

Inspiring each other to achieve success



Congerstone Primary School

Congerstone Primary School Management of medication procedures Policy

Adopted from: **LA Policy** (due for renewal 04/2020)

Policy to be reviewed: **Every 3 years** (earlier if circumstances within school change)

Last reviewed: **October 2014, Jan 2018, 2019, Sept 2020**

Date of next review **Sept 2023**

*This document is produced in conjunction with the Leicestershire Partnership Trust. We would like to acknowledge input from professional bodies and services with Leicestershire County, City and Rutland. This policy document has been made site specific for our school **An annual review is required** Please note additional information is available in the appendices listed on the schools website www.leicestershiretradedservices.org.uk relating to Individual Care Plans and specific medical needs/conditions*

Signed: Date:
Chair of Governors

Name:

Signed: Date:
Headteacher



1.0 Introduction

- 1.1 This document is revised in line with current Department for Education 'Supporting pupils at school with medication conditions' (September 2015) which replaces previous 'Managing medicines in schools and early years settings' (2005).
- 1.2 The Children and Families Act (Section 100) places a duty on governing bodies of maintained schools, proprietors of academies and management committees of Pupil Referral Units to make arrangements for supporting pupils with medical conditions.
- 1.3 This policy covers the general management of prescribed and non-prescribed medication. Such medications could be on a temporary, short term or one off basis or for a longer term or continual period for pupils with ongoing support needs. Pupils who have longer term support needs should have an individual health care plan developed, recorded and reviewed at least annually.
- 1.4 Guidelines and information on administration of specific medicines for specific conditions are included in the appendices of the Leicestershire Traded Services website www.leicestershiretradedservices.org.uk.

2.0 General Principles

- 2.1 The Board of Governors and staff at Congerstone Primary School wish to ensure that pupils with medication needs receive appropriate care and support while at school so that they have full access to education.
- 2.2 The head teacher accepts responsibility for members of the school staff giving or supervising pupils taking prescribed or non-prescribed medication during the school day.
- 2.3 Where possible, pupils will be encouraged to self-administer their own medication, but only with the oversight of school staff.
- 2.4 When medication is administered by staff, it shall be by those members of staff that have volunteered and been trained to do so, unless medically qualified staff are employed on site. It will not automatically be assumed that a qualified first aider will fulfil this role.
- 2.5 Staff will not give prescription or non-prescription medication unless there is specific written consent from a parent or guardian.
 - For prescription medicines, directions on the consent form and pharmacy label must match or appropriate evidence provided explaining the discrepancy.
 - For non-prescription medicines, such as hay fever treatment or cough/cold remedies, staff must ensure that the directions on the consent form coincide with that on the medicine box
- 2.6 All medication must be in its original packaging or that decanted by the pharmacist.
- 2.7 Prescribed medicines should be in original containers, or that decanted by the pharmacist, labelled with the pupil's name, dose, and frequency of administration, storage requirements and expiry date.
- 2.8 Generally, it is not necessary for an over the counter medicine to be prescribed by a medical practitioner in order to be administered in the school setting. The exception is where the child may already be taking prescribed medication and there may be an interaction between prescribed and non-prescribed medicines. In this instance, all medications should be prescribed. Aspirin should not be given to children under 16 years of age unless prescribed.
- 2.9 Pupils that have ongoing, long term or potentially emergency medication requirements should have an individual care plan completed and reviewed regularly. Pupils who require temporary, short-term medication only require a consent form to be completed.

3.0 Responsibilities

3.1 Training

- 3.1.1. Educational settings should ensure that members of staff who volunteer to administer medicines will be offered professional training and support as appropriate and required.

