

WOODTHORPE J.I. SCHOOL

MANAGEMENT OF ADMINISTERING MEDICATION Including ASTHMA POLICY

Aims

- To ensure the safety of children and school staff.
- To encourage parents/carers to accept responsibility for the administration of their child's medication whenever possible.
- To keep children in school rather than restrict their education through exclusion on medical grounds.
- To encourage children to attend school unless acutely ill.

POLICY STATEMENT

- We would ask parents/carers to ask their doctor wherever possible to prescribe medication which can be taken outside the school day.
- However, we as a school recognise that there are times when it may be necessary for a pupil to take medication during the school day.
- We are prepared to take responsibility for these occasions in accordance with the Guidelines laid down in this policy.
- The supervising or giving of medication to a child is a parental responsibility but teachers or school staff may be asked to perform this task. They cannot be directed to undertake this role but may do so voluntarily after appropriate training and in accordance with Local Authority Guidelines.

This policy is in accordance with:

- The Administration of Medicines in Schools and Settings Guidance LA February 2018
- Guidance on the use of emergency Salbutamol inhalers in school. Department of Health March 2015
- Supporting Pupils at School with Medical Conditions. DfE December 2015
- Children and Families Act 2014 (section 100).
- SEND Code of Practice 2014

Some pupils with medical needs may also have special educational needs (SEN) and may have an Education, Health and Care plan (EHCP) which sets out the pupil's health, social care and special educational requirements. For pupils with SEN, this policy should also be read in conjunction with the Special Educational Needs and Disability (SEND) Code of Practice.

1. On Admission to School

All parents/ carers will be asked to complete an admissions form giving full details of medical conditions, regular medication, emergency medication,

emergency contact numbers, name of family doctor, details of hospital Consultants, allergies, special dietary requirements etc. Only one parent with parental responsibility needs to consent to medicines being administered

2. Administration & Storage of Medication in School - Responsibilities and Requirements

2.1 Parent/carer

- Where possible, medication should be administered at home;
- Each request from a parent to administer medication to their child in school will be considered individually based on the circumstances;
- School will not unreasonably refuse the parent's request to administer medicine in school;
- The parent's written consent is required. Consent does not have to be obtained every time medication is administered, but the form should be updated regularly; and
- In exceptional circumstances i.e. if the medicine has been prescribed to the pupil without the knowledge of the parent, it may be administered without parental consent but the school will make every effort to encourage the child to involve their parents, whilst respecting the pupil's confidentiality.

Should a pupil need to receive medication during the school day, parents/carers will be asked to come into school and personally hand over the medication to the Office Manager or School Secretary.

Parents are responsible for:

- Ensuring that their child has a sufficient amount of medication which is in date;
- Replacing their child's supply of medication on request;
- Safely disposing of their child's date-expired medicines, for example by returning them to a pharmacy; and
- The medication should be in the original container as prescribed by the doctor and dispensed by the pharmacist showing:
 - Child's name, date of birth;
 - Name and strength of medication;
 - Dose;
 - Any additional requirements, e.g. to take the medication with food etc;
 - Expiry date; and
 - Dispensing date or date of purchase.

All medication should show an expiry date or should have been dispensed within the last six months.

The school's medication consent forms should be completed by the parent/carer unless there is some other pre-approved form of record is being used. This will be kept by the Office Manager in the school office. (See Appendix 2 and 3)

If the supply needs to be replenished this should be done in person by the parent/ carer.

2.2 School Staff

Agreeing to medication being administered in school, head teachers should be satisfied that it is necessary for medication to be administered during school hours, for example because the pupil will otherwise miss school and lose teaching time.

A record of the administration of each dose will be kept and signed on the 'Record of Medication Administered' form. (see Appendix 1)

Should the medication need to be changed or discontinued before the completion of the course or if the dosage changes, school should be notified in writing immediately.

2.3 Pupils

The Statutory Guidance states that, following discussion with parents and when set out in Care Plans, children who are competent can be responsible for managing their own medicines and procedures e.g. inhaler for asthma. We may ask the School Nurse to check technique before accepting full responsibility and undertake checks every term to ensure child/ren can administer their own medication.

3. Administration of Analgesics to pupils.

The school does not administer analgesics unless prescribed by the child's GP and agreed by the Head Teacher and School Nurse. Children under 16 should never be given medicines containing aspirin or ibuprofen unless prescribed by a doctor. With the exception of a single dose of paracetamol providing the preparation is provided by a parent, in the original packaging and labelled with the child's name. The permission to administer medication form must be completed on a daily basis stating the time and amount of the last dose given. Staff should follow the dosage information on the bottle/package.

4. Storage and Disposal of Medication

All medication with the exception of Emergency Medication will be kept in a locked cupboard in the staffroom.

Any medication which needs to be in the designated fridge in the staffroom.

A regular half-termly check will be made of the medication cabinet, and parents/carers will be asked to collect any medication which is out of date or not clearly labelled. If parents do not collect this medication, it will be taken to the local pharmacy for disposal.

