St Anne’s RCP School
Medicine Policy 2019

Working, learning, playing and caring together in God’s love.
ST. ANNE’S R.C. PRIMARY SCHOOL

Managing Medicines Policy

At St Anne’s RC Primary school we work together, learn together and care together in God’s love to enable each unique person to achieve their full potential. We aim to meet the needs of every child through a challenging, enriched curriculum, where everyone feels valued and respected. Providing a safe, secure and stimulating learning environment through an inclusive partnership between children, parents, our school, our church and the wider community

1. INTRODUCTION

This policy sets out the steps that St Anne’s R.C Primary school will take to ensure full access to learning for all children who have medical needs when attending school.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.

However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

All staff in schools and early year’s settings have a duty to maintain professional standards of care and to ensure that children are safe. Whilst there is no legal duty requiring staff to administer medication or to supervise a child when taking medicines, it is good practice. It is expected good practice that schools will review each individual case and administer medicines in order to meet the all-round needs of the child and to enable them to attend school.

Under the Disability Discrimination Act (DDA) 2010, schools are under a duty to make reasonable adjustments or disabled children, including those with medical needs. All provision should be planned with the intention of ensuring access to their full educational entitlement.

2. Managing Prescription medicines that need to be taken during the school day

2.1 Parents/carers must provide full written information about their child’s medical needs.

2.2 Parents/carers must provide written information of the responsible adult who will collect and deliver the medication to school – Mrs Shaikh and Mrs Peers School Administrators.

2.3 Short-term prescription medication must only be brought to school if it is detrimental to the child’s health not to have the medicine during the school day. Where possible it is the responsibility of parents/carers to arrange the timing so that it is not necessary for it be administered during the school day.

2.4 The school will only administer medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.

2.5 Medicines must always be provided in the original container as dispensed by a Pharmacist and should include the prescriber’s instructions for administration.
In all cases this should include:

- Name of child
- Name of medicine
- Dose
- Method of administration
- Any side effects
- Expiry date
- Medicine spoon/syringe

2.6 The school will not accept medicines taken out of the container as originally dispensed, nor make changes to prescribed dosage.

2.7 All medicine must be collected by the parent/carer or nominated responsible adult when no longer required. It is the responsibility of the parents/cares to dispose of the medicine in a safe manner.

2.8 The school will not administer non prescription medicines (e.g. Calpol or Piriton) without prior written permission from the parent/carer or parents/carers must come into school.

At St. Anne’s this means that there will be open and honest communication between school and home and an expectation that parents will fully disclose all information and keep this up to date.

3 Pupil Information

3.1 Parents/carers will be required to give the following information about their child’s long term medical needs with a responsibility to update it at the ‘start of each school year’;

- Details of pupil’s medical needs
- Medication, including any side effects
- Allergies
- Name of GP/Consultants
- Special requirements e.g. dietary needs, pre activity precautions
- What to do and who to contact in an emergency
- Cultural and religious views regarding medical care

At St. Anne’s this means that parents will keep school informed of any changes in their child’s medical history, particularly in regards to the above information and this information will be kept secure.

4 Educational Visits and Physical Education

4.1 To ensure that as far as possible, all children have access to all activities and areas of the school life, a thorough risk assessment will be undertaken to ensure the safety of all children and staff. No decision about a child with medical needs attending/not attending a school trip will be taken without prior consultation with the parents/carers.
4.2 Taking part in sports, games and activities is an essential part of school life for all pupils. The school ensures that as far as possible all staff know which children in their class have a long term medical condition and all PE teachers are aware of which pupils have asthma.

At St. Anne’s this means that staff will endeavour to remove all barriers to all children attending educational visits. Through an Educational Visit Officer, a risk assessment will be completed and a first aider will attend every educational visit.

5 The roles and responsibilities of staff managing medicines, and for administering or supervising the administration of medicines.

5.1 The administration of medicines will include arrangements for storage, record keeping and supervision. Wherever possible the child will self-administer his/her medicine.

5.2 Close co-operation between schools, parents/carers, health professionals and other agencies will help provide a suitably supportive environment for children with medical needs.

5.3 Where pupils have incurred injuries which restrict their mobility for example as a result of fractures, schools should consider what reasonable adjustments they need to make to enable them to participate fully in all areas of school life, including educational visits and sporting activities.

5.4 It is the duty of the Headteacher to ensure that all staff is informed of the arrangements that have been made to administer medicine to a child. This includes sharing information with temporary staff.

