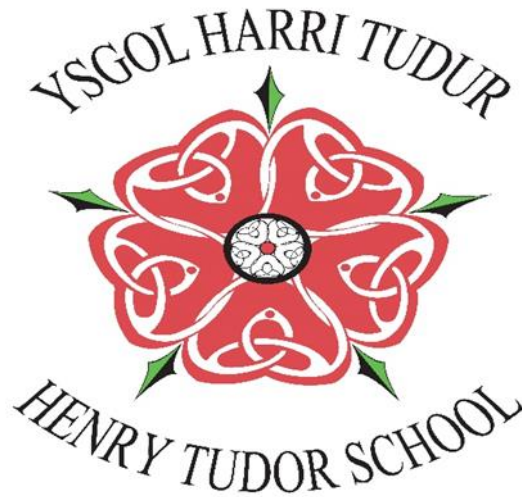


Ysgol Harri Tudur



Henry Tudor School

Administrations of Medication Policy

Approved – Governor's Resources Committee Summer 2012

Last review: Spring 2019

Review every 3 years

Next Review: Spring 2022

Introduction

1. The YHT Governing Body adopts the guidelines for administering medicines outlined in Bulletin 3 of the Education Services, Health and Safety for Education Establishments (Director of Education – September 2007) and will comply with the requirements imposed by the Local Authority and its insurer.

Key principles

- a. In most cases, pupils/students are able to take medicines before leaving for school and on arriving home. If medicines must be taken during school hours, YHT requires a doctor's note to this effect, and it should give clear instructions on dosage.
 - b. Administration of medicines is the responsibility of parents/carers.
 - c. Only staff with appropriate Health Board training can administer medicines on parents/carers' behalf. Under normal circumstances, staff will supervise pupils/students administering their own medicines.
 - d. Pupils/students should deposit any medicines with the school first-aider. Medicines must be clearly labelled with the pupils/students name, dose and expiry date.
 - e. The school does not issue Asprin, Paracetamol, or any other analgesics.
 - f. The school reserves the right not to administer medicines that may be dangerous or where the failure to administer medicine at set times could have any adverse consequences.
 - g. The school will only administer medicines provided full information has been given, on the appropriate form regarding medical condition, medicine dosage, type, timing and side effects, and any additional special care needed to cope with the child's medical condition.
 - h. The school does not provide medical advice.
2. An exception to these rules concerns the use of inhalers and emergency epipens. Where pupils/students require inhalers for asthma or emergency epipens, the school should still be notified, but the pupils should be encouraged to carry them around themselves and administer their own

medication. Written parental consent would be required. There may be other agreed exceptions where pupils/students carry medication.

Other Medical Needs

3. The school will try to respond to pupils/students short-term medical needs by making reasonable adaptation. For example, with fractured limbs, the pupil will be allowed to leave lessons earlier with the support of another pupil to avoid congestion in corridors. Parents/carers must not assume that the school will automatically make such arrangements. Before sending a pupil with temporary medical needs into school, the parents/carers must contact the Headteacher to explain what will be required.

Contagious Diseases

4. Parents/carers should not send children to school if they have serious diseases that could be spread easily. Equally, minor coughs and colds are not an acceptable excuse for pupils/students to stay away from school.

Guidance for the Administration of Medicines

Medication

5. The school must maintain an internal written record of the medical details and specific precautions to be taken and symptoms to be monitored for any child with an allergy or illness. The Headteacher and staff will treat all medical information as confidential. The following principles are to be followed where appropriate.

- a. Parental consent and advice is to be obtained prior to the child being admitted. The nominated person should advise staff of side effects which may be relevant.
- b. GP input should be sought in order to ensure that best advice is always received.
- c. Regular updates on serious medical conditions should be communicated to staff and recorded in an individual health care plan or medical P.S.P.
- d. General awareness of any child's conditions should be made to staff and students if it is necessary for the safety of the child.
- e. Parents/carers providing packed lunches for their child must submit full and detailed information with regards any materials, foods or substances which may cause an allergic reaction.
- f. Some prescribed medication may require refrigeration.
- g. Needles must be locked away until they are to be used and disposed of correctly in a 'sharps' container available in school.

