



Great Wilbraham C of E Primary School

Policy title: Administration of medicines

Date created: September 2018

Date ratified:

Next Review Date: September 2019

Signed:

1. Introduction

1.1. Rationale

The Children and Families Act 2014 (Section 100) places a duty on the governing body to make arrangements for supporting pupils at school with their medical conditions in line with the statutory guidance issued. The aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported at school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.

1.2. Definition

Pupils' medical conditions may be summarised as being of two types:

- a. Short-term affecting their participation in school activities while they are on a course of medication (requiring a Medical Information Consent Form)
- b. Long-term potentially limiting their access to education and requiring extra care and support (requiring an Individual Healthcare Plan)

1.3. Aims

- Welcome, support and make arrangements for pupils with medical conditions based on good practice
- Adopt and implement the statutory guidance from Department of Education Supporting pupils at school with medical conditions
- Assist parents in providing medical care for their children by developing healthcare plans on notification of their child's medical condition
- Educate staff and children in respect of providing support to children with medical conditions.
- Arrange suitable training for staff as required to support pupils with medical conditions
- Liaise as necessary with parents and medical services in support of the individual pupil(s)
- Provide emergency support to children in line with their individual healthcare plans
- Ensure that all children with medical conditions participate in all aspects of school life
- Monitor and keep appropriate records
- Provide information on school policies, plans, procedures and systems

2. Leadership and management

2.1. Roles and responsibilities

Senior Management

- Ensure that everyone in the school is aware of the policy and that they understand their role
- Raise awareness through the school website, newsletters and the school prospectus
- Ensure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need
- Ensure the school does not create any unnecessary barriers to prevent children participating in any aspect of school life

Staff

- May be asked to support pupils with medical conditions and develop healthcare plans
- School staff will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately
- Medications are to be stored appropriately in line with the DfE Guidance
- Focus on the needs of individuals in ensuring that pupils and parents have confidence in the school's ability to provide effective support
- Ensure children have easy and appropriate access to their medications at all times (including school trips, PE and sporting events, school transport and before and after school clubs)





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- Allow pupils themselves to manage their medical condition effectively in line with their individual healthcare plans
- Receive professional training where this is required

Pupils

- Provide information and be part of discussions about their medical support needs

Parent

- The prime responsibility for a child's health lies with the parent
- Provide school with sufficient and up-to-date information about their child's medical needs
- Encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative
- Parents are responsible for advising or training staff on the administration of prescription medication (in line with the printed advice that accompanies the medication)
- Where parents have asked the school to administer medication for their child they must complete a school 'Medicine Administration Consent Form and Record'. This ensures that the school is able to comply with the requirement to keep adequate records. School will only administer essential medication to a child where it would be detrimental to their health not to do so during the school day
- Medicines must be properly presented by parents through the school office and in accordance with the notes on the Medicine Administration Consent Form and Record

Governing body

- Ensure that the school's policy enables provision of effective support for medical conditions
- Comply with other relevant duties, such as for disabled children or for children with a statement of special educational needs (see also Special Educational Needs Code of Practice). The governing body remains legally responsible and accountable for fulfilling their statutory duty

School Nurse

- Notify school when a child is identified as having a medical condition and support school staff
- **Other healthcare professionals** may also provide notification, support and advice

2.2. Continuing professional development

The governing body and school management will ensure that relevant training is given and recorded to staff who require it. In addition, whole staff training in use of epi-pens and inhalers is given annually.

3. Administration of medicines

- Where possible, parents are asked to administer their child's medicines at home
- If the spacing of doses means that medication needs to be given during the school day and it is not possible to rearrange the timing of this, the child's parent will be asked to come into school to administer the medicine
- If the parent is unable to do this and asks the school to supervise the child self-administering or for a named member of staff to administer the medication, the following procedure will apply:
 - There must be written, signed authority and full instructions about giving the medicine from the parent including the actual dosage required
 - Medicines must be in their original labelled containers as supplied by the doctor or pharmacist
 - The medicines will be retained in a safe place, out of reach of all children
 - The child must administer medication under supervision
- The School will ensure that records are kept (and regularly updated) on specific long term illnesses of individual children (i.e. asthma, diabetes, allergies) and heed all advice provided by the child's medical practitioner or the school nursing team.





