

ST EGWIN'S C.E.
MIDDLE SCHOOL

Administering Medication Policy

Dated – September 2022
Review date – September 2023

Signed by:

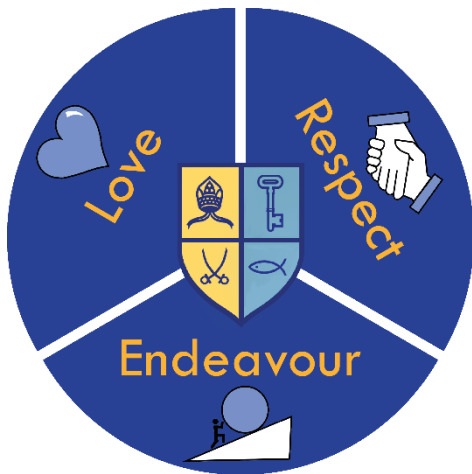
Interim Headteacher

Date:

September 2022

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School Vision:

Our Community fosters dignity by valuing every individual and their God-given uniqueness.

We endeavour to act justly, showing love and respect.

We thrive through growing resilience and living together gratefully with joy.

Statement of intent

St Egwin's CE Middle school will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy.

This policy has been developed in line with the DfE's guidance: 'Supporting pupils at school with medical conditions.'

The school is committed to ensuring that parents/carers feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

1. Legal framework

1.1. This policy has due regard to statutory legislation and guidance including, but not limited to, the following:

- Children and Families Act 2014
- DfE 'Supporting pupils at school with medical conditions' 2015

2. Definitions

2.1. St Egwin's defines "medication" as any prescribed or over the counter medicine.

2.2. St Egwin's defines "prescription medication" as any drug or device prescribed by a doctor.

2.3. St Egwin's defines a "staff member" as any member of staff employed at the school, including teachers.

2.4. For the purpose of this policy, "medication" will be used to describe all types of medicine.

3. Key roles and responsibilities

3.1. The governing body has overall responsibility for the implementation of the Administering Medication Policy and procedures of St Egwin's

3.2. The governing body has overall responsibility of ensuring that the Administering Medication Policy, as written, does not discriminate on any grounds, including but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.

3.3. The governing body is responsible for handling complaints regarding this policy, as outlined in the school's Complaints Policy.

3.4. The governing body is responsible for ensuring the correct level of insurance is in place for the administration of medication.

3.5. The governing body is responsible for ensuring that members of staff who provide support to pupils with medical conditions are suitably trained and have access to information needed.

3.6. The governing body is responsible for ensuring that relevant health and social care professionals are consulted in order to guarantee that the needs of pupils with medical conditions are properly supported.

3.7. The governing body will manage any complaints or concerns regarding the support provided or administration of medicine using the school's Complaints Procedure Policy.

- 3.8. The headteacher is responsible for the day-to-day implementation and management of the Administering Medication Policy and relevant procedures of St Egwin's.
- 3.9. The headteacher is responsible for ensuring that appropriate training is undertaken by staff members administering medication.
- 3.10. The headteacher is responsible for ensuring that staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system.
- 3.11. Specific staff are trained and responsible for overseeing insulin injections for diabetic pupils.
- 3.12. Staff, including teachers, support staff and volunteers, are responsible for following the policy and for ensuring pupils do so also.
- 3.13. Staff, including teachers, support staff and volunteers, are responsible for implementing the agreed policy fairly and consistently.
- 3.14. If a pupil is sent to hospital in an emergency situation, at least one member of staff will accompany the pupil until their parent/carer has arrived.
- 3.15. Parents/carers are expected to keep the school informed about any changes to their child/children's health.
- 3.16. Parents/carers are expected to complete a medication administration form (appendix A) prior to bringing medication into school.
- 3.17. Parents/carers are expected to discuss medications with their child/children prior to requesting that a staff member administers the medication.
- 3.18. The headteacher and the trip organiser are responsible for ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.
- 3.19. In the case of staff absence, the SBM is responsible for organising another appropriately trained individual to take over the role of administering medication.
- 3.20. It is both staff members' and pupils' responsibility to understand what action to take in general terms during a possible medical emergency, such as raising the alarm with the school nurse or other members of staff.

