



The Governing Body of

Herons Dale Primary School

have adopted the following policy:

Policy on Medicines in School

Reviewed by: Georgie Taylor

Date: March 2023

Review Date: March 2024

Policy on Medicines in School

Statement of Intent

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. The governing body of **Herons Dale School** will ensure that these arrangements fulfil their statutory duties and follow guidance outline in '**Supporting pupils at school with medical conditions**' December 2015.

Medicines will be administered to enable the inclusion of pupils with medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

Organisation and Roles

The Governing Body has legal responsibilities under the Children's act of 2014 to develop policies and procedures to ensure the medical needs of pupils at **Herons Dale School** are managed appropriately. They will be supported with the implementation of these arrangements by the Head teacher and school staff.

The Head teacher is responsible for ensuring appropriate staffing is available to support the medical needs of pupils

The lead for the management of medicines at **Herons Dale School** is **Georgie Taylor** or in their absence **Isabel Robson**. In their duties staff will be guided by their training, this policy and related procedures.

All staff have a duty to keep pupils safe and will seek appropriate support and guidance when necessary

All pupils where possible will be involved in discussions regarding their medical condition and care. Herons Dale School is a total communication school and pupils will be supported to understand what is happening 'now and next'

Implementation monitoring and review

All staff, governors, parents/carers and members of **Hérons Dale School** community will be made aware of and have access to this policy. This policy will be reviewed bi-annually OR SOONER if there is significant changes in arrangements and its implementation reviewed and as part of the Head teacher's annual report to Governors.

Insurance

Staff who follows the procedures outlined in this policy and who undertake tasks detailed in the RMP Medical Malpractice Treatment Table are covered under **WSSC insurance**. The medical audit is available to view on West Sussex Services for Schools under '**guide to insurance for schools**'.

Claims received in respect of medical procedures not covered by the insurers will be considered under the Council's insurance fund.

Admissions

When the school is notified of the admission of a pupil with medical needs the Staff will seek parental consent to administer short term-ad-hoc non-prescriptions medication using 'Template B: Parent/guardian consent to administer short-term non-prescribed 'ad-hoc' medicines'.

An assessment of the pupil's medical needs will be completed this might include the development of an Individual Health Care Plans (IHP) and require additional staff training.

The school will endeavour to put arrangements in place to support that pupil as quickly as possible. However the school may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place.

Pupils with medical needs

The school nurse will follow Government guidance and develop an IHP or EHC for pupils who:

- Have long term, complex or fluctuating conditions
- Require medication in emergency situations including anaphylaxis

Parents/guardians should provide the Head teacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents/guardians, Head teacher, school nurse and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. Healthcare plans will be reviewed by the school annually or earlier if there is a change in a pupil's medical condition.

All prescribed and non-prescribed medication

On no account should a child come to school with medicine if he/she is unwell. Parents may call into the school and administer medicine to their child, or they may request that a member of school staff administers the medicine. If a pupil refuses their medication, they should not be forced, the school will contact the parent/guardian and if necessary the emergency services. Pupils should not bring any medication to school for self-administration.

The school will keep a small stock of paracetamol and antihistamine for administration with parental consent for symptoms that arise in the school day, all other medication must be supplied by the parent/guardian in the original pharmacist's container clearly labelled and include details of possible side effects e.g. manufacturer's instructions and/or patient information leaflet (PIL).

Medicines must be handed to the **staff who have received training in Administering Medication** with the appropriate consent form

The school will inform the parent/guardian of the time and dose of any medication administered at the end of each day by telephone or home school book

Confidentiality

As required by the Data Protection Act 1998, school staff should treat medical information confidentially. Staff will consult with the parent, or the pupil if appropriate, as to who else should have access to records and other information about the pupil's medical needs and this should be recorded on the IHP or EHC. It is expected that staff with contact to a pupil with medical needs will as a minimum be informed of the pupil's condition and know how to respond in a medical emergency

Consent to administer medication

Parental/guardian consent to administer medication will be required as follows:

- **Short term ad-hoc non-prescribed medication** - The school will request parent/guardian consent to administer ad-hoc non-prescription medication when the pupil joins the school. OR by contacting the parent/guardian to gain consent at the time of administration
- The school will send annual reminders requesting parents/guardians to inform the school if there are changes to consent. If the school is not informed of any changes by the parent/guardian it will be assumed that consent remains current.
- **Prescribed and non-prescribed medication** - each request to administer medication must be accompanied by 'Parental consent to administer medication form or if applicable on the IHP

Prescription Medicines

All medicines should be prescribed by a doctor, dentist, or nurse prescriber.

