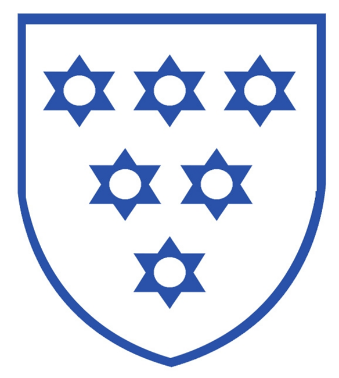
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The Market Weighton School

**Management of Medicines Policy**

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| **Policy Author** | **Richard Harrison** |
| **Date Policy Written** | **June 2016** |
| **Date Policy Adopted by the Governing Body** | **January 2017** |
| **Date of Next Review** | **January 2020** |
| **Updated** |  |

**Aims**

This policy has been produced to confirm the school’s position in relation to the management and administering of medication during the school day or off site during trips and visits.

This policy takes reference from guidance issued by the Department of Health (DH) and clarifies the responsibilities of the school, staff and parents/carers in respect of ensuring a child receives medication as prescribed in order to maintain normal attendance and performance at school.

This policy uses the recommendations of ‘*Managing Medicines in Schools & Early Years Settings’* as the standard procedure for the school and where appropriate cross refers to this document. The numbered paragraphs in the following sections are the paragraph numbers from the DH Guidance amended to suit the particular circumstances at Market Weighton.

Since September 2005 the appropriate provision for the management and administration of medication has been included in the criteria for Ofsted inspections and schools must demonstrate that the administration of medicines ‘*follows clear procedures’*. However it should also be noted that there is no legal duty that requires schools to administer medicines *(Further information please see paragraph 16 of the DH Guidance).*

**Content**

*The wording for each of these statements is taken directly from the DH Guidance and amended to suit the particular circumstances at The Market Weighton School. The paragraph numbers refer to the relevant paragraph from the DH guidance* ‘*Managing Medicines in Schools & Early Years Settings- Chapter 1 Developing Medicines Policies).*

**Prime Responsibility**

Parents/carers hold the prime responsibility for their child’s health; the school is not in a position to take responsibility for any decisions for a child’s health other than those laid out in the first aid and ambulance procedure in terms of determining if a child requires referral to hospital following an accident.

As such, members of staff will only manage and administer medicines in line with the expressed written approval of parents/carers and in accordance with the dosage and frequency instructions from a legitimate prescriber.

All relevant forms as detailed in the procedure must be completed before the school will undertake management of medicines for a child.

The document should be used in conjunction with other policy guidance available from the school and East Riding of Yorkshire Council when planning trips and visits especially where overseas rules regarding prescribed medicine may differ from the UK.

**Prescribed Medicines**

Medicines should only be brought onto the school site when essential; that is where it would be detrimental to a child’s health if the medicine were not administered during the school day’. 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.

**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.**

It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents could be encouraged to ask the prescriber about this. It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime. *(Further information please see paragraph 28 of the DH Guidance)*

**Controlled Drugs**

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children, e.g. methylphenidate.

Any member of staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber’s instructions and appropriate to their level of training and expertise.

A child who has been prescribed a controlled drug may legally have it in their possession. However for reasons of health and safety the school will look after a controlled drug, and agree a process with parents/carers for the medication to be administered to the child for whom it has been prescribed.

The school will keep controlled drugs in a locked non-portable container and only specified staff will have access. A full record of all medications received and the dates and times of administration will be retained for audit and safety purposes.

A controlled drug, as with all medicines, will be returned to the parent/carer when no longer required to arrange for safe disposal (by returning the unwanted supply to the local pharmacy). If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label).

**Non-Prescription Medicines**

Staff should **never** give a non-prescribed medicine to a child unless there is specific prior written permission from the parents and agreement from the Headteacher. If agreed to, under certain circumstances, clear records must be kept indicating when a non-prescribed medicine was taken.

**A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor** *(As directed by Department of Health ‘Managing Medicines in Schools & Early Years Settings’)*

**Administering Medicines**

No child under 16 should be given medicines without their parent’s written consent. Any member of staff giving medicines to a child should first check the following details on SIMS or records in the First Aid Room.