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- Where inhalers have been prescribed to children at Key Stage 1 & 2 with asthma, Health Authorities recommend that the child keep these to use as and when they think necessary. They must be where the child can access them and teachers know where they are. They must be named. We store our medicines in the staff room but there maybe an occasion when it is more appropriate to have one in the classroom or with the child
- Parents are responsible for checking that inhalers are in date and not empty. The school will check at the start of every year and monitored every term
- Where medicines cannot be administered by a parent or guardian and the medicine is:
 - considered dangerous
 - has to be administered with critical timing or dosage
 - needs technical or medical knowledge or expertise to administer
- The Headteacher will exercise special caution before accepting responsibility for the medicine's administration. In these situations, the Headteacher may refuse a request
- Specially trained staff only must administer injections
- On residential trips parental permission is sought for children to be provided with liquid paracetamol such as Calpol to be administered where appropriate. This permission is on the medical form for the residential and is only to be used for this purpose. Parents will be informed of any administration of medication as soon as possible and the trip leader will act in loco parentis

4. Personal development, behaviour and welfare

The school accepts that pupils with medical conditions:

- should be assisted if at all possible
- have a right to the full education available to other pupils
- should be enabled to have full attendance – where absence is unavoidable, appropriate support is put in place
- receive necessary proper care and support

The school accepts that all employees have rights in relation to supporting pupils with medical needs as follows:

- choose whether or not they are prepared to be involved
- receive training as appropriate and work to clear guidelines
- bring to the attention of management any concern or matter relating to supporting pupils with medical conditions

5. Communication

This policy has been created in consultation with parents and school staff before being brought to Governors for ratification.

6. Links to other policies

- 6.1. SEN/D
- 6.2. Equal opportunities
- 6.3. Health and safety
- 6.4. Asthma policy (also attached, see below)

7. Appendices

- 7.1. Medicine Administration Consent Form and Record (staff share/health and safety/first aid)
- 7.2. Supporting pupils at school with medical conditions December 2015 (DfE)
- 7.3. Guidance on the use of emergency salbutamol inhalers in school March 2015 (DfE)
- 7.4. Anaphylaxis and the use of epi-pens guidance
- 7.5. Evidence of training log





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7.6. Present list of first aiders





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ASTHMA POLICY

1. Introduction

1.1. Definition

This policy is part of the first aid and health and safety guidelines. It has been created as a separate policy in order to inform parents of our procedures regarding monitoring asthma in school.

1.2. Rationale

Great Wilbraham Primary School recognises that asthma is an important condition affecting many school children and staff. Great Wilbraham Primary School encourages children with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by all. Supply Teachers and new staff are also made aware of the policy.

1.3. Communication

This policy has been created through consultation with first aiders and staff before being taken to the Full Governing Body for ratification.

2. Leadership and management

2.1. Roles and responsibilities

Headteacher

- To review the policy annually
- To ensure staff are adequately trained

Leadership

- To monitor the medical forms
- To monitor date of medication
- To ensure parents are aware of our procedures

Staff

- To support children with asthma and ensure their well being

Governing Body

- To ensure the policy is updated annually

Parents

- To inform the school of changes in medication
- To complete the administration of medicines form
- To ensure medication is in date

Children:

- To tell a member of staff when they feel unwell (if appropriate and able)

2.2. Continuing professional development

Staff who work on the premises, particularly first aiders, have asthma training on an annual basis and from October 2017 using an online learning platform.

2.3. Reviewing and monitoring

This policy will be renewed annually in accordance with updates on medical and first aid arrangements.