4. Training of staff

- 4.1. Teachers and support staff who are First Aid trained will receive training on the Administering Medication Policy as part of their new starter induction.
- 4.2. Teachers and support staff will receive regular and ongoing training as part of their development.

- 4.3. The SBM will ensure that a sufficient number of staff are suitably trained in administering medication.
- 4.4. All relevant staff will be made aware of a pupil's medical condition via emails from the Medical Care plan administrator and on the staff room notice board.
- 4.5. A first aid certificate does not constitute appropriate training in supporting children with medical conditions.
- 4.6. The SBM will provide staff members with opportunities and details of CPD.
- 4.7. St Egwin's will provide whole-school awareness training so that all staff are aware of the Administering Medication Policy in the event of specialist medical conditions such as diabetes or epi-pen and understand their role in implementing the policy.

5. Medication

- 5.1. Prior to staff members administering any medication, the parents/carers of the pupil must complete and sign a medication administration form (appendix A).
- 5.2. No pupil under the age of 16 will be given medicines without written parental consent.
- 5.3. Under no circumstance will a pupil under the age of 16 be given aspirin unless there is evidence that it has been prescribed by a doctor.
- 5.4. Medicines must be in date, labelled, and provided in the original container with dosage instructions. Medicines which do not meet these criteria will not be administered, with the exception of insulin which is acceptable to use if it is in date but in a different container, such as an insulin pen.
- 5.5. Before administering medicine, maximum dosages and when the previous dose was taken will be checked.
- 5.6. A maximum of four weeks' supply of medication may be provided to the school.
- 5.7. When medicines are no longer required, they will be returned to the parents/carers of the pupil.
- 5.8. Needles and sharp objects will always be disposed of in a safe way, using 'sharp boxes'.
- 5.9. Medications will only be administered at school if it would be detrimental to the child not to do so.

5.10. Medications will be stored securely in the school office. Pupils may carry medication with them, where a Medical Care Plan or Profile, states this is in the best interests of the child. This would include Auto Injectors, Asthma Inhalers and Diabetic Equipment. In extreme cases, Pain Relief will be allowed to be carried by the pupil, should their medical condition require such actions. Permission for this will be granted on an individual basis, with consultation with Parents, relevant staff members and SLT/Head Teacher. **Medication held by the pupil must not be shared with any other pupil.**

5.11. In the event of a school trip or activity which involves leaving the school premises, medicines and devices, such as insulin pens and asthma inhalers, will be readily available to staff and pupils.

5.12. Only suitably qualified staff will administer a controlled drug.

5.13. Staff members have the right to refuse to administer medication. If a class teacher does refuse, the SBM will delegate the responsibility to another staff member.

5.14. Any medications left over at the end of the course will be returned to the pupil's parent/carer.

5.15. Written records will be kept for any medication administered to pupils.

5.16. Pupils will never be prevented from accessing their medication.

5.17. Where appropriate, pupils will be encouraged to take their own medication under the supervision of a teacher.

- Parents/carers will be consulted before a pupil is given approval to be responsible for their own medication.
- These arrangements will be reflected in their individual medical care plan (MCP).

5.18. If a pupil refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their MCP and parents/carers will be informed so that alternative options can be considered.

5.19. St Egwin's cannot be held responsible for side effects which occur when medication is taken correctly.

5.20. Where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements about what support to provide will be based on the available evidence, including a consultation with parents/carers.

6. Individual medical plans or profiles

6.1. For chronic or long-term conditions and disabilities, an MCP/MP will be developed in liaison with the pupil, parents/carers, headteacher, special educational needs coordinator (SENCO) and medical professionals.

