



Administration of Medicines Policy

COTTERIDGE PRIMARY SCHOOL

Cotteridge School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

Date of Review: October 2021

Date of Next Review: October 2023

Biennial in October

PURPOSE This policy sets out the circumstances in which we may administer medicines within school, and the procedures that we will follow

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1. Introduction

Most pupils will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other pupils have medical conditions that, if not properly managed, could limit their access to education. Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. This policy has been written to give guidance on the administration of medicine to children with medical conditions. Ultimately, the decision as to whether it is appropriate to administer medicine in school rests with the Headteacher or his representatives, which comprise the Pastoral Manager or a member of the Senior Leadership team.

There is no legal duty that requires schools and staff to administer medication: this is a voluntary role. The 'duty of care' extends to administering medication in exceptional circumstances.

2. The Role of Parents/Carers

Parents/carers should, wherever possible, administer or supervise the self-administration of medication to their children. This may be by spacing the doses so that they are not required within school hours, or by the parent/carer coming in to school at lunch time to administer the medication. However, this might not be practicable and in such a case parents/carer may make a request for medication to be administered to the child at school. If medicine needs to be administered during school time, then a parent or carer must bring it to the school office and fill in the Consent Form to Administer Medicines (Appendix 1).

Medication must not be given to the class teacher, or brought into school by the child themselves. If medication is for a short term condition, any remaining medication must be collected from the office by a parent or carer at the end of the school day.

3. Prescription Medication

Prescription medicines should be administered at home wherever possible, for example medicines that need to be taken 3 times a day can usually be taken before school, after school and at bed time. Parents are encouraged to ask the GP whether this is possible. Prescription medicines will only be administered by the school where it would be detrimental to a child's health if it were not given. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The exception to this is insulin which must still be in date, but may be available to school inside an insulin pen or a pump, rather than in its original container. Schools should never accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.

In all cases it is necessary to check:

- Name of child
- Name of medicine
- Dosage
- Written instructions provided by prescriber
- Expiry date

A Consent Form to Administer Medicines (Appendix 1) must be completed and signed by the parent / carer. No medication will be given without the parent's written consent.

Medicines including epi-pens for children in Key Stage 1 and Key Stage 2 will be kept in the medical area in the Key Stage 2 building either in the medical cupboard or the refrigerator as appropriate. Medicines for children in EYFS are kept in their classrooms. On occasion, it may be judged appropriate for medicines to

be kept in the Key stage 1 building for specific children. This will only happen following discussion and agreement with the Pastoral Manager. Controlled drugs will be kept in the school office.

4. Long Term Medical Needs

It is important for the school to have sufficient information regarding the medical condition of any pupil with significant long term medical needs. Parents, in conjunction with both school and the school nurse will draw up a Care Plan for such pupils, involving relevant health professionals. Appropriate training will be arranged for the administration of any specialist medication (e.g. adrenaline via an epipen, Buccal midazolam, insulin etc.) Staff should not administer such medicines until they have been trained to do so.

5. Controlled Drugs

Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act. Therefore it is imperative that controlled drugs are strictly managed between the school and parents. Medication handed over to the school should always be recorded- see Consent Form to Administer Medicines Record of Medicines Administered (appendix 1- page 2)

Controlled drugs should be stored in a locked non portable container and only specific named staff allowed access to it. A list of named staff will be kept by the Pastoral Manager. Each time the drug is administered it must be recorded, including if the child refused to take it. If pupils refuse to take medication, school staff should not force them to do so. The school should inform the child's parents as a matter of urgency. If necessary, the school should call the emergency services. The person administering the controlled drug should monitor that the drug has been taken. Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

As with all medicines any unused medication should be recorded as being returned back to the parent when no longer required. If this is not possible, it should be returned to the dispensing pharmacist. It should not be thrown away.

6. Non Prescription Medication

Where possible, the school will avoid administering non-prescription medicine. However, we may do so, if requested by the parent, if it will facilitate the child attending school and continuing their learning. This will usually be for a short period only for example: antihistamine for a mild allergy, the application of a lotion or the administration of paracetamol for toothache or other pain. However, such medicines will only be administered in school where it would be detrimental to a child's health if it were not administered during the day. A child under 16 should never be given aspirin-containing medicine, unless prescribed by a doctor.

If non-prescription medication is to be administered, then the parent/carer must complete a Consent Form to Administer Medicines (Appendix 1), and the same procedure will be followed as for prescription medication. The medicine must be provided in its original container, with dosage information on it. The parent's instructions will be checked against the dosage information, and this will not be exceeded.

7. Administering Medicines

When a member of staff administers medicine, they will check the child's School Record of Medication Administered (appendix 1-page 2) against the medication, to ensure that the dose and timing are correct. They will then administer the medicine as required, and record this on the form/first aid slip.

