

Date Valley School Trust

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Administration of Medicines Policy

Purpose:

This policy sets out the circumstances in which we may administer medicines within school, and the procedures that we will follow.

Introduction:

Most children 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 children have medical conditions that, if not properly managed, could limit their access to education. Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. Date Valley School is committed to ensuring that children with medical needs have the same right of access as other children.

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 the school to decide their local policy for the administration of medication.

The role of the parents / carers:

Parents / carers should, wherever possible, administer or supervise the self-administration of medication to their children. This may be by spacing the doses so that they are not required within school hours, or by the parent / carer coming in to school at lunch time to administer the medication. However, this might not be practicable and in such a case parents / carer may make a request for medication to be administered to the child at school.

If medicine needs to be administered during school time, then a parent or carer must bring it to the school office and fill in the Administration of Medication Permission Form and Record (Appendix 1). Medication must not be given to the class teacher, or brought into school by the child themselves. If medication is for a short-term condition, any remaining medication must be collected from the office by a parent or carer at the end of the school day.

Prescription Medication:

Prescription medicines should be administered at home wherever possible, for example medicines that need to be taken 3 times a day can usually be taken before school, after school and at bed time. Parents are encouraged to ask the GP as to whether this is possible. Prescription medicines will only be administered by the school where it would be detrimental to a child's health if it were not done.

Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The exception to this is insulin which must still be in date, but will generally be available to school inside an insulin pen or a pump, rather than in its original container. 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 the child
- Name of the medicine
- The dosage
- Written instructions provided by the prescriber
- Expiry date

An Administration of Medicine Permission Form and Record (Appendix 1) must be completed and signed by the parent / carer. No medication will be given without the parent's written consent.

Prescribed medication, other than emergency medication, will be kept in the school office, either in the medical cupboard or the refrigerator as appropriate. All emergency medicines (asthma inhalers, epi-pens etc.) should be kept clearly labeled and easily available in the medical cupboard. Print off Auto-Injector Advice (Appendix 6) and store with each epi-pen.

Long Term Medical Needs:

It is important for the school to have sufficient information regarding the medical condition of any child with long term medical needs. The school will draw up an Individual Health Care Plan (Appendix 2) for such children, involving the parents.

Appropriate training will be arranged for the administration of any specialist medication (e.g. adrenaline via an epipen). Staff should not administer such medicines until they have been trained to do so.

Controlled Drugs:

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. Ideally controlled drugs are only brought in on a daily basis by parents, but certainly no more than a week's supply and the amount of medication handed over to the school should always be recorded.

Controlled drugs should be stored in a locked non portable container, such as a safe, and only specific named staff allowed access to it. Each time the drug is administered it must be recorded, including if the child refused to take it. If the child refuses to take medication, school staff should not force them to do so. The school should inform the child's parents as a matter of urgency. The person administering the controlled drug should monitor that the drug has been taken. Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

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.

Non-Prescription Medication:

Where possible, the school will avoid administering non-prescription medicine. However, we may do so, if requested by the parent, if it will facilitate the child attending school and continuing their learning. This will usually be for a short period only, perhaps to finish a course of antibiotics, to apply a lotion or the

administration of paracetamol for toothache or other pain. However, such medicines will only be administered in school where it would be detrimental to a child's health if it were not administered during the day.

A child under 16 should never be given aspirin-containing medicine, unless prescribed by a doctor.

If non-prescription medication is to be administered, then the parent / carer must complete an Administration of Medication Permission Form and Record (Appendix 1) and the same procedure will be followed as for prescription medication. The medicine must be provided in its original container, with dosage information on it. The parent's instructions will be checked against the dosage information, and this will not be exceeded.

Administering Medicines:

Medicines will only be administered by members of staff who have been trained in the safe administration of medicines. This will usually be the school secretaries. Staff will also receive training for the administration of any specialist medication (e.g. adrenaline via an epipen). Staff should not administer such medicines until they have been trained to do so.

When a member of staff administers medicine, they will check the child's Administration of Medication Permission form against the medication, to ensure that the dose and timing are correct.

They will then administer the medicine as required, and record this on the form. A Medicine in School Record Slip (Appendix 3) will be emailed to parents, informing them of the time of administration.