5.5 If possible medicine should be self-administered under supervision.

5.6 If a child refuses to take medicine, staff will not force him/her to do so. Staff will record the incident and inform the parents/carer on the same day. If refusal to take the medicine results in an emergency, the school’s normal emergency procedures will be followed.

5.7 The Headteacher, in consultation with the Governing body, staff, parents/carers, health professionals and the local authority, is responsible for deciding whether the school can support a child to attend school by assisting with their medical needs. The Headteacher is responsible for;

- Implementing the policy on a daily basis
- ensuring that the procedures are understood and implemented
- ensuring appropriate training is provided
- making sure there is effective communication with parents/carers, children, school staff and all relevant health professionals concerning the pupil’s health needs.
- Overall responsibility for the development of individual healthcare plans.
At St. Anne's this means that of all staff whose care that child is under will be informed of the arrangements for administering medicine. In school office there is a lockable cabinet in which medicines are kept. The key is accessible in an emergency.

6. Parents/Carers responsibilities in respect of their child's medical needs.

6.1 It is the responsibility of the parents/carer to provide the Headteacher with sufficient **written** information about their child's medical needs if treatment or special care is needed.

6.2 The Headteacher will seek the agreement of parents/carers before passing on information about their child’s health to other staff.

6.3 If the parents/carers have difficulty understanding or supporting their child’s medical condition themselves, they will be encouraged to seek further guidance from their CP or the school nurse.

6.4 It requires only one parent/carer to agree to or request that medicines are administered to a child. It is likely that this will be the parent/carer with whom the school has regular day to day contact.

6.5 to provide school with sufficient and up-to-date information about their child’s medical needs.

6.6 parents should ensure that they provide school with the medication and equipment needed to care for their child’s medical needs. They must also make themselves or a nominated adult contactable at all times.

6.7 after discussion with a child’s parents, those pupils who are competent should be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected in their individual healthcare plan.

At St. Anne’s this means that we will not administer any medicine including that on prescription without prior written permission from the parent/guardian. Staff will be asked to consent as to whether they would be happy to administer medicine and good practice will be followed.

7. Assisting children with long-term or complex medical needs.

7.1 Where appropriate, an Individual Health Care Plan (IHCP) will be drawn up and reviewed annually in consultation with the school, parents/carers and health professionals. The Health Care Plan will aim to support school attendance wherever possible outlining the child’s needs and the level of support required in school. Where a child has a long term condition a care plan must be completed. For children with asthma type symptoms the asthma care plan may be used if preferable. The asthma care plan can be photocopied and one copy kept with the child’s inhaler and the other in the administration office.

7.2 No invasive procedures will be implemented e.g. catheterisation without appropriate training from the Health Service. Cases will be reviewed on an individual basis and all such treatments will be recorded.

7.2.1 During intimate medical procedures, in line with his/her Personal Health Care Plan, two members of staff will be present, one of the same sex as the child.
At St. Anne’s this means a child with a long term medical need will be provided with the support of the parent/guardian and an Individual Health Care Plan. Staff involved with the personal care of pupils will show respect towards their medical condition and ensure privacy at all times.

8. Support staff and training in dealing with medical needs.

8.1 Training and advice will be provided by health professionals for staff involved in the administration of medicines. Training for all staff will be provided on a range of medical needs including and resultant learning needs, as and when appropriate. The school ensures that all pupils are aware and have an understanding of asthma.

At St. Anne’s this means that staff will be provided with the opportunity to undertake CPD which will allow them the knowledge to support children with medical needs such as a Paediatric First Aid or哮喘 awareness.

9. Sickness and Vomiting in school

When a child is sick during school the following will be considered:

- age of the child
- Whether the child is displaying any other symptoms such as temperature.
- Whether the incident of sickness was due to indigestion, a bang on the head or the beginning of a stomach bug.
- Speak to the parents/guardian regarding their child’s health and come to an agreement regarding the next steps.

At St. Anne’s this means that parents/guardians should contact the school to discuss their child’s individual period of sickness. If a child has diarrhoea and vomiting they should remain off school for 48 hours.

10. Dealing with minor injuries

10.1 Injuries must be dealt with as quickly and calmly as possible and the child reassured whilst the treatment takes place.

When dealing with a cut or graze the following should be adhered to:

- Use the disposable gloves provided in the first aid box
- clean the wound under running tap water but do not use antiseptic because it may damage the tissue and slow down healing
- pat the area dry with a clean towel
- apply a sterile, adhesive dressing, such as a plaster

Ensure that gloves are worn at all time and then all first aid waste e.g. rubber gloves etc, must be placed inside a bag and placed in the usual refuse bin for disposal.

