



# Administering Medicines Policy

<b>Revised by School</b>	February 2023
<b>Responsible Person</b>	Headteacher
<b>Responsible Committee</b>	Full Governing Body
<b>Ratified by GB</b>	18.7.18
<b>Next Review</b>	February 2025

## 1. Introduction

The Governors and staff of Kingsham Primary school wish to ensure that children requiring medication receive appropriate care and support at school.

**Please note that parents should keep their children at home if acutely unwell or infectious.**

## 2. Responsibilities

### Governors

To monitor the effectiveness of this policy and to ensure that it is reviewed on a regular basis to ensure that it is up-to date and follows the most recent recommendations from the government.

### Headteacher

Will accept responsibility in principle for members of the school staff giving or supervising pupils taking prescribed medication during the school day.

Responsible for making all parties aware of this policy and for ensuring its successful implementation.

Responsible for ensuring that there are sufficient staff available who are adequately trained to support the needs of the children at Kingsham Primary. This training includes, but is not limited to, First Aid, Administering Medicines, and Auto Injector and inhaler training.

### Parents

Parents are responsible for providing the Headteacher with comprehensive information regarding the pupil's health and medication. See Appendix 1. It is the parent's responsibility to notify the school if there are any changes to their child's medication.

Parents have a responsibility to be available to the school at all times in case of a medical emergency.

Parents have a responsibility to adhere to this policy at all times.

### Staff

Staff are responsible for following the guidance set down in this policy and the policies that support it.

### **3. Prescribed Medication**

Parents must complete the Parental Consent to Administer Prescribed Short-term medication form to give consent for the school to administer prescribed medicine to their child. See Appendix 3.

All medicines must be handed to the staff in the school office.

Each item of medication must be delivered to the school office, by the parent or an appropriate adult, **in the original container it was dispensed in and must include the Patient Information Leaflet that accompanies it.** Each item of medication must be clearly labelled with the following information:

- Pupil's Name.
- Name of medication.
- Dosage.
- Frequency of administration.
- Date of dispensing.
- Storage requirements (if important).
- Expiry date.

**The school will not accept items of medication in unlabelled containers.**

The dosage of medication administered will be in accordance with the prescriber's instructions. The school will not make changes to prescription dosages on parental instructions.

Only reasonable quantities of medication should be supplied to the school (for example, a maximum of one week supply at any one time), except for asthma medication. For further information on Asthma medication in school please refer to the school Asthma Policy.

Medication must be collected by the parent, or appropriate adult, at the end of each school day.

### **4. Non-Prescribed Medication**

In order for either of the medications mentioned below to be given to a pupil, parents must have previously given written consent in advance and confirmed that the medication has been administered previously without any adverse effects. See Appendix 2. This written consent will be renewed on a termly basis and parents will be given the option to withdraw permission at any point.

#### **Paracetamol Oral Suspension**

The school has liquid paracetamol that can be administered to pupils should relevant symptoms develop during the school day.

The dose and amount given must be given in line with the medication guidelines. Medication will only be administered when a minimum of 4 hours has elapsed from the previous dose, if any.

The school will only purchase standard medication i.e. no plus caffeine or 'extra' etc.

Parents will be called before the medication is given to ensure that no medication was given before the start of the school day and to inform them what medication is being given, the dose, and why. If the parents/carer cannot be contacted, and it is before 1pm, then the school will not administer the medicine. This will ensure that there is no chance the child can be given an overdose.

### **Antihistamine**

If a child should experience a mild allergic reaction i.e. itchy skin, sneezing, itchy eyes, a rash etc., whilst in school one standard dose of a liquid antihistamine can be given as long as the school has written consent from the parent as stated above.

Once administered the child must be observed to ensure that the reaction does not develop further or change.

Should the reaction develop into a severe allergic reaction and the child has a prescribed auto-injector then this should be administered immediately, the ambulance called and the parents informed.

Antihistamine will never be administered by the school for relief of hay fever symptoms.

### **Other medication**

The school will not administer any other type of non-prescribed medication, this includes but is not limited to;

- Cough syrup or sweets
- Ibuprofen

Travel sickness medication will only be administered when supplied by the parent in its original container with the Patient Information Leaflet. The amount administered will be in line with the medication guidance. Written parental consent must be gained before administering and confirmation that the medication has been administered before without adverse effect.

Medicated creams will be administered in line with our intimate care policy and children must be able to self-administer.

***Records will be kept of any medication given. See Appendix 3, 4 & 5.***

THE SCHOOL WILL NOT ADMINISTER NON-PRESCRIPTION MEDICINES;

- As a preventative
- If the pupil is taking other prescribed or non-prescribed medication i.e. only one non-prescription medication will be administered at one time.
- For more than 48 hours

## **5. Storage of Medication**

Medication will be kept in a secure place, out of the reach of pupils, in line with the product instructions and in its original packaging.

Staff and pupil should know where all medication is stored and how to gain access to it.

Emergency medicines such as asthma inhalers and auto-injectors are NOT locked away.

