



## **First Aid – Administration of Medicines Policy (Includes Diabetes UK Medical Conditions)**

### **Important Note**

Unless otherwise stated, all Policies of St Hilda's School apply to the school in its entirety. This comprises all staff and pupils in the Early Years Foundation Stage (EYFS), the Junior School (Key Stage 1) and the Senior School (Key Stage 2).

**REVIEW DATE: March 2018**

**REVIEWED BY: Dan Sayers (Headmaster)**

*D. J. Sayers*

**SIGNED:**

**DATED: 22.03.18**

### **INTRODUCTION**

As part of the Government's agenda to improve the lives of children and young people and in accordance with the School's responsibility for health and safety, an administration of medicines policy has been established. Most children at some time will have short-term medical needs such as a course of antibiotics, whilst others have long term needs including asthmatics, diabetics and those with anaphylaxis.

### **AIMS**

- To ensure the safe administration of medicine in school
- To support children with medical needs requiring medicines in school
- To ensure that parents and guardians are aware of their responsibilities
- To ensure that all school staff are aware of their roles in the administration of medicine

### **OBJECTIVES**

There is no legal requirement for a school to administer medicines within the school setting. The aim of this policy is to provide a framework for clear and robust guidance for the safe administration of medicines. In order to achieve this, the

school believes that a clear policy on the handling and administration of medicines in school is necessary to safeguard all of the pupils in our care.

Administering a medicine in school can help to ensure regular attendance of a child that otherwise may not be able to attend school because of medical needs. This includes short-term needs such as finishing a course of antibiotics, or the administration of a regular analgesia as advised by a doctor. It would also include children with long-term needs such as asthma, diabetes, epilepsy and anaphylaxis who may require regular medicine or medicine in an emergency situation.

Protocols pertaining to the administration of medicine, first aid, and long-term medical conditions should be available to all parents through the Parents' Handbook. All parents and guardians should be familiar with school policies and their role in supporting and endorsing them.

Anyone caring for children including teachers, classroom assistants, Nursery Nurses and other support staff, have a duty of care to 'act like any reasonably prudent parent'. Children should be safe and healthy within the school setting, and at St Hilda's School this role extends to administering short and long-term medicines as well as taking action in an emergency. Within the school, a member of the office staff will usually be responsible for the administration of medicine in the school office.

## **GUIDELINES FOR ADMINISTRATION OF MEDICINE**

Medicines should only be taken to school if absolutely necessary and it would be detrimental to the child's health not to do so. Only medicines that have been prescribed by a doctor, dentist or nurse or pharmacist prescriber should be given. However, St Hilda's School agrees to the administration of non-prescription medicine **ONLY** with specific prior written consent from the parents. This includes cold and pain reliever remedies, all over the counter creams and lotions and anti-histamines. It is imperative that all medicines are handed in to the school office during school hours (see below).

**ALL MEDICINES SHOULD BE IN THEIR ORIGINAL CONTAINERS WITH PRESCRIBER OR MANUFACTURER DETAILS – CHILD'S NAME, DOSAGE, EXPIRY DATES AND WRITTEN INSTRUCTIONS - CLEARLY INTACT.** This is a statutory requirement under the Medicines Act 1968.

Appropriate written authorisation must be gained from the parent or guardian before the administration of any medicine. The authorisation form can be obtained from the School Office. This again is a mandatory requirement under the Medicines Act 1968. The authorisation must also be in line with the prescriber's instructions.

### **Authorisation information should include:**

- The date
- Name of child and medication
- Condition being treated
- Prescribed dosage and frequency

- Method of administration eg: lotion to arms etc.
- Expiry date

Parents must always keep the school informed of any medical conditions affecting their child and provide regular updates of their condition and changes in medication if it is long term.

Records of the administration of any medicine must be kept. The staff member supervising the administration of medicine needs to document the date, time, child's name, name and dosage of the medicine and whether administration was complete. Refusal to take medication should also be documented and the information passed on to the parents. Children must never be forced to take a medicine. Records should not be routinely destroyed but kept by the school.

