

Medication in School Policy



Black Firs School

Management of Medicines and Health Needs

Introduction

Children with medical needs have the same rights of admission to a school or setting as other children. Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children however have longer term medical needs and may require medicines on a long-term basis to keep them well, for example children with well-controlled epilepsy or cystic fibrosis.

Others may require medicines in particular circumstances, such as children with severe allergies who may need an adrenaline injection. Children with severe asthma may have a need for daily inhalers and additional doses during an attack.

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

Parents have the prime responsibility for their child's health and should provide school with information about their child's medical condition. However, this policy aims to accommodate children in school with medical conditions in order to assist the smooth integration of children into the life of the school.

Black Firs has several members of staff who are first aid trained and who are willing to administer prescribed or regular medication to children in school. Regular allergy training is undertaken by staff. This policy outlines the procedures involved in managing the medications in school and their administration and has been prepared in conjunction with 'The Managing Medicines in School and Early Year Settings' guidance and aims to ensure that children are not discriminated against because of any medical need or condition. There has been an assessment of risks in storage and administering medicines.

This policy aims to:

- Provide information about the administration of medicines to children in school.
- Provide information about the procedures and guidelines concerning the medical management and care of children.
- Provide protection and re-assurance to all staff carrying out our procedures.

Guidance has been taken from the School Nurse & Cheshire East Council.

Sections include:

- Medications in school. Who is responsible?
- Policies and procedures for supporting children with medical needs.
- Dealing with medicines safely.
- Drawing up a care plan for a child with medical needs.
- Managing long term medical needs e.g. allergies, asthma and epilepsy.

Short Term Medical Needs

It is accepted that children will sometimes be on medication for a short period only and be well enough to attend school. School has therefore agreed to administer prescribed medication to children to minimise the amount of time that a child needs to be off school.

Details of Administration

Ratified by the Governing Body.

Date: autumn 2017

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1

- A medication in school sign form should be completed and signed by the parent / guardian. This details the medication, dosage, frequency and times of day to be administered.
- All medicines must be brought and collected from the school office / child's class by an adult.
- The medication should be clearly marked with the child's name and include any necessary equipment for the administration e.g. a spoon.
- Medicines will be kept in the fridge in the staff room.
- Medicines will be administered in the classroom at the appropriate time and the medication form signed by the person administering the medication.
- Medication forms are kept with the medication in the staff room (top of the microwave) in a pink folder. Old forms are filed in the pink box.
- If medication needs to be administered the office staff will inform the teacher and the teacher will write it on the board as a reminder.
- Two adults should be present when the medication is administered. One adult will read the full name and dosage and the other will check that this is correct. The medication will then be administered.
- If a child refuses medication, they should not be forced to take it. Parents should be informed.
- Children are told where their medication is stored and where to go if they need it.
- Medication that has not been prescribed by a doctor i.e. paracetamol, can be administered in exceptional circumstances on the authority of the Headteacher. Care must be taken to determine what time the medication was last administered at home.

Long Term Medical Needs

Red alert cards are produced for children who have long term medical needs, i.e. allergies. Copies of these are kept on the notice board in the staffroom, in the kitchen and in front of the class register. They are kept in the class register to alert relief staff who would not otherwise be in that class to the child's medical needs. Copies of the forms are kept when a child leaves Black Firs and passed onto the receiving school.

Other information held in the staffroom.

Guidance on infection control in school and nurseries chart.

Health and Safety at work poster.

Self-Administration of Medicines

The age of children being responsible for administration of their own medication varies but children are encouraged from upper juniors to participate in the decision making about their own medication. They are allowed to administer their own medication i.e. inhalers or insulin for diabetes. Children are advised to notify staff once administered and this is recorded as appropriate.

Disposal of Medicines

Medication (other than for allergies) are kept in the office and these are checked at the end of each term to ensure that they are in date. If they are not, they will be returned with a note directly to the parent asking that they replace them. It is advised that unused medication is taken to the pharmacy for disposal.

School Trips

We encourage children to participate on all visits. Additional safety measures are taken to ensure that the trip runs smoothly for the child. Each class has a list of children who are on regular medication or who have allergies. The trip organiser is aware of the emergency procedures and ensures that the medication is taken with the child and then returned to the cupboard at the end of the visit.

Sporting Activities

The dignity of children is paramount. Precautionary measures are taking during exercise. Children have immediate access to inhalers etc and risk assessments are carried out.

Staff Training

Ratified by the Governing Body.

Whole staff training is provided as appropriate depending on the medical need to be addressed. Allergy training is held annually for all staff.

First Aiders

Volunteer members of staff, including Teachers, Teaching Assistants, Out of School Club staff and Lunchtime Supervisors are provided with regular training obtain their First Aid qualification and to renew as necessary. Black Firs prides itself in having a very high percentage of staff who are competently trained in first aid appropriate to the age of the children they are working with.

First Aid Equipment

The main stock of first aid (which is kept in the First Aid cupboard by the photocopiers) is regularly checked and restored. There are also various first aid boxes around school and for playground use. Mrs Evans is the lead first aider and responsible for ordering and replenishing stocks.

First Aid Log Books

All accidents are reported to parents via email, including Bump Head notices, using a common format. These are copied to Kirsty Plant, senior First Aider kplant@black-firs.co.uk . She keeps copies of all accident form emails and a copy is also placed in the Staff Share folder. Hard copies are sent home if we get no response to the email from a parent. These are kept for 20 years.

An accident which results in either a child or adult requiring medical attention is reported on the PRIME on-line website. Two staff have been trained in this – Kirsty Plant and Chloe Holloway and other staff are aware of the need to report incidents directly and immediately to them for recording under the terms of RIDOR.

Emergency Procedures

All staff are aware of emergency procedures. If an ambulance is required a member of staff will go to the office and stay with the SBM or clerical assistant while the emergency services are contacted, ensuring that there is a qualified member of staff with the child. A member of staff will wait for the ambulance to arrive outside School and direct to the car park and then to the injured child. If the child needs to go to hospital, a member of staff will accompany. The parent will be contacted to either meet at School or if there is not time, will be directed to the hospital. The child's Data Collection Sheet will be taken to the hospital so that the member of staff has contact details to contact the parents if they have been unobtainable or to report on progress or location.

In emergencies, children can be taken to hospital by car provided they are accompanied by another adult, have public liability insurance and a booster seat.