

# Crofton Infants School



## Administration of Medication in Schools and Early Years Settings Policy

## General Guidance:

- The Governors and staff at Crofton Infants' School wish to ensure that pupils with medical needs receive care and support. Pupils should not be denied access to a broad and balanced curriculum simply because they are on medication or need medical support, nor should they be denied access to school trips etc.
- Children with medical needs have the same rights of admission to our school as other children. Most children will at some time have short-term medical needs i.e. finishing a course of medicine. Medicines should only be taken to school or settings when essential.
- With regard to pupils with long term medical needs we ensure that we have sufficient information about the medical condition. A Health Care Plan may clarify for staff, parents and the child the help that can be provided.
- Some children with medical needs are protected from discrimination under the Equality Act 2010. We do not discriminate against disabled pupils in relation to their access to education and associated services.
- The Head Teacher will accept responsibility for members of school staff giving or supervising pupils taking prescribed medication during the school day.
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- Staff Indemnity Policy. Staff Indemnity - Waterton Academy Trust provides a staff indemnity for any school staff who agree to administer medication to a child in school given the full agreement of parents and school as follows:

Waterton Academy Trust fully indemnifies its staff against claims for alleged negligence, providing they are acting within the scope of their employment, have been provided with adequate training/information on administering medicine and have parental consent to do so. Any employee administering medicine to a pupil must follow the written guidelines provided by the school or Trust. In practice, indemnity means that Waterton Academy Trust and not the employee will meet the cost of damages should a claim for alleged negligence be successful. It is very rare for school staff to be sued for negligence and instead the action will usually be between the parent and employer.

- Staff who assist in the administration of medication will receive appropriate training/guidance where necessary identified by the Head Teacher in liaison with Health professionals.
- Unless otherwise indicated, all medication to be administered will be kept in a locked cupboard.

- Information and guidance on health related issues can be obtained from the school nurse. All staff should be aware of the difference between ‘training’ and ‘instruction’.

### **Prescribed Medication:**

- Medicines should only be brought into school when essential; that is where it would be detrimental to a child’s health.
- We do not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions (secondary dispensed). Alteration to the label is not acceptable. Any alteration to dosage must be accompanied by written instructions provided by the prescriber.
- Medicines can only be accepted in school when it has been prescribed by a doctor, dentist, nurse prescriber or pharmacist and include the prescriber’s instructions for administration.
- Where the possible side effects of medicines have been communicated by the prescriber or pharmacist to a member of staff they must ensure that this information is shared with all staff and recorded in the child or young person’s file and individual health care plan. If a member of staff notices side effects they must report this to the headteacher who will notify the prescriber and ask for advice. Information regarding side effects can also be obtained from the Patient Information Leaflet, which must be supplied with every medicine.
- Crushing of tablets (or opening of capsules unless specified) is not advocated, as it is an unlicensed use of the medication. If the patient is unable to take oral medication in the solid dosage form it should be referred back to the prescriber/pharmacist for amendment to a suitable liquid/soluble preparation.
- Medicines must not forcibly be given. This includes the crushing of tablets etc. into food or drinks in order to deceive. Where children and young people refuse to take medication that is essential to their health, a multi-disciplinary meeting must be held which must include the children and young person (where appropriate), the G.P, parents/persons with parental responsibility and representative (if applicable) to decide how to proceed. Any decision must be reached after assessing the care needs of the individual and the decision must be recorded in the individual health care plan. A written procedure must be developed that is specific to the child or young person.

### **Non-Prescribed Medication:**

- Staff should never give a non-prescribed medicine to a child unless there is specific prior written permission from the parents. The Head Teacher must approve the administration of the medicine.
- Criteria in the National Standards for under 8s day care providers, make it clear that non-prescription medicines should not normally be administered. Where a non-prescribed medicine is administered to a child it should be recorded on a form and the parent informed.
- A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

### **Administering Medicines**

Wakefield LA schools and settings should incorporate managing the administration of medicines into their health and safety policy and fully adopt the guidance provided in Chapter 2: Role and Responsibilities provided in Managing Medicines Guidance.