General codes of practice regarding the administration of medication

6. The following general codes of practice for administering medication apply;

- a. No medication is to be administered unless clear written instructions to do so have been obtained from the parents/carers or legal guardians and the school has indicated that it is able to do so. It must be understood that all staff are acting voluntarily in administering medicines.
- b. Children who are acutely ill and who require a short course of medication e.g. antibiotics, will normally remain at home until the course is finished. If it is felt by a medical practitioner that the child is fit enough to return to school, the dosage should be adjusted so that none is required during the school day.
- c. Medicines should be administered by a named individual member of school staff (with specific responsibility for the task) in order to prevent

any errors occurring. All children who require medication to be given during school hours should have clear instructions where and to whom they report.

d. Parents/carers or legal guardians must take responsibility to update the school of any changes in administration for routine or emergency medication and maintain an in date supply of medication. Any unused or time expired medication must be handed back to parents/carers or legal guardians of the child for disposal.

e. All medicines must be clearly labelled with the child's name, route i.e. mode of administration e.g. oral, dosage, frequency and name of medication being given. Medication must be in the original container with the child's name clearly visible.

f. Emergency treatment medication and inhalers must follow the child at all times. Inhalers and other emergency treatment medication must follow the child to the sports field/swimming pool etc. Where it is agreed by parents/carers and teachers, inhalers/epipens will be carried by the child. All other medicines should be kept securely but accessible to staff in an emergency.

g. If appropriate, children may carry their own emergency treatment medication or inhalers. If this is not appropriate the medication should be kept by the teacher in charge in a box on the touch-line or at the side of the pool. The school may hold emergency spare inhalers, if they are provided by the parents/carers/guardians, or other treatment medication in the event that the child's medication is lost.

h. Some medication needs to be stored in a refrigerator in order to preserve its effectiveness - this will be indicated on the label. In order to meet the requirement for security, medication may be stored in a separate box provided by the parent/guardian within a refrigerator. If a refrigerator is not available, medication may be kept for a short period in a cool bag or box with packs, provided by the parent/guardian.

i. Any questions in the use of pupil medicines, including injections or inhalers, can be directed to the Named School Nurse/s.

Long Term Medication

7. Longer term medication has the additional considerations;

a. Medicines in this category are largely preventative in nature. It is essential that they are given in accordance with instruction, otherwise the management of the medical condition is hindered.

b. Parents/carers/guardian must be informed that they must use a proforma to report any changes in medication to the school. Schools may need to offer support in the completion of this form where parents/carers have literacy problems or where English is not their first language.

c. It is sometimes necessary to explain the use of medication to a number of pupils/students in the class in addition to the affected child so that peer group support can be given.

d. Long term medication is particularly applicable to the management of asthma. There are two types of inhaler treatment:

(1) **Preventer Inhaler.** This medicine is taken regularly to ensure the airway is less sensitive and to reduce the incidence of asthma symptoms.

(2) **Reliever Inhaler.** This medicine opens the narrowed airways to help the child with breathing difficulties during asthma symptoms.

a) Advice for school staff on the management of asthma for individual children (including emergency care) will be provided by the school nurse, as requested, during awareness of medication sessions in school.

b) Any difficulties in the use of an inhaler or understanding about medication usage should be referred to the school first aid officer initially and further advice, if required, from the School Nurse.

c) It is important that the reliever inhalers are easily accessible for use when a child experiences breathing difficulties or when required prior to a sporting activity and outing as advised by the child's medical practitioner, parent/guardian or pupil.

Injections

8. There are certain conditions e.g. Diabetes which are controlled by an insulin pump or regular injections. Children with these conditions are usually independent to manage the pump/injections of insulin. Where this is not possible, it should be agreed, in advance, that they should be given by their parents/carers in school or at home. It is not envisaged that it will be necessary to give injection in school unless the child is away on a school visit and may require additional support by school staff. All pupils with a diagnosis of Diabetes will require an individual health care plan to outline their health care needs in school.

Emergency Treatment

9. No emergency medication should be kept in the school except those specified for use in an emergency for an individual child. Advice for school staff about individual children may be sought from parent/guardian's and supported by the School Nurse on request.
10. In the event of an absence of trained school staff, it is essential that emergency back-up procedures are in place. This may include an individual health care plan for the pupil agreed by parents/carers, pupil, school staff and with the support of the School Nurse if required
11. Medicines must be stored appropriately. Medications must be clearly labelled with the child's name, the action to be taken, route, dosage, frequency and the expiry date.
12. If it is necessary to give emergency treatment, a clear written account of the incident must be given to the parents/carers or guardians of the child and a copy retained by the school.
13. When specifically prescribed, a supply of antihistamines or adrenaline should be made available by parents/carers if it is known that a child is hypersensitive to a specific allergen e.g. wasp stings, peanuts, etc. Immediate treatment needs to be given before going to the nearest emergency hospital/or calling an ambulance. An individual health care plan regarding the protocol for establishing the administration of adrenaline injections and a parental consent form need to be prepared.
14. A pupil who has a diagnosis of Haemophilia will require urgent assessment following a minor fall or injury in school. Immediate transfer to A&E should be arranged via ambulance. Health & safety precautions should be followed as per school policy.
15. If a pupil has a diagnosis of epilepsy, from a Consultant, they may be prescribed emergency medication in the form of Buccolam (Midazolam). The medication is administered into the buccal cavity between the lower lip and gum line in the child's mouth and is normally given after 5 minutes onset of a seizure. This is in accordance with the individual health care plan prescribed by the Paediatric consultant. All staff who attend regular medicine awareness, delivered by the School Nurse, are able to administer this medication in an emergency situation in school. Parents should be informed by school staff as soon as possible and staff should contact the emergency services by ringing 999. Parents are responsible for providing the prescribed medication and disposing of expired Buccolam.
16. A supply of glucose (tablets, drink, etc) for the treatment of diabetic

