

This policy has been formulated by staff in consultation with governors, parents and children, in accordance with 'Managing Medicines in Schools and Early Years Settings' DFES 1448-2006DCL-EN and is linked to the Health and Safety Policy and School Risk Assessment.

Aims

To ensure that children with medical needs receive proper care and support in school, enabling regular attendance.

Prescribed medicines

Medicines should only be administered during the school day if it would otherwise be detrimental to the child's health. School staff will only accept these medicines if they have been prescribed by a doctor, dentist, nurse practitioner or pharmacist.

Medicines must always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The school will not make changes to dosages on parental instructions alone.

Controlled drugs

Where a child has been prescribed a controlled drug (Misuse of Drugs Act):

- the drug may be administered in school by a member of staff in accordance with the prescriber's instructions
- the drug will be kept in a locked cupboard to which only designated staff have access. A record will be kept for audit and safety purposes
- the drug will be returned to parents for safe disposal when no longer required
- mis-use of a controlled drug, such as passing it to another child is an offence.

Non-prescribed medicines

Staff **will not** give any non-prescribed medicine to a child without specific prior permission from parents/carers. Ideally, this will be in writing, however, we will accept verbal permission either face-to-face or over the telephone in exceptional circumstances.

Aspirin or medicines containing Ibuprofen will not be given to children unless prescribed by a doctor and dispensed by a pharmacist.

Aspirin may be offered to staff or visiting adults in the case of a suspected heart attack (300mg to be chewed and swallowed), while waiting for the Emergency Services to respond, as long as there are no contra-indications that would be life-threatening and it has been agreed by the Headteacher.

Long term medical needs

A designated member of staff will seek to ensure that the school has sufficient information about the medical condition of any child with long term needs before the child is admitted or when the child first develops the medical need. This should include the possible impact of any medicines on learning.

In those cases where a specific course of action is necessitated, a written healthcare plan is developed with parents/carers and health care professionals.

Administering medicines

No child will be given any medicines without the completion of a permission form by parents.

Only designated members of staff should administer a medicine and they will check:

- child's name
- prescribed dose
- expiry date

- written instructions provided.

If in any doubt, or if the member of staff has concerns about administering any medicine, they should discuss the issues with the parent/carer, if appropriate, or the school nurse. A record will be kept and signed each time a medicine is given to a child on the reverse of the parental permission form.

Self management

We recognise that is good practice, in consultation with parents/carers, to encourage pupils who are able, to take responsibility to manage their own medicines and to participate in making decisions about their medicines. Pupils who use asthma inhalers will be encouraged to carry them with them. We support pupils using other medicines case by case (for example: insulin for children with Type 1 Diabetes, Ritalin for children with ADHD) taking into account the specific medical advice and with the written permission of parents/carers.

Refusing medicines

If a child refuses to take medicine, staff will not force them to do so, but should note this in the record. The parents will be notified on the same day, or immediately if refusal puts the child at risk. If refusal results in an emergency, the procedures detailed in the health care plan and H&S policy will be implemented.

Record keeping

Staff should ensure that information provided by parents is the same as that provided by the prescriber. It is necessary to check that written details include:

- child's name
- name of medicine
- dose
- method of administration
- time/frequency of administration
- any side effects
- expiry date.

Educational visits

Staff supervising excursions should be aware of any medical needs of pupils and any relevant emergency procedures. (if there is a healthcare plan for a child, this should be taken in case of an emergency.)

If staff are concerned about whether they can provide for a child's safety, or the safety of others on the visit, they should consult the child's parents/carers and the school health service or the child's GP.

Sporting activities

Some children may need to take precautionary measures before or during exercise and may need to be allowed immediate access to medicines such as asthma inhalers or glucogel.

Staff training

Staff will receive training on a rolling programme to support them in providing suitable care for children with anaphylaxis and asthma as well as Emergency First Aid in school.