**No child under 16 should be given medicine without their parent's written consent.**

- Any member of staff giving medicines should check:
  - Child's name
  - Prescribed dose
  - Expiry date
  - Written instructions provided by the prescriber on the label or container.
- Early years settings must keep written records each time medicines are given. All schools should also arrange for staff to complete and sign a record each time they give medicine to a child.

### **Staff administering medication**

The administering of medicines is a voluntary role; however, schools should ensure they have sufficient members of support staff who are appropriately trained to manage medicines as part of their duties

### **Educational Visits:**

We have in place procedures for managing prescription medicines on trips and outings.

## **Record Keeping**

Written details from the parent/carer are kept in the office. Parents are asked to complete the appropriate parental Agreement form.

It is recommended that schools/settings use the record keeping forms provided in the appendix. Such records can offer protection to staff and provide proof that agreed procedures have been followed, as well as ensuring that a child is not given extra doses of medicine by mistake. The following details should be checked:

- Child's name
- Name of medication
- Dose
- Method of administration
- Time/frequency of administration
- Any side effects
- Expiry date

It is the parent/carer's responsibility to monitor when further supplies of medication are needed in the school/setting.

## **Safe Storage and disposal of medicines**

Where a school agrees to administer any medicines the employer must ensure that the risks to the health of others are properly controlled.

## **Emergency Procedures**

As part of the general risk management processes all schools and settings should have arrangements in place for dealing with emergency situations. This could be part of the school's first aid policy and provision. (paras 115-116 MMSEYS).

## **Risk Assessment and management procedures**

Schools and settings should ensure that risks to the health of others are properly controlled. This may involve undertaking individual risk assessments for pupils with long term medical needs. Schools and settings should be aware of the health and safety issues of dangerous substances and infection.

## **Parental Responsibilities**

Parents have a prime responsibility for their child's health and should provide schools and settings with information about their child's medical condition. Parents are responsible for making sure their child is well enough to attend school. Where a child is acutely unwell it is advised that the child be kept at home by the parent/carer.

The school/setting will not give medicine unless a parent completes and signs the written agreement form.

## Self Administration of Medication

Whilst DfE guidelines state that it is good practice to encourage children and young people to take responsibility for the self administration of medication, the LA view is that schools should give serious consideration to whether this is appropriate in all cases. Each case should be considered individually taking into account the age and needs of the child or young person. Schools should act as a “prudent parent” (Point D3 of LA Guidance, p35 DfE Guidelines) and should seek medical advice, written parental consent and undertake risk assessments to ensure the safety of children and young people in their care. The individual health care plan should detail arrangements for self administration of medication and the supervision for this.

All individual health care plans will identify whether and at what level child or young person requires help to take medicines as follows [the 3 A's]: -

- **Advise** – *to ask the service user if they have taken their medication, and if not to advise them that this is what they need to do. Staff will not be responsible for ensuring service users take their medication, this remains with the service user.*
- **Assist** - *to help service users who are cognitively able to retain responsibility for management of their medicines but are not able to physically administer their medication. In these circumstances staff will physically assist the service user to take their medication **from the original container as instructed on the label.** Staff will not be responsible for ensuring that service users take or have taken their medication; this remains with the service user.*
- **Administer** – *where a service user is not able to maintain responsibility for managing their own medicines, staff will be responsible for ensuring that the service user receives the correct medication at the right time.*

## Staff Training

- The Head Teacher or his/her representative will seek the advice of health care professionals on the type of training required for each authorised member of staff and what types of medication that training covers.
- Training for members of staff undertaking the administration of medicine is essential and advice and information from health colleagues should be sought.
- Training: can only be given by the Health Care professional authorised to assess the competence of the person being trained. This should be documented on the appropriate form (see example form for recording medical for staff). Examples of such procedures would include catheterisation, tube feeding, suction, rescue medication.

