

# Medicines Policy Thakeham Primary School

Date approved by Full Governing Body: 01.09.17

**Review Date: April 2019** 

**Signed** 

Headteacher: 8. Norton

Chair of Governors:

# **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 Thakeham Primary School will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting pupils at school with medical conditions' December 2015'.

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 Thakeham Primary School are managed appropriately. They will be supported with the implementation of these arrangements by the Head teacher and school staff.

The lead for the management of medicines at Thakeham Primary School is Jaime Younger or in her absence Jodi Bowbrick. 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 Thakeham Primary School community will be made aware of and have access to this policy. This policy will be reviewed bi-annually and its implementation reviewed as part of the Headteacher's annual report to Governors.

#### Insurance

Staff who follow the procedures outlined in this policy and who undertake tasks detailed in the WSCC medical audit are covered under WSCC insurance. The medical audit is available to view on WSSfS under 'guide to insurance for schools'.

Claims received in respect of medical procedures not covered by the insurers will be considered under the Council's insurance fund.

#### **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.

Our policy is to administer antibiotics only if the prescription requires the medication to be taken **4 times a day.** 

Occasionally a GP may prescribe 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 guardian 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 a 'Parental agreement for setting to administer medicine' form (Appendix 1). On no account should a child come to school with medicine if he/she is unwell.

# **Non-prescription Medicines**

Occasionally paracetamol will be administered to pupils aged 10 and over suffering acute pain from things like migraine and period pain. The school keeps its own supply of standard paracetamol for administration to pupils over the age of 10.

- Parents must give written consent for the school staff to administer medication at the start of the school year or when their child joins the school (Appendix 1 & 2)
- At the time of gaining consent the school will be specific about what brand of paracetamol we will be providing as some children are allergic to some brands
- 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
- Only 1 standard dose (appropriate to age and weight of the pupil) can be administered in school per day.
- Only those who have received WSCC Managing Medicines Training to administer paracetamol. Currently that is Jaime Younger and Jodi Bowbrick. Two first aiders to decide if paracetamol is necessary
- Verbal parental consent must be gained during the day to administer paracetamol between the start of school day and 12pm and again from 2pm and until the end of school day. If parents cannot be contacted then paracetamol cannot be administered.
- The school can administer paracetamol without parental consent on the day between 12pm and 2pm <u>but it is school policy to gain verbal consent even during these</u> <u>times</u>
- If paracetamol is administered at any time during the school day parents will be informed of the time of administration and dosage via a call and text message.
- The school will keep records of the administration of paracetamol as for prescribed medication.
- Pupils must not bring paracetamol (or other types of painkillers) to school for selfadministration.

Paracetamol may be used as pain relief for children under the age of 10, if a GP/Consultant/Dentist/Nurse Practitioner/School Nurse has recommended its use and parental consent is gained (Appendix 1 & 2). Circumstances that might warrant the use of pain relief in the under 10's include fracture, pre/post-operative toothache and post-operatively general surgery (this is not an exhaustive list). Details of the pupil's condition and the requirement for on demand pain relief must be documented on the pupil's IHC. In addition to the protocol for the administration of paracetamol detailed above the school will:

- Only administer paracetamol for a maximum of 1 week.
- The parent or guardian will supply daily a single dose of paracetamol for administration. This can be in the form of a tablet or liquid sachet.
- The requirement for pain relief will be regularly reviewed during the week; pain relief should not be given routinely each day. The review will be detailed on the pupils IHC.

Paracetamol may not be administered to the under 10's for ad-hoc unknown pain/fever etc. If the school is in any doubt if symptoms warrant pain relief the school nurse will be contacted for further advice.

Thakeham Primary School will also administer non-prescription travel sickness medication with appropriate parent consent (see appendix 1). All other non-prescription medication will not be administered at school and pupils should not bring them to school for self-administration. The majority of medication lasts 4-6 hours, therefore non-prescription medication can be administered at home prior to the start of the school day and it will last the duration of the school day. A parent or guardian may attend school to administer additional doses if necessary.

Thakeham Primary School will administer antihistamine only where a GP/Consultant has recommended or prescribed this for the treatment of a mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes) and with parent permission (see appendix 3). The school can administer 1 standard dose of antihistamine (appropriate to age and weight of the pupil) and it is very important that symptoms are monitored for signs of further allergic reaction. During this time pupils must never be left alone and should be observed at all times. If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms then an adrenaline auto injector should be administered without delay and an ambulance called. Piriton can cause drowsiness and therefore the school will consider if it is necessary for pupils to avoid any contact with equipment that might cause harm i.e. P.E. Science, Design and Technology.