Emergency Inhalers:

In line with [Guidance on the use of emergency salbutamol inhalers in schools](#), the school will keep emergency reliever (blue) inhalers for the emergency use of children whose own inhaler is not available for any reason. They will be stored in the Medical cupboard. Parents must sign a Consent Form: Use of Emergency Salbutamol Inhaler and / or Self Medication (Appendix 4) to consent to their child being allowed to use the emergency inhaler.

Self-Management for Ventolin inhalers:

It is important that as children get older and are deemed responsible, they should be encouraged to take responsibility and manage their own Ventolin inhaler. Parental consent should be obtained (Consent Form: Use of Emergency Salbutamol Inhaler and / or Self Medication (Appendix 4)). The safety of other children should be borne in mind.

Staff should be aware of the need for asthmatics to carry their inhalers with them (or for staff to take appropriate action). Children should know where their inhaler is when in their possession.

Refusing medication:

If a child 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 the refusal leads to a medical emergency, the school will call the emergency services and inform the parents.

Offsite visits:

It is good practice for schools to encourage children with medical needs to participate in offsite visits. All staff supervising visits should be aware of any medical needs and relevant emergency procedures.

Where necessary, individual risk assessments will be completed. A member of staff who is trained to administer any specific medication will accompany the child and ensure that the appropriate medication is

taken on the visit. Inhalers must be taken for all children who suffer from asthma. All medicines which a child needs to take should be handed to the teacher in charge of the visit. The only exception are asthma inhalers, which should be kept by the child themselves, if there is a individual health care plan agreement for this. The parents will sign a Medical Consent Form for School Trips (Appendix 5) for the consent of emergency treatment to be administered.

Travel Sickness - Tablets can be given with written consent from a parent but the child's name, dosage, time of dose and any possible side effects (the child must have had the travel sickness preventative at home before the trip in case of side effects) should be clearly marked on the container, which must be the original packaging. Parents will need to complete an Administration of Medication Permission Form and Record (Appendix 1).

Disposal of Medicines:

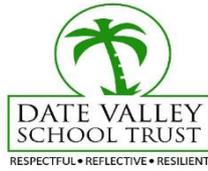
The school secretary will check all medicines kept in school each term to ensure that they have not exceeded their expiry date. Parents / carers will be notified of any that need to be replaced.

Parents / carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal. Sharps boxes should always be used for the disposal of needles. There will be a sharps box situated in the school office should the need for disposing sharps arise, e.g if any child requires regular injections such as insulin. Parents should provide a travel sharps box which can be taken offsite and on trips. The parents will be notified when the box is almost full so that they can bring in a new box and take the full box for disposal.

This policy has been read and approved for Date Valley School Trust, by the Headteacher and the Date Valley Trust Board.

Date: March 2019

Appendix 1 - Administration of Medication Permission Form and Record



Name of child:	Class:	Date:
Details of illness:		
Name of medicine:		
Expiry date of medicine:		
Times and dosage of medicine:		
Relevant side effects to be observed, if any:		
Medicine to be administered from:	Medicine to be administered to:	
Parent / Carer declaration: <ul style="list-style-type: none"> I hereby give permission that the above medication can be administered by school personnel I understand that I must supply the school with the prescribed medicine in the original container dispensed and properly labelled by the pharmacist I understand, I must collect this medication immediately after the day this order terminates 		
Parent / Carer name:	Signature:	Date:
Relationship to child:	Telephone:	

Office use:

Date	Expiry date of medicine	Time given	Dose given	Member of staff	Initials

Appendix 2 - Individual Health Care Plan



Individual Health Care Plan

Child's name:	
Date of birth:	Class:
Child's address:	Medical diagnosis or condition:
Family Contact Information	
(Adult 1) Name:	Relationship to child:
Phone no: (work / mobile)	Phone no: (home / mobile)
(Adult 2) Name:	Relationship to child:
Phone no: (work / mobile)	Phone no: (home / mobile)
Clinic / Hospital Contact	
Name:	Phone no:
General Practitioner	
Name:	Phone no:
Who is responsible for providing support in school?	
Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.	
Name of medication, dose, method of administration, when to be taken and side effects. (In addition, appendix 1 - Administration of Medication Permission Form and Record to be completed)	
Daily care requirements:	

Specific support for the child's educational, social and emotional needs
Arrangements for school visits / trips etc.
Describe what constitutes an emergency and the action to take if this occurs
Who is responsible in an emergency (state if different for off-site activities)
Other information not included:
Plan developed with:
Staff training needed / undertaken – who, what, when

The above information is, to the best of my knowledge, accurate at the time of writing. I will inform the school immediately, in writing, if there is any change in dosage or frequency of medication or if the medicine is stopped.