Medicines requiring refrigeration should be kept in the medicines fridge in the school office.

School staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each week. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.

## **6. Administering medication**

The administering of medications is documented on a signed administering of medicines form (Appendix 6)

It is expected that in normal circumstances the child requiring medication will be known to the member of staff administering it. There should be a mechanism in place which enables staff administering medication to positively identify the child at the time of administration e.g. by confirming with the child where possible their name, date of birth and/or comparing with a recent photo attached to the medication administration record / consent form. There must be a check that the name of the child, the name on the medication and the name on the consent form are the same.

When the child is not known or cannot give his or her details then a second check with a member of staff who does know the child and comparison with a recent photo or some other way of checking identity should be implemented.

As a general guideline before administering medication to a child the staff member should:

- Wash their hands
- Ensure that a drink is available if appropriate (some tablets can irritate and damage the throat and oesophagus if administered without a drink)
- Check the label on the medication
- Check the name of child
- Check that there is written consent from a parent/carer
- Check that the medication name and strength and dose instructions match the details on the consent form
- Check that the name on the medication label is that of the child being given the medication
- Check that the medication to be given is in date
- Check that the child has not already been given the medication

- Check the route of administration (e.g. by mouth, into ear/eye, rubbed on the skin)
- It is the correct time to administer
- Check for any special instructions

If there are any concerns about giving a medication to a child, then the member of staff must not administer the medication but should check with the parent/carer or a health professional, documenting any action taken.

If children refuse to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

School staff will NOT administer any medicine that is required twice a day, this should be administered at home in the morning and night.

If a child requires medication 3 or 4 times per 24 hours then the parents must inform the school of the time that the medication needs to be administered.

Only children with a Health Care Plan are able to self-administer medication. This does not include asthma inhalers.

## **7. Long term medication needs**

For each pupil with long-term or complex medication needs, the Headteacher, will ensure that a Health Care Plan is drawn up, in conjunction with the appropriate health professionals.

Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. This decision, and the decision on whether or not a child can carry their own medication, will be made after a careful assessment has been completed by the SENCo and the appropriate health care professionals. These decisions will be clearly stated in the child's Health Care Plan.

It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased.

It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.

The school will not make changes to prescription dosages on parental instructions.

All long term medication requirements will need to be shared with the school in writing and as soon as possible. A supporting letter from the child's GP will also be required to confirm this.

## **8. Trips**

The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required.

For residential trips, the school will take their own Paracetamol oral suspension and anti-histamine in case of an emergency.

The school must gain written consent before the departure date in order to administer any medication whilst on the trip. This consent must include that the parent certifies that they have administered the medication previously without adverse reaction. See Appendix 9.

All staff will be made aware of the procedures to be followed in the event of an emergency.

## **9. Emergency Procedures**

Emergency procedures are as follows;

All pain relief medication – if it is believed that the child has been given too much pain relief medication or if the pupil develops a rash or swelling this might indicate an allergic reaction, call 999 and contact the parents.

All other Non-prescription medication – If it is believed that the child is having a reaction to the medication i.e. rashes, difficulty breathing, feeling unwell or if symptoms worsen then the parents should be notified immediately and if necessary the emergency services should be called.

Appendix 8 should be used when contacting the emergency services.

## **10. Training**

At least two members of school staff will be trained in the management of medicines.

All staff who are expected to administer medicines should have successfully completed the Managing Medicines test from West Sussex.

Medication for epilepsy, diabetes, and anaphylaxis will require additional training. This training will be conducted by the school nursing service once a year and is essential for any staff member who may be asked to administer such medication. Staff may not administer these medicines without having successfully completed this training.

## **11. Reporting Incidents**

If there is a mistake in the administration of medication and the pupil is;

- Given the wrong medication
- Given the wrong dose
- Given medication at the wrong time (insufficient intervals between doses)
- Given medication that is out of date, or

- Wrong pupil given medication

Then the incident must be reported to the parents, the Academy Trust and the local authority. If necessary the incident will need to be investigated by a member of the senior leadership team.

## **12. Emergency Use Medication**

Following changes to the Human Medicines Act the school has purchased two asthma inhalers and an auto injector that can be used in an emergency. The school has also purchased a number of disposable spacers to be used with the emergency inhaler.

Emergency Inhalers can be found in the medical cabinet in welfare and in the emergency evacuation bag in the school office. The emergency auto-injector can be found in the school office.

Consent must be gained when a child starts the school to administer the emergency inhaler and/or the emergency auto-injector.

**Appendix 1**

**Pupil Health Information Form**

This information will be kept securely with your child's other records. If further information is needed we will contact you. Please do not hesitate to contact the school if there are any issues you wish to discuss.

<b>Childs Name</b>	<b>D.O.B</b>
<b>Completed by</b>	<b>Signature</b>

Please complete if applicable

Has your child been diagnosed with or are you concerned about any of the following:

<b>Condition</b>	<b>Yes</b>	<b>No</b>	<b>Medication</b>
<b>Asthma</b>			
<b>Allergies/Anaphylaxis</b>			
<b>Epilepsy</b>			
<b>Diabetes</b>			

Is your child taking regular medication for any condition other than those listed on the previous page – continue on a separate sheet if necessary.