- Only the dose prescribed on the dispensing label container must be given.
- We should never crush tablets unless essential as this could change the composition of the medication. If the need arises for a medication to be crushed the School Nurse will find out if this is possible from Worthing Hospital's Pharmacy.
- Parents should be encouraged to request medical professionals to prescribe a dosage that fits around the school day. If this is not possible Herons Dale School can administer any prescribed medication

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime.

Administration will be recorded and the parent/guardian informed. Parents/guardians are expected to remove any remaining medicine from school once the prescribed course has been completed.

Two trained members of staff are needed to safely administer medicine at **Herons Dale School**. When school staff administer medicines, the parent or guardian must supply the medicine in the original pharmacist's container with the dispensing label including details of possible side effects (this can be downloaded if not included) and must complete a '**Parental agreement for setting to administer medicine**' form. On no account should a child come to school with medicine if he/she is unwell.

The dispensing label must state the **child's name, the dose and frequency and route**.

Medicines must have recorded on them the date they were opened.

We never accept medicines that have been taken out of the original container as originally dispensed nor make changes to dosages on parental instructions

If in any doubt seek medical advice before administering the medicines

Non-prescription Medicines

Under exceptional circumstances where it is deemed that their administration is required to allow the pupil to remain in school the school will administer non-prescription medicines.

The school will not administer alternative treatments i.e. homeopathic or herbal potions, pills or tinctures or nutrition supplements unless prescribed or recommended by a Doctor and detailed on an IHP as part of a wider treatment protocol.

As recommended by the Government in Supporting Pupils at School with Medical Conditions December 2015 the school will also **not administer aspirin unless prescribed.**

The storage and administration for non-prescription medication will be treated as prescription medicines.

If the relevant symptoms develop during the school day as detailed under the paragraph 'short term ad-hoc non-prescribed medication' the school will administer the following non-prescription medications:

- paracetamol (to pupils of all ages)
- ibuprofen (pupils age 12 and over) so not held in school
- antihistamine

All other non-prescription medications will only be administered by staff, providing:

- The parent/guardian confirms daily the time the medication was last administered and this is recorded on the administration of medication form
- medication is licensed as suitable for the pupil's age;
- medication is suitable for the pupil i.e. if a child is asthmatic the medication is suitable for that condition;
- administration is required more than 4 times per day;
- medication is supplied by the parent or guardian in the original packaging with the manufacturer's instructions and/or (PIL);
- and accompanied by parental/guardian consent Template C and C1 (Appendix 2) and confirmation the medication has been administered previously without adverse effect;

The school will **NOT** administer non-prescription medication:

- as a preventative, i.e. in case the pupil develops symptoms during the school day;
- if the pupil is taking other prescribed or non-prescribed medication, i.e. only one non-prescription medication will be administered at a time;
- for more than 48 hours – parents will be advised if symptoms persist to contact their Doctor;
- A request to administer the same or a different non-prescription medication that is for the same/initial condition will not be repeated for 2 weeks after

the initial episode; and not for more than 2 episodes per term - it will be assumed that the prolonged expression of symptoms requires medical intervention, and parents/guardians will be advised to contact their Doctor.

- Skin creams and lotions will only be administered in accordance with the Schools Intimate Care Policy and procedures.
- Medication that is sucked i.e. coughs sweets or lozenges, will not be administered by the school.
- if parents/guardians have forgotten to administer non-prescription medication that is required before school – requests to administer will be at the discretion of the school and considered on an individual basis.

Short term ad-hoc non-prescribed medication

A small stock of standard paracetamol and antihistamine (**including pupils own creams/lotions for nappy or skin rashes**) will be kept by the school for administration if relevant symptoms develop during the school day.