hypoglycaemic episodes should be provided by parents/carers/guardians. These should be stored in school and accessible to the first aid officer and pupil with Diabetes. In the event of a pupil reporting a high/low blood glucose level, they should be managed in accordance to the individual health care plan outlining the steps to be taken to assess hypoglycaemia (low blood sugar) or hyperglycaemia (high blood sugar) with/without ketones. If a pupil becomes unwell or unconscious or the pupil is displaying consistent abnormal readings on their diabetic meters, staff should contact parents and ring 999 and request emergency service.

School Visits

18. When conducting school trips the following areas must be actioned, as appropriate;

- a. The Local Authority is to be informed prior to the commencement of any school visit outside of the county boundary for a period of more than 24 hours.
- b. Consent must be gained from the child's parent/carer prior to participation in any school trip. Any medical problems, including allergies and reactions, must be highlighted by the parent/carer/guardian.
- c. Where insurance cover is obtained, medical conditions must be disclosed.
- d. A named person must be identified to supervise the storage and administration of medication.
- e. Wherever possible, children should carry their own inhalers for the treatment of asthma, but it is important that the named person is aware of this.
- f. Parents/carers are to inform the school prior to the visit if their child is expected to carry and self-administer painkillers, antibiotics or other prescription medication during the course of the trip.

Modified LA Appendices

19. Where necessary, the following appendices are to be completed;

- a. Appendix 1 - Request for School to Administer Medication
- b. Appendix 2 - Request for Pupil to Carry his / her Medication

Request for School to Administer Medication

Ysgol Harri Tudur / Henry Tudor School

The school will not give your child medicine unless you complete and sign this form, and the Headteacher has agreed that school staff can administer the medication.

PUPIL DETAILS

Surname:

Forename(s):

Address:.....

M/F:

.....

Date of Birth:.....

.....

Tutor Group:

Brief details of medical condition:

.....

MEDICATION

Name/Type of Medication (as described on the container)

Method of administration (eg measured liquid dose / tablets to be taken with food or water)

.....

For how long will your child take this medication?

Date dispensed:

Full Directions for use:

Dosage and method:

Timing:

Special Precautions:

Side Effects:

Self-Administration:

Procedures to take in an Emergency:

CONTACT DETAILS:

Name: Daytime Telephone No:

Relationship to Pupil:

Address:

.....

- I hereby give permission for the Headteacher or nominated person to administer the medication above in accordance with the details given.
- I understand that neither Pembrokeshire County Council nor its agents will be held liable for any injury or death which may arise either directly or indirectly from or out of the administration of any prescribed medication by an appointed member of staff, other than through the County Council's negligence.
- I will be responsible for updating the school of any changes in administration for routine or emergency medication.
- I will maintain an in-date supply of medication.
- I agree that emergency treatment medication and inhalers must follow the child at all times, including to the sports field / swimming / educational visits etc
- I will request the appropriate pro-forma from school in order to inform the school of any changes

Signature(s):

Date:

Relationship to pupil:

Notes:

.....
.....
.....

SCHOOL USE ONLY

Confirmation of the Head Teacher's / nominated person's Agreement to Administer Medication

I agree that [name of child]:

will receive [quantity and name of medicine]:
.....

every day at [time medicine to be administered e.g. lunchtime or afternoon break].

[Name of child] will be given/ supervised whilst he/she takes their medication by [name of member of staff].
.....

This arrangement will continue until [either end date of course of medicine / or until instructed by parents/carers]

Date:

Signed:

(Headteacher/Named Member of Staff)

Request for Pupil to Carry his / her Medication

This form must be completed by parent/carer/guardian

Pupils/students Name..... Tutor Group

Address

.....

Condition or illness

.....

.....

Name of Medicine

.....

Procedures to be taken in an Emergency

.....

.....

Date of completion of course of medication:

CONTACT INFORMATION

Name

Daytime Phone No

Relationship to child

I would like my son / daughter to keep his / her medication on him / her for use as necessary

Signed

Date

Relationship to child