

ST MARY'S COLLEGE

ADMINISTRATION OF MEDICINES POLICY

Policy Approved March 2010

Our Mission

“Love God with all your heart, with all your soul, with all your mind and with all your strength and love your neighbour as you love yourself” (Mk 12:30-31)

St. Mary's R.C. Sports College exists to help parents and carers to educate young people spiritually, morally, physically and academically as well as possible.

We aim to be a truly Christian community, where our relationships are built on encouragement, concern, respect, forgiveness and reconciliation.

Our religious life is rooted in the faith, practice and moral teaching of the Roman Catholic Church.

Each person in our community is specially valued and has an important part to play in making sure that we live out our mission.

SUPPORTING STUDENTS WITH MEDICAL NEEDS ADMINISTRATION OF MEDICINES POLICY AND PROCEDURES

INTRODUCTION

References

- 1 This policy should be read in conjunction with the LA's guidance on the administration of medicines and DfEE/DH Circular 14/96 Supporting Students with Medical Needs in School. The school also has an Intimate Care Policy covering staff administering to the medical needs of students requiring intimate care.

Students with Medical Needs

2. Most students will at some time have a medical condition that may affect their participation in school activities. For many this will be short-term, e.g. finishing a course of medication. Other students have medical conditions that, if not properly managed, could limit their access to education. Such students are regarded as having medical needs. 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. School staff may, however, need to take extra care in supervising some activities to make sure that these students, and others, are not put at risk.

Support for Students with Medical Needs

4. Parents have prime responsibility for their child's health and should provide the school with information about their child's medical condition. Parents, and the student if s/he is mature enough, should give details in conjunction with their child's GP or paediatrician as appropriate.
5. There is no legal requirement for school staff to administer medication and where staff do administer medication or attend to medical needs this is done voluntarily. The school will endeavour to meet the medical needs of students as far as possible.

Medication in Schools: Who is Responsible?

6. It is important that responsibility for students' safety is clearly defined and that each person involved with students with medical needs is aware of what is expected of them. Close co-operation between the school, parents, health professionals and other agencies will help provide a suitably supportive environment for students with medical needs.

Parents

7. Parents, as defined in the Education Act 1996, are a child's main carers. They are responsible for making sure that their child is well enough to attend school.
8. Parents should provide the Special Educational Needs Co-ordinator (SENCO) with sufficient information about their child's medical condition and treatment or special care needed at school. This information may be shared with the Student Support Services Officer (SSSO) who will usually keep all medication for administering. Sharing information is important if staff and parents are to ensure the best care for a student.

9. Parents should keep children at home when they are acutely unwell.

School Insurance

10. The City Council's Public Liability Insurance, held by the school, provides cover for staff acting within the scope of their employment, including administering medicines in accordance with the guidance set out in this document. In the event of legal action over an allegation of negligence, the employer, being the School Governing Body, rather than the employee is likely to be held responsible.
11. It is the responsibility of the head teacher to ensure the staff follow this policy and the correct procedures. Keeping accurate records in the school is helpful in such cases. Teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency. If staff follow the school's documented procedures they will normally be fully covered by the school's public liability insurance should a parent make a complaint.
12. The Governing Body is responsible for making sure that willing staff have appropriate training to support students with medical needs. Health authorities have the discretion to make resources available for any necessary training. The head teacher needs to be satisfied that any training to staff involved in administering medication has given staff sufficient understanding, confidence and expertise. A health care professional should confirm proficiency in medical procedures.

The SENCO Responsibility for students with long term and complex medical needs.

13. The SENCO is responsible for implementing the governing body's policy in practice for students with long term or complex medical needs and for developing detailed procedures for those students. When teachers or support staff volunteer to give students help with their medical needs, the SENCO should agree to their doing this, and must ensure that teachers and support staff receive proper support and training where necessary. The SENCO should make sure that all parents of students with long term and complex medical needs are aware of the school's policy and procedures. A copy of the Policy will be held on the school's intranet.
14. For a child with medical needs, the SENCO will agree with the parents exactly what support the school can provide. Where there is concern about whether the school can meet a student's needs, or where the parents' expectations appear unreasonable, the SENCO will seek advice from the school nurse or doctor, the child's GP or other medical advisers and, if appropriate, the City Council.

