TRADITIONAL VALUES, CONTEMPORARY ASPIRATIONS, CREATIVE CURIOSITY



## **Management of Medicines Policy**

### Version 24/25-1.0

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#### 1. Aims

This policy has been produced to confirm the school's position in relation to the management and administering of medication during the school day or off-site during trips and visits.

This policy takes reference from guidance issued by the Department of Education, supporting pupils at school with medical conditions, December 2015 and clarifies the responsibilities of the school, staff and parent/carers/carers in respect of ensuring a child receives medication as prescribed, in order to maintain normal attendance and performance at school.

#### 2. Introduction

There are regulations regarding Medicines in a School Setting. Only certain medication is allowed to be carried by pupils whilst in school. By law, parent/carers must give written consent for their children to carry their own medication and to be given medication.

Conditions such as allergy causing anaphylaxis, asthma and diabetes mean pupils may need to carry their own medication whilst at school, however, unless it is deemed essential for their condition (e.g. the above and certain migraine medication) the pupil is not allowed to carry their own medication. It is the parent/carer's responsibility to ensure that medication is handed into the main reception who will then inform the medical staff to collect.

# Medication should be in date. It is NOT the school's responsibility to notify parents/carers if medication has gone out of date.

Parents/carers will also be responsible for ensuring there is an adequate supply of medication for their children whilst at school. Any out of date medication should be collected by parents/carers.

#### 3. Organisation - Roles and Responsibilities

#### The Governing Body

The governing body has general responsibility to assist in developing a policy on pupils with medical needs. The policy should be reviewed and updated on a regular basis and should contain clear systems and procedures for the safe administering of medication to pupils. In addition, they are responsible for making sure proper guidance is in place for dealing with medicines in the school environment and providing full insurance cover for staff acting within the scope of their employment and that staff are aware of this.

Governors should also ensure that there are suitable systems for sharing information about pupils' medical needs and should satisfy themselves that any training has given staff sufficient understanding, confidence and knowledge and those arrangements are in place to update training on a regular basis.

If the administration of prescription medicines requires technical or medical knowledge then the governing body should ensure training is provided to staff from a qualified health professional. Such training should be specific to the individual medical needs of the child concerned and a health care professional should provide written confirmation of proficiency in any medical procedure.

#### The Headteacher

The Headteacher is responsible for implementing the governing body's policy on a dayto-day basis. For a child with medical needs, the Headteacher must agree with parent or carer exactly what support can be provided in school. If parents or carers expect unreasonable adjustments, the Headteacher should seek advice from the school nurse, the child's Doctor or other appropriate health professional. The Headteacher, or delegated manager, should: -

- Ensure that procedures are understood and adhered to
- Ensure that training is provided where necessary
- Ensure that there is appropriate, effective communication and consultation with parent/carer/carers, children and health professionals concerning pupils with medical needs

In addition, all staff (including supply staff) should be notified of the delegated person with responsibility for medical care and informed of a child's medical needs, if appropriate.

#### Prime Responsibility

Members of staff will only manage and administer medicines in line with the expressed written approval of parents/carers and in accordance with the dosage and frequency instructions from a legitimate prescriber. (Note it only requires one parent/carer to agree to or request that medicines are administered. As a matter of practicality, it is likely that this will be the parent/carer with whom the school or setting has day-to-day contact. Where parents/carers disagree over medical support, the disagreement must be resolved by the Courts. The school or setting should continue to administer the medicine in line with the consent given and in accordance with the prescriber's instructions, unless and until a Court decides otherwise).

#### Parents/Carers

The major role of caring for a child rests with the parents/carers and it is their responsibility to manage the child's health and to ensure attendance at school (Section 7 of the 1996 Education Act).

It is the responsibility of the parents/carers to provide the school with full information about their child's medical needs, annually, during admissions or whenever medicines are prescribed and should include;

- Full name and tutor group of child
- Details of their child's medical needs
- Details of the treatment he/she will need at school, including any possible side effects of medication, other special needs or conditions (i.e. dietary requirements, pre-activity precautions) and details of any allergies
- The name and address of GP/consultants
- Telephone number of surgery
- What to do and who to contact in an emergency

Parents/carers should also: -

Provide any medication in a clearly labelled container with the following: -

- Full name and tutor group of child
- Name and strength of medicine
- Number of tablets/quantity to be given to school
- When to be given
- Expiry date
- Any changes to the medication
- Any other appropriate instructions (e.g. special storage arrangements)
- Collect and dispose of any medicines held in school at appropriate times
- Ensure that medicines have not passed the expiry date

All relevant forms as detailed in the procedure **<u>must be completed</u>** by parents/carers and returned before the school will undertake management of medicines for a child.

The document should be used in conjunction with other policy guidance available from the school and government when planning trips and visits especially where overseas rules regarding prescribed medicine may differ from the UK.

#### 4. Medicines

#### **Prescribed Medicine**

Medicines should only be brought onto the school site when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. Malet Lambert will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.

# Malet Lambert will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents/carers should be encouraged to ask the prescriber about this. It is to be noted that medicines which must be taken three times a day could be taken in the morning, after school hours and at bedtime.

#### Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children, e.g. methylphenidate.

Staff should seek assistance from the medical office before administering a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions and appropriate to their level of training.