3.1 Storage

- 3.2.1. Medication must be kept in a known, safe, secure location. This may need to be a fridge depending on the medication and manufacturer requirements. (door compartments of the staffroom fridge within a sealed plastic bag/box)

- 3.2.1. In certain instances, pupils may take some responsibility for their medication, e.g Diabetes medication, after consultation with parent/guardian and consent has been received, kept with child in class during lessons and office at lunchtime, but only administered with adult supervision.
- 3.2.2 Prescribed emergency medication, such as asthma inhalers, should remain with the pupil at all times. (e.g Inhaler Station within class)The child will use it under adult supervision.
- 3.2.3 Prescribed emergency medication, such as adrenaline auto injectors, are stored securely, but readily accessible within the school office. Child knows where their medication is stored.
- 3.2.4 Parents/guardians are responsible for ensuring that school has an adequate amount of medication for their child. As a general rule, no more than four weeks of medication should be stored at any one time.
- 3.2.5 An emergency school asthma inhaler kit is located in the school office and is taken to the evacuation assembly point in the event of a fire (fire drill)

3.3 Disposal of medication

- 3.3.1 Procedures using sharp items should be disposed of safely using a sharps bin. These are available on prescription where needed.
- 3.3.2 Parents/guardians are responsible for collecting remaining medication at the end of each day or term (as appropriate) and for re-stocking medication at the start of each term.
- 3.3.3 Parents/guardians are responsible for ensuring that medication is within its expiry date and that any expired medication is returned to the pharmacy for safe disposal.

3.4 Record keeping

- 3.4.1 Consent forms must be signed before any medication is given. School is responsible for storing copies of signed consent forms. Consent forms should include:
 - The pupil's name, age and class
 - Contact details of the parent/guardian
 - Clear instructions on medication required, dose to be administered, frequency of dose and period of time medication will be needed for.
 - Acknowledgement that the pupil has previously taken the required medication with no adverse reactions.
 - A dated signature of the parent/guardian.
- 3.4.2. Changes to prescriptions or medication requirements must be communicated to the educational setting by the pupil's parent/guardian and a new consent form signed.
- 3.4.3 Individual care plans should be developed and reviewed for all pupils who require ongoing medication or support. Care plans should be developed with parents/guardians, school and other professional input as appropriate.
- 3.4.4 A record of medication given or supervised being taken should be kept including the date, time, dose taken and initial of the adult. An exception report should be provided to the parent/guardians e.g if the child refuses, otherwise it can be assumed that the instructions/care plan was followed

4 Medical Emergencies

- 4.1.1 In the event of a medical emergency, all relevant procedures should be activated and 999 dialled as appropriate. (see appendix E)
- 4.1.2 A record of emergency medicines and their expiry dates should be kept and recorded each term for those educational settings which store such medications (for example adrenaline auto injectors or emergency asthma inhaler).
- 4.1.3 Emergency medicines should only be given to pupils with a signed consent form and following clear, agreed procedures detailed in the consent form or individual care plan.

5 Further relevant information

It is vital that school has the most up to date information for any medical condition a child may have.

Appendix F provides some links. Further guidance is available on the LA website

www.leicestershiretradedservices.org.uk system under 'A' for Administration of medicines and Medication and Management Procedures. This includes:

Appendix 1 Parental consent form for medicines (Appendix A within this document)

Appendix 2 Individual Health Care Plan (IHCP) for pupils: complete at school (Appendix C within this document)

- Appendix 3 Epilepsy Health and record forms from health professionals
Appendix 4 Emergency action plans for anaphylaxis from health professionals
Appendix 5 Diabetes health forms from health professionals
Appendix 6 Supporting pupils at school with medical conditions - Department of Education document.
Appendix 7 Guidance on the use of emergency asthma inhalers in schools - Department of Education guidance.
Appendix 8 Template letter for purchase of emergency asthma inhalers (for use by schools to pharmacy). Should be generated by school on letter headed paper

6 School trips

- 6.1.1 It is part of the Inclusion Policy of our school that all pupils should be encouraged to take part in school trips wherever safety permits. It may be that school would need to take additional safety measures for outdoor visits and staff supervising outings must be aware of any medical needs of such pupils and of relevant emergency procedures. An additional adult (or the particular parent) may need to accompany visits where a difficult situation might arise. Training of staff should be considered when initially planning trips. A risk assessment may be required
- 6.1.2 Children **must** take their own emergency medication (inhaler, adrenaline auto injector) on all trips and at least one trained member of staff/parent should attend every trip. It will be necessary to take copies of any relevant Health Care Plans and in the case of an emergency, these should be given to the paramedics.
- 6.1.3 Parents/carers are sent a residential visit form to be completed and returned to school before their child leaves for an overnight or extended day visit. The form requests up-to-date information about the pupil's current medical condition, their overall health and asks for consent, giving staff permission to supervise or administer medication.