There may be cases when a child self-administers their own inhaler and this may remain unknown to staff and therefore unrecorded.

Appropriate training will be arranged annually for the administration of any specialist medication (e.g. adrenaline via an epipen, Buccal midazolam, insulin etc.) Staff should not administer such medicines until they have been trained to do so. A list of all staff trained in administration of epi-pens and inhalers will be maintained by the Pastoral Manager and is available in the staffroom. The Pastoral Manager maintains a record of children with Care Plans.

8. Emergency Inhalers

In line with "Guidance on the use of emergency salbutamol inhalers in schools" March 2015, the school will keep emergency reliever (blue) inhalers for the emergency use of children whose own inhaler is not available for any reason. Parents must sign a "Consent form: use of emergency salbutamol inhaler" (Appendix 2) to consent to their child being allowed to use the emergency inhaler. A list of the children whose parents have consented to the emergency inhaler is kept in the medical file in the medical cupboard. The emergency inhalers are to be found in Nursery, the Key Stage 1 office and school Reception.

9. Self Management

It is important that as children get older they should be encouraged to take responsibility and manage their own medication. Staff should be aware that children towards the end of Year 6 should have duplicate asthma medication in school which will be kept both on their person and in the medical cupboard. Children should know where their medicines are stored.

10. Refusing medication

If a child refuses to take medication staff should not force them to do so, but note this in the records and inform parents of the refusal. If the refusal leads to a medical emergency, the school will call the emergency services and inform the parents.

11. Offsite visits

All staff supervising visits should be aware of any medical needs and relevant emergency procedures. Where necessary, a risk assessment will be completed. A member of staff who is trained to administer any specific medication will accompany the pupil and ensure that the appropriate medication is taken on the visit. Inhalers must be taken for all children who suffer from asthma.

Travel Sickness - Tablets can be given with written consent from a parent but the child's name, dosage, time of dose and any possible side effects (the child must have had the travel sickness preventative at home before the trip in case of side effects) should be clearly marked on the container, which must be the original packaging. Parents will need to complete an Administration of Medication Permission and Record form.

Residential visits – All medicines which a child needs to take should be handed by parents to the staff member responsible for medicines on the day of the visit. Before the visit, parents will sign a consent form for any medicines which they need to take during the trip plus consent of emergency treatment to be administered – see Consent Form to Administer Medicines in Appendix 1. The only exception are asthma inhalers, which should be kept by the child themselves.

12. Disposal of Medicines

The Pastoral Manager will check all medicines kept in school each term to ensure that they have not

exceeded their expiry date. Parents/carers will be notified of any that need to be replaced. Parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. Sharps boxes should always be used for the disposal of needles. If needed, a sharps box will be kept in the School Office. If any child requires regular injections (eg. Insulin), they may have their own sharps box which can be taken offsite with them on trips etc. The parents will be notified when the box is almost full so that they can bring in a new box and take the full box for disposal.

Communication

An annual letter, see appendix 3, will be sent informing parents of the Medicines in School Policy and the need to inform school of any alterations in medical conditions.

Consent Form to Administer Medicines on School site and off-site activities

School staff will not give your child medication unless this form is completed and signed.

Dear Head teacher

I request and authorise that my child* be given/gives himself/herself the following medication: (*delete as appropriate)

| | | | |
|---|--|--|--|
| Name of child | | Date of birth | |
| Address Daytime Tel no(s) | | | |
| Group/Class/Form | | | |
| Medical Condition or Illness, and reason for medication | | | |
| Name of medicine: | N.B Medicines must be in their original container, and clearly labelled | | |
| Special precautions e.g. take after eating | | | |
| Are there any side effects that the school needs to know about | | Dose | |
| Time of Dose | | Maximum Dose (if applicable) | |
| Start Date | | Finish Date | |

I confirm that:

- I have received medical advice stating that it is, or may be in an emergency, necessary to give this medication to my child during the school day and during off-site school activities;
- I agree to collect it at the end of the day/week/half term (delete as appropriate) and replace any expired medication as soon as possible, disposing of any unused medication at the pharmacy;
- This medicine has been given without adverse effect in the past/ I have made the school aware any side effects that my child is likely to experience, and how the school should act if these occur (delete as appropriate);
- The medication is in the original container labelled with the contents, dosage, child's full name and is within its expiry date; and
- The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy and my child's Care Plan. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

| | |
|--|--|
| Signed (parent/Carer) | |
| Date | |
| Based on the above information the Head Teacher acknowledges that it is, or may be, necessary for your child to be given medication during school hours | |
| Signed (Head teacher/representative) | |



Cotteridge Primary School

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www.cotteridgeprimary.co.uk Telephone: 0121 464 2865

Headteacher : Mr. J. Willetts BSc. P.G.C.E. N.P.Q.H.
Deputy Headteacher: Miss. K. Lacey BSoc.Sci P.G.C.E.
Assistant Headteacher: Mrs V. Tucker BA Hons
Assistant Headteacher: Mrs K. Darby BA Hons, P.G.C.E

Dear Parents/ Carers,

Re: Parental Consent Form for Use of School Emergency Salbutamol Inhaler

Our records show that your child has asthma and an inhaler at school. In line with government guidelines, the school has now purchased an emergency salbutamol inhaler and this letter is to request consent that we may use this emergency inhaler just in case your child's own device is unavailable or unusable. The school inhaler has disposable mouth pieces to ensure hygiene.