- Information/Instruction is the exchange of information needed to carry out basic personal care and hygiene procedures.

## **Health Care Plans**

- In order to ensure that all relevant information about the child's condition is available it is recommended that schools should complete an individual Health Care Plan as and whenever necessary. This should be in consultation with the school nursing service, parents and school staff.

## **Key Issues**

1. The Head Teacher has a duty to arrange for all appropriate staff in the school to be briefed about medical conditions and about the contents of this document.
2. The school will safely store any necessary medication prescribed by a medical practitioner and to which the attached appropriate instructions for use are provided
3. The school will store any necessary equipment required to carry out procedures.
4. The school will keep written records of medicines given to pupils.

Signed C Holloway  
Head teacher

Date: September 2021

FORM 10

**Authorisation for the administration of buccal midazolam**

Name of school/setting

Child's name

Date of birth

Home address

G.P.

Hospital consultant

/ /

should be given buccal midazolam          mg.

If he has a \*prolonged epileptic seizure lasting over          minutes

**OR**

\*serial seizures lasting over          minutes.

An Ambulance should be called for \*

**OR**

If the seizure has not resolved \*after          minutes.

**(\*please enter as appropriate)**

Doctor's signature \_\_\_\_\_

Parent/carer's signature \_\_\_\_\_

Date \_\_\_\_\_

The following staff have been trained:

Trainers name and post

### **NB: Authorisation for the administration of buccal midazolam**

As the indications of when to administer the midazolam vary, an individual authorisation is required for each child. This should be completed by the child's GP, Consultant and/or Epilepsy Specialist Nurse and reviewed regularly. This ensures the medicine is administered appropriately.

The Authorisation should clearly state:

- when the midazolam is to be given e.g. after 5 minutes; and
- how much medicine should be given.

Included on the Authorisation Form should be an indication of when an ambulance is to be summoned.

**Records of administration should be maintained**

# ADMINISTRATION OF MEDICINES REQUIRED BY PUPILS ATTENDING DAY SCHOOL PROCESS FLOW CHART

## COLUMN 1 – STAGE 1

REFER TO INSURANCE POLICY DOCUMENT IS THE ACTIVITY INCLUDED

YES



HAVE STAFF RECEIVED APPROPRIATE TRAINING

YES



IS THE ACTIVITY APPROPRIATE FOR A NON-HEALTH CARE PROFESSIONAL TO UNDERTAKE OR CHILD TO SELF MEDICATE

YES



GO TO COLUMN 2

NO



## COLUMN 2 – STAGE 2

IS THE MEDICATION PRESCRIBED, ORAL & NOT REQUIRED FOR MORE THAN 7 DAYS



OR

IS THE MEDICATION PRESCRIBED, ORAL AND FOR 8 + DAYS IN LINE WITH A HEALTH CARE PLAN (HCP)



OR

IS IT NON PRESCRIBED IN LINE WITH A HCP AND NOT ASPIRIN OR IBUPROFEN BASED



AND

HAS ANY HCP BEEN DRAWN UP IN CONSULTATION WITH A NURSE OR GP, SPECIFYING LEVEL OF COMPETENCY REQUIRED TO ADMINISTER MEDICATION



AND

IS THERE A PROCESS IN PLACE TO SAFELY STORE MEDICINES & RECORD CONSENT, ADMINISTRATION AND REFUSAL



IF NO TO ANY OF ABOVE

IF YES



## COLUMN 3 – STAGE 3

IS THE MEDICATION IN ONE THAT IS INCLUDED ON THE INSURERS HEALTH CARE LIST

YES



ADMINISTER THE MEDICATION



NO



CONSULT WITH PROFESSIONALS LISTED



CONSULT HEALTH CARE PROFESSIONAL IF IN DOUBT ABOUT THE ADMINISTRATION PROCESS

CONSULT MITIGATION OF RISK OFFICER