7 Links to other policies

- Health and safety
- First aid policy
- Educational visits guidance

Appendix A: Medicine Consent Form

Appendix A part 2 RECORD OF MEDICATION (This table should be copied to the reverse of the Medical Consent Form)

Appendix B: Procedure for the development of an Individual Health Care Plan (IHCP)

Appendix C: FORM 1 – INDIVIDUAL HEALTH CARE PLAN

Appendix D: CONGERSTONE STAFF TRAINING RECORD - MEDICAL

Appendix E: CONTACTING EMERGENCY SERVICES

Appendix F: Advice on Medical Conditions

Appendix A: Medicine Consent Form

Congerstone Primary School Medicine Consent Form

Child's name and class	
Child's date of birth	
My child has been diagnosed as having (<i>condition</i>)	
He/she is considered fit for school but requires the following medicine to be given during school hours	
Name of medicine	
Dose required	
Time/s of dose	
With effect from [start date]	
Until [end date]	
The medicine should be taken by (<i>mouth, nose, in the ear, other: please provide details as appropriate</i>)	
<input type="checkbox"/> I consent for my child to be supervised by a member of staff, whilst my child <u>takes their medicine by him/herself</u> according to the dose/frequency above.	
<input type="checkbox"/> I consent for my child to be given the <u>medication by a member of staff</u> according to the dose/frequency above.	
By signing this form I confirm and understand the following statements:	
<ul style="list-style-type: none"> • That my child has taken this medicine, or at least two doses of this medicine, before and has not suffered any adverse reactions. 	
<ul style="list-style-type: none"> • That I will update school with any change in medication routine, use or dosage 	
<ul style="list-style-type: none"> • That I undertake to maintain an in date supply of the medication 	
<ul style="list-style-type: none"> • That school staff are acting voluntarily in administering medicines and have a right to refuse to do so 	
<ul style="list-style-type: none"> • That school will not be held responsible if, due to unforeseen circumstances, my child does not receive their medication 	
<ul style="list-style-type: none"> • That school is not responsible for any loss of/or damage to any medication 	
<ul style="list-style-type: none"> • That staff will act in the best interests of my child whilst administering medication 	
<ul style="list-style-type: none"> • That staff will keep a record of medicine given. 	
Signed	
Name (please print)	
Contact details	
Date	
Staff member signature	
Name (please print)	
Date	

Appendix A part 2 RECORD OF MEDICATION (This table should be copied to the reverse of the Medical Consent Form)

