



St.Cuthbert's
Roman Catholic Academy Trust

St Cuthbert's Roman Catholic Academy Trust
**Administering Medicines in School Policy –
For Pupils with Short Term Medical Conditions**



**ST MARY
QUEEN OF
MARTYRS**
VC ACADEMY

Date policy produced: March 2021
Produced by: St Cuthbert's RC Academy Trust

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Reviewed by: St Cuthbert's RC Academy Trust

Other related academy policies that support this Administering Medicines in School policy include:- Asthma; Attendance & Punctuality; Supporting Pupils at School with Medical Conditions

PURPOSE

This policy document describes the arrangements in place at XXXXXXXXXXXX VC Academy for administering prescription, prescribed and 'over-the-counter' medicines to pupils with **short-term** medical conditions.

Pupil medical needs may be broadly summarised as being of two types:

Short-term – affecting their participation at school because they are on a course of medication.

Long-term – potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances.

Arrangements for pupils with long-term medical conditions are described in the school's 'Supporting Pupils at school with Medical Conditions' policy. For pupils with chronic asthma, arrangements are described in the school's 'Asthma' policy.

GENERAL PRINCIPLES

There remains no legal duty that requires school staff to administer medication – this is a voluntary role. The 'duty of care' extends to administering medication in exceptional circumstances and is therefore at the school's discretion.

Medicines should normally be administered at home and only brought into school when absolutely necessary (as determined by dose frequency). However, this policy has been designed to ensure that we have effective controls in place for administering medicines at school where it would be **detrimental to a child's health or would impact on a child's school attendance not to do so.**

Under strict criteria – and only with prior written parental/carer consent without exception – our school can administer:

- medication recommended by a pharmacist or nurse without a written prescription;
- any medication prescribed by a doctor, dentist or an appropriately qualified pharmacist or nurse;
- 'over-the-counter' medication sourced by a parent/carer.

PRESCRIPTION, PRESCRIBED AND 'OVER-THE-COUNTER' MEDICATION

Medicines must not usually be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist.

When we use the word 'prescribe' we mean medicine that is recommended. When we use the word 'prescription' we mean written instructions from a doctor or dentist.

Most pharmacists cannot write prescriptions and can only prepare the medicine as instructed by a doctor or dentist. However, they can recommend ('prescribe') 'over-the-counter' medicines such as painkillers. Additionally, qualified nurse independent prescribers, and pharmacist independent prescribers, can prescribe any licensed medicine for any medical condition they have been trained to specialise in. For nurses, this includes some controlled drugs.

EVALUATING A REQUEST TO ADMINISTER MEDICATION

A parent/carer must use the dual consent/medication care plan contained at Appendix A to make a request to the school to administer medicine.

The accompanying medicine (in the smallest practicable amount) must be brought to the school office by a parent/carer.

- Prescription medicines will only be accepted if these are provided in the original container, in-date, clearly marked with the child's name as dispensed by a pharmacist and include the prescriber's instructions for administration, dosage and storage. Containers that require translation will not be accepted.
- 'Over-the-counter' medicines will only be accepted if these are provided in the original container, in-date and include instructions for administration, dosage and storage. Containers that require translation will not be accepted. A parent/carer must clearly mark their child's name on the original container.
- To avoid exceeding maximum dosage, parents/carers must be explicit when confirming the last time medicine was administered at home.
- Our school will never administer medicine to pupils containing aspirin or ibuprofen unless prescribed by a doctor.
- Our school will never administer herbal or home remedy medication to pupils.
- Under no circumstances should a parent/carer send a child to school with any medicine – including sore throat lozenges/sprays or any other cold/flu remedy – without informing the school. These could present a hazard to the child or to another child if found and accidentally swallowed.
- Our school will never accept medicines that have been taken out of the container as originally dispensed nor make changes to prescribed doses on parental instruction. Any change to dosage must be authorised by a medical practitioner or responsible prescriber and a new dual consent/medication care plan completed.
- Under exceptional circumstances only will our school administer prescribed 'over the counter' medicines beyond a 48-hour period. This does not apply to prescription medication for which the written instructions usually determine a longer duration.
- If the school has concerns about the nature of any presented medication, it reserves the right to refuse its administration. The parent/carer will be advised of this immediately and will be consulted on alternative arrangements.

