



Managing Medications Policy

**Next Review:
June 2022**

A handwritten signature in black ink, appearing to read "Dawn Laverick-Brown".

Chair of Governors: Dawn Laverick-Brown

Introduction:

On September 1st 2014, a new duty came into force for governing bodies to make arrangements to support students at school with medical conditions.

1.1 Most students will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other students have medical conditions that, if not properly managed, could limit their access to education.

1.2 Most students with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. However, school staff may need to take extra care in supervising some activities to make sure that these students, and others, are not put at risk.

1.3 Students, Schools and Families is committed to ensuring that students with medical needs have the same right of access as other students.

1.4 Some students with medical needs are protected from discrimination under the Disability Discrimination Act (DDA). Under part 4 of the Act responsible bodies for schools must not discriminate against disabled students in relation to their access to education and associated services.

1.5 There is no legal duty that requires schools and staff to administer medication, this is a voluntary role. The 'duty of care' extends to administering medication in exceptional circumstances, and therefore it is for schools to decide their local policy for the administration of medication.

1.6 Schools should ensure that they have sufficient members of staff who are appropriately trained to manage medicines as part of their duties. Such staff should receive appropriate training and support from health professionals.

1.7 All staff working in a LA maintained school are covered in respect of public liability insurance while they are acting on behalf of the County Council. This includes any duties that are undertaken to support a healthcare plan.

Detailed guidance, including forms to use, is set out in the joint DfES and DoH guidance which can be found on the DfES web site:

['Managing Medicines in Schools and Early Years Settings'](#)

All educational establishments must ensure that they and their staff are familiar with the guidance document and follow its recommendations.

2.0 POLICY:

Batchwood School's policy covers:

Procedures for managing prescription medicines.

Procedures for managing prescription medicines on trips and outings. (see also off-site visits policy)

Clear statement on the roles and responsibilities of staff managing the administration of medicines.

Statement on parental responsibilities in respect of student's medical needs.

Need for prior written agreement from parents for any medicines to be given to a student.

The circumstance in which student may take any non-prescription medicines.

The school policy on assisting students with complex medical needs.

Policy on students carrying and taking their medicines themselves. ONLY ASTHMA inhalers may be carried or Epi-pens

Staff training in dealing with medical needs.

Record keeping.

Safe storage of medicines.

Access to school's emergency procedures.

Risk assessment and management procedures.

3.0 MEDICATION

3.1 Parents should, wherever possible, administer or supervise the self-administration of medication to their child. However, this might not be practicable and in such a case parents may make a request for medication to be administered to the student at the school/establishment

No student under 16 should be given any medicines without their parent's written consent.

3.2 Prescribed Medication

3.2.1 It is helpful, where possible that medication be prescribed in dose frequencies which enable it to be taken outside of school hours. E.g. medicines that need to be taken 3 times a day can be managed at home. Parents should be encouraged to ask the prescriber about this. If it is the first time a dose is to be given, it must be taken at home in case of any adverse side effects.

3.2.2 Such medicines should only be taken into schools where it would be detrimental to a student's health if it were not administered during the day.

3.2.3 Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.

3.2.4 Schools should never accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.

In all cases it is necessary to check:

Name of student

Name of medicine

Dosage

Written instructions provided by prescriber

Expiry date

3.2.5 A written record should be kept of the administration, stating the dosage amounts as prescribed.

3.2.6 Large volumes of medication should not be stored. Prescribed medication kept at the establishment will be kept in locked medicines cabinet in the Staff room and arrangements made for it to be readily accessible when required. Key holders to the medical cupboard are: Nina Waters, Deborah Parsonage and Debbie Hawkes.

3.2.7 All emergency medicines (asthma inhalers, epi-pens etc.) should be readily available and not locked away. Student epi-pens and asthma inhalers are stored in the front office cupboard for easy access. And staff are trained in administering.

Additional emergency asthma inhalers are kept for students whose inhaler has run out or expired and these are in the first aid room.