ONLY 1 dose of any of the following medications suitable to the weight and age of the pupil will be administered during the school day. Parents will be informed of the time and dose and what medication was given

ONLY standard medication can be administered e.g. no '*plus caffeine*' or '*extra*'

ONLY the following will be administered following the necessary procedures:

- For relief from pain
 - Standard Paracetamol will be administered in liquid or tablet form for the relief of pain i.e. period pain, migraine.
 - Gripe water
 - pupils own creams/lotions for nappy or skin rashes
 - Standard Ibuprofen will **ONLY** be administered in tablet form to pupils age 12 and over for period pain, migraine and muscle/skeletal disorders involving inflammation i.e. joint sprains.
 - Ibuprofen will **NOT** be administered to any pupil diagnosed with asthma.
 - For mild allergic reaction – Standard Piriton (see Anaphylaxis)
 - For travel sickness – medication will be administered if required before educational visits and must be age appropriate and supplied by the parent/guardian in its original packaging with the PIL if available. (parent consent gained and confirmation that this medication has been given before with no adverse effects)

***** No aspirin can be given to pupils under the age 16**

Pain relief protocol for the administration of paracetamol and ibuprofen

If a request for non-prescribed pain relief is made by a pupil or carer/staff (advocate for a non-verbal/non-communicating pupil) before 12pm:

- The school will contact the parent/guardian and confirm that a dose of pain relief was NOT administered before school, parents/guardians and if appropriate the pupil will also be asked if they have taken any other medication containing pain relief medication i.e. decongestants e.g. Sudafed, cold and flu remedies e.g. Lemsip and medication for cramps e.g. Feminax etc. and these conversations will be recorded.
- If the school cannot contact the parent/guardian and therefore cannot confirm if pain relief (Paracetamol and Ibuprofen) was administered before school then the school will refuse to administer pain relief.

If a dose of pain relief has been administered before school:

- PARACETAMOL - The school will not administer paracetamol until 4 hours have elapsed since the last dose (assume 8am) no more than 4 doses can be administered in 24 hours.
- IBUPROFEN – Herons Dale school will NOT administer Ibuprofen at all during the school day

If a request for pain relief is made after 12pm:

- The school will assume the recommended time between doses has elapsed and will administer 1 standard dose of PARACETAMOL without any need to confirm this with the parent/guardian but if appropriate the pupil will still be asked if they have taken any other medication containing pain relief medication and this conversation will be recorded.

The school will inform the parent/guardian if pain relief has been administered this will include the type of pain relief and time of administration. If symptoms persist parents will be contacted

All prescribed medication emergency procedures:

If pupils develop a rash or any symptom that might be an allergic reaction.

Or

If it is suspected that the pupil has taken too much medication in 24hrs period call 999 and contact parents

Asthma

The school recognises that pupils with asthma need access to relief medication at all times. The school will manage asthma in school as outlined in the Asthma Toolkit. Pupils with asthma will be required to have an emergency inhaler and a spacer (if prescribed) in school. The school may ask the pupils parent or guardian to provide a second inhaler. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required.

As of September 2017 a sufficient number of salbutamol inhaler(s) and spacer(s) will be held by the school to cover emergency use and parental consent to administer the 'school inhaler' will be gained when the pupil starts school (see Asthma Toolkit). The school will hold a register of the pupils diagnosed with asthma, and parental consent with the 'school inhaler(s)'. The school will be responsible for ensuring the 'school inhaler(s)' remain in date.

The school will follow the emergency treatment as detailed on the Asthma Information Form that can be found within the Asthma Toolkit. The school inhaler will only be used in an emergency and will always be used with a spacer as outlined in the Asthma Toolkit. The school will develop Individual Health Care Plans for those pupils with severe asthma, and an Asthma Information Form completed for pupils with mild asthma.

The spare reliever inhaler is kept in the school office

Anaphylaxis

Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the school population. The school complies with the School Nursing Service recommendations that all staff are trained in the administration of auto injectors and that training is renewed annually.

In accordance with the Medicines and Healthcare Products Regulatory Agency (MHRA) advice the school will ask parent/ guardian(s) to provide 2 auto-injectors for school use. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required and a record of these communications will be kept.

Some antihistamine medication can cause drowsiness and therefore the school will consider if it is necessary for pupils to avoid any contact hazardous equipment after administration of the medication i.e. P.E. Science, Design and Technology.

**We do not guarantee an allergy free environment however we aim to manage triggers by controlling activities, cooking etc.... and by increasing hygiene.
Pupil with a severe allergy may require a segregated meal time**

Mild Allergic Reaction

Non-prescription antihistamine will be administered for symptoms of mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes), the pupil must be monitored for signs of further allergic reaction. If antihistamine is not part of an initial treatment plan, anaphylaxis medication will be administered following the guidance for short term ad-hoc non-prescribed medication.