All medicines must be handed in to the School Office for safe storage. If pupils hand their medicine to the class teacher it is then forwarded to the school secretary. Medicines that require refrigeration are stored in a designated fridge in the school office. Spare individual inhalers and EpiPens, and insulin are always accessible in the school office. The other inhaler or EpiPen should be kept with the child in the classroom or kept by the teacher with prior consent by the parent. All short-term medicines should be returned home with the child and parent/carer at the end of the school day. Parents are responsible for the disposal of expired medicines. There is provision to store the medicines that may be required occasionally or regularly such as pain relief for migraines, period pains or more long-term medical conditions. In each case the medicine will only be accepted and administered if in its original labelled container with the prescriber's instructions and accompanied by a detailed letter from the parents as outlined above.

**PUPILS SHOULD NEVER CARRY THEIR OWN MEDICINE IN SCHOOL UNLESS AN INHALER OR EPIPEN. MEDICINES SHOULD NEVER BE SHARED WITH OTHER PUPILS.**

If a child requires medication off-site this should be arranged with the child's teacher or trip leader. It is possible for a designated person to supervise the administration of a medicine out of school. Children with long-term medical needs are not excluded from out of school activities and inhalers, EpiPens and insulin will always accompany the child as appropriate.

Pupils requiring the administration of a medicine three-times daily may not require the medicine in school unless staying late.

Office staff are generally responsible for the supervision of medicine. In some cases they will be unavailable and the responsibility falls to the qualified named First Aiders. All medically unqualified staff should be familiar with the authorisation information required to safely administer a medicine (**see protocol for the administration of medicines**).

Information regarding a child's medical condition is shared with appropriate members of staff and is noted on our MIS (Engage). However, confidentiality is maintained and information is not routinely divulged.

## **MONITORING AND EVALUATION**

The Administration of Medicines policy will be reviewed annually in line with other policies by members of the Senior Management Team.

Staff will be kept up-to-date with the medical conditions of all pupils as required in weekly staff meetings and staff bulletins. This is an on-going concern with medical lists updated as medical conditions arise.

First Aid training for staff will be reviewed regularly and attendance at training sessions encouraged.

## **NOTES TO POLICY**

1. Under the Health and Safety at Work Act 1974, employers including schools and their Governing Bodies (in the case of St Hilda's, Board of Governors) have a statutory requirement to produce a health and safety policy. Under this remit there is also a requirement to produce a policy for the management of medicines within schools.
2. When creating a policy for the management of medicines there are links with other policies already in place and invariably there is a degree of overlap. Other policies that may be linked to this policy include:
  - Admissions policy – clarity over rights of admission for all children
  - Educational Visits – taking medicines outside the school setting (see Health and Safety policy)
  - Food Hygiene – dietary requirements and allergies
  - Exclusion and sickness – guidance on when girls are too sick to attend school and when they should be fit to return, eg: after sickness and diarrhoea
  - Emergency plans
  - First Aid policy
3. Parents include the natural parents and any person who is not the parent but has parental responsibility. In the case of divorce or separation both parents automatically assume parental responsibility, but in the case of unmarried parents only the mother will have parental responsibility unless the father has acquired it in accordance with the Children Act 1989. This is important if there is disagreement over the management of a pupil who is unwell.
4. In accordance with Managing Medicines in Schools and Early Years Settings. (Department of Health March 2005), it is important that the person administering the medicine is able to verify that the written authorisation from the parents is in line with the prescriber's instructions. Medicine cannot be administered without the prescriber's instructions.

- 5 Medicines should be stored strictly in accordance with the product instructions (for example: placed in the fridge as soon as possible) and in the original container in which it was dispensed. **Non-healthcare staff should never transfer medicines from their original containers.**

**This policy will be reviewed annually, by the Senior Management Team, in line with the school's review schedule for policies.**



**Diabetes UK Medical Conditions Policy  
to accompany  
First Aid – Administration of Medicines Policy**

**Important Note**

Unless otherwise stated, all Policies of St Hilda's School apply to the school in its entirety. This comprises all staff and pupils in the Early Years Foundation Stage (EYFS), the Junior School (Key Stage 1) and the Senior School (Key Stage 2).

**REVIEW DATE: March 2018**

**REVIEWED BY: Dan Sayers (Headmaster)**

**SIGNED:**

**DATED:**

**INTRODUCTION**

As part of the Government's agenda to improve the lives of children and young people and in accordance with the School's responsibility for health and safety, this information regarding Diabetes will accompany our Administration of Medicines Policy (**Standard 3, Section No. 25**).

