



Medical Needs & Administration of Prescribed Medicines Policy

The purpose of this policy is to put into place effective management systems and arrangements to support children and young people with medical needs in the school and to provide clear guidance for staff and parents/guardians on the administration of medicines. This document, where appropriate, must be considered in conjunction with all other relevant policies, for example, health and safety.

All staff in schools and early year's settings have a duty to maintain professional standards of care and to ensure that children and young people are safe. It is expected good practice that schools and settings will review cases individually and administer medicines in order to meet the all-round needs of the child. However, there is no legal duty requiring staff to administer medication or to supervise a child when taking medicines. This is a voluntary role.

Roles and Responsibilities

Under the Disability Discrimination Act (DDA) 1995, schools and settings should be making reasonable adjustments for disabled children, including those with medical needs, and are under a duty to plan strategically to increase access over time. Schools and settings should consider what reasonable adjustments they need to make to enable children with medical needs to participate fully in all areas of school life, including educational visits and sporting activities.

The Headteacher/Manager, in consultation with the Governing body, staff, parents/guardians, health professionals and the local authority, is responsible for deciding whether the school or setting can assist a child with medical needs. The Headteacher/Manager is responsible for:

- implementing the policy on a daily basis
- ensuring that the procedures are understood and implemented
- ensuring appropriate training is provided
- making sure there is effective communication with parents/guardians, children and young people, school/settings staff and all relevant health professionals concerning the pupil's health needs

It is good practice that staff, including supply staff should always be informed of a child's medical needs where this is relevant and of any changes to their needs as and when they might arise. All staff will be informed of the designated person with responsibility for medical care. A list of medical needs must be clearly known and accessible in order to support the child's day to day care.

Parents/Guardians

It is the responsibility of parents/guardians to:

- a) inform the school of their child's medical needs
- b) provide any medication to the school office in a container clearly labelled with the following:
 - THE CHILD'S NAME
 - NAME OF MEDICINE
 - DOSE AND FREQUENCY OF MEDICATION
 - SPECIAL STORAGE ARRANGEMENTS
- c) collect and dispose of any medicines held in school at the end of each term
- d) ensure that medicines have not passed the expiry date

Pupil Information

Parents/guardians should be required to give the following information about their child's long term medical needs and to update it at the start of each school year or update school when changes arise:

- Details of pupil's medical needs Medication, including any side effects
- Allergies
- Name of GP/consultants
- Special requirements e.g. dietary needs, pre-activity precautions. Parents/guardians may be required to provide evidence in this case.
- What to do and who to contact in an emergency
- Cultural and religious views regarding medical care

Administering Medication

Staff are not legally required to administer medicines or to supervise a child when taking medicine. Any employee may volunteer to undertake this task but it is not a contractual requirement and appropriate training should be given before an individual takes on a role which may require administering first aid or medication.

All schools should ensure that they have sufficient members of support staff who are appropriately trained to manage medicines as part of their duties. Within their Health & Safety Policy it should incorporate managing the administration of medicines and supporting children with complex health needs. For staff following documented procedures, they should be fully covered by their Employers Public Liability Insurance should a parent/guardian complain. Staff should also be aware when a child may need extra attention due to changes to their medical requirements as agreed with parents/guardians and their care plan altered as necessary. In the likelihood of an emergency arising, all staff should be aware of what action to take and back up cover should be arranged if the staff member normally responsible for the child's care is absent.

It is expected that parents/guardians will normally administer medication to their children at home. No medication will be administered without prior written permission from the parents/guardians. A 'Parental agreement for school to administer prescribed medicine' form must be completed.

Over the counter/un-prescribed medication will not be administered by school staff. However, in exceptional circumstances this may be discussed with a senior member of staff who may need clarification from your family G.P. If Calpol/Piriton needs to be administered on a regular basis then it must have a pharmacy label on the bottle or be prescribed by a G.P.

The Headteacher will decide whether any medication will be administered in school/early years setting and following consultation with staff, who will be responsible. Most medicines will normally be administered during lunchtime. If, for medical reasons, medicine has to be taken at other times during the day, arrangements will be made for the medicine to be administered at other prescribed times (i.e. Insulin). Where appropriate, pupils will be told where their medication is kept.

Any member of staff, on each occasion, giving medicine to a pupil should check:

- a) Name of pupil
- b) Written instructions provided by the parents/guardians or doctor
- c) Prescribed dose
- d) Expiry date
- e) Parent Information leaflet

Storage

Where appropriate all medicines will be safely stored in a medicine cabinet in each classroom. If they need to be kept below a certain temperature they will be kept in the fridge in the staffroom. All medicines will be logged in the school's medical folder. Class teachers will store children's' inhalers, which must be labelled with the pupil's name.

Records

Staff will complete and sign a Record of medicine administered to an individual child each time medication is given to a child and these will be kept in the office. The sheets will record the following:

- a) Name of pupil
- b) Date and time of administration
- c) Who supervised the administration
- d) Name of medication
- e) Dosage
- f) A note of any side effects

Refusing Medication

If a child refuses to take their medication, staff will not force them to do so.

Parents/guardians will be informed as soon as possible. Refusal to take medication will be recorded and dated on the child's record sheet. Reasons for refusal to take medications must also be recorded as well as the action then taken by the teacher.

Training

Training may be required as part of a pupils individual care plan specific to the pupils requirements. This will be provided on a range of medical needs, including any resultant learning needs, as and when appropriate. The Headteacher/Manager will ensure there are trained and named individuals to undertake first aid responsibilities, ensuring training is regularly monitored* and updated. Advice on the treatment of Asthma will be available from either the school nurse or the school first aiders who will also brief all staff with any updates/changes on a yearly basis.

Health Care Plan

Where appropriate, a personal Health Care Plan will be drawn up in consultation with the school/setting, parents/guardians/carers and health professionals. The Health Care Plan will outline the child's needs and the level of support required in school. Health Care Plans will be reviewed annually. The Headteacher/Manager will ensure that all staff are aware of the school's planned emergency procedures in the event of medical needs.

Intimate or Invasive Treatment

This will only take place at the discretion of the Headteacher/Manager and Governors, with written permission from the parents/guardians and only under exceptional circumstances. Two adults, where possible, one of the same gender as the child, must be present for the administration of such treatment. Cases will be agreed and reviewed on an individual basis. Training will be given to members of staff involved where necessary and all such treatment will be recorded.

School Trips

To ensure that as far as possible, all children have access to all activities and areas of school life, a thorough risk assessment will be undertaken to ensure the safety of all children and staff. No decision about a child with medical needs attending/not attending a school trip will be taken without prior consultation with the parents/guardians.

Residential trips and visits off site:

- a) Sufficient essential medicines and appropriate Health Care Plans will be taken and controlled by the member of staff supervising the trip;
- b) If it is felt that additional supervision is required during activities e.g. swimming, school/setting may request the assistance of the parent/guardian.

Date: April 2022

To be reviewed 2025