



Silsden
Primary School

Administering Medication Policy

Adopted:
Review:

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Statement of intent

Silsden Primary School will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy. This policy has been developed in line with the DfE's guidance: 'Supporting pupils at school with medical conditions'.

The school is committed to ensuring that parents/carers feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

Signed by:

_____ Headteacher Date: _____

_____ Chair of governors Date: _____

1. Legal framework

1.1. This policy has due regard to statutory legislation and guidance including, but not limited to, the following:

- Children and Families Act 2014
- DfE 'Supporting pupils at school with medical conditions' 2015
- DfE 'Using emergency adrenaline auto-injectors in schools' 2017

2. Definitions

- 2.1. Silsden Primary School defines "medication" as any prescribed or over the counter medicine.
- 2.2. Silsden Primary School defines "prescription medication" as any drug or device prescribed by a doctor.
- 2.3. Silsden Primary School defines "non-prescription medication" as any over the counter medication.
- 2.4. Silsden Primary School defines a "staff member" as any member of staff employed at the school, including teachers.
- 2.5. For the purpose of this policy, "medication" will be used to describe all types of medicine.

3. Key roles and responsibilities

- 3.1. The governing board has overall responsibility for the implementation of the Administering Medication Policy and procedures of Silsden Primary School.
- 3.2. The governing board has overall responsibility of ensuring that the Administering Medication Policy, as written, does not discriminate on any grounds, including but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- 3.3. The governing board is responsible for handling complaints regarding this policy, as outlined in the school's Complaints Policy.
- 3.4. The governing board is responsible for ensuring the correct level of insurance is in place for the administration of medication.
- 3.5. The governing board is responsible for ensuring that members of staff who provide support to pupils with medical conditions are suitably trained and have access to information needed.
- 3.6. The governing board is responsible for ensuring that relevant health and social care professionals are consulted in order to guarantee that the needs of pupils with medical conditions are properly supported.
- 3.7. The governing board will manage any complaints or concerns regarding the support provided or administration of medicine using the school's Complaints Policy.
- 3.8. The headteacher is responsible for the day-to-day implementation and management of the Administering Medication Policy and relevant procedures of Silsden Primary School.
- 3.9. The headteacher is responsible for ensuring that appropriate training is undertaken by staff members administering medication.

- 3.10. The headteacher is responsible for ensuring that staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system.
- 3.11. A designated member of staff is responsible for overseeing insulin injections for diabetic pupils where necessary.
- 3.12. Staff, including teachers, support staff and volunteers, are responsible for following the policy and for ensuring pupils do so also.
- 3.13. Staff, including teachers, support staff and volunteers, are responsible for implementing the agreed policy fairly and consistently.
- 3.14. If a pupil is sent to hospital, at least one member of staff will accompany the pupil until their parent/carer has arrived.
- 3.15. Parents/carers are expected to keep the school informed about any changes to their child/children's health.
- 3.16. Parents/carers are expected to complete the appropriate medication administration form (appendix A i,ii) prior to bringing medication into school.
- 3.17. Parents/carers are expected to discuss medications with their child/children prior to requesting that a staff member administers the medication.
- 3.18. The headteacher is responsible for ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.
- 3.19. In the case of staff absence, the headteacher is responsible for organising another appropriately trained individual to take over the role of administering medication.

4. Training of staff

- 4.1. Teachers and support staff will receive training on the Administering Medication Policy as part of their new starter induction.
- 4.2. Teachers and support staff will receive regular and ongoing training as part of their development.
- 4.3. The headteacher will ensure that a sufficient number of staff are suitably trained in administering medication.
- 4.4. It is the responsibility of all relevant staff to be aware of a pupil's medical condition.
- 4.5. The headteacher will ensure that supply teachers are appropriately briefed regarding pupils' medical conditions.
- 4.6. A first aid certificate does not constitute appropriate training in supporting children with medical conditions.
- 4.7. The governing board will provide staff members with opportunities and details of CPD.
- 4.8. Silsden Primary School will provide whole-school awareness training so that all staff are aware of the Administering Medication Policy and understand their role in implementing the policy.