During this time pupils must NEVER be left alone and must be observed at all times

Hay fever - should administer antihistamine before the pupil starts school, it is **not** necessary for schools to administer antihistamine for the treatment of hay fever. Herons Dale School will only administer antihistamines for symptoms of allergic reaction and NOT as a precautionary trigger

Severe Allergic Reaction

Where a GP/Consultant has recommended or prescribed antihistamine as an initial treatment for symptoms of allergic reaction this will be detailed on the pupils IHP. The school will administer 1 standard dose of antihistamine (appropriate to age and weight of the pupil) and it is very important that symptoms are monitored for signs of further allergic reaction. During this time pupils must NEVER be left alone and should be observed at all times.

If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms then if the pupil has been prescribed an adrenaline auto injector it will be administered without delay an ambulance called and the parents informed.

Medical Emergencies

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified.

Should an emergency situation occur to a pupil who has an IHP or EHCP, the emergency procedures detailed in the plan are followed, and a copy of the IHP is given to the ambulance crew.

If applicable the pupil's emergency medication will be administered by trained school staff, if the pupils medication isn't available staff will administer the schools emergency medication with prior parental consent.

In accordance with amendments made to the Human Medicines Regulations 2012 from October 2014 a sufficient number of salbutamol inhaler(s) spacer(s) will be held by the school to cover emergency use. Parents are expected to provide 2 in date auto-injectors for administration to their child. If a child attending school requires an auto-injector and if the school does not hold 2 in date auto-injectors for each pupil then a suitable number of auto-injectors will be purchased for use by the school in an emergency.

Parental consent to administer the 'school inhaler and/or auto-injector' and anaphylaxis will be gained when the pupil joins the school

The school will hold a register of the pupils diagnosed with asthma and/or anaphylaxis, and if parental consent has been given to administer the school medication. The school will be responsible for ensuring the school medication remains in date.

Instructions for calling an ambulance are displayed prominently by the telephone in all classes and the office

Controlled Drugs

The school does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves.

Controlled drugs will be stored securely in a non-portable container and only named staff will have access.

Controlled drugs for emergency use e.g. **midazolam** will not be locked away and will be easily accessible.

The administration of a controlled drug will be witnessed by a second member of staff and records kept.

In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug stock held in school.

Pupils taking their own medication

For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the pupil's individual health care plan and parents should complete the self-administration section of '**Parental agreement for setting to administer medicine**' form

Storage and Access to Medicines

All medicines apart from emergency medicines (**inhalers, adrenaline auto injector, midazolam** etc.) will be kept securely (where access by pupils is restricted).

Medicines are always stored in the original pharmacist's container. Where appropriate pupils are told where their medication is stored and who holds the key and staff will be fully briefed on the procedures for obtaining the medication in an emergency.

Emergency medicines such as **inhalers and adrenaline auto injector and midazolam** must not be locked away

If appropriate certain emergency medication can be held by the pupil or kept in a clearly identified container in his/her classroom. The school will make an assessment as to the competency of each individual pupil to carry their own medication. Parents will be asked to supply a second adrenaline auto injector for each child Staff must ensure that emergency medication is readily available at all times i.e. during outside PE lessons, educational visits and in the event of an unforeseen emergency like a fire.

Medicines that require refrigeration are kept in the **class fridge** to which pupil access is restricted, and will be clearly labelled in an airtight container. There are specific arrangements in place for the storage of controlled drugs see page 7.

The Head teacher is responsible for ensuring medicines are stored safely (COSHH Reg 2002)

Waste medication

Where possible staff should take care to prepare medication correctly. If too much medication is drawn into a syringe the remainder (amount above the required dose) should be returned to the bottle before administration.

If only a half tablet is administered the remainder should be returned to the bottle or packaging for future administration.

If a course of medication has been completed or medication is date expired it will be returned to the parent/guardian for disposal.

Spillages

A spill must be dealt with as quickly as possible and staff are obliged to take responsibility/follow the guidelines. Spillages will be cleared up following the schools procedures and considering the control of infection. Any spilled medication will be deemed unsuitable for administration and if necessary parents will be asked to provide additional medication.