Signed by parent or carer:	Print name:
Signed by staff member:	Print name and position:
Date:	Review date:
Copies to:	

Appendix 3 – Medicine in School Record Slip

MEDICINE IN SCHOOL RECORD SLIP	Date:	
	Time:	
Child's Name:	Class:	
Name of Medication:	Staff Signature:	
Dose Given:		
Reaction/Comments:		
Notice to Parent or Guardian: The school has issued you with this record for information only. Your child has been given the medication detailed above. If you have any concerns, please contact the school office.		

Appendix 4 – Consent Form: Use of Emergency Salbutamol Inhaler and / or Self Medication



Consent Form: Use of Emergency Salbutamol Inhaler and / or Self Medication

Name of child:	Class:	Date:
Please tick as appropriate:		
I can confirm that my child has been diagnosed with asthma and has been prescribed a Salbutamol inhaler.		
My child has a working in-date Salbutamol inhaler, clearly labelled with their name, which has been handed in to the school office and is stored in the medical cupboard		
My child has a working in-date Salbutamol inhaler, clearly labelled with their name, which they keep on themselves during the school day for self-medication if the need arises		
In the event of my child displays symptoms of asthma and if their inhaler is not available or is unusable, I consent for my child to receive Salbutamol from the emergency inhaler held by the school for such emergencies		
Signed by parent or carer:	Print name:	
Signed by staff member:	Print name and position:	

Appendix 5 – Medical Consent Form for School Trips



Medical Consent Form for School Trips

Name of child:	Class:
Parents' Contact Details	
Name:	Name:
Address:	Address:
Contact Number:	Contact Number:
Relationship to child:	Relationship to child:
Emergency Contacts	
Name:	Name:
Address:	Address:
Contact Number:	Contact Number:
Relationship to child:	Relationship to child:
Doctor's Details	
Name:	Contact Number:
Address:	
Has your child got any condition/s requiring medical treatment? (If yes, please detail)	Is your child allergic to any medication? (If yes, please detail)

Declaration

- In the event of an emergency, we will always try to contact you or your named contact immediately, but we would also be grateful if you could sign and date the following agreement
- This permission is to cover **any educational visit** during this academic year. If there is an emergency that requires urgent hospital treatment, I expect a member of the school staff to accompany my child to hospital in the ambulance, if I am unable to arrive at the time of the ambulance's departure
- I agree to my son/daughter receiving medication and any emergency dental, medical or surgical treatment, including anaesthetic, as considered necessary by the medical authorities present
- It is strongly recommended that your son/daughter does not bring any expensive items, such as electronic items. If they do so, they are solely responsible for them and the school takes no responsibility for any loss or damage that may occur. Please note, children are not allowed to bring mobile phones

Signed:	Date:
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Appendix 6 – Auto-Injector Advice (To be placed with the child’s Auto-Injector)



Administering the auto-injector (e.g EpiPen):

EpiPen Junior is a 0.3ml intra-muscular injection which contains 0.15mg of Adrenaline (also known as Epinephrine)

- 1. Take the syringe out of the box and plastic tube**
- 2. Pull off grey safety cap**
- 3. Hold the pen around the centre**
- 4. Place black tip against the outer part of the thigh in a right angle**
- 5. You do not need to remove thin clothing**
- 6. Press hard onto the thigh until auto jet mechanism functions (2 ticks)**
- 7. Hold in place for ten seconds (Count one thousand, two thousand up to ten)**
- 8. Remove EpiPen, place back in the plastic tube and put safely out of reach**
- 9. Massage the area of administration to encourage the injection to disperse**
- 10. Note down exact time given**
- 11. If child unconscious put in recovery position**
- 12. Call 999 informing them of the administration of the EpiPen**
- 13. Inform parent**
- 14. The child may feel distressed and unwell after the EpiPen has been administered, therefore may need comforting**
- 15. If no improvement after five minutes you may have to administer a second pen, but seek guidance from 999**
- 16. Pass on the used EpiPen to the ambulance crew**