

ADMINISTRATION OF MEDICINES POLICY

ISP Polar Re-Start



Approved by:

Local Governing Body

Date: July 2023

Last reviewed on:

July 2023

Next review due by:

July 2024

POLICY FOR THE ADMINISTRATION OF MEDICINES

NATIONAL CONTEXT

All schools and all early years' settings and their employers are expected to develop policies on managing medicines, and to put in place effective management systems to support individual children with medical needs.

Positive responses by schools and settings to a child's medical needs will not only benefit the child directly, but can also positively influence the attitude of their peers.

SCHOOL CONTEXT

The purpose of this policy is to put into place effective management systems and arrangements to support children and young people with medical needs in we and to provide clear guidance for staff and parents on the administration of medicines. This policy statement must be considered in conjunction with other relevant policies, for example Health and Safety.

Contents

1. Roles and Responsibilities: School Staff.....	4
2. Roles and Responsibilities: Parents / Foster Parents.....	4
3. Pupils Information.....	5
4. Administering Medication	5
5. Carrying Medication	6
6. Storage.....	6
7. Records.....	6
8. Refusing Medication.....	6
9. Training	7
10. Health Care Plan.....	7
11. Intimate or Invasive Treatment.....	7
12. Educational Visits	7
13. Residential Visits.....	7
14. Emergency Procedures.....	7
15. Staff Medication.....	7

1. ROLES AND RESPONSIBILITIES: STAFF

All members of staff have a duty to maintain professional standards of care and to ensure that children and young people are safe. Our staff will monitor and review individual needs and administer medicines in order to meet the all-round needs of the child. There is no legal duty requiring staff to administer medication or to supervise a child when taking medicines. This is a voluntary role.

In response to the Disability Discrimination Act (DDA) 1995, we are making reasonable adjustments for disabled children, including those with medical needs, and we are planning strategically to improve access over time. We are also making reasonable adjustments to enable children with medical needs to participate fully in all areas of ISP Polar Re-Start School life including educational visits and sporting activities.

The Lead Teacher, in consultation with the Governing Body, staff, parents, parents, health professionals and the local authority will decide whether we can assist a child with medical needs. The Lead Teacher is responsible for:

- Implementing the policy on a daily basis;
- Ensuring that the procedures are understood and implemented;
- Ensuring appropriate training is provided;
- Making sure that there is effective communication with parents/foster parents, pupils, staff and all relevant health professionals concerning pupils' health needs.

Staff, including supply staff, will be informed of any pupil's medical needs where this is relevant and of any changes to their needs as and when they might arise. All staff, parents and pupils will be informed of the designated person with responsibility for medical care.

2. ROLES AND RESPONSIBILITIES: Parent/Foster Parents

It is the responsibility of parent/parents to:

- Inform the staff of their child's medical needs
- Provide any medication in a container clearly labelled with the following:
- Collect and dispose of any medications held in staff at the end of each term
- Ensure that medicines have NOT passed the expiry date.
 - The child's name
 - Name of medicine
 - Dose and frequency of medication
 - Any special storage arrangements

3. PUPIL INFORMATION

At the start of each programme, parents/foster parents should give the following information about their child's long term medical needs. THE INFORMATION MUST BE UPDATED AS AND WHEN REQUIRED.

- Details of pupil's medical needs;
- Medication including any side effects;
- Allergies;
- Name of GP/Consultants;
- Special requirements e.g. dietary needs, pre-activity precautions;
- What to do and who to contact in an emergency;
- Cultural and religious views regarding medical care.

4. ADMINISTERING MEDICATION

We expect parent/parents to administer medication to their children at home as the spacing between doses usually allows for administering at breakfast time, after school and before bedtime. No medication will be administered without prior written permission from the parent/parents including written medical authority if the medicine needs to be altered (e.g. crushing of tablets).

A Request to Administer Medication Form must be completed. Staff members are not legally required to administer medicines or to supervise a pupil when taking medicine. This is a voluntary role.