A child who has been prescribed a controlled drug may legally have it in their possession. However, for reasons of health and safety Malet Lambert will look after a

controlled drug, and agree a process with parents/carers for the medication to be administered to the child for whom it has been prescribed.

Malet Lambert will keep controlled drugs in a locked non-portable container and only specified staff will have access. A full record of all medications received and the dates and times of administration will be retained for audit and safety purposes.

A controlled drug, as with all medicines, will be returned to the parent/carer when no longer required to arrange for safe disposal (by returning the unwanted supply to the local pharmacy or similar arrangements). If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label).

#### Non-Prescription Medicines

Staff should **<u>never</u>** give a non-prescribed medicine to a child.

# A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

#### Administering Medicines

No child under 16 should be given medicines without their parent/carers written consent. Any member of staff giving medicines to a child should first check the following details on SIMS.

- the child's name
- prescribed dose
- expiry date
- written instructions provided by the prescriber on the label or container
- parental consent has been received.

If in any doubt staff should not administer the medicines but contact parents/carers regarding decisions before taking further action. If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent/carer.

All medications should be stored safely: - A locked cabinet in the First Aid Room & clearly marked with the pupil's name and their dosage. Medications that are no longer required or out of date should be returned to the parent/guardian for safe disposal.

#### Self-Management & Long Term/Complex Medical Needs (access to education)

The Department of Education guidance considers it to be good practice, where appropriate, for children to take responsibility for the management of their own medicines from a relatively early age.

Malet Lambert will consider self-management on an individual case basis. Recognition must be taken of the potential risk to the child in question but also to other pupils and members of staff if medication of any description is handed into the care of a pupil. Careful consideration must be given to all mitigating circumstances although the general position is that all medication will be controlled and documented by the school.

Some children with medical needs are protected from discrimination under the Disability Discrimination Act (DDA) 1995. The DDA defines a person as having a disability if he/she has a physical or mental impairment which has substantial or long-term adverse effect on his or her abilities to carry out normal day to day activities.

Under part 4 of the DDA, the school must not discriminate against disabled pupils in relation to their access to education and associated services – a term that covers all aspects of school life including school trips, clubs and activities. The school will make reasonable adjustments for disabled children, including those with medical needs at different levels of school life, and for the individual disabled child, within our practises, procedures and policies furthermore the school will strategically plan, where possible, an increase to access, over time, for disabled children, including those with medical needs.

#### Refusing Medicines

If a child refuses to take medicine, staff should not force them to do so. The refusal should be noted in the child's pupil record. Parents/carers should be informed immediately of the refusal. If a refusal to take medicines results in an emergency, the school's emergency procedures should then be followed.

#### Record Keeping

Parents/carers must notify the school about the medicines their children needs to take and provide details of any changes to the prescription or any support required. The Medication Notification form must be completed and returned to the school <u>before</u> any support or medication can be managed or administered by the school.

When first receiving/managing a new medication, staff must make sure that the information provided by the parent/carer corresponds with that provided by the prescriber before updating pupil records including Sims.

Although there is no legal requirement for schools to keep records of medicines given to pupils, and the staff involved, Malet Lambert will retain a full record to demonstrate that agreed procedures, timings and dosages have been followed and to provide support/justification for staff should this be required in any given circumstance.

#### 5. Confidentiality

The Headteacher and staff should always treat medical information confidentially. The Headteacher should agree with the child where appropriate, or otherwise the parent/carer, who else should have access to records and other information about a child. If information is withheld from staff they should not generally be held responsible if they act incorrectly when giving medical assistance in good faith.

#### 6. Educational Visits

Malet Lambert has established procedures for the operation of trips and visits. When it is necessary to take medicines on trips <u>all</u> medicines will be controlled by staff and retained in a locked box with the exception of immediately required treatments such as inhalers or Epi Pens which can be retained by children in line with the clause regarding self-management.

Staff supervising trips & visits (including sport activities etc.) must always be aware of any medical needs, and be provided with relevant personal health plans.

#### 7. Sporting Activities

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Members of Staff leading lessons off the school site must carry a portable first aid kit where, if necessary pupil medication can be carried for immediate access. In such circumstances recognition must be taken of clause on self-management, if necessary, and if staff are willing to do so appropriate training must be provided to enable them to administer medicines or the first aid staff requested to attend.

#### 8. Staff Medicines

Staff who have prescribed medication in their possession or in school should not carry it around with them, it should be kept in a place that is not accessible by the pupils i.e. personal locker, own office (again as long as it can be locked and is not accessible to pupils) and if either of these options are not available to certain staff then it should be retained in the secure area of the main office and treated in exactly the same way as the pupils prescribed medication, but they are solely responsible for it.

#### 9. Access to Emergency Procedures

Emergency procedures that might be required regarding the medication of a pupil should be assessed using the criteria and forms in the "Administration of Medicines Procedure Document" This will usually be a collectively constructed document involving the input of several sources including the medical profession, parent/carer/carers school nurse, Pastoral Staff, SEND Staff, First Aid Staff, Teachers etc. Generally, the completed record of actions etc. will be located on Sims and appropriate staff briefed however, this will vary on occasion as each individual will be assessed on their particular needs not, common factors and therefore any outcome and actions may vary.

Initial Assessment of pupils that might be considered at "higher risk" or present emergency actions that are specialist in nature and require staff assistance will be initially assessed by the SEN team, as they occur and at the start of each new term, and details passed to the school for further assessment.