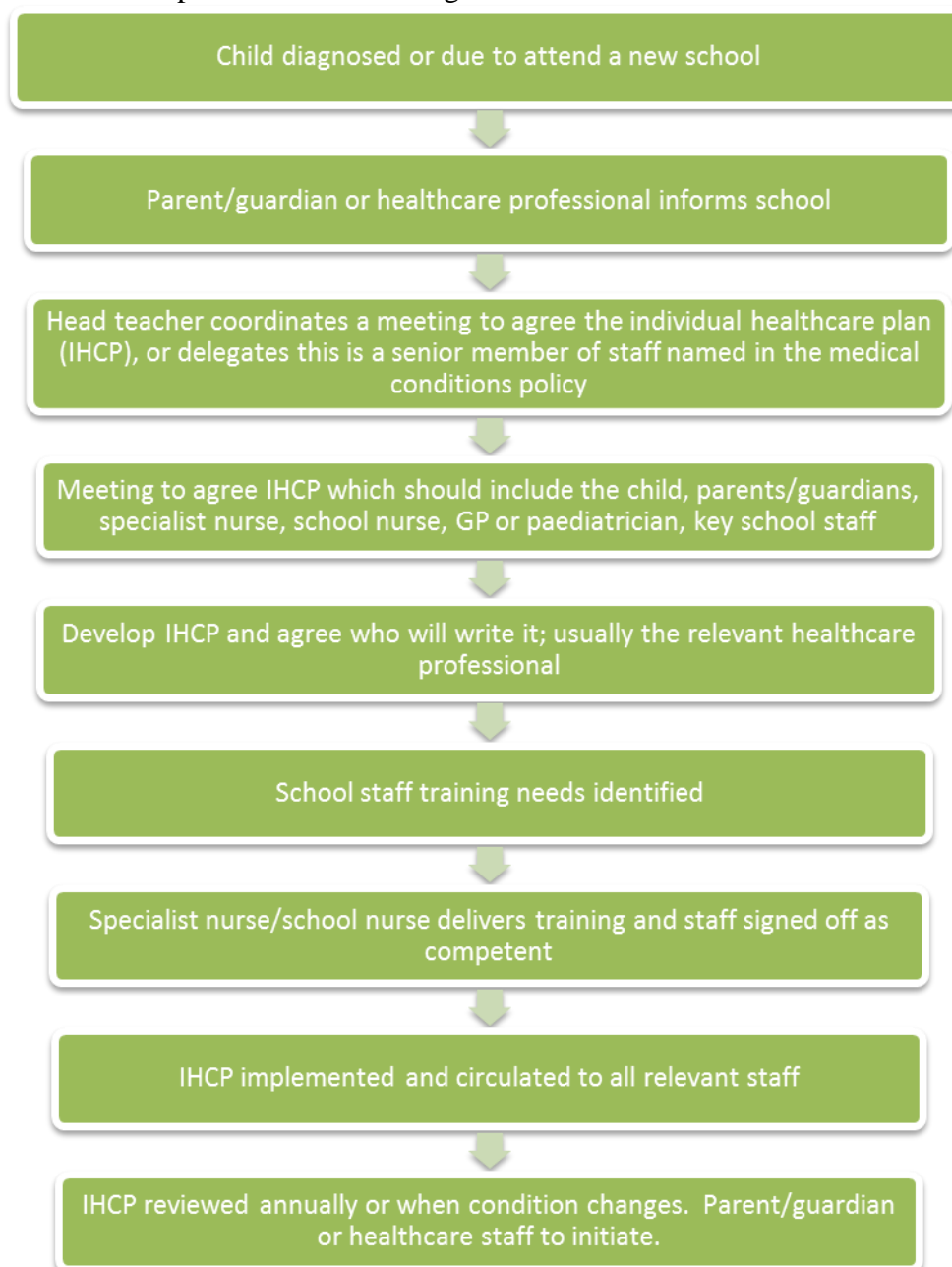
Pupils name

Date	Time	Name of medication	Dose given	Any reactions	Name of staff administering/overseeing medication	Signature of staff member

Appendix B: Procedure for the development of an Individual Health Care Plan (IHCP)

An IHCP is a written, recorded plan containing specific information and requirements of an individual pupil to ensure the pupil's needs will be met in the educational setting. Plans should be agreed by the head teacher and parents/guardians, be formally recorded and reviewed at regular intervals. A template/pro forma is available for download on the Schools website www.leicestershiretradedservices.org.uk system under 'A: Administration of medicines' and Medication and Management Procedures.

The procedure for development of an IHCP is given below:



Appendix C: FORM 1 – INDIVIDUAL HEALTH CARE PLAN

This form will be personalised for pupils with complex medical needs at Congerstone Primary School – (Appendix A part 2 RECORD OF MEDICATION, can also be personalised)

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school	
--	--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

--

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications,

--

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Parental and Pupil Agreement

I agree that the medical information in this plan may be shared with individuals involved with my child's care and education (this includes the emergency services).

I agree that my child can be administered their medication by a member of staff in an emergency

I understand that I must notify the school of any changes.

Signed (pupil) _____ Date _____

Signed (parent) _____ Date _____

Print name _____

Healthcare Professional Agreement

I agree that the information is accurate and up to date.

Signed _____ Date _____

Print name _____ Job Title _____

Headteacher Agreement

It is agreed that (name of child) _____

Will receive the above listed medication at the above listed time

Will receive the above listed medication in an emergency

This agreement will continue until the end date of the course of medication or until instructed by the child's parents.