The school has additional procedures in place for the management of bodily fluids which are detailed in the Health and Safety policy

If the school holds any cytotoxic drugs, their management will be separately risk assessed and follow Health and Safety Executive (HSE) guidance

Recording Errors and Incidents

If for whatever reason there is a mistake made in the administration of medication and the pupil is:

- Given the wrong medication
- Given the wrong dose
- Given medication at the wrong time (insufficient intervals between doses)
- Given medication that is out of date
- Or the wrong pupil is given medication

Incidents must be reported to the Schools Senior Management Team who will immediately inform the pupil's parent/guardian. Details of the incident will be recorded locally in the school incident/accident book and shared with the Governing body

Local records must include details of what happened, the date, who is responsible and any effect the mistake has caused.

Senior Management will investigate the incident and change procedures to prevent reoccurrence if necessary. NB: Incidents that arise from medical conditions that are being well managed by the school do not need to be reported or recorded locally.

Staff Training

The school will ensure a sufficient number of staff complete Managing Medicines in Schools training before they can administer medication to pupils. The school will also ensure that other staff who may occasionally need to administer a medicine are trained in the procedure adopted by the school by the person who has completed the Managing Medicines course. Staff given instruction by the Lead for Medicines MUST complete a competency test and achieve a score of 100% in order to administer medication. These records will be kept in staff files held by the SBM

Supply and locum staff will be given appropriate instruction and guidance in order to support the pupils with medical needs in their care. All school staff are trained annually to administer an auto-injector and asthma inhaler in an emergency. A record of all training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

In addition the school will ensure that the staff who administer medicine for specific chronic conditions are trained to administer those specific medicines, for example, Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse.

Transport to and from school (Special schools only)

If a medical emergency occurs whilst a pupil is being transported to school the emergency services will be called and the parents informed. With parental consent and following Data Protection Law the pupil's IHP or EHC will be given to those external companies and/or staff providing transportation to and from school, (Taxi, Mini Bus etc.) in order that the care plan can be passed to the ambulance crew in the event of an emergency.

Educational Visits (Off - site one day)

Staff will administer prescription medicines to pupils when required during educational visits. Parents should ensure they complete a consent form and supply a sufficient amount of medication in its pharmacist's container. Non-prescription medicines as detailed in this policy can be administered by staff, pupils must not carry non-prescription medication for self-administration.

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

Medicines on Residential Visits

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the care plan.

Occasionally it may be necessary to administer non-prescription medicines i.e. paracetamol, anti-histamine etc. to pupils suffering acute pain from things like headache, period pain, toothache. Parents must give written consent prior to the residential visit using a, 'Parental agreement for setting to administer medicine' form before non-prescription medication can be given. Staff will check that the medicine has been administered without adverse effect to the child in the past and parents must certify this is the case – a note to this effect should be recorded on the consent form.

The school will keep its own supply of standard paracetamol tablets and liquid suspension for administration to pupils during a residential visit and parental consent will be required in order for the school to administer the supply. The medication will be stored and administration recorded as for prescription medicines. Pupils should not bring paracetamol (or other types of painkillers) on the residential visit for self-administration.

Records of administering medication will be kept as if it had been given in school

Risk assessing medicines management on all off site visits

Pupils with medical needs shall be included in visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals so that extra measures (if appropriate) can be put in place. A copy of the pupils IHP or EHP will be taken on the visit and detail arrangements relating to the management of their medication(s) during the visit should be included in the plan.

If a pupil requires prescribed or non-prescribed medication during visit and an IHP or EHP has not been developed and the management of their medication differs from procedures followed whilst in school, the school will conduct a risk assessment and record their findings.

Travelling abroad – a risk assessment will be developed considering parental and medical advice and documented on the pupils IHP or EHP. If an IHP or EHP has not been developed, the school will record their findings. Best practice would be to translate these documents to the language of the country being visited. The international emergency number should be on the care plan (112 is the EU number). European Health Insurance Cards (EHIC) should be applied for by parents and supplied to the school prior to travel for all pupils that travel abroad.

The results of risk assessments however they are recorded i.e. IHP, EHP etc. will be communicated to the relevant staff and records kept of this communication.

School policy is to always have two trained people to check any medication given.

Staff will record information to include: date, time given and sign on each child's medication sheet.

Two trained members of staff should be responsible for the giving of medications. They will be relieved from their normal duties while preparing or giving the medicines to avoid any interruptions.

