



# Policy for the Administration of Medicines

The staff responsible for the Policy for the Administration of Medicines are

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The EYFS Governor

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## **Policy for Medicines in School**

This policy is based upon guidance issued to schools by Norfolk County Council, which itself is based on the DFE document, 'Supporting Pupils with Medical Conditions'.

- Many children will, at some time, have short-term medical needs, perhaps entailing the finishing off of a course of medicine, such as antibiotics.
- Some children may require medicines on a long-term basis, such as those with well-controlled asthma or epilepsy.

These children are usually able to attend school regularly, and take part in normal school activities. Individual care plans are drawn up with the help of the school nursing service where required.

This policy seeks to explain how Roydon Primary School can support children with medical needs within school.

### **Prescribed Medicines**

Medicines should only be brought into 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. We would expect that in sending medicine to school, parents or carers would either be following the advice of a doctor in deciding that a child who is completing a course of treatment (e.g. antibiotics) is well enough for school, or that the medicine is for the treatment of a long-term condition such as asthma or epilepsy. In either case, parents and carers are welcome to come into school to administer the dose themselves.

Medicines should only be administered in school if they are on prescription from a doctor, dentist, nurse or pharmacist prescriber.

These medicines should be provided to the school in the original container with the prescriber's instructions for administration and dosage.

Prescribed medicines, such as antibiotics, that need to be administered 4 times a day, will be given to the child at lunch time as long as the parent or carer has completed the relevant form. Medicines that are prescribed to be administered three times a day will not normally need to be given at lunchtime and should not be brought into school except in exceptional circumstances.

If a child is attending an after-school club, parents and carers need to communicate directly with those running the club.

It remains the parent or carer's responsibility to ensure that medicine is given at the correct times. In all cases, written permission on the appropriate forms must be given.

## **Non-Prescription Medicines**

Staff cannot give children non-prescribed medicines unless there is prior written permission from a parent or carer by completing a form.

Occasionally, one minimum dose of Calpol may be administered following the receipt of emailed consent from the parent or carer. This would only be in exceptional circumstances when it is felt that this would facilitate the child feeling well enough to stay in school. The date, time and dose would be noted.

## **Long-term medical needs**

If a child has long term medical needs, the school will seek the advice of the appropriate medical professional in drawing up a care plan. This will include information relevant to the care of the child concerned.

## **Administering Medicines**

1. All medicines should be clearly labelled with the child's name; the first dose should be accompanied by a written request for schools to administer medicine. This must state that it is necessary for the medicine to be taken in school hours and a request is being made for the school to administer it. The note should give clear instructions about the dose required. No child under 16 can be given medicines without their parent or carer's written consent.
2. In the case of inhalers for asthma sufferers, parents are asked to leave one set of equipment in school to avoid the problem of forgetting to bring it in or take it home.
3. The medicine should be given to the office staff, and will be taken only under supervision. A written record of medicines taken will be kept.
4. Children should self-administer medicines under the supervision of an adult at the school wherever this possible.
5. Parents of children who require the school to keep prophylactic medicines (such as adrenalin injectors and asthma inhalers) are responsible for ensuring that medicines remain 'in date'.
6. If a child refuses medication, the staff should not force them to take it, but should make a note in the records regarding the refusal. Parents or carers will be informed on the same day.
7. It must be clearly understood that, whilst every effort is made to comply with requests that fall into the categories above, the distractions of a busy school day may lead to an oversight and there can be no guarantees that medicines sent in will be administered in school. If the timing of administration is vital, parents or carers should make arrangements to come into school to administer medicines.

All medicines are stored in the school office.

Care plans are usually devised for individual children with long-term conditions who require medication. For children who may need to use an adrenalin injector, there will be an identification picture in the staffroom with instructions for action, if required. All staff will be aware of these instructions.

Staff are not legally required to administer medicines, but the school seeks to ensure all children who are able to attend school – including those who may need medication – can do so. As such, staff are trained to administer medicines in accordance with the schedule above.

The person administering medicine to a child must check the name of child, name of medicine, dose, method of administration, time of administration and expiry date of medicine, and the dose must be recorded.

### **Asthma Care**

- Inhalers will be kept in a fluorescent drawstring bag in the classroom, clearly labelled with the child's name.
- The children must be allowed to use their inhaler whenever they need to, and it must always be returned to the bag.
- Inhalers must be taken on school trips, and the teacher in charge is responsible for ensuring it is returned to the bag after the trip.
- It is the parent's responsibility to ensure it is in date.

### **Sporting Activities**

Where children need to take precautionary measures before or during exercise (e.g. use of inhalers), staff supervising such activities should be aware of relevant medical needs and, if necessary, carry out risk assessments.

### **Educational Visits**

We encourage children with medical needs to participate in educational visits where it is safe for them to do so. When children need to take medicines that are normally administered at home, parents or carers should send full written instructions for administration along with the medicines in their original containers. All medicines must be labelled with the child's name. The administration of all medicines is recorded. Where necessary, detailed discussion between the parent or carer and the visit leader will take place; if a child has a care plan, a copy of this will be taken on the visit.

The school seeks to facilitate all children attending school for the maximum number of days possible in the school year, but parents and carers should be clear that children who are ill should not be sent to school. This includes children with temperatures controlled by analgesics and those who have only just begun medication with antibiotics. This policy addresses the management of children who are fundamentally well, but who have specific long- or short-term medical needs.