

GREYSBROOKE PRIMARY SCHOOL



ADMINISTRATION OF MEDICINES POLICY

INTRODUCTION

This policy has been ratified by Greysbrooke's governing body and is identified in our school prospectus. All members of teaching and non-teaching staff are made aware of the policy and procedures regarding the administration of medicines.

Employees working under the School Teachers' Terms and Conditions of Employment have no contractual obligation to administer medicines. Any agreement to do so would, therefore, be a voluntary act.

However, at Greysbrooke (with the exception of extreme cases eg the use of an Epi-pen to counteract severe allergic reaction), staff will not be expected to administer medicines. This is due to specific problems and legal concerns which arise when staff volunteer to administer medicines, namely:

- All teachers volunteering their services are advised to talk with their professional association or unions regarding such matters.
- The needs of chronically sick children cannot be met through unqualified support.
- Most medical conditions can only be managed with qualified support.
- A medical statement from a general practitioner must be supplied to the school in order to establish clear evidence of need.
- Staff who administer medicine voluntarily may be placing themselves in a legally vulnerable position. If staff volunteer to administer medication a written parental consent form must be completed and a record of the dosage/time given is kept in a file in the medical room; this is signed and witnessed by a second member of staff.
- It is also difficult to meet the terms of any agreement between home and school at all times eg school journeys, absence of staff.
- An individual undertaking voluntary administration extends his or her duty of care.
- Appropriate insurance cover would need to be provided by the responsible body in order to indemnify any successful claim brought against a member of staff.
- A thorough risk assessment would need to be undertaken in every case where parents requested the administration of medicines for their children.

SCHOOL PROCEDURES

Parents are responsible for the administration of medicines to their children. If a child requires medicine in the middle of the day, parents are expected to come to the school to administer the medicine. We advise parents that pupils who are unwell should not be sent to school. Pupils with diarrhoea and/ or vomiting should remain off school until they have been symptom free for 48 hours

ILLNESS DURING THE SCHOOL DAY

a) Parental Responsibility

Staff will not administer medicines to children who fall ill during the school day. Parents will be informed of their child's condition and expected to collect them as soon as possible. We have quick access to pupils' home/work and emergency telephone numbers which we request parents to regularly update. Parents who continually fail to provide emergency contact numbers are informed that the school will act in 'loco parentis' should an incident occur. This may result in a referral to Social Services. Pupils developing symptoms whilst at school should go home as soon as possible and remain away until they have been symptom free for 48 hours.

b) School Responsibility

When a pupil becomes seriously unwell or is injured, an ambulance will be called immediately and parents or relatives informed.

SELF-ADMINISTRATION OF MEDICINES

Pupils with specific medical needs such as asthma, nut allergies, diabetes or ADHD will have an 'individual care plan' put in place. The photographs of pupils who have 'high risk' medical conditions are displayed in the staff room for quick reference and to ensure that all members of staff are aware of these pupils' needs.

Some conditions eg asthma require the child to have immediate access to preventative and reliever inhalers. Whilst welcoming all pupils with such conditions, the following clarification will be sought:

- Written details will be provided by the parents giving the name of the child, dose, timing of medication and, in case of any difficulties, where and when the parent can be contacted.
- Written advice on the storage of medication will be provided.
- Ways of ensuring pupil access to the medication is decided by the school and notified to parents.
- The smallest practical dose should be brought to the school.
- There is an asthma register which is completed when pupils administer asthma medication in the form of an inhaler. Each class has an individual folder which evidences dosage administered.

SPECIFIC MEDICAL PROBLEMS

1) Asthma

- We encourage and help children with asthma to participate fully in all aspects of school life.
- We recognise that immediate access to inhalers is vital.

- Several staff members are trained and/or have a clear understanding of what to do in the event of a child having an asthma attack.
- We work in partnership with parents, school governors and health professionals to ensure the successful implementation of school policy.

2) Anaphylaxis or Anaphylactoid Reactions

Anaphylaxis is a severe allergic reaction of rapid onset with circulatory collapse and hypotension (low blood pressure) and is life threatening. Almost any food can cause anaphylaxis but the foods most commonly responsible are nuts, fish, cow's milk and eggs.

If a pupil appears to demonstrate symptoms, we will call the emergency services immediately requesting a paramedic and stating that the patient has had 'apparent anaphylactic reaction'. Staff are made familiar with emergency procedures (see Appendix 1).

We have agreed to administer appropriate medicines providing that clear protocol between the school and parents for the child known to suffer from anaphylactic shock exist (ref supporting letter).

3) Diabetes

As a disorder in which the body is unable to control the amount of sugar in the blood, we recognise the implications for children who attend residential trips. As such:

- Because a diabetic cannot go safely for long periods without food, 'top ups' between meals would be encouraged.
- The child would be expected to always carry emergency glucose (eg fruit, glucose tablets or a chocolate bar) as the insulin/sugar balance can be disturbed by exercise, stress and excitement.
- Other children will be made aware of the need for the diabetic to 'snack' during the day.
- Teachers must have a written record and agreement between the school and the parent about the handling of the child's diabetic disorder.

4) Epilepsy

At least one staff member will have had training in immediate emergency procedures for epilepsy.

5) ADD/ADHD

Attention Deficit Disorder is treated by Ritalin (Methylphenidate) which we will not directly administer because of the contractual and legal implications in administering such medication. We will, however, support the family in terms of accessibility during the school day. In most cases, tablets can be taken twice daily. If a midday tablet is prescribed a contract may be negotiated, providing a volunteer agrees to support the child in self-administering.

Reference in this policy was made to: LEA advice

DfEE Publication – Supporting Pupils with Medical Needs
DfEE Guidance on First Aid for Schools
NAHT advice – Specific Medical Problems

(PM Series 011)

Policy Reviewed: January 2017

Date for Next Review: January 2020

NB In all relevant cases, the recommendations of a child's care plan is adhered to.

Letter requesting the administration of medication in cases of Anaphylactic Shock

Dear Headteacher

I request and authorise that
(full name of child)
be given the following medication:

.....
.....
.....
.....

This medication has been prescribed to my child by
(name of practitioner)
whom you may contact for verification. The medication is clearly labelled indicating
the contents, dosage and the child's full name.

I further authorise
(name of trained individual(s))
to administer the injections as I am satisfied that he/she has been trained in the use of
the injection and is competent in recognising the indications for its administration.

I fully understand that the medication will only be given if there is a suitably trained
volunteer in school at the time. Should no volunteer be available, it is my
responsibility to provide the necessary cover until the volunteer replacement is in
school.

I confirm that I am the parent/person with parental responsibility in respect of the
child and accordingly I am legally empowered to give authority for the administration
of this medication.

Signed Date

Name

Address

.....

Headteacher Date

Review Date