**AIMS**

- To ensure the safe administration of medicine in school
- To support children with diabetes in school
- To ensure that parents and guardians are aware of their responsibilities
- To ensure that all school staff are aware of their roles relating to children with Diabetes.

**Policy framework**

The policy framework describes the essential criteria for how the school can meet the needs of children and young people with long-term conditions including diabetes.

**This school is an inclusive community that supports and welcomes pupils with medical conditions.**

- This school is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- This school will listen to the views of pupils and parents.
- Pupils and parents feel confident in the care they receive from this school and the level of that care meets their needs.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability to learn.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- The whole school and local health community understand and support the medical conditions policy.
- This school understands that all children with the same medical condition will not have the same needs.
- The school recognises that duties in the Children and Families Act (England only), the Equality Act (England, Wales and Scotland) and the Disability Discrimination Act (Northern Ireland only) relate to children with disability or medical conditions is anticipatory.

**This school's medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.**

- Stakeholders should include pupils, parents, school nurse, school staff, governors, the school employer and relevant local health services.

**The medical conditions policy is supported by a clear communication plan for staff, parents\* and other key stakeholders to ensure its full implementation.**

- Pupils, parents, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

\*The term 'parent' implies any person or body with parental responsibility such as a foster parent, carer, guardian or local authority.

**All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.**

- All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency and this is refreshed at least once a year.
- All children with a medical condition at this school have an individual healthcare plan (IHP), which explains what help they need in an emergency. The IHP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.

**All staff understand and are trained in the school's general emergency procedures.**

- All staff, including temporary or supply staff, know what action to take in an emergency and receive updates at least yearly.

**This school has clear guidance on providing care and support and administering medication at school.**

- This school understands the importance of medication being taken and care received as detailed in the pupil's IHP.
- This school will make sure that there are several members of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes escort staff for home to school transport if necessary. This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the pupil to involve their parent, while respecting their confidentiality.
- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents will be informed. This school will not give a pupil under 16 aspirin unless prescribed by a doctor.
- This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- Parents at this school understand that they should let the school know immediately if their child's needs change.
- If a pupil misuses their medication, or anyone else's, their parent is informed as soon as possible and the school's disciplinary procedures are followed.

**This school has clear guidance on the storage of medication and equipment at school.**



- This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment is readily available wherever the child is in the school and on off-site activities, and is not locked away. Pupils may carry their emergency medication with them if they wish/this is appropriate.
- Pupils may carry their own medication/equipment, or they should know exactly where to access it.
- Pupils can carry controlled drugs if they are competent, otherwise this school will keep controlled drugs stored securely, but accessibly, with only named staff having access. Staff at this school can administer a controlled drug to a pupil once they have had specialist training.
- This school will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately.
- This school will store medication that is in date and labelled in its original container where possible, in accordance with its instructions. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of each term.
- This school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

**This school has clear guidance about record keeping.**

- Parents at this school are asked if their child has any medical conditions on the enrolment form.
- This school uses an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent, school staff, specialist nurse (where appropriate) and relevant healthcare services.
- This school has a centralised register of IHPs, and an identified member of staff has the responsibility for this register.
- IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- The pupil (where appropriate) parents, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care.
- This school makes sure that the pupil's confidentiality is protected.
- This school seeks permission from parents before sharing any medical information with any other party.
- This school meets with the pupil (where appropriate), parent, specialist nurse (where appropriate) and relevant healthcare services prior to any

overnight or extended day visit to discuss and make a plan for any extra care requirements that may be needed. This is recorded in the pupil's IHP which accompanies them on the visit.

- This school keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.
- This school makes sure that all staff providing support to a pupil have received suitable training and ongoing support, to make sure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse/school nurse/other suitably professional and/or the parent. The specialist nurse/school nurse/other suitably qualified healthcare professional will confirm their competence, and this school keeps an up-to-date record of all training undertaken and by whom.

**This school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.**

- This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.
- This school makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- This school understands the importance of all pupils taking part in physical activity and that all relevant staff make appropriate adjustments to physical activity sessions to make sure they are accessible to all pupils. This includes out-of-school clubs and team sports.
- This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.
- This school makes sure that pupils have the appropriate medication/equipment/food with them during physical activity.
- This school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's

medical condition. This school will not penalise pupils for their attendance if their absences relate to their medical condition.