ADMINISTERING MEDICINE

Staff administering medicine will do so in accordance with prescriber instruction or in the case of 'over-the-counter' medication, follow the instructions detailed on the original container. If the administration of prescription medicine requires technical or medical knowledge, then appropriate training will be provided from a qualified health professional and written records maintained:

- Before administering medicine, a child will first be asked their name – even if the member of staff knows the child well – and this will be checked against the name identified on the medicine container.

- The completed dual consent/medication care plan will be checked to ensure that the medicine is being administered at the correct time, the correct dose and to ensure that another member of staff has not already administered the due dose.
- Medicine will be only administered under dual staff supervision to ensure appropriate rigour. It may be self-administered by the child or administered by a member of staff.
- Any witnessed side-effects will be notified to the parent/carer.
- If a child refuses to take medication, staff will not force them to do so but will note this on the appropriate dual consent/medication care plan and inform parents of the refusal. If the refusal leads to a medical emergency, the school will call emergency services and ensure that parents/carers are informed.

Parents are welcome to come into school to administer medicine – either because it is their choice or because the school has refused to administer it during the evaluation process.

RECORD KEEPING

To evidence that agreed procedures have been followed, the school keeps a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom and who witnessed the event. This information is recorded on the reverse of the associated dual consent/medical care plan (Appendix A) and continuation sheet (Appendix B) when applicable.

STORAGE

The Head of School is responsible for ensuring that all medication is stored safely. Container instructions will be followed to ensure that medication is stored appropriately, including those that require refrigeration.

OFFSITE VISITS

Where pupils are required to take medication during a trip, the trip leader ensures that arrangements are in place to administer this in accordance with this policy.

In the case of a residential trip, young people sometimes need minor medical treatment for conditions such as headaches, rashes, coughs & colds, insect bites, etc. With parental/carer consent, the school will treat these ailments with 'over-the-counter' medication commonly available from most Pharmacies. This list includes (but is not limited to) paracetamol; throat lozenges; cough mixture; antiseptic cream; calamine lotion; antiseptic wipes; hypoallergenic adhesive plasters; insect bite antihistamine; sun cream and travel sickness tablets.

RETURN/DISPOSAL OF MEDICATION

Parents/carers are responsible for collecting medication from school and ensuring that any date-expired medication is returned to a pharmacy for safe disposal.

Medication left in school will be taken to a local pharmacy for safe disposal.

LIABILITY AND INDEMNITY

The St Cuthbert's Roman Catholic Academy Trust Board ensures that the appropriate level of insurance cover is in place.

XXXXXXXXXXXXXXXXXXXX VC Academy

Administration of Medication in Exceptional Circumstances – Consent and Care Plan

This consent form must be completed in full to enable a request for the administration of medication in school to be effectively evaluated.

Pupil Details

Child's Name	
Date of Birth	
Year Group	
Medical Condition	

Medication Details

Name/Type of Medication (as described on the container)	
Expiry Date	
Dosage and Method	
Time(s) to be Administered	
Special Precautions/Other Instructions	
Are there any Side Effects that the School needs to know about?	
Self-administration – Yes/No	
Procedures to Follow in an Emergency (if applicable)	

Emergency Contact Details

Name	
Telephone Number(s)	
Relationship to Child	
Address	

Parent/Carer Consent

I clearly understand and accept that;

- as there is no legal duty that requires school staff to administer medication, my request will be evaluated at the school's discretion;
- I am responsible for delivering/collecting the above medication to/from the school office and ensuring that any date-expired medication is returned to a pharmacy for safe disposal;
- the school accepts no responsibility for any adverse reaction that my child may suffer as a consequence of being administered the above medication at my request.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering the above medication in accordance with the school's policy.

Signed: _____ Name: _____

Date: _____

MEDICATION CARE PLAN (For School Use Only)

Date	Time	Dose	Staff Name	Signature	Witness Name	Witness Signature
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Staff Comments (including instances of pupil refusals; noted side-effects etc.)

Appendix B

MEDICATION CARE PLAN – CONTINUATION SHEET (For School Use Only)

Child’s Name: _____

Date	Time	Dose	Staff Name	Signature	Witness Name	Witness Signature
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Staff Comments (including instances of pupil refusals; noted side-effects etc.)