



**Thomas Russell Infants' School**  
**Administering Medicines**  
**Procedure**  
**SEPTEMBER 2022**

### **1. INTRODUCTION AND GENERAL PRINCIPLES**

The staff and governors of Thomas Russell Infants School are wholly committed to pursuing a policy of inclusive education that welcomes and supports pupils with medical conditions. This policy is designed to support the management of medication and medical care in school and to support individual pupils with medical needs. The policy complies with DCFS guidelines for 'Managing Medicines in Schools and Early Years Settings (2004)'

### **2. RATIONALE AND AIMS**

To provide a clear policy that is understood and accepted by all staff, parents and children, providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that for such children attendance is as regular as possible.

### **3. RESPONSIBILITIES**

- a. Parents or guardians have prime responsibility for their child's health and should provide the school with up to date information about their child's medical conditions, treatment and/or any special care needed. If their child has a more complex medical condition, they should work with the school nurse or other health professionals to develop an individual healthcare plan, which will include an agreement on the role of the school in managing any medical needs and potential emergencies. It is the parent/carers responsibility to make sure that their child is well enough to attend school.
- b. **There is no legal duty which requires school staff to administer medication; this is a voluntary role.** While teachers have a general professional duty to safeguard the health and safety of their pupils and to act in 'loco parentis', that is, to act as any reasonable parent would, this does not imply a duty or obligation to administer medication. Staff will have access to information on pupils' medical conditions and actions to take in an emergency. Staff managing the administration of medicines and those who administer medicines will receive appropriate training and support from health professionals.
- c. The policy of Thomas Russell Infants School is not to administer medication or medical care unless the pupil has a medical condition, which if not managed, could prove detrimental to their health or limit access to education.
- d. The head teacher accepts responsibility, in principle, for school staff administering or supervising the taking of prescribed medication or medical care during the school day only where it is absolutely necessary. Wherever possible, the headteacher will be the person, administering the medicine.

### **4. PRESCRIBED MEDICINES**

- a. Prescribed medicines should only be brought to school when essential; that is, where it would be detrimental to a child's health if the medicine were not administered during the school day. Only medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber and are presented in the original container dispensed by a pharmacist and include the pupil's name, prescriber's instructions for administration and dosage, will be administered.
- b. Under normal circumstances medicines prescribed 'three times a day' should be

administered before school, after school and at night and will not be administered by school staff.

- c. School will administer a dose of medicine at lunchtime if the medicine states 'four times a day'. Medicines will not be kept in setting and will need to be taken home each day. Exceptions to this are inhalers where the child has a spare or emergency medications agreed on care plans.
- d. Exceptions to this are pupils on health care plans who have individual medical needs requiring regular or emergency medication to treat specific conditions. This would include medicines prescribed three times a day in circumstances where timings need to be within a school day.

## **5. ADMINISTERING MEDICINES**

Thomas Russell Infants School recognises no child under 16 should be given medicines without their parent's written consent. Following written consent using 'Permission to administer medicines form', any member of staff administering medicines to a pupil should check:

- The child's name
- Name of medication
- The prescribed dose
- Expiry date
- Written instructions provided by the prescriber on the label or container

If in doubt about any procedure, staff will not administer the medicine before checking with parents or a health professional before taking further action.

A written record must be kept following administration of medicines to pupils.

If a child refuses to take a medicine, staff will not force them to do so, but will record this on the form and parents/carers will be notified of the refusal.

## **6. LONG-TERM MEDICAL NEED**

Where a pupil has a chronic illness, medical or potentially life threatening condition, the school will initiate a Health Care Plan to meet individual needs and support the pupil. This will be drawn up by health care professionals or the school in consultation with the child's parents or guardians and will contain the following information:

- Definition and details of the condition
- Special requirements e.g. dietary needs, pre-activity precautions
- Treatment and medication
- What action to take/not to take in an emergency
- Who to contact in an emergency
- Staff training where required
- The role the staff can play
- Consent and agreement

## **7. RECORD KEEPING**

Parents should tell the school about the medicines their child needs to take and provide details of any changes to the prescription or the support required. Medicines should always be provided in the original container as dispensed by the pharmacist and include the prescriber's instructions.