5. Receiving and storing medication

- 5.1. Prior to staff members administering any medication, the parents/carers of the pupil must complete and sign the appropriate medication administration form (appendix A i,ii).
- 5.2. Consent obtained from parents will be renewed annually.
- 5.3. No pupil will be given medicines without written parental consent.
- 5.4. Under no circumstance will a pupil be given aspirin unless there is evidence that it has been prescribed by a doctor.
- 5.5. Medicines must be in date, labelled, and provided in the original container with dosage instructions. Medicines which do not meet these criteria will not be administered, with the exception of insulin which is acceptable to use if it is in date but in a different container, such as an insulin pen.
- 5.6. The school will only allow prescribed medication, and only a maximum of four weeks' supply of medication to be stored by school.
- 5.7. When medicines are no longer required, they will be returned to the parents/carers of the pupil.
- 5.8. Needles and sharp objects will always be disposed of in a safe way, such as using 'sharp boxes'.
- 5.9. Long term medications, with the exception of adrenalin auto-injectors, will be stored in the medical box in the child's classroom. Where a child has an adrenalin auto-injector they will be stored in the school offices at either site.
- 5.10. Short term medications will be stored in the school office e.g. paracetamol. If necessary medications will be stored in a fridge e.g. antibiotics.
- 5.11. School spare adrenalin injector pens are stored in the office on both sites for use in an emergency. Every attempt will be made to contact the parent before use. An ambulance will be called if these are used.
- 5.12. School spare asthma inhalers are stored in the office on both sites for use in an emergency. Every attempt will be made to contact the parent before use. Parents will be informed of use using the Medical Tracker app.
- 5.13. The school will ensure that pupils know where their medication is at all times and are able to access them immediately.
- 5.14. In the event of a school trip or activity which involves leaving the school premises, medicines and devices, such as adrenalin auto-injectors, insulin pens and asthma inhalers, will be readily available to staff and pupils.
- 5.15. Staff members have the right to refuse to administer medication. If a class teacher does refuse, the headteacher will delegate the responsibility to another staff member.
- 5.16. Any medications left over at the end of the course will be returned to the pupil's parent/carer.
- 5.17. Written records will be kept on Medical Tracker for any medication administered to pupils.
- 5.18. Pupils will never be prevented from accessing their medication.

6. Administering medication

6.1. Medications will only be administered at school if it would be detrimental to the child not to do so.

6.2. Before administering medicine, maximum dosages and when the previous dose was taken will be checked on forms (appendix A i,ii) or verbally with parents.

6.3. Medication will be administered in a quiet and comfortable environment and, as far as possible, in the same room as the medication is stored; this will normally be the office.

6.4. Before administering medication, the responsible member of staff should check:

- The pupil's identity
- That the school possesses written consent from a parent.
- That the medication name and strength and dose instructions match the details on the consent form.
- That the name on the medication label is the name of the pupil who is being given the medication.
- That the medication to be given is within its expiry date.
- That the child has not already been given the medication within the accepted timeframe.

6.6 If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.

6.5. Where appropriate, pupils will be encouraged to take their own medication under the supervision of a member of staff.

- Parents/carers will be consulted before a pupil is given approval to be responsible for their own medication.
- These arrangements will be reflected in their individual healthcare plan (IHCP).

6.6. If a pupil refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their IHCP and parents/carers will be informed so that alternative options can be considered.

6.7. Silsden Primary School cannot be held responsible for side effects which occur when medication is taken correctly.

7. Individual healthcare plans

7.1. For chronic or long-term conditions and disabilities (where a care plan has not been provided by a medical professional), an IHCP will be developed in liaison with the pupil, parents/carers, headteacher, special educational needs coordinator (SENDCo) and medical professionals.