The Lead Teacher will determine if medication is to be administered in the school, and by whom, following consultation with staff. All medicine will normally be administered during breaks and lunchtimes. If, for medical reasons, medicine has to be taken during the day, arrangements will be made for the medicine to be administered at other prescribed times. Pupils will be told where their medication is kept and who will administer it.

Any member of staff, giving medicine to a pupil, should check on each occasion;

- Name of pupil;
- Written instructions provided by the parent/parents or doctor;
- Prescribed dose;
- Expiry date.

Written permission from parent/parents will be required for pupils to self-administer medicine(s). A 'Request to Self- Administer Medication Form' must be completed.

5. CARRYING MEDICINES

For safety reasons, pupils are not allowed to carry medication, other than a maximum of two over the counter pain relief tablets, unless agreed on an individual basis. Such arrangements will only be agreed after completion of a 'Request for Child to Carry His/Her Own Medicine Form'. All other medicines must be handed into reception on entry to the Polar Re-Start School.

6. STORAGE

All medicine, in the care of the school, will be kept locked in the medicine cabinet. All medicine will be logged onto the school's file. Reception staff may store pupil's inhalers which must be labelled with the pupil's name. Inhalers and other medicines must be labelled with the required dosage and must be returned to parent/parents when they run out of date.

7. RECORDS

Each time medication is given to a child, a member of staff, will complete and sign a record sheet, kept in reception. These sheets record the following:

- Name of pupil;
- Date and time of administration;
- Who supervised the administration;
- Name of medication;
- Dosage;
- A note of any side effects;
- If medicine has been altered for administration (e.g. crushing tablets) and authority for doing so;

8. REFUSING MEDICATION

If a child refuses to take their medication, no member of staff will force them to do so. Parent/parents will be informed as soon as possible. Refusal to take medication will be recorded and dated on the child's record sheet. Reasons for refusal and any action then taken by the staff member will also be recorded. If concerns are raised regarding any refusal to take medication, then this should be referred to the parents/foster parents. If Parents/foster parents are not available, then the NHS 111 service should be utilised for advice.

9. TRAINING

Training and advice will be accessed from health professions for staff involved in the administration of medicines. Training for all staff will be accessed on a range of

medical needs, including any resultant learning needs as and when appropriate. Details of all training will be recorded.

10. HEALTH CARE PLAN

When appropriate a personal Health Care Plan, will be drawn up in consultation with school, parents/foster parents and health professionals. The Health Care Plan will outline the child's needs and the level of support required in the school.

11. INTIMATE OR INVASIVE TREATMENT

Intimate or Invasive treatment will only take place at the discretion of the Lead Teacher with written permission from the parents/foster parents and only under exceptional circumstances. Two adults, one of the same gender as the child, must be present for the administration of such treatment. Cases will be agreed and reviewed on an annual basis. All such treatments will be recorded. Governors will be informed at least annually of any intimate or invasive treatment carried out by school staff.

12. EDUCATIONAL VISITS

To enable, as far as possible all pupils to have access to all activities and areas of school life, a risk assessment will be undertaken to ensure the safety of all participants in educational visits. No decision about a child with medical needs attending/ not attending an educational visit will be taken without prior consultation with parents/foster parents.

13. RESIDENTIAL VISITS

Sufficient essential medicines and appropriate health care plans will be taken and controlled by the member of staff supervising the visit. If additional supervision is required for activities e.g. swimming, we may request the assistance of the parent/foster parent.

14. EMERGENCY PROCEDURES

The Lead Teacher will ensure that all members of staff are aware of the school's planned emergency procedures in the event of medical needs.

15. STAFF MEDICATION

In order to safeguard children from accessing medication whilst at the ISP Polar Re-Start School.

All medication must be stored within the medicine cabinet in Lead Teacher office. All medication including over the counter drugs such as paracetamol should not be taken into classrooms. Should a staff member require privacy to administer e.g insulin etc, then permission should be sought from Lead Teacher to use the first aid/medical room.

All medication should be self-labelled including non-prescription, and collected back at the end of the day.

1	November 22
2	July 2023