* the child’s name
* prescribed dose
* expiry date
* written instructions provided by the prescriber on the label or container
* parental consent has been received

If in doubt about any procedure staff should not administer the medicines but contact parents/carers regarding decisions before taking further action. If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent.

**Self-Management**

The DH guidance considers it to be good practice where appropriate for children to take responsibility for the management of their own medicines from a relatively early age.

The school will consider self-management on an individual case basis. Recognition must be taken of the potential risk to the child in question but also to other pupils and members of staff if medication of any description is handed into the care of a pupil. Careful consideration must be given to all mitigating circumstances although the general position is that all medication will be controlled by the school.

**Refusing Medicines**

If a child refuses to take medicine, staff should not force them to do so. The refusal should be noted in the child’s student record. Parents/carers should be informed immediately of the refusal. If a refusal to take medicines results in an emergency, the school’s emergency procedures should then be followed.

If the refusal is repeated, at the discretion of the Headteacher and Governors a child could be excluded from school until a satisfactory position is reached that allows them to return under normal circumstances.

**Record Keeping**

Parents must notify the school about the medicines their child needs to take and provide details of any changes to the prescription or the support required. The Medication Notification form must be completed and returned to the school **before** any medication can be managed or administered by the school.

When first receiving/managing a new medication staff must make sure that the information provided by the parent/carer corresponds with that provided by the prescriber before updating pupil records.

Although there is no legal requirement for schools to keep records of medicines given to pupils, and the staff involved, the school will retain a full record to demonstrate that agreed procedures, timings and dosages have been followed and to provide support/justification for staff should this be required in any given circumstance.

**Educational Visits**

The school has established procedures for the operation of trips and visits. When it is necessary to take medicines on trips **all** medicines will be controlled by staff and retained in a locked box with the exception of immediately required treatments such as inhalers which can be retained by children in line with the clause regarding self-management.

Staff supervising excursions must always be aware of any medical needs, and be provided with relevant personal health plans.

**Sporting Activities**

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Members of Staff leading lessons outside of the school premises must carry a portable first aid kit where, if necessary pupil medication can be carried for immediate access. In such circumstances recognition must be taken of clause on self-management, if necessary, and if staff are willing to do so appropriate training must be provided to enable staff to administer medicines.

**Home to School Transport**

Local Authorities arrange home to school transport where legally required to do so. They **must** make sure that pupils are safe during the journey. Most pupils with medical needs do not require supervision on school transport, but Local Authorities should provide appropriate trained escorts if they consider them necessary. Guidance should be sought from the child’s GP or paediatrician

Drivers and escorts should know what to do in the case of a medical emergency. They should not generally administer medicines but where it is agreed that a driver or escort will administer medicines (i.e. in an emergency) they **must** receive training and support and fully understand what procedures and protocols to follow. They should be clear about roles, responsibilities and liabilities.

Where pupils have life threatening conditions, specific health care plans should be carried on vehicles. Within the East Riding Council area, this role is undertaken by the East Riding of Yorkshire Passenger Services section, prior to arranging transport for a pupil with specific needs they collect all the information from the relevant departments/agencies in the council, including the school’s SEN to establish the needs/disability of the pupil following which they arrange the necessary care, for example providing an escort to ensure the pupils safety and wellbeing.

Some pupils are at risk of severe allergic reactions. Risks can be minimised by not allowing anyone to eat on vehicles. As noted above, all escorts should have basic first aid training and should be trained in the use of an adrenaline pen for emergencies where appropriate.

**Procedures**

A designated member of staff in the First Aid Room will be responsible for receipt, recording and administering medicines and control of the necessary documentation that can be found at the end of this section.

Medicines will be retained in a locked cabinet or secure fridge as required within a secure area of the general office.

**Parental Agreement**

Before the school accepts any form of medication or attempts to administer such medicine, the Parental Agreement form must be completed and returned to school. Once satisfied that all necessary information has been provided the School will request that the parent/carer bring to school the prescribed medicine (in the original container it was dispensed in) and in the presence of the parent/carer complete the:

Record of Medicine Administered to an Individual Child (paying particular attention to the quantity and expiry date).

Request for Child to carry his/her own medicine form (if appropriate).