6.2. When deciding what information should be recorded on a MCP (see appendix B), the governing body will consider the following:

- The medical condition, as well as its triggers, signs, symptoms and treatments
- The pupil's resulting needs, such as medication (the correct dosage and possible side effects), equipment and dietary requirements
- The specific support needed for the pupil's educational, social and emotional needs
- The level of support that is needed and whether the pupil will be able to take responsibility for their own health needs
- The type of provision and training that is required, including whether staff can be expected to fulfil the support necessary as part of their role
- Which staff members need to be aware of the pupil's condition
- Arrangements for receiving parental consent to administer medication
- Separate arrangements which may be required for school trips and external activities
- Which staff member can fulfil the role of being a designated, entrusted individual where confidentiality issues are raised
- What to do in an emergency, including whom to contact and contingency arrangements
- What is defined as an emergency, including the signs and symptoms that staff members should look out for

6.3. The governing body will ensure that MCPs are reviewed at least annually. MCPs will be routinely monitored throughout the year by the MCP Administrator

7. Monitor and review

7.1. This policy is reviewed every 12 months by the headteacher.

7.2. Records of medication, which have been administered on school grounds, will be monitored and the information will be used to improve school procedures.

7.3. Staff members who are trained to administer medication will routinely recommend any improvements to the procedure.

7.4. St Egwin's will seek advice from any relevant healthcare professionals as deemed necessary.

Appendix A- Parental Agreement Form

St Egwin's CE Middle School Medication Consent Form



STUDENT NAME:.....FORM:.....

TYPE OF MEDICATION & DOSAGE:.....

IS THIS PRESCRIBED MEDICINE? YES/NO

PLEASE GIVE DETAILS OF THE CONDITION REQUIRING THE
MEDICATION

I HAVE SENT IN A SPARE (PLEASE TICK OR CIRCLE)

INHALER *

AUTO INJECTOR*

OTHER (PLEASE GIVE DETAILS)

***IF YOUR CHILD USES AN INHALER AND/OR AN AUTO
INJECTOR A SPARE MUST BE KEPT IN SCHOOL**

DO YOU AUTHORISE THE STAFF AT ST EGWINS TO ADMINISTER
THIS MEDICATION..... YES/NO

TRAINING MAY NEED TO BE PROVIDED, DEPENDING ON THE
MEDICATION

SignedDate

Relationship to Student

Appendix B- Individual Medical Care Plan Template

ST EGWIN'S MIDDLE SCHOOL



MEDICAL CARE PLAN

| | |
|---|--|
| NAME | |
| DATE OF BIRTH | |
| ADDRESS | |
| YEAR/FORM | |
| MEDICAL DIAGNOSIS/ CONDITION | |
| DESCRIPTION OF CONDITION | |

| | | | |
|---|--|---|---------------------|
| DATE COMPLETED | COMPLETED BY V VIGGERS | | REVIEW DATE |
| | USING INFORMATION PROVIDED BY PARENT AND/OR MEDICAL QUESTIONNAIRE | | IN ONE YEAR |
| CONTACT DETAILS 1 | NAME | TELEPHONE NUMBER | RELATIONSHIP |
| | | HOME MOBILE WORK/OTHER EMAIL | |
| CONTACT DETAILS 2 | NAME | TELEPHONE NUMBER | RELATIONSHIP |
| | | HOME MOBILE WORK/OTHER | |
| GP NAME, ADDRESS & TELEPHONE | | | |
| MEDICATION DOSE & FREQUENCY | | | |

| | |
|------------------------------|--|
| SYMPTOMS OF CONDITION | |
| ACTIONS REQUIRED | |

| | |
|---------------------------|--|
| EMERGENCY SYMPTOMS | |
| ACTIONS REQUIRED | |

| PERSONS RESPONSIBLE IN AN EMERGENCY | | |
|--|--|------------------------|
| ON SITE | CLASS TEACHER/ADULT/FIRST AIDER/AUTO INJECTOR TRAINED STAFF/IF REQUIRED, A PARAMEDIC | |
| OFF SITE | CLASS TEACHER/ADULT/FIRST AIDER/AUTO INJECTOR TRAINED STAFF ON THE TRIP/IF REQUIRED A PARAMEDIC. A COPY OF THE MEDICAL CARE PLAN & ANY MEDICATION HELD IN SCHOOL TO BE TAKEN BY THE TRIP ORGANISER/LEAD PERSON | |
| | NAME | CONTACT DETAILS |
| HOSPITAL CONTACTS | | |
| CLINIC CONTACTS | | |
| OUTSIDE AGENCY | | |

THIS INFORMATION WILL BE SHARED WITH STAFF