

# **Managing Medication Procedure**

**Policy Number: HBS026**

**Governor Committee: H,S & P**

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## Policy Review

This policy will be reviewed in full by the Governing Body every two years.

The policy was last reviewed and agreed by the Governing Body on 23/05/2023  
It is due for review in 24 months from the above date.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Head Teacher**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Chair of Governors**

## **Introduction**

This procedure has been produced to assist the school in setting policies on the administration of medication. Most pupils will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other pupils have medical conditions that, if not properly managed, could limit their access to education.

Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. However, school staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.

Hitchin Boys' School is committed to ensuring that children with medical needs have the same right of access as other children.

There is no legal duty that requires schools and staff to administer medication, this is a voluntary role. The 'duty of care' extends to administering medication in exceptional circumstances, and therefore it is up to Hitchin Boys' School to decide its own local policy for the administration of medication.

The School will ensure that they have sufficient members of staff who are appropriately first aid trained to manage medicines as part of their duties. Such staff should receive appropriate training and support from health professionals i.e. emergency deployment of EpiPens, etc. All staff at Hitchin Boys' School are covered in respect of public liability insurance while they are acting on behalf of the School. This includes any duties that are undertaken to support a healthcare plan.

The following Policy includes:

- Procedures for managing prescription medicines.
- Procedures for managing prescription medicines on trips and outings.
- Clear statement on the roles and responsibilities of staff managing the administration of medicines.
- Statement on parental responsibilities in respect of child's medical needs.
- Need for prior written agreement from parents for any medicines to be given to a child. No child under 16 will be given any medicines without their parent's written consent.
- The circumstance in which children may take any non-prescription medicines.
- Policy on assisting children with complex medical needs.
- Policy on children carrying and taking their medicines themselves.
- Staff training in dealing with medical needs.
- Record keeping.
- Safe storage of medicines.
- Access to school's emergency procedures.

- Risk assessment and management procedures.

### **Medication**

Parents should, wherever possible, administer or supervise the self-administration of medication to their children. This may be affected by the child going home during the lunch break or by the parent visiting the school. However, this might not be practicable and in such cases, parents may make a request for medication to be administered to the child at the school on their behalf.

### **Prescribed Medication**

It is helpful, where possible, that medication be prescribed in dose frequencies which enable it to be taken outside of school hours e.g. medicines that need to be taken 3 times a day can be managed at home. Parents should be encouraged to ask the prescriber about this. Such medicines should only be taken into schools where it would be detrimental to a child's health if it were not administered during the day. Medicines should always be provided in the original packaging as dispensed by a pharmacist and include the prescriber's instructions for administration. The school will not accept medicines that have been taken out of the packaging nor make changes to dosages on parental instruction. In all cases it is necessary to check:

- Name of child
- Name of medicine
- Dosage
- Written instructions provided by prescriber
- Expiry date

A written record should be kept of this check with the medication.

Large volumes of medication should not be stored. Prescribed medication kept at the school should be under suitable locked storage and arrangements made for it to be readily accessible when required. Children should know where their medicines are stored and who holds the key.

All emergency medicines (i.e. asthma inhalers, EpiPens etc.) should be readily available in a secure location but not locked away.

If the medication must be kept refrigerated proper arrangements should be implemented to ensure that it is both secure and available whenever required.

Under no circumstances should medicines be kept in first-aid boxes.

### **Long term medical needs**

It is important for the school to have sufficient information regarding the medical

condition of any pupil with long term medical needs. In case of complex or significant needs the school will draw up a health care plan for such pupils, involving the parents and the relevant health professionals. Any specific training required by staff on the administration of medication will be provided by the school nurse or other suitably qualified persons. Staff will not administer such medicines until they have been trained and advised to do so.

### **Controlled Drugs**

Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act. Therefore, it is imperative that controlled drugs are strictly managed between the school and parents.

Ideally controlled drugs are only brought in on a daily basis by parents, but certainly no more than a week's supply, and the amount of medication handed over to the school should always be recorded. Controlled drugs should be stored in a locked non-portable container, such as a safe, and only specific named staff allowed access to it. Each time the drug is administered it must be recorded, including if the child refused to take it.

The person administering the controlled drug should monitor that the drug has been taken. Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

As with all medicines any unused medication should be recorded as being returned back to the parent when no longer required. If this is not possible it should be returned to the dispensing pharmacist. It should not be thrown away.

### **Non-Prescription Medication**

If a pupil suffers regularly from acute pain, such as migraine, the parents should authorise and supply appropriate painkillers for their child's use, with written instructions about when the child should take the medication and frequency of the dosage. A member of staff should notify the parents that their child has requested medication and supervise the pupil taking the medication if the parents have agreed to it being taken.

The school will keep a supply of paracetamol in the medical cupboard. If it is deemed necessary and appropriate for a student to be given paracetamol, a member of staff will ring parents to gain verbal consent and a written record will be kept.

### **Record keeping**

Parents/guardians should provide written details of medicines their child needs to take at school. Although there is no legal requirement for schools to keep records of medicines given to pupils, it is good practice to do so. The school should ensure that staff complete and sign a record each time they give medicine to a child.

### **Self-Management**

It is important that as children get older they should be encouraged to take responsibility and manage their own medication. This should be clearly set out in the child's health care plan in agreement with the parents, bearing in mind the safety of other pupils.

Staff should be aware of the need for asthmatics to carry medication with them (or for staff to take appropriate action) when, for example, participating in outdoor physical education or in the event of an evacuation or fire drill. Children should know where their medicines are stored and who holds the key.

### **Refusing medication**

If a child refuses to take medication staff should not force them to do so, but note this in the records and inform parents of the refusal. If necessary the school should call the emergency services.

### **Off site visits**

It is good practice for schools to encourage pupils with medical needs to participate in off site visits. All staff supervising visits should be aware of any medical needs and relevant emergency procedures. Where necessary individual risk assessments should be conducted. It should be ensured that a member of staff who is trained to administer any specific medication (e.g. EpiPens) accompanies the pupil and that the appropriate medication is taken on the visit. Medicines should be kept in their original packaging (an envelope is acceptable for a single dose - provided this is very clearly labelled)

### **Sporting Activities**

Most pupils with medical conditions can participate in PE and extra-curricular sport. Any restrictions on a child's ability to participate in PE should be recorded in their health care plan. If restrictions apply, individual risk assessments should be conducted. Some pupils may need to take precautionary measures before or during exercise and may need to be allowed immediate access to their medicines. (e.g. asthma inhalers). Staff supervising sporting activities should be aware of all relevant medical conditions and emergency procedures.

### **Hygiene and Infection**

Control All staff should follow the Education health and safety guidance on the prevention of contamination from blood borne viruses (see First Aid Policy).