

### Rationale

Regular school attendance is vital for every child and Dussindale Primary School does all that it can to maintain high attendance figures. Nevertheless, from time to time every child will become ill and may require some time out of school to recover. In general, where a child requires medication (or treatment) they should be kept at home until the course of treatment is complete.

There are, however, the following exceptions:

- When a child has almost fully recovered and simply needs to complete a course of medication (e.g. antibiotics) for a day or so;
- Where a child suffers from a condition requiring occasional medication, such as inhalers for asthma or epipens for severe allergies. We strongly encourage children to take personal responsibility for these items as soon as possible.
- When a child has a chronic condition e.g. diabetes or epilepsy, when regular administration of medicine by staff is essential to full inclusion for the child. In these cases training must be given by appropriate professionals, and a care plan must be drawn up and followed.

### Legal Aspects

There is no legal duty on non-medical staff to administer medicines or to supervise a child taking it.

*This is purely a voluntary role.* Staff should be particularly cautious agreeing to administer medicines where:

- the timing is crucial to the health of the child;
- there are potentially serious consequences if medication or treatment is missed;
- a degree of technical or medical knowledge is needed.

Staff who volunteer to administer medicines should not agree to do so without first receiving appropriate information and/or training specific to the child's medical needs. Under no circumstances must any medication, even non-prescription drugs such as paracetamol, be administered without parental approval.

### Safety checklist

- Is any specific training required to administer medicines?
- Is any necessary protective clothing or equipment available?
- Has the parent completed the Medication Consent Form? Has a copy been filed?
- Is the member of staff clear on what they are expected to do?
- Is the emergency contact information, particularly for the G.P. and parent or guardian clear?
- What action is necessary in the event of an accident or failure of the agreed procedures?
- Will medication be stored in a safe place and at a suitable temperature?
- Staff must be aware of the policy on infectious diseases.

The school will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration and dosage.

**The school will never accept medicines that have been taken out of the container as originally dispensed, nor make changes to dosages on parental instructions.**

### **Instruction and Training**

Specific instructions and training should be given to staff before they are required to assist with or administer medicines or medical procedures. This must include the identification of tasks that should not be undertaken. Such safeguards are necessary both for the staff involved and to ensure the well being of the child. Even administering common medicines can sometimes be dangerous if children are suffering from non-related illnesses or conditions.

### **Record Keeping**

Form Med 1 must be completed by the parent if any medicine is to be administered, and a copy must be kept in the central record in the school office. The school must complete form Med 2 whenever medicine is administered to a child, and this must also be copied and kept in the central record.

### **Safe storage and disposal of medicines**

- Medicine should be administered from the original container or by a monitored dosage system such as a blister pack. The designated member of staff should not sign the medicine record book unless they have personally administered, assisted, or witnessed the administration of the medicines.
- When medicines are used staff will need to ensure that they fully understand how each medicine or drug should be stored. Storage details can be obtained either from the written instructions of the GP/Pharmacist or from parents.
- All medicines should be stored in the original container, be properly labeled, and kept in a secure place, out of reach of children. Arrangements may be needed for any medicines that require refrigeration. These should be clearly labeled and kept separated from any foodstuff. Medicines should only be kept while the child is in attendance.
- Where needles are used, a sharps container and adequate arrangements for collection and incineration should be in place. Such arrangements are necessary for any equipment used which may be contaminated with body fluids, such as blood etc.
- Controlled drugs (eg Ritalin) must be kept in a locked non-portable container and only named staff should have access. A record should be kept for audit and safety purposes.
- Any unused or outdated medication will be returned to the parent for safe disposal.

### **Non-prescription medicines**

Staff should never give a non-prescribed medicine to a child unless there is specific prior written permission from the parents. In general, non-prescription medicines should not normally be administered. However, examples may include analgesics (pain relief), milk of magnesia tablets or liquid, creams and sprays etc.

### **Accidental failure of the agreed procedures**

Should a member of staff fail to administer any medication as required they will inform the parent as soon as possible. However, the position should not normally arise as any child requiring vital medication or treatment would not normally be in school.

### **Children with infectious diseases**

Children with infectious diseases will not be allowed in school until deemed safe by their GP and/or the School Nurse or local health authorities.

### **Educational visits and trips**

Children requiring medication on school trips should be included wherever possible. Risk assessments will be carried out as appropriate to each individual case. Where medicines are administered on a school trip, normal procedures for record-keeping will be followed.

**Children with long-term, chronic conditions**

For children with conditions such as epilepsy or diabetes which require daily administration of medicine, a care plan will be drawn up together with parents/carers and health professionals. These will be displayed in the staffroom where appropriate, and stored with the central record in the school office.

**Staff training**

Where staff volunteer to administer medicine in more complex cases (eg epipens, diabetes injections), training will be arranged with an appropriate health professional and/or with the parents. This training will be recorded on form Med 4 and kept in the central record.

This policy has been agreed by the governing body.