Asthma inhalers are audited termly for expiry and use. Parents are advised if a replacement is required.

If the medication must be kept refrigerated, the medication is clearly marked in a sealed bag and stored in the fridge in the staff room.

Under no circumstances should medicines be kept in first-aid boxes.

For school trips a lockable medications box is used and a trained medications staff member will administer meds where possible. Where this is not possible then the meds trained staff will train the staff member leading the trip and they will administer. This has been agreed with Mark Falkingham, Head of Off-site visits at HCC.

3.3 Long term medical needs

3.3.1 It is important for the school to have sufficient information regarding the medical condition of any student with long term medical needs. Batchwood School have health care plans for such students, which has been drawn up with parents/carers and the relevant health professionals.

3.3.2 Advice on drawing up Health care plans is given in chapter 4 of [‘Managing Medicines in Schools and Early Years Settings’](#) See also ‘Supporting students with medical conditions’ policy.

General advice on common conditions such as asthma, epilepsy, diabetes and anaphylaxis is provided in Chapter 5 of [‘Managing Medicines in Schools and Early Years Settings’](#) See ‘Supporting students with medical conditions policy’. In the first instance the school nurse should be the initial contact for any queries over specific medical conditions.

3.3.4 Any specific training required by staff on the administration of medication (e.g. adrenaline via an epipen, rectal valium etc.) will be provided by the school nurse. Staff training for epi-pen undertaken 2019 and we will have further training from the school nurse in the Autumn term 2020-21.

3.3.5 Staff should not administer such medicines until they have been trained to do so. Batchwood School has 6 staff members trained in the administration of medications, as at October 2020 and 14 staff members trained in epi-pen.

3.4 Controlled Drugs

3.4.1 Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act. Therefore, it is imperative that controlled drugs are strictly managed between the school and parents. See Supporting Students with Medical Conditions policy. Every student with medical needs has an IHP.

Controlled drugs are only brought in by parents/carers and only a small supply is held at school. The amount of medication handed over to the school is always recorded and we hold a signed record of the drugs administration.

Controlled drugs are stored in a locked non portable medical safe located in the staff room, which is locked at all times. Only trained staff Nina Waters, Debbie Hawkes and Deborah Parsonage have access to the key safe. Each time the drug is administered, two members of staff are present. They check the label, dosage and date of the medication before administering. This is recorded on the students’ medications form and signed by the two staff members. A record is shown even if the student refuses to take it.

If students refuse to take medication, school staff should not force them to do so. The school should inform the student’s parents as a matter of urgency. If necessary, the school should call the emergency services.

If the student has a reaction to the medication, then follow the advice on the medication and if in any doubt contact the emergency services and complete the emergency form.

The person administering the controlled drug should monitor that the drug has been taken and always provide a glass of water to the student. Passing a controlled drug to another student is an offence under the Misuse of Drugs Act and the taking of the drug must therefore be witnessed by the staff member.

As with all medicines any unused medication should be recorded as being returned back to the parent when no longer required. If this is not possible it should be returned to the dispensing pharmacist. It should not be thrown away. Audit of medication last undertaken July 2020.

3.5 Non Prescription Medication

3.5.1 It is strongly recommended that homeopathic medicines are not administered to students unless permission is given by parents.

3.5.2 Staff may not know whether the student has taken a previous dose, or whether the medication may react with other medication being taken. A student under 16 should never be given aspirin containing medicine, unless prescribed by a doctor. (there are links between the use of aspirin to treat viral illnesses and Reyes Syndrome, a disease causing increased pressure on the brain)

3.5.3 Batchwood School holds a supply of non-prescription medicine, paracetamol. Students' parents must be called to gain permission to administer paracetamol every time it is required. A stock is maintained in the locked medicine cupboard in Staff room with a further supply within a locked container in Reception. Records are maintained in the medications folders and signed by the staff member. Only one staff member needs to administer non-prescriptive drugs.

