

KINGS HEATH PRIMARY SCHOOL POLICY ON THE ADMINISTRATION AND MANAGEMENT OF PRESCRIBED MEDICINES

Approved by: Safeguarding & Inclusion Committee Date: 08.03.2021

Last reviewed on: 08.03.2021

Next review due by: _____Spring 2022_____

1. Introduction

This policy is written using the most recent guidance from BCC Health and Safety Department (July 2002) and should be read in conjunction with the Department for Education 'Supporting Pupils at school with Medical Needs' — Statutory Guidance September 2014. It is also written with regard to the Code of Practice for SEND (2014) and the Equality Act (2010)

Our attendance policy encourages children to attend school if they are medically fit to do so. This policy seeks to support this is several ways

- To enable children who are fit for school but need to take a prescribed medicine to manage a medical condition to fully participate and attend school – both long term and short term
- To ensure that children are not excluded from education or activities because of their condition
- To ensure that any administration of medicines by school staff is done so safely and correctly

This policy in no way seeks to over ride the conditions that make it necessary for a child to be off school – for example with an infectious disease or a quarantine period following sickness and diarrhoea. It also makes provision for the administration of medicines by school staff only when the school is satisfied that parents / guardians have exhausted every other possible means.

This policy applies primarily to the administration of medicines prescribed by a medical practitioner. The school will administer over the counter medicines in certain circumstances – see below. The school will not administer any form of homeopathic drug. We do not allow children to self medicines during school time. Parents (or an adult nominated by the parent) may come to school during the day to administer.

In order to minimise unnecessary discomfort from common afflictions the school will allow

- 1. Administration of piriton for the relief of hayfever symptoms during the summer months. This will require the same paperwork as other medicines and should only be considered where a 24 hour dose is not appropriate.
- 2. Throat sweets to relieve symptoms related to severe colds. These can be held by the class teacher and given at appropriate periods.
- 3. Paracetamol, iprobrufen and Calpol to manage minor pain and low grade fever.

For both of the above, the administration will be for the shortest possible time period to manage symptoms.

2. Management of Prescribed Medicines

It should be the exception rather than the rule for prescribed medicines to be brought into school. Parents should be advised that a request to administer prescribed medicines at school will only be considered after all other options have been explored.

Parents/carers should be encouraged to discuss with their Doctor/Consultant the administration of prescribed medication. Part of this discussion should focus on whether the prescribed medication can be administered outside of normal school hours.

It is normally expected that parents/carers should administer prescribed medicines to their children.

All parents should be advised that each request for prescribed medicines to be administered to a pupil would be considered on an individual basis in line with the Governors/schools policy.

As previously stated, the administration of prescribed medication to children is a parent/carer responsibility, however, in certain circumstances schools may be asked to perform this task, but they may not, however, be directed to do so. The administering of prescribed medicines by any member of staff is entirely voluntary.

Whether agreeing or refusing to administer medicines in school, the Head's decision will be defensible if it is clear that he or she has acted reasonably.

3. Responsibilities

For the administration of prescribed medicines to work effectively and safely it requires a partnership between the parents/carers and the school to be developed.

This partnership will place responsibilities not only on the school but also on the parents/carers and in some circumstances, the pupil as well. The following gives an outline of the main areas of responsibility:

Governors.

The Governor's have overall responsibility for all Health and Safety issues in school (see Health and Safety Policy) but delegate day to day responsibility for its implementation to the Head Teacher.

Head Teacher.

The Head Teacher is responsible for the formulation, implementation and review of this policy and for ensuring that the procedures within it are known to staff.

To this end, the Head Teacher will ensure that

- Any school staff who agree to administer medication receive information about how and when the medication is to be administered.
- Training is provided for any member of staff administering a specific medication on a long term basis.
- Any necessary protective clothing or equipment is provided
- Regular training regarding the administration of emergency medication and management of known medical conditions in school is provided.
- Any staff who agree to administer medication are aware of the risks and legal liabilities involved (see below).

School Staff.

It is the responsibility of all school staff to read and comply with the procedures outlined in this policy. It is also the responsibility of school staff to bring to the attention of the Head Teacher any possible risks to children or staff that are not covered under this policy.

Parents / Carers.

All parents/carers of pupils in the school will be made aware of the school policy on medicines and a written copy should be provided on request.

It is the responsibility of parents/carers to fully co-operate with the school to ensure the safety and well being of their child.

<u>Pupils</u>

According to their age and maturity, pupils have specific responsibilities in relation to administration of medicines.

Pupils must co-operate with members of staff in enabling the safe administration of medicines. Any failure to do this – for example, deliberate removal of themselves from the site of medication, refusing to allow the medication in their mouth – will result in the parent being telephoned and requested to administer the medicine and may result in the withdrawal of the school's agreement to administer medicines to the child.

Members of staff will not be required to administer medication to a child who is persistently refusing the treatment, unless the situation is an acute emergency. In this situation, the assistance of the emergency services will also be called.

4. Requests for medicine to be administered by the school.

Parents/carers must complete a general consent form which will be signed and dated. Verbal instructions <u>will not</u> be accepted in any circumstances.