## Mild Allergic Reaction

Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the school population. Antihistamine will be administered for mild reactions as detailed above.

#### **Severe Allergic Reaction**

An adrenaline auto injector should be used immediately in a severe reaction (see Pupils Individual Health Care Plan for details). If in doubt about the severity of an allergy reaction, administer the adrenaline auto injector and call an ambulance immediately

**Hay fever** - Piriton for the treatment of hay fever, parents should administer antihistamine before the pupil starts school, it is not necessary for schools to administer antihistamine for the treatment of hay fever.

These non-prescription medications will be administered by staff providing they are supplied in the original packaging and accompanied by a 'Parental agreement for setting to administer medicine' form (Appendix 1). 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 consent form. The use of antihistamine will be detailed on the pupils Individual Health Care Plan. The medication will be stored and administration recorded as for prescription medicines. The school will inform the parent / guardian the time and dose of the non-prescription medication that has been administered, at the end of each day (Appendix 5).

#### **Controlled Drugs**

The school does not deem a pupil 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 a non-portable container and only named staff will have access. Controlled drugs for emergency use must also be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug held in school (Appendix 4 & 5)

# Pupils with 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. For pupils with significant needs, arrangements will be documented in an Individual Healthcare Plan (IHP) or Educational Health and Care plan (EHCP Appendix 6). These plans will be reviewed by the school annually or following a significant change in a pupil's medical condition.

#### 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 IHP 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.

# Pupils taking 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 health care plan and parents should complete the relevant section of 'Parental agreement for setting to administer medicine' form (Appendix 1).

# 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 (adrenaline auto injector), Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse. 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. (Appendix 7)

The school will also ensure that other staff who may occasionally need to administer a prescribed medicine supplied by the parent with a valid consent form and, or an IHP, are trained in the procedure adopted by the school by the person who has completed the Managing Medicines course. 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. (Appendix 7)

The school will ensure that a record is made of every dose of medicine administered in school. This record is completed by the person that administers the medicine. (See Appendix 4 & 5)

#### **Storage and Access to Medicines**

All medicines apart from emergency medicines (inhalers, adrenaline auto injector, etc.) are kept in a locked store cupboard in the Medical Room. Medicines are always stored in the original pharmacist's container. Pupils are told where their medication is stored and who holds the key and staff will be fully briefed on the procedures for obtaining the medication in an emergency.

Emergency medicines such as inhalers and adrenaline auto injector are either held by the pupil or kept in a clearly identified container in his/her classroom. The school will make an assessment as to the competency of each individual pupil to carry their own medication. Parents will be asked to supply a second adrenaline auto injector for each child and they will be kept in the school office. Staff must ensure that emergency medication is readily available at all times i.e. during outside PE lessons, educational visits and in the event of an unforeseen emergency like a fire. In accordance with the Human Medicines (Amendment No 2) Regulations 2014 the school will keep a small supply of salbutamol inhalers for emergency use. Parental consent will be gained to administer the emergency school inhaler (see Asthma Policy).

Medicines that require refrigeration are kept in the Medical Room fridge, clearly labelled in an airtight container.

#### **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 guardian will be informed if their child has been unwell during the school day. For record sheets see (Appendix 4 & 5).

# **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 IHP, the emergency procedures detailed on the plan are followed, and a copy of the IHP is given to the ambulance crew. IHP's will also be given to those companies and staff providing transportation of pupils to and from school, in order that the IHP 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 (Appendix 8).

# **Medicines on Educational Visits**

Staff will administer prescription medicines to pupils when required during educational visits. Parents should ensure they complete a consent form (Appendix 1) and to supply a sufficient

supply of medication in its pharmacist's container. Non-prescription medicines (apart from travel sickness medication and antihistamine for mild allergic reaction) cannot be administered by staff and pupils must not carry them for self-administration.

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.

#### **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 care plan.

Occasionally it may be necessary to administer non-prescription medicines i.e. paracetamol, anti-histamine etc. to pupils suffering acute pain from things like migraine, period pain, toothache. Parents must give written consent prior to the residential visit using a, 'Parental agreement for setting to administer medicine' form (Appendix 1) 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 and liquid suspension for administration to pupils during a residential visit and parental consent will be required in order for the school to administer the supply. 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.

#### **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 a 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 care plan (112 is the EU number). European Health Insurance Cards (EHIC) should be applied for by parents and supplied to the school prior to travel for all pupils that travel abroad.