At St. Anne’s this means that staff will following the above procedure when dealing with a minor injury or contact a trained first aider should they require further advice.
11. Record Keeping.

11.1 Staff will complete and sign a record sheet each time medication is given to a child and these will be kept in the administration office. The sheets will record the following:

- Name of the pupil
- Date and time of administration
- Who supervised the administration
- Name of the medication
- Dosage
- If medicine has been altered for administration (e.g. crushing tablets) and authority for doing so.
- The child will be issued with a medication band or sticker to inform the class teacher when they need to go to the office for their medication.

At St. Anne’s this means that up to date records will be kept on all medicines administered during the school day, over the academic year. Parents/guardians will be expected to update the information requested above at the beginning of each new term.

12. Safe storage of medicines

12.1 All medicines will be kept in a locked cabinet in the school administration office, although immediate access to reliever inhalers is essential. Class teachers will store children’s inhalers which must be labelled with the pupil’s name within the unlocked classroom. Permission from parents/carers will need to be obtained prior to this. All medicine will be logged onto the school’s file.

At St. Anne’s this means that all medicines will be kept in a locked refrigerated cabinet in the school office.

13. Disposal of Medicines.

13.1 Staff will not dispose of medicines. The parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. Return of such medicines to parents/carers will be documented.

13.2 The Parents/carers are responsible for collecting medicines held at the end of each term.

At St. Anne’s this means that parents/guardians are responsible for the disposal of medicines, therefore these will be returned at the end of each term or when the expiry date has passed, whichever comes first.

14. Access to the school’s emergency procedures

14.1 The Head teacher will ensure that all members of staff are aware of the school’s planned emergency procedures in the event of medical needs. In conjunction with the school’s emergency procedures in the event of an asthma attack the school will follow clear guidelines on “What to do in an asthma attack” which is outlined in Appendix 1A. These guidelines will be available to all staff members and displayed in different areas around the school.
14.2. All children with asthma should have an easily accessible inhaler in school in line with their asthma care plan. Additionally, to address the possibility of a child’s own reliever being unavailable, parents/carers should provide the school with a spare inhaler labelled with the child's name. This should be kept by the school in a secure, readily accessible place. Where a pupil is having an asthma attack the pupil should use their own reliever inhaler or the spare kept by the school.

14.3 Reliever inhalers are prescribed for use by an individual child only. As such they should not be used by anyone else. It is recognised however that there may be emergency situations where a child experiences severe asthma symptoms and his/her reliever (or spare) is not immediately to hand. School staff have a duty of care towards a pupil to act like any reasonably prudent parent. In accordance with the British Guideline on the Management of Asthma reliever inhalers are generally accepted to be a very safe form of medicine. In an emergency situation it is therefore recognised that using another child’s reliever inhaler may be preferable to not giving any immediate medical assistance.

It is important that schools agree with parents of children with asthma how to recognise when their child's asthma gets worse and what action will be taken. School should ask the parent/guardian to sign to permit this practice in the case of an emergency in their child's asthma care plan.

15. Unacceptable Practice

We will use our discretion and judge each case on its merits with reference to the child’s individual healthcare plan, the following is not acceptable practice:

We will not:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged).
- send children with medical conditions home frequently or prevent them from staying for normal school activities; including lunch, unless this is specified in their individual healthcare plan.
- If the child becomes ill, send them to the school office unaccompanied or with someone unsuitable.
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need in order to manage their medical condition effectively.
- penalise children for their attendance record if their absences are related to their medical condition.
• prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child.

• require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is not meeting these needs.

At St. Anne’s this means that all staff under the guidance of Senior Management will endeavour to ensure that all practice is acceptable bearing in mind the above points.

16. Dealing with concerns and complaints

If parents, pupils or members of the public have concerns they should:

• Discuss their concerns with your child’s classteacher the member of staff most directly involved and, if not satisfied;

• Discuss their concerns with the Deputy / Assistant Headteacher or another member of the Senior Leadership team and, if not satisfied;

We expect the majority of concerns will be resolved in this way however if not the following formal procedure will be followed

• Discuss their concerns with the Headteacher.

Only where all these avenues have been tried and found unsatisfactory should the complainant take a complaint in writing to the Chair of Governors or Clerk to the Governing Body.

At St. Anne’s this means that all complaints will be dealt with in a professional and timely manner.

Staff authorised to dispense medicine – Mrs Shaikh, Mrs Peers and Mrs Orrell.

Agreed and reviewed at the Full Governing Body Meeting 12th March 2019. To be reviewed every three years.