when a child develops a condition.

Non-Prescribed Medication

We do not administer any medication that is not prescribed for a child, such as paracetamol, ibuprofen or aspirin. There are legal and insurance implications regarding the administration of non-prescribed medication.

School staff will not administer non-prescription medicines. This type of medicine can be obtained on prescription; therefore if a child suffers regularly from frequent or acute pain the parents should be encouraged to refer the matter to the child's G.P.

There may be rare occasions when school decides to administer non-prescription medicines due to individual circumstances. In these cases the guidelines below will be followed:

- The head teacher must give prior written authorisation
- This should only be done on the request of the parent/carer
- The parent/carer must provide specific prior written authorisation
- provide written instructions, detailing when their child last took the medication, what dosage is required and when they should take the next dose.
- supply the appropriate medication for their child's use
- Staff supervising the taking of such medication should notify parents/carers in writing on the day the medication is taken, detailing time and quantity taken.
- The administration of the medication must be recorded on an appropriate form on each occasion
- Particular care should be taken, as staff may not be aware if the child has previously taken non-prescription medication and the effects this may have if the child is already taking other prescribed medication.
- Adequate insurance cover must be in place

Prescribed Medication

No child will be given medication without the parent/carer's prior written consent

A Request to administer Medicine form should be completed by the child's parent/carer.

It is the parent/carer's responsibility to:

- ensure medication is in a suitable container
- ensure it is dated and labelled with:
 - the child's name
 - the name and strength of the medication
 - instructions for use
 - the quantity to be taken
 - the timing of the dosages.

Staff who receive the medication need to be satisfied with the container and labelling. They should:

- read the label carefully
- ensure the correct child's name is stated
- ensure that they understand the instructions, including written instructions from the prescriber (This could be a doctor, dentist, nurse, or pharmacist)
- check the prescribed dosage on the pharmacist's label and the expiry date on the packaging.

Each time they administer or supervise the taking of medication staff should:

- complete and sign record cards/sheets
- ensure that the child has actually taken the medication

If there is any doubt, staff should check with parents / carers or a health professional before taking further action.

Self-Management/Administration

It is good practice to encourage children, where appropriate, to manage their own medication from a relatively early age. If children are able to self-administer, school staff only need to supervise.

Staff responsibilities and training

School must ensure that any member of school staff providing support to a pupil with medical needs should have received suitable training. This should have been identified during the development or review of individual healthcare plans. Some staff may already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required. Staff who provide support to pupils with medical conditions should be included in meetings where this is discussed.

Refusal to Take Medication

If a child refuses their medication, they should not be forced to take it. The school will inform the child's parents / carers as a matter of urgency.

Appropriate recording of the refusal should be made, identifying the subsequent action taken, by whom and at what time.

Record Keeping

Schools will keep a record of medication given to children and of the staff involved.

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School will always keep a record of all medication received, even if they do not subsequently administer it.

It is the responsibility of parents / carers to supply written information about the medication their child needs to take in school and to let us know in writing of any changes to the prescription or its administration or to the support required.

Parents or a doctor should provide the following details as a minimum: -

- Name and strength of medication
- Dosage
- Time, frequency and method of administration
- Length of treatment
- Date of issue

- Expiry date
- Possible side-effects
- Storage details
- Other treatment

However, should a medicine need to be refrigerated, it must be in a clearly labelled, locked, airtight container.

Medication should be:

supplied to the school in the original dispensed container and not re-packed in another container labelled with:

- the name of the child
- the name and strength of the medication
- the dosage
- the time, frequency and method of administration
- the date of issue, the medication should have been dispensed within the previous three months.

Where children have more than one prescribed medicine, each should be in a separate container.

Children should know where their own medication is stored and who holds the key.

A few medicines, such as asthma inhalers and epi-pens, are readily available to children, should the need arise. We do allow children to carry their own inhalers. Other medicines will be kept in a secure place, not accessible to children.

Disposal of Medication

School staff should not dispose of medication. This is the responsibility of parents / carers. Date expired medication or any medication no longer required by the child should be returned to the parents / carers. This should be done at least at the end of every term. Left over medications should not be stored over holiday periods in schools or other centres.

Individual Healthcare Plan

Plans are completed by the class teacher on a health care for pupil who need additional medical care. A copy of the plan is kept in the students file with the Head Teacher and an additional copy is kept on the staff notice board so that all staff are aware.

Hygiene/Infection Control

All staff should be aware of basic hygiene precautions for avoiding infection, such as washing and drying hands before and after the administration of medication. Staff have access to protective, disposable gloves and take extra care when dealing with spillages of blood or other body fluids and when disposing of dressings or equipment.

Co-ordination and Dissemination of Information

The Head teacher is responsible for obtaining parents'/carers' permission to share information about a child's medical condition with other staff members.

Staff who need to deal with an emergency will need to know about the child's medical needs and the procedures to follow.

The head teacher will make sure supply staff know about any medical needs.

Confidentiality

The head teacher has responsibility for safeguarding the confidentiality of information regarding the health and medical treatment of children, and their right to privacy. Medical information will be treated in confidence, with regard to the Caldicott Report (1996), the Human Rights Act (1998) and the Data Protection Act (1998).

Agreement will be reached with the parent/carer or the child (where appropriate) about who else should have access to information and/or records.

However, if information is withheld from staff, they will not be held responsible if they act incorrectly in giving medical assistance, but acted otherwise in good faith.

School Trips

School will encourage children with medical needs to participate in school trips. Reasonable adjustments will be considered to ensure the inclusion of all children.

It will be necessary to undertake a further risk assessment or to take additional safety measures, particularly for outdoor visits or activities.

Staff on school trips will be made fully aware of the medical needs of children, the procedures for administration of medication, care and intervention, and the relevant emergency procedures

Emergency Procedures

All staff know how to call the emergency services. The Head Teacher is responsible for ensuring that this happens.

Any child taken to hospital by ambulance will be accompanied by a member of staff, who will remain until a parent/carer arrives. Health professionals will be responsible for any decisions on medical treatment when parents are not available.

Staff will not take children to hospital in their own car in an emergency. This can hinder emergency treatment. An ambulance will always be called.

Unacceptable Procedures

Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition, eg hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

Reviewed March 2015

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