

# **Winnington Park Primary School and Nursery**

## **Administration of Medicines**



Updated: Autumn 2023

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## **Administration of Medicines Policy**

This Policy is underpinned by the DfE Statutory Guidance 'Supporting Pupils at Schools with Medical Conditions 2015'.

### **Introduction**

Children with medical needs have the same rights of admission to our school as other children. Most children will at some time have short-term medical needs, while other children may have longer term medical needs and may require medicines on a long-term basis to keep them well. Other children may require medicines in particular circumstances, such as children with severe allergies.

### **Aims of this policy**

- to explain our procedures for managing prescription medicines which may need to be taken during the school day
- to explain our procedures for managing prescription medicines on school trips
- to outline the roles and responsibilities for the administration of prescription medicines

### **Prescribed Medicines**

The NHS West Cheshire Clinical Commissioning Group has agreed a policy supporting self-care for minor or self-limiting conditions. The policy states that for these conditions, patients (or their parents) are encouraged to self-care, and are expected to buy over-the-counter (OTC) medicines when appropriate. Therefore, GPs will not routinely prescribe these medicines. OTC medicines include those medicines on the General Sale List (GSL) that may be bought from retail outlets without medical supervision, or Pharmacy (P) medicines that can be purchased from registered pharmacies under the supervision of a pharmacist. Examples of medicines that do not require a prescription and which parents can give permission to administer include:

- Paracetamol, ibuprofen or antihistamines - provided they are supplied in packaging with clear dosage instructions that are age appropriate for the child
- Moisturising / soothing preparations for minor skin conditions
- Sunscreen for routine protection while playing / learning outside

These examples are illustrative only and not a comprehensive list of medicines that can be administered. To help determine whether a child is well enough to attend school, or an Early Years Provider setting, parents can be advised to review the NHS Choices website. <https://www.nhs.uk/pages/home.aspx> Schools and Early Years providers are, therefore, requested to review their policies to enable parents to give written consent for the use of an OTC non-prescribed medicine for minor conditions, without requesting a prescription be written. This will support the Clinical Commissioning Group's self-care policy, thereby reducing demand for appointments in general practice for minor conditions suitable for self-care and will reduce expenditure on prescriptions for OTC medicines.

## **Children with Asthma**

**All children with Asthma require a Health Care Plan which is to be filled out by parents/carers and to be kept in school with the pupil's inhaler.**

Children who have inhalers should have them available where necessary. Inhalers should be kept in a safe but accessible place. Inhalers should be taken to all physical activities and off-site activities, including school trips. Inhalers must be labelled and include guidelines on administration. School has a register of triggers for each child.

**It is the responsibility of parents to regularly check the condition of inhalers and ensure that they are working and have not been completely discharged.**

## **Storage of Medicines**

All medicines should be delivered to the school office or class teacher by the parent or carer.

**In no circumstances should medicines be left in a child's possession.** All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines will be kept in the staff room in a lockable cupboard and should not be kept in classrooms, with the exception of adrenaline pens and inhalers. All medicines must be stored in the supplied container and be clearly labelled with the name of the child; the name and dose of the medicine and the frequency of administration.

All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and staff and kept in an agreed place in the classroom. Emergency inhalers are available in the first aid 'bum-bags' taken onto the playground by staff on duty. Once used emergency inhalers are destroyed and replaced. Children may carry their own inhalers, when appropriate.

## **Disposal of Medicines**

Staff should not dispose of medicines. Parents are responsible for ensuring that date expired medicines are returned to the pharmacy for safe disposal. They should collect medicines at the end of the agreed administration time period.

## **Trips and Outings**

Children with medical needs are given the same opportunities as other children. Staff may need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This may include carrying out a risk assessment for such children. The school visit leader will be responsible for tabulating medical information for each child and one member of staff will be nominated as having responsibility for the administration of all medication. A first aider attends every trip.

## **Roles and Responsibilities**

### **Parent/Carer**

- Should give sufficient information about their child's medical needs if treatment or special care is required.
- Must deliver all medicines to the school office in person.
- Must complete and sign the parental agreement form.

- Must keep staff informed of changes to prescribed medicines.
- Keep medicines in date – particularly emergency medication, such as adrenaline pens.
  - Must take responsibility to see the medical form if required at the end of each day.

### **Headteacher**

- To ensure that the school's policy on the administration of medicines is implemented.
- There are members of staff within the school willing to volunteer to administer medication to specific pupils if required.
- Ensure that staff receive support and appropriate training where necessary.
- To share information, as appropriate, about a child's medical needs.
- Ensure that parents are aware of the school's policy on the administration of medicines.
- Ensure that medicines are stored correctly.

### **Staff**

- On receipt of medicines, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber should be checked and the medicines should be taken to the office.
- Ensure that the parent/carer completes a consent form for the administration of medicines following the prescriber's instruction.
- On administration the following checks must take place witnessed by another adult: the child's name; prescribed dose; expiry date and written instructions provided by the prescriber and signed by administrator and witness, on medical sheet in the file/in the case of inhaler and emergency medication the medical sheet is kept with the medication.
- Ensure that medicines are returned to parents for safe disposal and sign they have received it.

Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly.

School staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, staff should not:

- prevent children from accessing inhalers or medication
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office with an adult.
- penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;

- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues.

### **Refusal of Medicines**

If a child refuses to take medicines, staff should not force them to do so, but should note this in the records and inform parents immediately or as soon as is reasonably possible.

### **Record Keeping**

Medicines should be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. Staff should check that written details include:

- name of the child
- name of the medicine
- dose
- method of administration
- time and frequency of administration
- any side effects
- expiry date

A parental agreement form (see appendix) must be completed and signed by the parent, before medicines can be administered.

### **Children with long term medical needs**

It is important that the school has sufficient information about the medical condition of any child with long term medical needs. A health care plan will be written for children with long term medical needs, involving the parents and relevant health professionals. A copy of the child's health care plan will be kept with their teacher, in the office and in the staffroom. Health care plans will be updated and amended regularly.

### **Confidentiality**

The head and staff should always treat medical information confidentially. The head should agree with the child/parent who else should have access to records and other information about a child.

### **Staff Training**

Training opportunities are identified for staff with responsibilities for administering medicines.



Appendix: Parental Consent Form

**WINNINGTON PARK PRIMARY SCHOOL AND NURSERY**

**REQUEST FOR THE SCHOOL TO GIVE MEDICATION**

Dear Headteacher

I request that ..... (Full name of pupil)  
be given the following medicine(s) while at school:

Name of Medicine

Duration of course

Dose Prescribed

Date Prescribed

Time(s) to be given

The above medication is clearly labelled indicating contents, dosage and child's name in FULL.

- I understand that the medicine must be delivered to and collected from the school by myself or the undermentioned responsible adult.

.....

- I accept that this is a service which the school is not obliged to undertake and also agree to inform the school of any change in dosage immediately.
- I understand that every effort will be made to give the medication at the stated time, but this cannot always be guaranteed.

I agree to the Headteacher requesting access to the above named pupil's medical records

Signed: ..... Parent/Guardian

Address: .....

.....

Date: .....

Notes to Parents:

1 Medication will not be accepted by the school unless this form is completed and signed by the parent or legal guardian of the child and that the administration of the medicine is agreed by the Headteacher.

2 This agreement will be reviewed on a termly basis.  
The Governors and Headteacher reserve the right to withdraw this service.

[illegible]