The Director of Learning Services responsibility for Student Support Service Officers

15. The Director of Learning Services, supported by the office manager who manages the Student Support Service on a day to day basis, is responsible for ensuring that the Student Support Services Officer and other trained support staff involved in administering medication, correctly implement the school's policy and procedures. Day to day decisions about administering medication will normally fall to the office manager and SSSO's as all medications are held in the Student Support Services office and administered by the SSSO's, with the exception of medicines agreed to be held by and be the responsibility of students.

16 Publicising the Policy

The Director of Learning Services will ensure that all school staff are aware of the policy and a copy of the policy will be kept on the school intranet under Policies. The Policy will also be available to parents from the school internet site, and a hard copy may be obtained from the Student Services Office if requested.

Teachers and Other School Staff

17. Some school staff are naturally concerned about their ability to support a student with a medical condition, particularly if it is potentially life threatening. Teachers who have students with medical needs in their class should understand the nature of the condition, and when and where the student may need extra attention. The student's parents and health professionals should provide this information. Staff should be aware of the likelihood of an emergency arising and what action to take if one occurs. Back up cover should be arranged for when the member of staff responsible is absent or unavailable. At different times of the school day other staff may be responsible for students (e.g. lunchtime supervisors). It is important that they are also provided with training and advice [Appendix 8].
18. Teachers' conditions of employment do not include giving medication or supervising a student taking it, although staff may volunteer to do this. Any member of staff who agrees to accept responsibility for administering prescribed medication to a student should have proper training and guidance. S/he should also be aware of possible side effects of the medication and what to do if they occur. The type of training necessary will depend on the individual case.

Health Service

19. GPs are part of primary health care teams. Most parents will register their child with a GP. A GP has a duty of confidentiality to patients. Any exchange of information between GPs and the school about a child's medical condition will be with the consent of the child (if s/he has the capacity) or the parent. In some cases parents may agree for GPs to advise teachers directly about a child's condition, in others GPs may do so by liaising with the School Health Service.

POLICY AND PROCEDURE FOR SUPPORTING STUDENTS WITH MEDICAL NEEDS

20. Parents are encouraged to provide the school with full information about their child's medical needs. Staff noticing deterioration in a student's health over time should inform the SENCO, who will inform the parents and the Student Support Service. This deterioration might be apparent through attendance and/or performance.

Short Term Medical Needs

21. Many students will need to take medication (or be given it) at school at some time in their school life. Mostly this will be for a short period only, e.g. to finish a course of antibiotics or apply a lotion. To allow students to do this will minimise the time they

need to be off of school. Medication should only be taken to school when absolutely essential. It is helpful if, where possible, medication can be prescribed in dose frequencies that enable it to be taken outside school hours. Parents should be encouraged to ask the prescribing doctor or dentist about this.

Non-Prescription Medication

22. Students sometimes ask for pain killers (analgesics) at school, including aspirin and Paracetamol. School staff should generally not give non-prescribed medication to students as they may not know whether the student has taken a previous dose, or whether the medication may react with other medication being taken. A child under 12 must never be given aspirin, unless prescribed by a doctor. If a student suffers regularly from acute pain, such as migraine, the parents should authorise and supply appropriate pain killers for their child's use, with written instructions about when the child should take the medication. A member of staff should supervise the student taking the medication and notify the parents, in writing, on the day painkillers are taken.
23. The school will write to the parents of all students, asking them to complete a consent form [Appendix 1] indicating approval/non-approval for pain relief to be given during school hours. Such medication will not be administered without prior written permission and verbal approval by a registered home contact of over 18 years of age. The school will only offer Paracetamol tablets BP 500mg, in accordance with the manufacturers recommended dose. A letter confirming the medication and time administered will be given to the student to take home (to avoid exceeding the daily dose) [Appendix 2].

Long Term Medical Needs

24. It is important for the school to have sufficient information about the medical condition of any student with long term medical needs. If a student's medical needs are inadequately supported this can have a significant impact on a student's academic attainments and/or lead to emotional and behavioural problems. The school therefore needs to know about any medical needs before a child starts school, or when a student develops a condition. For students who attend hospital appointments on a regular basis special arrangements may also be necessary. It is often helpful for the school to draw up a written health care plan for such students, involving the parents and relevant health professionals [Appendix 3]..
25. No student under 16 will be given medication without his or her parent's written consent [Appendix 4]. Any member of staff giving medicine to a student will check:
 - the student's name;
 - written instructions provided by parents or doctor;
 - prescribed dose;
 - expiry date.
26. If in doubt about any of the procedures the member of staff should check with the parents or a health professional before taking further action. It is good practice for staff to complete and sign record cards each time they give medication to a student, and a separate record of medication provided to each student will be kept by the Student

Support Service along with the corresponding medication. In some circumstances, it is good practice to have the dosage and administration witnessed by a second adult.