# **Complaints**

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



# THAKEHAM PRIMARY SCHOOL Rock Road, Thakeham, West Sussex, RH20 3AA

# PARENT/CARER AGREEMENT FOR ADMINISTRATION OF MEDICATION

The school will not give your child medicine unless you fully complete and sign this form and return it to the school office.

Details of Pupil	
Surname	Forename
Address	
Date of Birth	Male/Female
Class	Teacher
Condition or illness	
Medication	
MEDICINES MUST BE IN THE ORIGINA PHARMACY	AL CONTAINER AS DISPENSED BY THE
Parents must ensure that in date prope	erly labelled medication is supplied
Name/Type of medication (as described of	on the container)
Date dispensed	
Expiry date	
Full directions for use: Dosage and me	ethod

NB Dosage can only be changed on Doctor's instructions

Timing of dosage to be given at school	_
Special precautions/side effects	
Procedure to take in an emergency	
Contact details	
Name	
Phone number to be contacted	
Relationship to pupil	
Address if different to pupil	
I understand that I must deliver the medication accept that this is a service, which the school is understand that I must notify the school of any	s not obliged to undertake. I
Signature	Date
GP Name	Phone
The above information is, to the best of my known and I give consent to school staff administering school policy. I will inform the school immediate frequency of the medication or if the medicine	g medicine in accordance with the tely if there is any change in dosage or
Parent's signature	
Print name	
Date	

**Reviewed daily** 

<u>Day 1</u>

# Individual Protocol for a pupil under the age of 10 using paracetamol

Day 2

<u>Day 3</u>

Day 4

<u>Day 5</u>

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					-
<u>Date</u>					
Name of pupil:				Please attac	
Date of Birth:				p	
Class:					
School:					
Family Contact 1 Name: Relationship: Tel: Home: Tel: Work: Tel: Mobile:	-	Nam Rela	Family Corne: ationship: Tel: Home: Tel: Work: Tel: Mobile:		
Contact details for recommended on		urse Practitione	r/School Nurse	who has	
Name: Surgery/Hospital/O Phone No: Address:	Clinic:				
Condition requiring relief:					
MEDICATION – S tablet/liquid (delete a					
Name of medication:		 			
Expiry Date:		 			

Dosage & Method: As prescribed on the container appropriate for the age and weight of the pupil. Medication will be administered following the protocol detailed overleaf. Only 1 dose can be administered at school for a maximum of 1 week and this requirement will be reviewed daily by the school in conjunction with the parent/guardian.

NB: It is the parent's responsibility to ensure the Paracetamol has not expired

Emergency procedures – if the pupil develops a rash or swelling this might be a sign of an allergic reaction or if it is suspected that the child has taken too much paracetamol in a 24 hour period call 999 and then contact the parents.

# Protocol for the administration of paracetamol

- Verbal parental consent must be gained during the day to administer paracetamol between the start of school day and 12pm and again from 2pm and until the end of school day. If the parents cannot be contacted paracetamol cannot be administered.
- The school can administer paracetamol without additional parental consent on the day between 12pm and 2pm. <u>but it is school policy to gain</u> verbal consent even during these times
- If paracetamol is administered at any time during the school day parents will be informed of the time of administration and dosage (as per the protocol).
- The school will keep records of the administration of paracetamol as for prescribed medication.
- Pupils must not bring paracetamol (or other types of painkillers) to school for self-administration.

# **Use with caution:**

- Liver problems
- Kidney problems
- Long term malnutrition
- Long term dehydration
- Epilepsy

# Do not administer if the pupil is also taking any of the following drugs:

- Metoclopramide (relieves sickness and indigestion)
- Carbamazepine (treats a number of conditions including epilepsy)
- Phenobarbital or phenytoin (used to control seizures)
- Lixisenatide used to treat type 2 diabetes)
- Imatinib used to treat leukaemia
- Other drugs containing paracetamol

#### Record of administration of paracetamol

Record of administration of paracolamor						
Day	1	2	3	4	5	
Dose						
Time						
Additional parental consent gained(time)						

Agreed by:	School Representative	Date
Aureeu DV.	OCHOOL REDIESELIATIVE	Date.

I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education.

I confirm that I have administered paracetamol in the past to my child without adverse reaction. I am aware that I will be informed by the school in writing when medication has been administered by letter.

I am aware that my child can only have 4 doses of paracetamol in any 24 hour period.

