



# Medicines in School Procedure

Date of ratification: **March 2022**

Date of review: **March 2025**

Signed Headteacher: \_\_\_\_\_ Date: \_\_\_\_\_

Signed CoG: \_\_\_\_\_ Date: \_\_\_\_\_

## Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. The governing body of Kobi Nazrul Primary School will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting pupils at school with medical conditions' (April 2014).

Establishment staff do not have a statutory duty to give medicines or medical treatment. However medicines will be administered to enable the inclusion of pupils with medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

## Organisation

The governing body will develop policies and procedures to ensure the medical needs of pupils at Kobi Nazrul Primary School are managed appropriately. They will be supported with the implementation of these arrangements by Head teacher and school staff.

The Lead for the Managing Medicines at Kobi Nazrul Primary School is **Rumina Bibi (Inclusion and Well-being Leader)**. In their duties, staff will be guided by their training, this policy and related procedures.

## Implementation monitoring and review

All staff, governors, parents/carers and members of the Kobi Nazrul Primary School community will be made aware of and have access to this policy through the school website. This policy will be reviewed bi-annually.

## Unacceptable practice

School staff are guided by the following principles in their management of children with medical needs, that it is not acceptable practice to:

- Assume that pupils with the same condition require the same treatment.
- Ignore the views of the child or their parent/carer; or ignore medical evidence or opinion (although this may be challenged).
- Send pupils home frequently or preventing them from taking part in activities at school.
- Send the pupil to the school office alone if they become ill.
- Penalise pupils with medical conditions for their attendance record where the absences relate to their condition.
- Make parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- Create barriers to pupils participating in school life, including school trips.
- Refuse to allow pupil to eat, drink or use the toilet when they need to in order to manage their condition.

## Prescription Medicines, Allergies and Long Term or Complex Medical Needs

An 'Individual Care Plan' is needed for a child if the school are required to administer medicine or where a child has long term or complex medical need.

### *Prescription medicines*

Medicine should only be brought to school when it is **essential** to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics, for example, are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime.

Occasionally a GP may prescribe that a medicine has to be taken during the school day. Parents may call into the school and administer medicine to their child, or they may request that a member of school staff administers the medicine.

When school staff administer medicines, the parent or carer must supply the medicine in the original pharmacist's container, clearly labelled including details of possible side effects to the school office and must complete an electronic form which gives parental agreement for any first aider in the setting to administer medicine. The Senior Leadership Team, the class teacher and the Admin Team are then informed by email of this information and a reminder is set to ensure medication is given promptly. Each time a child receives medication, the first aider records this electronically. On no account should a child come to school with medicine in their possession if he/she is unwell.

### *Allergies*

All children with an allergy should have an Individual Care Plan prepared by the School Nurse which outlines the allergen, symptoms of a reaction and appropriate treatment (if any). School staff should take precaution to ensure that children avoid the allergen within school or on visits outside of school.

The school will clearly display information around the building about children who may require emergency medication such as an auto-injector. There should be two auto-injectors in school for each relevant child. Emergency medication should be stored safely out of the reach of children in a labelled container in the classroom for ease of access.

### *Long term or complex medical needs*

Parents or carers should provide the head teacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents, head teacher, school nurse and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. An Individual Care Plan should be prepared (outlined below).

Some children with complex needs may have an Educational, Health and Care Plan (EHC) issued by the Local Authority which will record the medical condition and treatment or special care needed at school. These are for those children with a significant special educational need or disability. EHC Plans are kept in the class Inclusion folders and a second copy in the school SEND records.

### Preparing an Individual Care Plan

Arrangements for administering medication or meeting the needs of children with long term or complex needs are documented in an Individual Care Plan.

The school will have an initial meeting to gather information to make a referral to the School Nurse using the appropriate template. The School Nurse will meet with parents to finalise the Individual Care Plan. Parents or carers need to sign the final Individual Care Plan.

Individual Care Plans will be reviewed by the school annually or following a significant change in a pupil's medical condition. They are kept in the medical folder in the main office and a second copy in the class Inclusion Folder.

## Non-prescription Medicines

Non-prescription medicines are not administered at school and pupils should not bring them to school for self-administration. Only non-prescription travel sickness medication will be administered by staff providing they are supplied in the original packaging and parents have completed the relevant electronic form. Medication must be suitable for the pupil's age, supplied by the parent (not the school) and in its original packaging, with manufacturer's instructions. Staff will check that the medicine has been administered without adverse effect to the child in the past and parents must certify this is the case – a note to this effect should be recorded on the electronic consent form. The medication will be stored and administration recorded as for prescription medicines.