3.5.4 If a student suffers regularly from acute pain, such as migraine, the parents should authorise and supply appropriate painkillers for their student's use, with written instructions about when the student should take the medication.

A member of staff should notify the parents that their student has requested medication and supervise the student taking the medication if the parents have agreed to it being taken. Only one staff member needs to sign to administer non-prescriptive pain killers but the student's parents must be contacted before administering, in case they have had a dose before coming into school. This also applies to travel sick pills for journeys and hay fever medicine which can be held for students at the request of their parent/carer.

3.6 Record keeping

3.6.1 Parents / guardians should provide details of medicines their student needs to take at school. Forms 3A/B in ['Managing Medicines in Schools and Early Years Settings'](#) can be used to record these details in a standard format.

3.6.2 Batchwood School maintains a written record of all medications administered.

3.6.3 Controlled and prescribed drugs must be prepared by two staff members. They must check the name of student, name of drug, the dosage and expiry date. This must be done every time, even if it is a regular daily occurrence. Both staff members must date, record the time and sign the administration documentation.

Non prescribed drugs (hay fever/paracetamol) only need one staff member to administer.

3.7 Self Management

3.7.1 It is important that as students get older they should be encouraged to take responsibility and manage their own medication. This should be clearly set out in the student's health care plan in agreement with the parents, bearing in mind the safety of other students. Due to the nature of Batchwood school students, we allow students to hold their asthma inhalers but all other medications must be locked away in the staff room medical cupboard. Students are always made aware of how they can access the medications and which staff members to approach.

3.7.2 Staff should be aware of the need for asthmatics to carry medication with them (or for staff to take appropriate action) when, for example, participating in outdoor physical education or in the event of an evacuation or fire drill.

3.7.3 Students should know where their medicines are stored. The asthma inhalers are stored in the front office whilst additional emergency inhalers are stored in the first aid room.

3.8 Refusing medication

3.8.1 If a student refuses to take medication staff should not force them to do so, but note this in the records and inform parents of the refusal. If necessary, the school should call the emergency services.

3.9 Offsite visits

3.9.1 Students with medical needs are included and participate in offsite visits. All staff supervising visits should be aware of any medical needs and relevant emergency procedures. Where necessary, an individual risk assessment should be conducted.

3.9.2 It should be ensured that a member of staff who is trained to administer any specific medication (e.g. epi-pens) accompanies the student and that the appropriate medication is taken on the visit.

3.9.3 Medicines should be kept in their original containers (an envelope is acceptable for a single dose- provided this is very clearly labelled)

3.9.3 Part B sections 4.7, 6.8 of the [Off Site Visits Manual](#) also refers

3.10 Sporting Activities

3.10.1 Most students with medical conditions can participate in PE and extra-curricular sport. Any restrictions on a student's ability to participate in PE should be recorded in their health care plan.

If restrictions apply, individual risk assessments should be conducted.

3.10.2 Some students may need to take precautionary measures before or during exercise and may need to be allowed immediate access to their medicines. (e.g. asthma inhalers/epi-pen/diabetes checks). Staff supervising sporting activities should be aware of all relevant medical conditions and emergency procedures.

4.0 **HYGIENE AND INFECTION CONTROL**

4.1 All staff should follow the [HCC](#) and [Education](#) health and safety guidance on the prevention of contamination from blood borne viruses.

5.0 **FURTHER ADVICE**

5.1 Advice on medical issues should be sought from the designated school nurse, the schools local Primary Care Trust (PCT), which includes guidance on communicable diseases, NHS Direct or from the SEN Advisors.

MEDICAL EMERGENCY REPORT

School:-----

Student:-----

Date of Birth:-----

DETAILS OF INCIDENT

Date:

Time:

What happened e.g allergic reaction, minor or severe; seizure, hypoglycaemic attack (low blood glucose level) faint or collapse:

Details of treatment given:

Additional information and comments:

AMBULANCE SENT FOR: yes/no

Name of person completing form

Date form completed

Risk Assessment/follow up required: -----