Agreed by:	
Parent	Date

Individual Protocol for	using Antihistamine (e.g. Piriton)
Name:	Please attach a
Date of Birth:	photo here
Class:	
School: Nature of Allergy:	
Contact Information	
<u></u>	
Family Contact 1	Family Contact 2
Name:	Name:
Relationship:	Relationship:
Phone Numbers:	Phone Numbers:
Home:	Home:
Work:	Work:
Mobile:	Mobile:
GP Contact	Clinic/ Hospital
<u>Contact</u> Name:	Name:
Phone No:	Phone No:
Address:	Address:
MEDICATION - Antihistamine	
Name on Antihistamine & Expiry date:	
<ul> <li>It is the parents responsibility to ensuexpired</li> </ul>	re the Antihistamine has not
Dosage & Method:	
<ul> <li>It is the schools responsibility to ens parents inform the school of any cha</li> </ul>	• • • • • • • • • • • • • • • • • • •
Agreed by: School	D 4
Representative	Date
I agree that the medical information contain individuals involved with my chil	

I confirm that I have administered antihistamine in the past to my child without adverse reaction. I am aware that I will be informed by the school in writing when medication has been administered by letter.

Parent	Date
Individual protocol for	using Antihistamine (e.g.
	Piriton)

# Symptoms may include:

- Itchy skin
- Sneezing, itchy eyes, watery eyes, facial swelling (does not include lips/mouth)
- Rash anywhere on body

Inform
parent/guardian to
collect

.....

from school

# **Stay Calm**

Reassure

Give Antihistamine
Delegated person
responsible to administer
antihistamine, as per
instructions on prescribed
bottle

Observe patient and monitor symptoms

If symptoms progress and there is any difficulty in swallowing/speaking /breathing/ cold and clammy
Dial 999

A = Airway

B = Breathing C = Circulation

If child is pres

If child is prescribed an adrenaline auto injector administer it - follow instructions on protocol

# If symptoms progress Dial 999 - Telephone for an ambulance

You need to say: "I have a child in anaphylactic shock".

Give school details:

**Give details:** Childs name has a severe allergy and what has happened.

DO NOT PUT THE PHONE DOWN UNTIL YOU ARE SURE ALL THE NECESSARY

**INFORMATION HAS BEEN GIVEN** 

Someone to wait by the school gate to direct the ambulance staff straight to the child.

# Record of medicine administered to all children

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<b>.</b>	l la companya di managantan	1
Name of school/setting	l la companya di managantan	l
raine or concensuating	l	1

Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

# Appendix 5 Record of medicine administered to an individual child

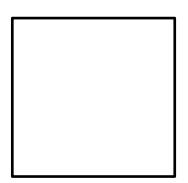
Name of school/setting			
Name of child			
Date medicine provided b	y parent		
Group/class/form			
Quantity received			
Name and strength of me	dicine		
Expiry date			
Quantity returned			
Dose and frequency of me	edicine		
Staff signature			
·			
Signature of parent			
orginature or paronit		<del></del>	
Data			
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			
			•
Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

# Record of medicine administered to an individual child (Continued)

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
		_
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		

# Individual healthcare plan (IHCP)





Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Eamily Contact Information	
Family Contact Information Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
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 administr administered with/without supervision	ration, when to be taken, side effects, contra-indications, administered by/self-
Daily care requirements	
Specific support for the pupil's educational, soci	cial and emotional needs
Arrangements for school visits/trips etc.	
Other information	
Describe what constitutes an emergency, and the	he action to take if this occurs
Who is responsible in an emergency (state if dia	ifferent for off-site activities)
Plan developed with	
Staff training needed/undertaken – who, what, v	when
I the undersigned agree to notify the school imn	mediately of any changes in care / medication.
Signed by parent or guardian	Print name
Date Copies to:	Review date
copies to.	

# Staff training record – administration of medicines

Name of school/setting	g		
Name			
Type of training receive	ved		
Date of training comp	leted		
Training provided by			
Profession and title			
<del>-</del>	out any necessa	-	training detailed above and ommend that the training is
Trainer's signature			_
Date			
I confirm that I have	received the tra	aining detailed ab	ove.
Staff signature			-
Date			
Suggested review dat	ie		

# **Appendix 8: Contacting Emergency Services**

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- 1. your telephone number **(01798 812133)**
- 2. your name
- 3. your location as follows:

Thakeham Primary School,

Rock Road,

Storrington

**RH20 3AA** 

- 4. state what the postcode is please note that postcodes for satellite navigation systems may differ from the postal code **RH20 3AA**
- 5. provide the exact location of the patient within the school setting
- 6. provide the name of the child and a brief description of their symptoms
- 7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
- 8. put a completed copy of this form by the phone