5. Asthma Policy

This school:

- Welcomes pupils with asthma and recognises their needs
- Works towards ensuring the school environment is favourable to pupils with Asthma
- Expects and encourages parents/carers to appropriate information to the school regarding their child's asthma and to provide a prescribed reliever (blue) inhaler and spacer device if required
- Recognises that pupils need to have immediate access to their reliever inhaler
- Will encourage and help children who have asthma to participate fully in all aspects of school life
- Will access regular Asthma Awareness training for all staff

Every child with an asthma diagnosis must have a reliever inhaler (blue) available in school and a spacer device if this is normally used. Preventer inhalers do not need to be brought into school.

In addition, Woodthorpe J.I. School has an emergency reliever inhaler that can be used if a child's own inhaler is not available and the school has written parental consent for use of the emergency inhaler.

5.2. Safety and Storage of Asthma Inhalers

All inhaler devices should be clearly labelled with the child's name.

Key Stage 1

- Inhalers will be kept in a named place in the child's classroom e.g. on the teacher's desk under supervision of the class teacher.
- Reliever inhalers (blue) should be easily accessible for children.
- Specific places are recorded on the Asthma Register which is kept in the medical cupboard in the music room and in the Head Teacher's office.

Key Stage 2

- Pupils at this age are encouraged to become self-managing by the end of Year 6 by carrying their own reliever inhaler.
- If there are any concerns about the child's inhaler technique, they should be referred to the school nurse.
- A spare reliever (blue) inhaler clearly labelled with the child's name needs to be kept centrally in school.

Most children will not need to use their reliever (blue) inhaler on a daily basis, therefore, if a child has experienced symptoms and has needed to use their inhaler, parents/carers will be informed.

Parents/carers will always be informed if their child has an asthma attack.

If pupils leave the premises for any activity, they must have their reliever (blue) inhaler with them.

Parents/carers need to check all reliever inhalers/spacer devices termly or regularly, confirming that inhalers are in date and are full of medication. All inhalers will be sent home at the end of each academic year. It is the parent's/carer's responsibility to ensure a new and in-date inhaler comes into school on the 1st day of the next academic year.

Inhalers should not be stored where there is excessive heat or cold.

In the event of evacuation of the school e.g. for a fire or fire drill, adults in a classroom should take out the centrally stored box of asthma inhalers and our asthma kit.

5.3. Exercise and Activity

Pupils with asthma are encouraged to participate in P.E. lessons.

Some pupils with asthma may need to use their reliever inhaler before exercising.

Reliever inhalers must be readily available at all times, including off-site visits.

5.4 Asthma Attack

It is essential that all staff know how to manage a child experiencing an asthma attack.

In the event of an asthma attack school staff must follow the procedure outlined in the 'Asthma Attack Flowchart' (see appendix 1). This flowchart is visibly displayed in key areas:

- Staff room
- First aid areas
- Woodies after school care
- PE hall

5.5 Training

All staff receive asthma awareness training and regular updates so that they recognise and know how to manage a child having an asthma attack, when and how to call an ambulance and what to do whilst waiting for the ambulance to arrive.

All staff volunteering to administer medication receive appropriate training which will normally be provided by Birmingham Community Healthcare NHS Foundation Trust, through a school nurse or special school nurse other suitably qualified professional e.g. a medical professional who is already working with the child.

Staff who volunteer to administer medication receive training which explains:

- The basic legal principles and potential legal liabilities involved;

- How to deal with emergency situations that may arise;
- How to appropriate and safely administer the medication in question;

Regular, i.e. at least annual, training relating to emergencies, medication and relevant medical conditions will be provided; advice about training can be obtained from the school nurse.

School keeps records of all training and whether or not it has been satisfactorily completed. Even after training has been received, staff may decide that they no longer wish to volunteer to administer medication or request further training if the member of staff feels that it is necessary, which school will provide. Training should be regularly updated, at least annually and when there are changes to the medication that a pupil requires.

6. Children with special medical needs

- Should we be asked to admit a child to school with special medical needs we will in partnership with the parents/carers, school nurses and our medical advisors, discuss individual needs.
- Where appropriate an individual Care Plan will be developed in partnership with the parents, school nurse and/or medical advisor.
- Any resulting training needs will be met.
- Care Plans will be kept securely and confidentially in the Staffroom and a copy will be kept with the child's emergency medication kit (If one is required). This ensures that it is accessible in case of emergency.
- Parental permission will be sought to display the Care Plan with the child's photograph in the staffroom and in the class register. This will only be shared with relevant staff.

7. Medical Emergencies

If in doubt an ambulance will always be called. Staff are not permitted to take a child to hospital in their own car. See 'Emergency Action in Case of Accident' for procedures for calling an ambulance. If a parent is not present then health professionals, and not school staff, will be responsible for decisions about the medical treatment that the child requires. Staff accompanying a child to hospital will have basic medical information about the child, for example their Care Plan if one is in place and identifying data e.g. full name and date of birth and their parents' contact details.

Emergency medication must always be readily accessible and never locked away. A copy of the child's care plan should be kept with the medication and should include precise details of the action to be taken in the event of an emergency.

The emergency medication kit and member of staff who has received training on its use must go wherever the child goes e.g. educational visits, swimming etc.