Staff will always check the following each time a drug is administered against the child's medication recording sheet.

- The name of the child
- Name of medication, this is the same as written on the bottle, container packet or blister strip.
- The written instructions provided by the prescriber on the label or container.
- Prescribed dose
- Method of administration, e.g. orally, buccally or via enteral feeding tubes
- Time/frequency of administration
- If it has been given already
- That you know of any side effects that may occur
- The date of supply
- Expiry date on packet
- You have entered the correct date on medicines chart
- Frequency of administration for emergency Buccal Midazolam and the protocols that should be followed).
- Contact address of Parents /carers

Once both members of staff are sure all the above are correct they must both identify the child who the medication is due for and once it has been administered both persons must sign the medication sheet.

Once given both staff members must sign and state date of administration

If in any doubt check with parent or school nurse

Record Keeping

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. A parent or guardian will be informed if their child has been unwell during the school day.

Travelling Abroad

Children with medical needs will be encouraged to take part in visits. The responsible member of staff will carry out a specific and additional risk assessment and a care plan will be drawn up considering parental and medical advice. Best practice would be to translate these documents to the language of the country being visited. The international emergency number should be on the care plan (112 is the EU number). European Health Insurance Cards (EHIC) should be applied for by parents and supplied to the school prior to travel for all pupils that travel abroad.

Complaints

Issues arising from the procedure of administering medicine whilst in school should in the first instance be directed to the Head teacher. If the issue cannot easily be resolved the Head teacher will inform the governing body who will seek resolution.

Infection control measures

Staff should wash their hand prior to the administration of medicines
Aprons and gloves are to be worn when giving any enteral feed.
Syringes used for oral medications will be washed in warm soapy water and allowed to dry. NB Syringes used for admin of meds via enteral feeding should be decontaminated according to guidance received during enteral feeding training.

Refer to infection control policy.

Appendix

1. Parent/guardian consent to administer short-term non-prescribed 'ad-hoc' medicines
2. Parental consent to administer medication
3. Individual Protocol for non-prescribed medication
4. Consent to administer non-prescribed medication on a Residential Visit
5. Ambulance Protocol
6. Contacting Emergency Services Poster
7. Medicine sent in to school and sent home from school
8. All medications taken out of school on school trips
9. Medical Folder label

*** All templates are based on Supporting Pupils with Medical Conditions - May 2014



Herons Dale School

Parent/guardian consent to administer short-term non-prescribed 'ad-hoc' medicines

Herons Dale School will not administer medication unless this form is completed and signed. This information will be kept securely with your child's other records. If further information is needed we will contact you. Please do not hesitate to contact the school if there are any issues you wish to discuss.

Pupils Name	D.O.B
Gender	Year/Tutor Group

The Medicines Policy permits Herons Dale School to administer the following non-prescription medication if your child develops the relevant symptoms during the school day. Pupils will be given a standard dose suitable to their age and weight. You will be informed when the school has administered medication by either home/school book or telephone call. The school holds a small stock of the following medicines:

- Paracetamol
 Anti-histamine

Tick the non-prescription medications above that you give your consent for the school to administer during the school day and confirm that you have administered these medications in the past without adverse effect. Please keep the school informed of any changes to this consent.

Signature(s) Parent/Guardian

Date

Print name



Herons Dale Primary School

Parental consent to administer medication (where an Individual Healthcare Plan is not required)

Herons Dale School **will not** give your child medicine unless you complete and sign this form,

Name of child	
Date of birth	
Class	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Side effects that the school needs to know	
Self-administration – y/n	
Procedures to take in an emergency	

Medicines must be in the original container dispensed by the pharmacy with manufacturer's instructions Patient Information Leaflet (PIL) included

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	Trained staff

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I confirm that this medication has been administered to my child in the past without adverse effect. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date



Individual Protocol for non-prescribed medication

This form should be completed in conjunction with parental consent

Under exceptional circumstances where it is deemed that their administration is required to allow the pupil to remain in school the school will administer non-prescription medicines for a maximum of 48 hours.

Date (requirement reviewed daily)	Time last dose administered at home as informed by parent/guardian	Dosage given in school	Time	Comments
Day 1				
Day 2				

3 main side effects of medication as detailed on manufacturer's instructions or PIL		
1.	2.	3.