## Controlled Drugs

The school does not deem that pupils who are prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves. Controlled drugs will be stored securely in the medicine cupboards located behind the reception desk and only named staff will have access. The administration of a controlled drug will be witnessed by a second member of staff and records kept. An electronic record will be kept of any doses used and the amount of controlled drug held in school.

## Admissions

When the school is notified of the admission of a pupil with medical needs the Lead for Managing Medicines will complete an assessment of the support required. This might include the development of an Individual Care Plan and additional staff training. The school will endeavour to put arrangements in place to support that pupil as quickly as possible. However the school may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place.

## Encouraging pupils to take responsibility their own medication

For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the pupil's Individual Care Plan and parents should complete the relevant section of the electronic form.

## Staff Training

The school will ensure that the staff who administer medicine to control specific chronic conditions are trained to administer those specific medicines, for example, Anaphylaxis (auto-injectors), Diabetes (insulin), Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse or annual whole school training. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required. The record is kept within the school office.

The school will ensure that every dose of medicine administered in school is electronically recorded. This record is completed by the person that administers the medicine.

## Storage and Access to Medicines

All medicines are stored securely in the medicine cupboards located behind the reception desk (a second auto-injector can also be found in the first aid cupboard in the classroom for relevant children). Medicines are always stored in the original pharmacist's container. Pupils are informed that their medication is stored at the reception desk.

Staff must ensure that emergency medication is readily available at all times i.e. during outside PE lessons, after school clubs, educational visits and in the event of an unforeseen emergency like a fire.

## Record Keeping

For legal reasons, records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. A parent or carer will be informed if their child has been unwell during the school day.

## Emergency Procedures

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a pupil who has an Individual Care Plan, the emergency procedures detailed on the plan are followed, and a copy of the Individual Care Plan is given to the ambulance crew along with evidence of any medication that has been administered and notes taken. Individual Care Plans will also be given to those companies and staff providing transportation of pupils to and from school, in order that the Individual Care Plans can be passed to the ambulance crew in the event of an emergency. Instructions for calling an ambulance are displayed prominently by the telephone in the school office (Contacting the Emergency Services).

## Medicines on Educational Visits

Staff will administer prescription medicines to pupils when required during educational visits. Medicine will be administered by a first aider as agreed. Non-prescription medicines (apart from travel sickness medication) cannot be administered by staff and pupils must not carry them for self-administration. Hay fever remedies etc. should therefore be provided, if necessary, on prescription.

Pupils with medical needs shall be included in educational visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals in suitable time so that extra measures (if appropriate) can be put in place for the visit.



All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person. Where appropriate, the lead person will carry individual risk assessments.

### Medicines on Residential Visits

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the Individual Care Plan. The School Nurse should be consulted in advance of the visit.

Occasionally it may be necessary to administer non-prescription medicines i.e. paracetamol, to pupils suffering acute pain from things like migraine, period pain, toothache. Parents must give written consent prior to the residential visit before non-prescription medication can be given. Staff will check that the medicine has been administered without adverse effect to the child in the past and parents must certify this is the case – a note to this effect should be recorded on the consent form.

The school will keep its own supply of standard paracetamol tablets for administration to pupils during a residential visit. The medication will be stored and administration recorded as for prescription medicines. Pupils should not bring paracetamol (or other types of painkillers) on the residential visit for self-administration. Lead person will phone parent if two doses of painkiller have been given to keep them informed. Where appropriate, the lead person will carry individual risk assessments.

### Travelling Abroad

Children with medical needs will be encouraged to take part in visits. The responsible member of staff will carry out a specific and additional risk assessment and an Individual Care Plan will be drawn up considering parental and medical advice. Best practice would be to translate these documents to the language of the country being visited. The international emergency number should be on the Individual Care Plan (112 is the EU number).

## Work Experience

Lead person for work experience students will liaise with school/EBP to ensure clarity around any medical need. If needed, an additional pre-visit and a risk assessment will be organised and circulated to all relevant staff.

## Complaints

Issues arising from the medical treatment of a pupil whilst in school should in the first instance be directed to the Head teacher. If the issue cannot easily be resolved, the head teacher will inform the governing body who will seek resolution.