Any changes to the administration instructions will require the completion of a new consent form. Copies of these consent forms are attached in appendix 1.

Parents/carers will be responsible for ensuring that there is sufficient medicine to be administered and that it is within the expiry date. Medicine should be provided to the school in the original container from the pharmacy and clearly labelled with:

- child's name
- name of medicine
- how much to give i.e. dose
- when to be given
- any other instructions

At the completion of a course of treatment, or if the medicine passes its expiry date, the medicine will be returned to the parents/carers for disposal.

If pupils are administering prescribed medicines themselves a fully completed consent form, signed and dated by the parents/carers, would still be required.

5. Out of School Activities/Educational Visits

The activity leader is responsible for ensuring that the Head Teacher is aware of any children who may need administration of medicines during an offsite activity. It is essential that before pupils take part in out of school activities a full risk assessment be undertaken in respect of the possible administration of medicines and medical treatment to pupils. This risk assessment will cover

- any specific risk factors in the activity relevant to the medical condition.
- the availability of members of staff in the party who are willing to administer medication.
- the ability to make appropriate arrangements for safe storage of the medicine throughout the activity.

While all practical and reasonable steps will be taken to allow the child to participate, the school may make the decision that it can not guarantee the safety of the child and therefore not allow the child to take part in the visit. In such circumstances, parents will always be offered the option to accompany the child themselves.

6. Storage of Medicines

All medicines for administration will be securely stored in the first aid room. Refrigeration facilities will be available if required. Emergency and life-saving medicines (eg epi-pens) will also be kept in the first aid room. All medicine storage cabinets will be locked, with the key located in the same room in a place known to all members of staff.

It is the responsibility of parents / carers to ensure that the school is given accurate information relating to the storage of medicines.

Asthma inhalers should not be locked away. Wherever possible pupils should be responsible for their own inhalers which should be clearly marked with the pupil's name. All inhalers should be stored in a clearly marked box in a central place in the classroom.

Lunchtime supervisors will be made aware of all children in their classes who suffer from asthma. Inhaler boxes will be placed outside classrooms during all break times and the location of these made known to the supervisors, to enable quick access to inhalers should classrooms be locked.

7. Emergency Medication

While there are concerns about the misuse of inhalers, either by the pupil or other pupils, the need for the pupil to have ready access should override any concerns about misuse.

The school has exercised the option within the new guidelines on supporting pupils with medical needs in school (2014) to purchase and keep salbutamol inhalers in school. In line with the guidance, these inhalers will only be prescribed to children on the asthma register, where explicit signed parental consent has been gained and when the situation is judged to be an emergency.

The school has also exercised the option within the new guidelines on supporting pupils with medical needs in school (2017) to purchase and keep an adrenaline auto-injector in school. In line with the guidance, the emergency AAI should only be used on pupils known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for the use of the spare AAI has been provided. The spare AAI can also be used if the pupils prescribed AAI is not available, not working (for example, because it is broken or empty) or cannot be administered correctly without delay.

8. Check list for administering medication/care to support school staff in the safe administration of medication/care.

- Staff responsible for administering medication/care have received any appropriate training.
- Parent/carer consent has been recorded.
- An individual health care plan is in place for medication/care that is Long-term (over 8 days including weekends)
- You have communicated and shared all critical information to any staff to assist them managing continuity of care

Where medicines are not prescribed

- Non-prescribed medication should not contain aspirin.
- Medication should be in the original package with prescribing information available.
- The child's name and class must be written on the package. Care must be taken as some medications may have a different brand names but the medication may be the same e.g. paracetamol- also known and contained in Calpol, para-med.

9. Disposal of medicines.

Staff must not dispose of medicines, parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. Return of such medicines to parents/carers will be documented. Parents/carers should also collect medicines held at the end of the school year. If parents/carers do not collect all medicines, they will be taken to a local pharmacy for safe disposal. This process will be documented. Sharps boxes will always be used for the disposal of needles. Collection and disposal of the boxes will be arranged with Birmingham City Council.

10. Hygiene and Infection Control

All staff should be familiar with normal precautions for avoiding infection and follow hygiene procedures. Staff will have access to personal protective equipment to avoid infection or risks of cross contamination when administering medicines/lotions, in addition staff will take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

11. Birmingham Education Service

Birmingham Education Service as part of Birmingham City Council indemnifies its staff against claims of alleged negligence when administering prescribed medicines providing they are acting in a reasonable manner and in the best interests of pupils and have received training where appropriate.

Any claims for alleged negligence would be directed against the insurance holder, i.e. Birmingham Education Service and not the individual concerned.

A full extract of the Birmingham City Council's Indemnity is reproduced as Appendix 2.

12. Policy Review.

This Policy will be reviewed annually by the Health and Safety Committee of the Governing Body or as necessary in the light of changing legislation.

13. Policy Links

- Supporting children with Medical Needs in School
- Accessibility plan
- Complaints
- Equalities
- First aid
- Health and safety
- Safeguarding
- Special educational needs
- Anaphylaxis, Asthma and Allergies