Emergency procedures – if the pupil develops any of the signs or symptoms mentioned above or any other signs of reaction as detailed on the manufacturer's instructions and/or PIL this might be a sign of a negative reaction or if it is suspected that the child has taken too much medication in a 24 hour period staff will call 999 and then contact the parent/guardian(s).

I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education.

I am aware that each day I must inform the school when I last administered the medication and that I will be informed by the school in writing when medication has been administered by home/school book or telephone

Agreed by: Parent/guardian

Date.....



Consent to administer non-prescribed medication on a Residential Visit

The school will not administer medication unless this form is completed and signed. This information will be kept securely with your child's other records. Whilst away if your child feels unwell the school staff may wish to administer the appropriate non-prescription. Please do not hesitate to contact the school if there are any issues you wish to discuss.

Pupils Name	D.O.B
Gender	Class Group

If your child develops the relevant symptoms during their residential visit, they will be given a standard dose suitable to their age and weight of the appropriate non-prescribed medication. If symptoms persist medical advice will be sought and if necessary the emergency services called. You will be informed when the school has administered medication on our return by home/school book or telephone. The school will hold a small stock of the following medicines:

<input type="checkbox"/> Paracetamol	<input type="checkbox"/>
<input type="checkbox"/> Anti-histamine	<input type="checkbox"/>
<input type="checkbox"/> Travel sickness	<input type="checkbox"/>

Tick the non-prescription medications above that you give your consent for the school to administer during the residential visit and confirm that you have administered these medications in the past without adverse effect. Please keep the school informed of any changes to this consent.

Signature(s) Parent/Guardian

Date

Print name

Ambulance Protocol

- The call for an ambulance must be made by the nearest phone to the injured / ill child
- The ambulance centre will ask questions about the child's injuries and condition, therefore the person concerned must remain with the child.
- Staff dealing with child, should contact the Office staff and ask for "call" to be put out to ensure a Paediatric First Aider/school nurse attend.
- Office staff must ensure they are given the location and the name of the child.
- Office staff must inform Isabel or Georgie. Office staff to contact a member of staff to go to top of drive and a member of staff to wait at front of school to greet ambulance
- Office staff to phone parent/s or carer/s.
- Staff waiting by the front entrance will meet the ambulance and escort paramedics to the child
- Staff who have been with child since the start of the concern will liaise with the paramedics
- Class staffs collect Care Plan, any medications etc. and hand to the member of staff dealing with the child so that they can share this information with the paramedics.
- Child to go in ambulance with the parents if they have arrived at the school or a familiar member of staff who can pass on relevant information to hospital staff and parents.
- Isabel to ensure that any member of staff who accompanies a child to hospital has a mobile phone on them that is fully charged and has credit it on it so that they can contact the school with updates and to make arrangements to return to school.
- Member of staff who goes to hospital should keep the school updated on a regular basis.
- If a member of staff accompanies a child to hospital they should contact school and ask to be collected or arrange for a taxi once parents have arrived and they have ensured that all relevant information has been shared with them. School will pay taxi fare.
- All paperwork should be completed immediately, ensuring that the staff member completing it has liaised with Anne, Office Manager, regarding the West Sussex County Council on-line reporting system.

MEDICATIONS SENT INTO SCHOOL AND SENT HOME TO PARENTS

DATE IN	NAME OF PUPIL	NAME OF MEDICATION	EXPIRY	1 ST WITNESS	2 ND WITNESS	DATE OUT	1 ST WITNESS	2 ND WITNESS

ALL MEDICATIONS TAKEN OUT OF SCHOOL ON SCHOOL TRIPS

**ALL MEDICATIONS MUST BE CHECKED IN AND OUT BY TWO TRAINED PEOPLE
PLEASE**

DATE	NAME OF CHILD	NAME OF MEDICATION	TIME OUT	TIME IN	TAKEN OUT BY	ON RETURN SIGNATURES

HERONS DALE SCHOOL RECORDS OF MEDICINES ADMINISTERED TO ALL CHILDREN

DATE	CHILD'S NAME	TIME	NAME OF MEDICINE	DOSE GIVEN	ANY REACTIONS	Method of admin	SIGNATURE OF BOTH STAFF	PRINT NAMES

HERONS DALE SCHOOL RECORDS OF MEDICINES ADMINISTERED TO ALL CHILDREN



Medical Folder