Signed _____ Date _____

Appendix D- CONGERSTONE STAFF TRAINING RECORD - MEDICAL

Name of member of staff	Training received	Date	Training provider	Suggested date for update training

APPENDIX E –

CONTACTING EMERGENCY SERVICES

- If urgent treatment is required the call to 112/ 999 should not be delayed in order to consult with parents or carers (For medical concerns ring NHS 111)
- Be ready with the following information:

1. Your telephone number 01827 880243

2. Our location is

School location	If off site complete before leaving
Congerstone Primary School Shackerstone Shackerstone Rd Nuneaton Warwickshire	
CV13 6NH	

3. Give the exact location of the person needing help

4. Give your name

5. Give the name of the person needing help

6. Give a brief description of the person’s symptoms and any known medical conditions

7. Inform ambulance control of the best entrance and state that the crew will be met at this entrance and taken to the pupil

8. Don’t hang up until the information has been repeated back to you

9. Ideally the person calling should be with the child, as the emergency services may give instructions for first aid and medication

10. Never cancel an ambulance once it has been called

APPENDIX F

Advice on Medical Conditions

The Community Paediatrician or nurse, on request, will give advice to schools regarding medical conditions. Parents or guardians of children with medical conditions seeking general information should be advised to seek advice from their GP, school health professionals (providing name and contact details) or from specialist bodies, an selection of which are listed below.

Asthma	General information	Asthma UK: www.asthma.org.uk Asthma helpline: 0300 222 5800
	For teachers	Guidance on Emergency asthma inhalers for use in schools: www.gov.uk
Epilepsy	General information	Epilepsy action: www.epilepsy.org.uk Helpline: 0808 800 5050
	For teachers	Guidance in Appendix 3: 'Epilepsy Health Forms for IHCPs'.
Infectious diseases		Public Health England: www.gov.uk ; Tel: 0344 225 4524 option 1
Haemophilia		The Haemophilia Society: www.haemophilia.org.uk ; Tel: 0207 939 0780
Anaphylaxis	General information	Anaphylaxis Campaign: www.anaphylaxis.org.uk ; Tel: 01252 542 029
	For teachers	See Appendix 4: 'Emergency Action Plan' forms for EpiPen/Jext Pens. NB the need to report the administration of this medication to: Bridge Park Plaza, Fax: 0116 258 6694 and email to childrensallergy@uhl-tr.nhs.uk
Thalassaemia		UK Thalassaemia Society: www.ukts.org ; Tel: 020 8882 0011
Sickle Cell Disease		The Sickle Cell Society: www.sicklecellsociety.org ; Tel: 020 8961 7795
Cystic Fibrosis		Cystic Fibrosis Trust: www.cfrust.org.uk ; Tel: 020 846 47211
Diabetes	General information	Diabetes UK: www.diabetes.org.uk ; Tel: 0345 123 2399
	For teachers	See Appendix 5 on website. Note the opportunity to attend 'Diabetes in School' training days, regularly advertised on www.leicestershiretradedservices.org.uk and funded by Diabetes UK Diabetes Specialist Nurse: 0116 258 6796 Consultant Paediatrician: 0116 258 7737 Diabetes Care line services: 0345 123 2399
Other useful contact numbers	Insurance Section LCC	David Marshal-Rowan, Tel: 0116 305 7658 (for additional insurance) James Colford, Tel: 0116 305 6516 (for insurance concerns)
	Corporate Health, Safety & Wellbeing, LCC, County Hall,	Tel: 0116 305 5515 Email: healthandsafety@leics.gov.uk
County Community Nursing Teams	<u>East Region</u> Market Harborough Rutland Melton	Locality managers: 1. Maureen Curley (PA: Janet Foster, Tel: 01858 438109) 2. Jane Sansom (PA: Clare Hopkinson, Tel: 01664 855069)
	<u>West Region</u> Hinckley & Bosworth Charnwood	Locality managers: 1. Chris Davies } PA: Sally Kapasi, tel: 01509 410230 2. Teresa Farndon }