- This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCO/ALNCO/Special Educational Needs Advisor who will liaise with the pupil (where appropriate), parent and the pupil's healthcare professional.
- Pupils at this school learn what to do in an emergency.
- This school makes sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

**This school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks and has a written schedule of reducing specific triggers to support this.**

- This school is committed to identifying and reducing triggers both at school and on out-of-school visits.
- School staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers.
- It has a list of the triggers for pupils with medical conditions at this school, has a trigger reduction schedule and is actively working towards reducing/eliminating these health and safety risks.
- The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with medical needs.
- This school reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.

**Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.**

- This school works in partnership with all relevant parties including the pupil (where appropriate), parent, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- The roles and responsibilities for all relevant parties can be found at **[www.diabetes.org.uk/schools](http://www.diabetes.org.uk/schools)**

**The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.**

- In evaluating the policy, this school seeks feedback from key stakeholders including pupils, parents, school healthcare professionals, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services, governors and the school employer. The views of pupils with medical conditions are central to the evaluation process

**This policy will be reviewed annually, by the Senior Management Team, in line with the school's review schedule for policies.**

## **APPENDIX**

### **First Aid – Protocol for the Administration of Medicines**

This protocol should be followed to ensure the safe administration of any medicine to a pupil whilst at school.

In the unlikely event that a qualified first aider is not available, another member of staff may be required to administer medicines to a pupil in need of medication (see Administration of Medicines Policy).

- Medicines should be in their original containers with the original prescribing instructions. The medicine should be clearly named with the pupil's name. Staff should ensure that there is letter of consent with full instructions for the administration of that particular medicine (see Administration of Medicines Policy).
- The member of staff administering the medicine should wash their hands prior to and after administering it to prevent cross infection.
- He or she should also ensure that a drink of water is available as some medications irritate the mouth and oesophagus (including inhalers).
- The identity of the pupil should be checked to ensure that the medicine is the correct one for the relevant child.
- The instructions from the pupil's parents should correspond with the prescriber's instructions on the medicine.
- The person administering the medicine should ensure that it is being given at the correct time. A minimum of 4 hours must elapse before a subsequent dose of paracetamol is administered. A maximum of 4 doses of paracetamol may be given in any 24-hour period.
- Prior to administering the medicine, the record book (held in the School Office) should be checked to ensure that the medicine has not already been administered to the pupil in question.
- The route and site of administration should be checked (e.g. by mouth, into the eye/ear, etc). The expiry date on the medicine should also be checked and note taken of any special instructions (e.g. not using a cream on a broken area of skin).
- Before administering a medicine, a check should be made of any known allergies (see both the MIS (Engage) medical list and the list of pupils with allergies held in the School Office).
- After administering the medicine, a record should be made in the record book. The following details must be included:

**Name of child**

**Date and time**

**Name of medicine and dosage**

**Signature of person giving the medicine**

- If a child refuses to take their medicine, they should not be forced. A note should be made in the record book and the child's parents should be informed in writing. It is important that the school does not dispose of unused medicine. Any unused medicine should always be returned to the parents for disposal.

The school ensures that members of staff have appropriate training to ensure good practice in the administration of medicines.



## **MEDICATION TO BE ADMINISTERED BY FIRST AIDER**

**Please ensure all medication is clearly labelled with pupil's name and form. Expiry date to be checked.**

**Full Name of Pupil:** .....

**Form Teacher:** ..... **Form:** .....

**Name of Medication: (Please indicate if prescribed medication):**

.....

**Dosage:**..... **Keep in Fridge? YES/NO**.....

**Time(s) to be administered:**.....

**Reason for Medication:**.....

**Date(s) and Time(s) administered:**

**Date** ..... **Time** ..... **(First Aider)**.....

**Date** ..... **Time** ..... **(First Aider)**.....

**Date** ..... **Time** ..... **(First Aider)**.....

**Date** ..... **Time** ..... **(First Aider)**.....

**Date** ..... **Time** ..... **(First Aider)**.....

**PARENT/CARER'S SIGNATURE:** .....

**NAME (PRINTED):** .....

**RELATIONSHIP:** .....

**DATED:** .....