Requests for staff to administer medication should be written on 'Permission to administer medicines form' These should include:

- Name of child

- Name of medicine
- Dose
- Method of administration
- Time/frequency of medication
- Any side effects
- Expiry date

Completed forms will be kept in the headteacher's office and referred to when administering medication. A record form must be completed by the headteacher or staff member following administration; this will also be retained by the school office.

Requests for updated medical information including asthma are distributed to parents at the beginning of each school year. These are collated by the school office and registered and recorded in SIMS and class folders. All staff have access to this information and actions to take in an emergency.

Children with food allergies have their photographs and details displayed in the catering manager's office to ensure that food products are safe for children.

Updated medical conditions and reviews of policies and practice are monitored and disseminated by the school office in liaison with the headteacher as they are presented.

### **8. STORING MEDICINES**

Staff will only store, supervise and administer medicine that has been prescribed for an individual child. Medicines must be stored safely in the pharmacist's original container and clearly labelled with the child's name, the dosage and instructions for administration.

Non-emergency prescribed medication is stored with the 'Permission to administer medicines form' in the headteacher's office. Medication requiring refrigeration is stored in the staffroom fridge.

Emergency medications such as Epi-pens and asthma inhalers should be readily available in the classroom. Children should know where their medicines are stored; they should not be locked away.

Parents are ultimately responsible for checking expiry dates on their children's medicines and replacing as necessary.

### **9. DISPOSAL OF MEDICINES**

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 year. Any medicines that have not been collected should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the safe disposal of needles. Parents should obtain these from their child's GP and return to a pharmacy for safe disposal.

### **10. EMERGENCY PROCEDURES**

- All staff are aware of procedures when dealing with a medical emergency. These should be supervised by a trained First Aider.
- All staff are aware of pupils on a Health Care Plan and understand the need to follow agreed emergency support.
- All staff know how to call the emergency services; guidance is displayed on the school office noticeboard.
- In the event of an emergency, every effort will be made to contact a parent so that they

may accompany their child to hospital. If this is not possible, a member of staff will accompany the child to hospital by ambulance and stay until the parent arrives. Health care professionals are responsible for any decisions on medical treatment when parents are not available.

### **11. EDUCATIONAL VISITS**

Thomas Russell Infants School actively encourages children with medical needs to participate in trips and visits. Staff will aim to facilitate reasonable adjustments to enable pupils with medical needs to participate fully and safely on visits. Risk assessments will be used to highlight any potential difficulties and ensure procedures are in place to support pupils. Additional staff/adults will be considered for this purpose.

Accompanying staff will be aware of any medical needs and relevant emergency procedures. A copy of Health Care Plans will be taken on all visits as well as emergency medication that may be required.

### **12. STAFF TRAINING**

Key staff at Thomas Russell Infants School have received Paediatric First Aid Training and School's First Aid training. This is renewed on a three yearly basis.

Staff training is provided to support the administration of emergency medications such as Epi-pens or insulin where necessary. Only staff who have received this training should administer such medications.

### **14) MEDICAL CONDITIONS**

#### **ASTHMA**

Thomas Russell Infants School recognises that asthma is a widespread, potentially serious, but controllable condition and encourages pupils with asthma to achieve their potential in all aspects of school life.

- a. Parents have a duty to inform staff if their child is asthmatic. Preventative inhalers should be provided and labelled with the pupil and class name. These should be kept in an assigned container within the teacher's cupboard and accompany the child if they are educated outside the school premises.
- b. Children with asthma must have immediate access to inhalers when they need them and know where they are kept. A spacer device may be required and the pupil may need support to use this.
- c. Parents should be notified when a child has used an inhaler excessively or more regularly than usual.
- d. Pupils with asthma are listed in the school medical Register, found in the headteachers office, the school office and all classrooms.
- e. Leaders of 'after school clubs' are notified on club registers if a member is asthmatic.

#### **HEAD INJURIES**

Pupils who sustain a head injury MUST be reviewed by a First Aider in school. Parents will always be informed of a head injury and are welcome to assess their child personally. Where there are no residual effects, the pupil can remain in school whilst being observed if the parent wishes.

#### **EPILEPSY, ANAPHYLAXIS AND DIABETES**

Parents have a duty and responsibility to notify the school if their child has any of these conditions and should provide details of any treatment and support they may require in school. Relevant health care professionals will liaise between parents/guardians and school personnel to ensure staff are aware of, and trained to provide, any relevant or emergency support or treatment. An individual Health Care Plan will usually be compiled, detailing the course of action to be taken.