3. Teaching, learning and assessment





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3.1. Medication

- All medication, care plans and children's photos are kept together on a shelf in the Staff room in named boxes (unless individual circumstances deem it necessary to be in the classroom).
- Parents of these children are asked to ensure that the school is provided with reliever inhaler.
- All inhalers must be labelled with the child's name by the parent and must be in date.
- School staff are not required to administer medication to children except in an emergency.
- School staff who agree to administer medication are insured when acting in accordance with this policy.
- All school staff let children take their own medication when they need to but staff should always accompany children to the Staff Room for their medication and note this in the medication records.
- Out of date inhalers should be returned to a GP's surgery

3.2. Emergency Inhaler

A generic relief inhaler is also kept in the Staff Room. This may be given to children as and when it may be thought necessary but must be given via a spacer. The emergency inhaler may be used repeatedly if the casing is washed thoroughly after use but the spacer must be replaced each time it is used. **Parents of children with Asthma must tell the School if they do not wish their child to use the emergency inhaler using the slip at the bottom of this policy.** The boxes containing the relief inhalers should be kept with PE Staff for the duration of the lesson if being held outdoors. The boxes containing the relief inhalers should be taken and held with a nominated member of Staff on all trips.

3.3. Asthma attacks

All staff will know what to do in the event of an asthma attack.

- a. Ensure that reliever inhaler is taken immediately
- b. Stay calm and reassure the child
- c. Help the child to breathe by loosening clothing

Minor attacks should not interrupt a child's involvement in school. When they feel better they can resume school activities. The child's parents must be informed and the incident logged in the first aid book.

Emergency Procedure

Phone 999 and parents from the school office if:

- The reliever has no effect after 10 minutes
- The child is either distressed or unable to talk
- The child is getting exhausted
- You have doubts about the child's condition

If the doctor is unobtainable call an ambulance

3.4. Physical Education

Taking part in sports is an essential part of school life. All teachers are aware of which children have asthma. Children with asthma participate fully in PE. Teachers will remind children whose asthma is triggered by exercise to take their reliever inhaler before the lesson and complete a warm up before the lesson. Each child's inhalers will be labelled and kept in an accessible place. If the child needs to use their inhaler during the lesson they will be encouraged to do so and inhalers from children will be brought outside if the individual circumstances is necessary.





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3.5. When a child is falling behind in lessons

If a child is missing a lot of time from school because of asthma, the teacher will initially talk to parents. If appropriate the teacher will talk to the school nurse and SENCO about the situation. The school recognises that it is possible for children with asthma to have special needs.

3.6. Assessment: Record Keeping

At the beginning of each school year, or when a child joins the school, parents are asked if their child has asthma. All parents of children with asthma are given a National Asthma campaign school card to give to their child's GP or asthma nurse to complete and return to school. From this information the school keeps its asthma register, which is available for all school staff. Cards are then sent to parents on an annual basis to update. If medication changes in between times, parents are asked to inform the school, update the Medicine Administration Consent Form and Record or the GP asthma record.

4. **Personal development, behaviour and welfare**

4.1. Safeguarding

The safety of children is paramount in all situations. In line with the administering of medicine policy, staff can help administer medicine if the relevant form has been completed but will always consider the safeguarding of children and seek advice if they are unsure.

4.2. Health and safety: The School environment

Great Wilbraham Primary School does all it can to ensure the environment is favourable to children with asthma. As far as possible the school does not use chemicals in science and art lessons that are potential triggers for children with asthma.

5. **Outcomes for pupils**

5.1. Inclusion and equal opportunities

Our whole school philosophy totally encompasses the equality of access and opportunity. Children should have access to the activities the school provides and consideration upon how to ensure this happens for children with asthma is made when planning and implementing sessions.

6. **Links to other policies**

6.1. Administration of medicines policy

6.2. Health and Safety policy (including first aid)

7. **Appendices**

7.1. Medicine Administration Consent Form and Record

Parent form for NOT allowing the use of an emergency inhaler – DO NOT return if you are happy for the use of an emergency inhaler should the need arise:

I DO NOT wish my child to be given an emergency inhaler should the need arises.

Parent:

Date:





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Appendix 7.1 Medicine Administration Consent Form and Record'

Name of Child:		
Date of Birth:		
Medical condition/illness (1 per column):		
Type/name of medicine (1 per column):		
Quantity received:		
Expiry date:		
Dosage and method:		
Self-administration	Yes/No	Yes/No
Date received:		
Staff signature:		
Parent signature:		
Quantity returned:		
Date returned:		
Staff signature:		
Parent signature:		





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Medicine:		
Date and time:		
Dose given:		
Staff signature:		
Date and time:		
Dose given:		
Staff signature:		
Date and time:		
Dose given:		
Staff signature:		
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