



Administering Medicines in School

Reviewed: September 2024

Next review: September 2026

(Review date extended ; awaiting final updates from Gov / DfE regarding listed health conditions).

Aims

- To have a clear policy for managing medicines, which is understood and accepted by staff, parents and pupils.
- Put in place effective management systems to help support individual children with medical needs.
- Make sure that within our early years and school setting, medicines are handled responsibly.
- Help ensure that all school staff are clear about what to do in the event of a medical emergency.

Roles and responsibilities

Staff

There is no legal duty that requires school staff to administer medicines to children, but it is accepted that it is sometimes done. Head Teachers may agree that medication will be administered or allow supervision of self-administration to avoid children losing learning time at school. Each request should be considered on an individual basis. School staff have the right to refuse to be involved. Staff who choose to manage the administration of medicines and those who administer medicines should understand legal liabilities involved and have access to information, training and support from health professionals.

Parents

Parents have the prime responsibility for their child's health and should provide school with full and up to date information about their child's medical condition. Parents, and the child if appropriate, should obtain details from their child's General Practitioner (GP) or paediatrician, if needed. Verbal instructions will not be accepted.

Managing prescription medicines in school

At Berry Hill Primary School our policy is, in the main, to not administer medicines unless prescribed by the GP; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. Examples being asthma inhalers, insulin, epi-pens.

In normal circumstances, we only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. The GP is asked to prescribe an antibiotic which can be given outside of school hours wherever possible. Three times a day doses can normally be given in the morning before school, immediately after school and at bedtime.

In accordance with NHS guidance on spreading out the administering of antibiotics throughout the day, for children in EYFS, we will administer the middle dose of thrice-daily antibiotics. This is in recognition of the child needing to go to bed before a suitable gap could be achieved between the 2nd and 3rd dose.

Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration and dosage.

We never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

On the rare occasion where it is deemed absolutely necessary to administer prescribed medicine, the approval of the head is sought, and then the correct documentation is completed. Parents supply information about the medicine and give their consent for the nominated staff member to administer it. The nominated staff member must ensure they complete the written record every time medicine is administered.

We have recording policies for the administering of any medicines, including inhalers and insulin, and these are completed by office staff.

Managing prescription medicines on trips.

When planning off-site activities we consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. This might include reviewing and revising the visits policy and procedures so that planning arrangements will include the necessary steps to include children with medical needs. It might also include risk assessments for such children.

We ensure that all medicines/inhalers are carried on off-site activities and all members of staff are aware of where they are located.

Non-prescription medicines

As with prescription medicine, in general it is not our policy to administer non-prescription medicines, unless absolutely necessary. Requests for this will be considered on a case-by-case basis at the discretion of the headteacher.

Circumstances which may qualify for such consideration may include pupils who are recovering from a significant injury who may need an additional dose of pain relief or children who might otherwise not attend school should the option of having a non-prescription medicine not exist. In these circumstances, medicines must only be brought in with prior-agreement. The process for non-prescription medicine is the same as that for prescription medication and the correct documentation must be completed. Parents fill in the necessary form (appendix 1) and ensure that the

medicine is handed in to a member of the office staff. All medication must be brought to school in the medicine's original packaging.

On rare occasions over-the-counter medication may be requested for extreme hayfever. This should be treated in the same way as prescribed medication. Staff should never give a non-prescribed medicine to a child unless there is specific prior written permission from the parents which has been agreed by the HT. The approval of the head must be sought and relevant documentation completed by parents and staff.

Travel Sickness Tablets – When going on school trips where travel sickness tablets may be required, staff need to ensure the letter to parents contains a statement asking for consent to administer this. It also needs to be made clear, that parents need to supply the tablet/s in the original box, with dosage stated.

Record Keeping

Although there is no legal requirement for schools to keep records of medicines given to pupils, and the staff involved, it is good practice to do so. Records offer protection to staff and proof that they have followed agreed procedures. As a school we record all medicines given to children. Good records help demonstrate that staff have exercised a duty of care. Copies of these are located in the Managing Medicines file in the office.

ALL completed forms must to be returned to the office file and these will be filed. In our yearly hand over meeting, we ensure that we pass on accurate information to the next class teacher, about all medical conditions.