Whenever an ambulance has been called a Medical Emergency Report Form should be completed after the event. This form (see Appendix 3, supply kept in School Office) should then be sent to the school's Nurse Adviser, Medical Needs in Schools. Information will be treated confidentially and will help to ensure that the Nurse Adviser can offer appropriate advice and training.

Specific specialised training is required for those staff prepared to act in emergency situations. **Staff who administer emergency medication must have training from an appropriate health care professional which should be repeated annually.**

Children who have diabetes must have an emergency supplies kit available at all times. This kit should include a quick acting glucose in the form of glucose sweet or drinks. Some children will also have a concentrated glucose gel preparation e.g. Glucogel. These are used to treat low blood sugar levels (hypoglycaemia). The kit should also contain a form of longer acting carbohydrate such as biscuits.

8. Educational Visits and Sporting events

Schools will consider what adjustments can reasonably be made to enable children with medical needs to participate safely and as fully as possible on school visits which will include a risk assessment. School will consult with parents/carers, pupils and a healthcare professional on an event by event basis to ensure that pupils can participate safely.

If pupils do not normally administer their own medication then a trained member of staff or parent will accompany the child on the off-site activity. The Consent Form to Administer Medicine should include off-site visits.

School will inform staff members who run sporting activities and the school's own after school clubs, or extra-curricular activities, if specific pupils require medication and how they should deal with a medical emergency occur. Staff may require additional training, and should be aware of how to access the pupil's medication.

Schools will make it clear that parents need to separately inform private wrap-around services about their children's health needs.

9 . Over the counter medicines (OTC) (non-prescription)

The Medicines and Healthcare Products Regulatory Agency license all medicines and classifies them as OTC when it considers it safe and appropriate that they may be used without a prescription. Birmingham Local Medical Committee considers it a misuse of GP time to provide an appointment for a child with the sole purpose of acquiring a prescription for

an OTC medicine. Sometimes a pupil's medical condition may mean that they need to take OTC medication.

OTC medicines can be administered to pupils on the same basis as prescription medication, i.e. where medically necessary, with the parent's consent, when approved by the head teacher in accordance with this policy and as set out in the pupil's Care Plan, if one is in place.

Parents will be informed if OTC medication has been administered that day, and the parent will be asked to sign the School Record of Medication Administered to acknowledge that the school has told them that you have given the agreed medication

With OTC medications the dose and frequency must be consistent with the guidance and dosage on the packaging and school will check with parents the date and time that the child took the most recent dose.

10. Alternative Medications (e.g. Homeopathic and Herbal Remedies)

The school will only administer alternative medication which has been prescribed or supported in writing by a General Practitioner or Consultant.

Signed:

Approved: 18 March 2019

Review: March 2022

School Record of Medication Administered

Name of child.....
Date of birth.....**Class**.....
Name and strength of medication.....
Dose and Frequency of medication.....
Time last dose given.....
Maximum dosage..... **Other medication being taken**.....

Date		
Quantity received		
Quantity returned		
Staff name and signature		

Date									
Time Given									
Dose Given									
Staff Signature									
Print Name									
Additional notes, e.g. parent notified									
Parents signature and date									

Appendix 2

Parental/carer consent to administer an ‘over-the-counter’ (OTC) medicine

- All over the counter (OTC) medicines must be in the original container.
- A separate form is required for **each medicine**.

Child's name	
Child's date of birth	
Class/form	
Name of medicine	
Strength of medicine	
How much (dose) to be given. For example: One tablet One 5ml spoonful	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry and administer their own medication in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

Mobile number of parent/carer	
Daytime landline for parent/carer	
Alternative emergency contact name	
Alternative emergency phone no.	
Name of child's GP practice	
Phone no. of child's GP practice	

- I give my permission for a first aider, senior member of staff or office staff (or his/her nominee) to administer the OTC medicine to my son/daughter during the time he/she is at school/nursery. 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 no longer needed.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- I confirm that the dose and frequency requested is in line with the manufacturers' instructions on the medicine.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal. If the medicine is still required, it is my responsibility to obtain new stock for the school.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carer name	
Parent/carer signature	
Date	

Parental/carer consent to administer a prescribed medicine

- All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included on the pharmacy label.
- A separate form is required for **each medicine**.

Child's name	
Child's date of birth	
Class/form	
Name of medicine	
Strength of medicine	
How much (dose) to be given. For example: One tablet One 5ml spoonful	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry their own salbutamol asthma inhaler/Adrenaline auto injector pen for anaphylaxis [delete as appropriate].	Yes	
	No	
	Not applicable	
I give permission for my son/daughter to carry their own salbutamol asthma inhaler and use it themselves in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

I give permission for my son/daughter to carry and administer their own medication in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

Mobile number of parent/carer	
Daytime landline for parent/carer	
Alternative emergency contact name	
Alternative emergency phone no.	
Name of child's GP practice	
Phone no. of child's GP practice	

- I give my permission for a first aider, senior member of staff or office staff (or his/her nominee) to administer the prescribed medicine to my son/daughter during the time he/she is at school. 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.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school, if necessary.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carer name	
Parent/carer signature	
Date	