If specific staff training is required to administer a particular medicine, then the approved trainer must complete the Staff Training Record form for all those trained and a copy including retraining dates forwarded to the Training Manager for inclusion onto the school data base.

Once completed, all the forms should be logged alphabetically in a single document folder with a page divider between each student’s collective sheets. Whenever medicine is administered or replaced/disposed of records should be amended. The form Record of Medicines Administered to all Children will be used on a daily basis by the school for logging multiple medicines however; these must be transferred to an individual’s personal record sheet at the end of each day.

All medicines must be checked weekly to ascertain that the quantities are correct and have not reached the expiry dates. When the quantity becomes low or close to expiry a letter will be sent directly to the parents/carers informing them of the fact and requesting that they should bring to school either replacements or in the case of time expired medicine, remove it from school premises. Any documentation regarding the control of medicine should be retained for life in the school achieve once complete or no longer required.

Staff Medicines

**Staff who have prescribed medication on their possession or in school should not carry it around with them, it should be kept in a place that is not accessible to students.**

**School Contact**

Iain Robinson

Business Manager

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Appendices

|  |  |
| --- | --- |
|  | Parental Agreement for School/Setting to Administer Medicine |

The Market Weighton School will not administer medicines to your child unless you complete and sign this form and return it to the school on or before the first day the medication must be administered at school.

Note: Medicines must be in the original container dispensed by the pharmacy.

It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents could be encouraged to ask the prescriber about this. It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Child |  | | | | |
| Date of Birth |  |  |  |  | |
| Form |  | | | | |
| Medical Condition or Illness |  | | | | |
| **Medicine** |  | | | |
| Name/type of medicine  *(as described on the container)* |  | | | | |
| Date dispensed |  |  |  |  | |
| Expiry date |  |  |  |  | |
| Agreed review date to be initiated by  (Member of Staff) |  | | | | |
| Dosage and method |  | | | | |
| Timing |  | | | | |
| Special precautions |  | | | | |
| Are there any side effects that the school/setting needs to know about? |  | | | | |
| Self administration Yes/No |  | | | | |
| Procedures to take in an emergency |  | | | | |
| **Contact Details** |  | | | |
| Name |  | | | | |
| Daytime telephone no. |  | | | | |
| Relationship to child |  | | | | |
| Address |  | | | | |

I accept that this is a service that the school/setting is not obliged to undertake. I understand that I must notify the school/setting of any changes in writing.

Date

Signature(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
|  | Record of Medicine Administered to an Individual Child |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of child |  | | | |
| Date medicine provided by parent |  |  |  |  |
| Form |  | | | |
| Quantity received |  | | | |
| Name and strength of medicine |  | | | |
| Expiry date |  |  |  |  |
| Quantity returned |  | | | |
| Dose and frequency of medicine |  | | | |

Staff Signature

Signature of Parent

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  |  |  |  |  |  |  |  |  |
| Time given |  | | |  | | |  | | |
| Dose given |  | | |  | | |  | | |
| Name of member of staff |  | | |  | | |  | | |
| Staff initials |  | | |  | | |  | | |

|  |  |
| --- | --- |
|  | Record of Medicines Administered to all Children |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Child’s name** | **Time** | **Name of medicine** | **Dose given** | **Any reactions** | **Signature** | **Print name of staff** |
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| --- | --- |
|  | Request for Child to carry his/her own Medicine |

This form must be completed by parents/guardian

|  |  |  |
| --- | --- | --- |
| Child’s name |  | |
| Form |  | |
| Address |  | |
| Name of medicine |  | |
| Procedures to be taken in an  emergency |  | |
| **Contact Information** |  |
| Name |  | |
| Daytime phone no. |  | |
| Relationship to child |  | |

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed

Date

If more than one medicine is to be given a separate form should be completed for each one.

|  |  |
| --- | --- |
|  | Staff Training Record – Administration of Medicines |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  | | | |
| Type of training received |  | | | |
| Date of training completed |  |  |  |  |
| Training provided by |  | | | |
| Profession and title |  | | | |

I confirm that has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated every

Trainer’s signature

Date

**I confirm that I have received the training detailed above.**

Staff signature

Date

Suggested review date