Condition	Medication, emergency requirements

Please use the space below to tell us about any other concerns you have regarding your child's health, continue on a separate sheet if necessary:

**Thank you**

**Appendix 2.**

**Parent/carer consent to administer short-term non-prescribed 'ad-hoc' medicines**

The school will not administer medication unless this form is completed and signed. This information will be kept securely with your child's other records. If further information is needed we will contact you. Please do not hesitate to contact the school if there are any issues you wish to discuss.

<b>Pupils Name</b>	<b>D.O.B</b>
<b>Gender</b>	<b>Class</b>

The Administering Medicines Policy permits the school to administer the following non-prescription medication if your child develops the relevant symptoms during the school day. Pupils will be given a standard dose suitable to their age and weight. You will be informed when the school has administered medication by telephone call. The school holds a small stock of the following medicines:

Paracetamol – Calpol sugar free suspension, strawberry flavour

Anti-histamine – Piriton syrup

***Tick the non-prescription medications above that you give your consent for the school to administer during the school day and confirm that you have administered these medications in the past without adverse effect. Please keep the school informed of any changes to this consent.***

**NB. Medicines will only be given if symptoms present themselves and will not be given as preventative medication.**

Signature(s) Parent/Carer \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

### Appendix 3

#### Parental consent to administer medication

*(where an Individual Healthcare Plan or Education Healthcare Plan is not required)*

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

#### Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy and the manufacturer's instructions and/or Patient Information Leaflet (PIL) must be included

#### Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff or school location]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I confirm that this medication has been administered to my child in the past without adverse effect. 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.

Signature(s) \_\_\_\_\_ Date \_\_\_\_\_

**Appendix 4**

**Individual Protocol for non-prescribed medication**

**This form should be completed in conjunction with Appendix 3 – parental consent**

Under exceptional circumstances where it is deemed that their administration is required to allow the pupil to remain in school the school will administer non-prescription medicines for a maximum of 48 hours.

Date (requirement reviewed daily)	Time last dose administered at home as informed by parent/carer	Dosage given in school	Time	Comments
Day 1				
Day 2				

3 main side effects of medication as detailed on manufacturer’s instructions or PIL		
1.	2.	3.

Emergency procedures – if the pupil develops any of the signs or symptoms mentioned above or any other signs of reaction as detailed on the manufacturer’s instructions and/or PIL this might be a sign of a negative reaction or if it is suspected that the child has taken too much medication in a 24 hour period staff will call 999 and then contact the parent/carer(s).

I agree that the medical information contained in this plan may be shared with individuals involved with my child’s care and education.

I am aware that each day I must inform the school when I last administered the medication and that I will be informed by the school in writing when medication has been administered by phone call.

Agreed by: Parent/carer.....Date.....

**Appendix 5.**

**Record of medicine administered to an individual child**

Name of school	Kingsham Primary School
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature \_\_\_\_\_

Signature of parent \_\_\_\_\_

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

**Appendix 5.**

**Record of medicine administered to an individual child (Continued)**

Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by


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Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by


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Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by


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Date

Time given

Dose given

Controlled drug stock

Name of member of staff

Staff initials

Witnessed by




Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. Telephone number - 01243 784046
2. Your location as follows;

<p><b>Kingsham Primary School</b> <b>Hay Road</b> <b>Chichester</b> <b>West Sussex</b></p>
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3. State what the postcode is – please note that postcodes

<p><b>PO19 8BN</b></p>
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4. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient

<p><b>Best entrance is: Main School entrance on Hay Road</b></p>
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5. your name
6. provide the exact location of the patient within the school setting
7. provide the name of the child and a brief description of their symptoms
8. put a completed copy of this form by the phone

**Appendix 8. Consent to administer non-prescribed medication on a Residential Visit**

The school will not administer medication unless this form is completed and signed. This information will be kept securely with your child’s other records. Whilst away if your child feels unwell the school staff may wish to administer the appropriate non-prescription.

Please do not hesitate to contact the school if there are any issues you wish to discuss.

<b>Pupils Name</b>	<b>D.O.B</b>
<b>Gender</b>	<b>Class</b>

If your child develops the relevant symptoms during the residential visit, with your consent they will be given a standard dose suitable to their age and weight of the appropriate non-prescribed medication. If symptoms persist medical advice will be sought and if necessary the emergency services called. You will be informed when the school has administered medication on our return by telephone.

The school will hold a small stock of the following medicines:

Paracetamol brand .....

Anti-histamine brand .....

***Please tick the non-prescription medications that you give your consent for the school to administer their stock of during the residential visit.***

If you would like your child to be given travel sickness medication please supply medication suitable for their age and weight in its original packaging with the patient information leaflet

Travel sickness

***I give my consent for the medications ticked above to be administered by the school from their stock and confirm I have administered them to my child in the past without adverse effect.***

Signature(s) Parent/Carer \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_