

John Hunt Academy



Administration of Medication Policy

John Hunt Academy Rationale:

Although regular school attendance is expected, if a child is ill they should remain at home until well enough to cope with the demands of the learning environment. Some children however who have a short or long term illness/physical condition may require medication to be administered in school.

The Governors and staff of John Hunt Academy wish to ensure that pupils with medical needs receive the care and support in school that they need, subject to the guidelines outlined in this policy.

Aim:

To provide an appropriate, safe policy in relation to the administration of medicine in school following national and local educational guidelines.

In a partnership approach, to identify clearly the responsibilities of the school and parents/carers in respect of a child's medical needs and the roles and responsibilities of staff who volunteer to administer medication in school.

To ensure that members of staff know that there is no legal responsibility for non-medical staff to administer medication or to supervise medical procedures.

To ensure that all staff know they must be adequately trained before undertaking this role.

Responsibility:

It is the decision of the Head teacher as to whether school staff should be asked to administer medication during the child's formal education. Best practice advises that staff have training in administering medicines and that a record of this is recorded. **(Appendix D)**

School staff are not trained or qualified to administer medicines and **the overall management of medical treatment for children is the responsibility of the parent/carer**. It is also their responsibility to provide the school with up to date information regarding their child's medical needs and to keep the school informed of any change.

Where agreement is reached that members of staff should administer medication, an ADMINISTRATION OF MEDICINES form (**see Appendix A**) must be completed and signed by **both** the parent and the Head teacher.

A child will require a Care Plan if they have complex medical needs/more than one prescribed medication/medical procedure. A Care Plan must be formulated in collaboration with parents and any relevant professional body ie hospital and Community School Nurse/Paediatric Teams. An up to date Care Plan should be in place for a child with complex medical needs as outlined above **before** they are admitted to school and school staff are requested to administer medication.

It is the parents/carers responsibility to ensure there is sufficient, in date medication in school. Medication must always be provided in its original container with the pharmacist's original label and clearly stating directions for use (see Appendix A).

Members of staff who administer medication in accordance with the school's policies and procedures are covered for insurance under the school's policy with the Local Authority.

Confidentiality

Information regarding a child's medical needs are kept in their file. While it is essential for staff to be fully acquainted with individual medical needs, this information must only be shared with relevant members of staff and is subject to data protection.

Short term medication

Where possible, GPs will prescribe medication in such a way that it can be given outside school hours. If medication has been prescribed 3/4 times a day, and the child is well enough to benefit from lessons, parent/carers are asked to come into school and complete the ADMINISTRATION OF MEDICINES Form with their child's Year group Teaching Assistant. This will then be stored securely with appropriate documentation in a safe locked place. The parent is responsible to delivering and collecting the medication from the Teaching Assistant at the start and end of each school day. The Teaching Assistant will record the administration of the medication on the MEDICATION RECORD for each child.

Over the counter medication

Over the counter medicines are regarded as non-essential and **will not** be administered in school in line with Local Authority guidelines. This also applies to homeopathic medicines.

Infectious diseases

Children who have an infectious childhood illness may return to school after the period in which they may pass the infection to other children and staff has elapsed. In the case of sickness and diarrhoea, this is 48 hours from the last episode.

Training

To ensure the well-being of the child and to safeguard staff, specific training should be given by a suitably qualified person, to all those who volunteer and before they are required to administer medication or undertake a medical procedure. It is important that lunchtime supervisors are included in any training in order for them to be able to recognise an emergency situation and respond appropriately.

Training should be updated as advised by medical directives in collaboration with School Health.

Storage of medicines

All medication must be stored securely, in a cool place; any requiring refrigeration must be in the locked Medical fridge which is stored centrally in the staff room.

All emergency medication must be easily accessible as identified in the Care Plan and the whereabouts known to the child and all staff.

Disposal and return of medication

Medication is only kept in school whilst the child is in attendance. **It is the parents/carers responsibility to replace medication which has been used or has expired.** Parents/carers are requested to collect all medication at the end of each academic year and to return it as required at the start of the next academic year. Any medication not collected at the end of the academic year will be returned to a pharmacy for disposal.

Where disposal of sharp items i.e. needles is required, the appropriate safety measures must be followed as identified in the child's Care Plan.

School Trips/Off Site Activities

Each member of staff leading a group of children on an off-site activity, will carry a medical first aid kit equipped with basic medical equipment, Accident Slips and a list of any children who have a medical condition and /or Care Plan. A child on an off-site activity who has been prescribed emergency medication **must have a named trained person on the activity who will ensure that such medication**

accompanies the child at all times and is returned to the designated storage on the return to the school. Class teachers/group leaders will each take a mobile phone plus their full class EV4 forms.

Record Keeping

If a medicine is administered by staff, the date and time must be recorded, signed by the administrator. **See Appendix B.**

Any reason why a medication is not given must also be recorded. Staff must not force a child to accept medication but must record any refusal to do so and inform the parents as soon as possible.

When a child requires an individual Health Care Plan this is in collaboration with parents, staff and the relevant health professional i.e. School Nurse, Consultant, GP, and Specialist Nurse.

Emergency Situations

The list of qualified First Aiders is displayed in and around school. Staff must never take any child to hospital in a car, it is safer to call an ambulance. Health professionals are responsible for any decisions on medical treatment in the absence of a parent/carer.

In the absence of a parent/carer and at the discretion of the Head teacher, a member of staff if available, may accompany the child to hospital and stay until the parent/carer arrives.

Any medical information including contact details should be taken with the child or given to emergency staff.

Emergency Medication

Specific guidelines are in place for emergency medication within a child's individual Health Care Plan (**Appendix C**). A copy of this Care Plan plus a photograph is stored electronically; parents also have a copy.

Appendices:

A - PARENTAL AGREEMENT FOR SCHOOL TO ADMINISTER MEDICINE

B - RECORD OF MEDICATION

C - INDIVIDUAL HEALTH CARE PLAN