7.2. When deciding what information should be recorded on a IHCP (see appendix C), the governing board will consider the following:

- The medical condition, as well as its triggers, signs, symptoms and treatments

- The pupil's resulting needs, such as medication (the correct dosage and possible side effects), equipment and dietary requirements
- The specific support needed for the pupil's educational, social and emotional needs
- The level of support that is needed and whether the pupil will be able to take responsibility for their own health needs
- The type of provision and training that is required, including whether staff can be expected to fulfil the support necessary as part of their role
- Which staff members need to be aware of the pupil's condition
- Arrangements for receiving parental consent to administer medication
- Separate arrangements which may be required for school trips and external activities
- Which staff member can fulfil the role of being a designated, entrusted individual where confidentiality issues are raised
- What to do in an emergency, including whom to contact and contingency arrangements
- What is defined as an emergency, including the signs and symptoms that staff members should look out for

7.3. The governing body will ensure that IHCPs are reviewed at least annually. IHCPs will be routinely monitored throughout the year by the Inclusion Team.

8. Monitor and review

8.1. This policy is reviewed every year by the governing board and the headteacher.

8.2. Records of medication, which have been administered on school grounds, will be monitored and the information will be used to improve school procedures.

8.3. Staff members who are trained to administer medication will routinely recommend any improvements to the procedure.

8.4. Silsden Primary School will seek advice from any relevant healthcare professionals as deemed necessary.

Appendix A

Short Term Medication Administration Form

Student's Name

Self administration

Yes

No

Medical condition

Date medication dispensed by pharmacy

Medication name

Special precautions

EXAMPLE: Medication should be taken before/ after lunch.

Last date medication needs to be taken

Dosage of medication

Procedures to take in an emergency (if applicable)

1. Medication use time

2. Medication use time (if applicable)

3. Medication use time (if applicable)

DETAILS OF PERSON COMPLETING THIS FORM:

Name

Date

Email address

Signed

OFFICE USE ONLY: RECORDED ON MEDICAL TRACKER:

Long Term Care Plan Form

Student's name

Medical condition

Is this an ongoing condition?

- Yes
 No

Medication name(s)

Dosage of medication(s)

1. Medication use time (if applicable)

2. Medication use time (if applicable)

3. Medication use time (if applicable)

Self administration

- Yes
 No

Date medication(s) dispensed by pharmacy

Medication expiry date(s)

Special precautions

EXAMPLE: Medication should be taken before/ after lunch.

Student's condition and individual symptoms

Daily care requirements

Procedures to take in an emergency

Follow up care (if applicable)

GP Details/ medical professionals working with your child

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Additional information (if needed)

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Using the information provided we will create a long term care plan for your child. We will let you know when this is ready to be reviewed and authorised by you.

DETAILS OF PERSON COMPLETING THIS FORM:

Name

--

Date

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Email address

--

Signed

--

OFFICE USE ONLY: RECORDED ON MEDICAL TRACKER:

Appendix B – Individual Healthcare Plan Template



Silsden Primary School Individual Healthcare Plan

Pupil's name:

Address:

Date of birth:

Class teacher:

Medical condition:

Date plan drawn up: __/__/__

Review date: __/__/__

CONTACT INFORMATION

Family contact 1

Name:

Phone number:

(work):

(home):

(mobile):

Who is responsible in an emergency (State if different on off-site activities):

Signed	Date
Parent/carers	
Pupil (where appropriate)	
Headteacher	
SENCO	
GP	

Appendix D – information to support staff administering medication

Medicines in school

Adrenalin auto injectors (both named and school kept) will only be administered in an emergency situation. School inhalers will only be administered in an emergency situation. Record card per pupil to be kept with all medicines. KS1 - an adult to complete record card. KS2 – pupil to complete. **This must be completed for all medication use.** When completed they should be returned to the office for a new one.

Adrenalin Auto Injectors

All adrenalin auto injectors to have pupil's picture on the box. All Adrenaline Auto Injectors are stored in the school office.
School spare for emergencies to be stored in the office.

Inhalers for asthma/allergies

Inhalers should be kept in the class medical box in the classroom.
All use of inhalers to be recorded.

Care Plans

Short Term care plan should be used for
Anti-biotics etc
Paracetamol/Ibuprofen brought from home

Long term care plan for
Asthma etc
In conjunction with care plan issued by a medical professional

IHCP should be used for
Chronic or long-term conditions and disabilities (where a care plan has not been provided to school by a medical professional) e.g. Arthritis