A list of all asthmatic children is kept on the office wall and shared with staff by email.

Safe storage

The correct and safe storage of medicines is vital to ensure we are carrying out our duty of care to all children. Children should know where their own medicines are stored.

Medicines should be stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which dispensed. Staff should ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration

If medicines are required to be stored in the refrigerator, the one located in the Reception kitchen is to be used. Medicines should be clearly labelled with the child's name.

Asthma inhalers need to be kept in a prominent position in the classroom to ensure all staff and lunch supervisors can locate them quickly, if required.

Disposal

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each term. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the disposal of needles.

Staff Training

First Aid

First Aid Training is renewed as required and is provided by recognised facilitators.

A current list of First Aiders is displayed in the school office, staffroom display board and attached to this policy. All staff have basic first aid training. Paediatric First Aiders in school are Helen Comery Sally Sutton and Nicola Elliott.

The law details that there must be a paediatric trained first aid person present at all times, where children aged 5 and under are present. This also includes off-site activities and trips.

Expiry Dates for First Aid certificates are monitored by the Headteacher and Safeguarding Lead and renewal courses booked as needed.

Training specific to a medical condition is undertaken as and when a child's needs are identified.

Emergency procedures

In the case of a medical emergency involving a child with an individual healthcare plan, the plan is to be taken to the hospital and given to the medical staff to ensure they are provided with the correct information they require.

In the instance of an ambulance being required, there is a 999 Emergency Contact Form located on the Office notice board. This contains all information which will be required by the emergency services.

A member of staff should always accompany a child taken to hospital by ambulance, and should stay until the parent arrives. Health professionals are responsible for any decisions on medical treatment when parents are not available. Staff should never take children to hospital in their own car unless they have business insurance, they

have a second member of staff with them and this has been agreed by the headteacher.

Individual health care plans should include instructions as to how to manage a child in an emergency and identify who is responsible in such a case.

Risk Assessment

Risk Assessments are carried out for all off-site activities in accordance with LA guidelines. Generic risk assessments are adhered to and in all cases, a group specific risk assessment is carried out. All children with medical needs should be identified on here, including asthmatics.

Individual Healthcare Plans (IHCP)

Pupils with certain conditions will have a signed Individual Health Care Plan. The main purpose of an individual health care plan for a child with medical needs is to identify the level of support that is needed. A copy of these is held in the office, and they can be accessed on the school server on Teams – T drive - Medical – Individual Health Care Plans 2024 2025. They are also on individual children's CPOMs records and on Arbor.

An individual health care plan clarifies for staff, parents and the child the help that can be provided.

These are to be reviewed yearly or earlier if a child's medical needs change.

Information for Staff and Others

Staff who may need to deal with an emergency will need to know about a child's medical needs. The office will ensure that supply staff know about any medical needs. Copies of healthcare plans are placed in the school office, shared with school staff including Midday supervisors and kitchen staff.

A list of children requiring an asthma inhaler is placed on the office wall and can be found on Teams – T drive - MEDICAL – ASTHMA CARE PLANS. A copy is emailed termly to staff. Each class teacher is also aware who requires an inhaler.

Appendix 1: Administering Medicines form

BERRY HILL PRIMARY SCHOOL

CONSENT FORM FOR THE ADMINISTRATION OF DRUGS

Name Class

Requires the following dose of medication to be administered within school

Times of day to be given or circumstances	Dosage	Name of medicine/Drug	Method of Drug Administration

I give my consent for a member of staff to administer the above medicine/drugs. I understand that the same member of staff may not be available at all times and the medicine/drug may be administered by a different member of staff.

I undertake to deliver the correct medication (only doctor prescribed) to the school office in the original child-proof container/bottle and spoon if necessary which will be administered according to my instructions above. The medication will be kept in a safe place at all times.

I acknowledge that any staff involved in the administering of medication in school are not qualified medical practitioners nor holding themselves out to be qualified medical practitioners.

I understand that the staff in the school will take reasonable care in the administration of medicines in school and will endeavour to respond appropriately in all circumstances should emergency treatment be required.

Signed Parent/carer

Date