Please note that the school inhaler will only be used in cases of absolute emergency and your child MUST have their own working, in date inhaler kept in school at all times.

Please read and agree to the points listed 1 to 3 below, indicating your consent by signing the bottom of the letter.

I do understand the importance of the safe management of asthma in school so please contact me if you have any questions or concerns about this new procedure.

Kind regards,

Miss K. Lacey
Deputy Headteacher

1. I can confirm that my child has been diagnosed with asthma and has been prescribed an inhaler.
2. My child has a working, in date inhaler, clearly labelled with their name, which is kept in school.
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

This consent form will remain valid for the duration of your child's time at school.

Please sign this form and return to the school office by Monday 30th September 2019.

Signed: _____

Date: _____

Name (print) _____

Child's Name: _____

Class: _____



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Dear Parents and Carers,

As it is the start of the academic year, it's the right time for us to ask parents and carers if there have been any changes in your child's medical conditions. We understand that children's medical needs change over time and therefore if there have been any alterations that you feel we should know about please do not hesitate to get in touch with the School Office. This might include, for example, changes relating to an allergy or asthma.

I would also like to reiterate our **Medicines in School Policy**. This policy ensures that, as a school, we work in line with the recommendations of the Department for Education and Birmingham Local Authority. The full details are on the school website but some important details are given below.

Please may we ask that you take time to read this.

If your child needs to have medicines or prescribed drugs whilst at school, there are specific requirements that must be adhered to: Pupils **MUST NOT** carry any medicines on them whilst at school*. Medicines should be handed into the main school office where a medical consent form should be filled in by a parent or carer and this includes over the counter medication such as Paracetamol, Ibuprofen and Piriton.

Parent and Carers Responsibilities

Parents and Carers should provide the school with sufficient and up-to-date information about their child's medical needs, which includes asthma. Verbal instructions cannot be accepted in order for the school to administer medicines. A Consent Form to Administer Medicines must be completed in all instances. Only one parent (defined as those with parental responsibility) is required to agree to, or request, that medicines are administered by staff.

The parent or carer needs to ensure there is sufficient medication and that the medication is in date. Parents/guardians are responsible for ensuring that date expired medicines are returned to a pharmacy for safe disposal.

Medication should always be provided in an original container with the pharmacist's original label and the following, clearly shown: -

- Child's name, date of birth
- Name and strength of medication
- Dose
- Any additional requirements e.g. in relation to food etc.
- Expiry date whenever possible
- Dispensing date

Antibiotics

Parent/carers should be encouraged to ask the GP to prescribe an antibiotic, which can be given outside of school/setting hours wherever possible. Most antibiotic medication will not need to be administered during school hours. Twice daily doses should be given in the morning before school and in the evening. Three times a day doses can normally be given in the morning before school, immediately after and at bedtime. It should normally only be necessary to give antibiotics in school if the dose needs to be given four times a day, in which case a dose is needed at lunchtime. All antibiotics must be clearly labelled with the child's name, the name of the medication, the dose, the date of dispensing, be in their original container and brought into school in the morning and taken home again at the end of each day by the parent/guardian.

Care Plans

A Care Plan must be completed by the parent/carer in conjunction with the school nurse for **life saving medication** to be administered in a medical emergency e.g. Epipen. The Care Plan must be completed by the parent/carer in conjunction with the school nurse. These are recorded at school so staff are aware and the medicine/s are available in school in the event of an emergency. Parents/carers are involved in the development and review of their child's individual Care Plan and should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Minor changes to the Care Plan can be made if signed and dated by the school nurse. If, however, changes are major, a new Care Plan must be completed. Care Plans should be reviewed at least annually and it is the parents' responsibility to notify school/school nurse of any changes required to the Plan e.g. treatment, symptoms, contact details.

School Contact

We hope this information is useful and clarifies the school's policy; should you have any queries or concerns or wish to obtain a 'Consent Form to Administer Medicines' form, please contact the School Office or ask to speak to Mrs Burnett or Miss Lacey. The School Nurse may be contacted on 0121 245 5750 or BCHNT.southcentralsnteam@nhs.net

Yours sincerely

Miss K Lacey
Deputy Headteacher

*The only exception to this is that Year 6 children often carry their own inhalers as they move towards secondary transition.