Self Management

27. It is good practice to allow students who can be trusted to do so to manage their own medication from a relatively early age depending upon their degree of maturity and school encourages this. If students can take their medicine themselves, staff may only need to supervise this. Students may carry and administer their own medication, subject to parental consent [Appendix 7].

Refusing Medication

28. If students refuse to take medication, school staff will not force them to do so. The school will inform the child's parents as a matter of urgency. If necessary, the school will call the emergency services.

Record Keeping

29. Parents are responsible for supplying information about medicines that their child needs to take at school, and for letting the school know of any changes to the prescription or the support needed. The parent or doctor should provide written details including:
- name of medication;
 - dose;
 - method of administration;
 - time and frequency of administration;
 - other treatment;
 - any side effects.
30. It can be helpful to give parents a form [Appendix 4] to record the details of medication in a standard format. The child's GP may be willing to provide confirmation of the medication.
31. Although there is no legal requirement for schools to keep records of medicines given to students, and the staff involved, it is good practice to do so. Records offer protection to staff and proof that they have followed agreed procedures. The school keeps a separate record for each pupil of medication administered to that pupil [Appendix 6].

School Trips

32. Students with medical needs will be encouraged to participate in schools trips, whenever safety permits. Sometimes the school may need to take additional safety measures for outside visits. Arrangements for taking any necessary medication will also need to be taken into consideration. Staff supervising excursions must be aware of any medical needs and relevant emergency procedures. Sometimes an additional supervisor or parent might accompany a particular student. If staff are concerned about whether they

can provide for a student's safety, or the safety of other students on a trip, they will seek medical advice from the School Health Service or the child's GP.

Sporting Activities

33. Most students with medical conditions can participate in extra-curricular sport or in the PE curriculum which is sufficiently flexible for all students to follow in way appropriate to their own abilities. For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a student's ability to participate in PE should be included in their individual health care plan.
34. Some students may need to take precautionary measures before or during exercise, and/or need to be allowed immediate access to their medication if necessary. Teachers supervising sporting activities should be aware of relevant medical conditions and emergency procedures.

Dealing with Medicines Safely

Safety Management

35. Some medicines may be harmful to anyone for whom they are not prescribed. Where a school agrees to administer this type of medicine the school has a duty to ensure that the risks to the health of others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations 1994 (COSHH).

Storing Medication

36. The school will not store large volumes of medication. The Student Support Services Office will ask the parent or student to bring in the required dose each day. When the school stores medicines in the Student Services Office, staff will ensure that the supplied container is labelled with the name of the student, the name and dose of the drug and the frequency of administration. Where a student needs two or more prescribed medicines, each should be in a separate container. The Office Manager is responsible for making sure that medicines are stored safely. Students should know where their own medication is stored and who holds the key. A few medicines, such as asthma inhalers, must be readily available to students and must not be locked away. The school allows students to carry their own inhalers; other medicines are generally kept in a secure place not accessible to students.
37. If the school locks away medication that a student might need in an emergency, all staff will be notified where to obtain keys to the medicine cabinet. Some medicines need to be refrigerated. Medicines can be kept in a refrigerator containing food but should be in an airtight container and clearly labelled. The school restricts access to a refrigerator holding medicines.

Access to Medication

38. Students must have access to their medicine when required. It is also important, however, to ensure that medicines are only accessible to those for whom they are prescribed.

Disposal of Medicines

39. School staff may safely dispose of medicines that are out of date or not collected by parents when their child leaves the school. Parents should collect medicines held at school at the end of each term.

Hygiene/Infection Control

40. All staff should be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

Emergency Procedures

41. All staff should know how to call the emergency services. All staff should also know who is responsible for carrying out emergency procedures in the event of need. Generally the receptionist on duty should call the ambulance, and their internal telephone number is 100. When calling an ambulance the school telephone number to be given is 851136.

The office manager will request a member of the office staff to telephone the parent of any pupil being taken to hospital. The parent should either come to the school to accompany their child in the ambulance or arrange to meet the child at the hospital. If the child cannot be met by a parent/carer at the hospital then a member of staff will accompany the child in the ambulance and remain until the student's parent arrives. Generally staff should not take students to hospital in their own car. In an emergency, however, it may be the best course of action. The member of staff should ideally be accompanied by another adult and have vehicle insurance that covers business use.

Drawing up a Health Care Plan for a Student with Medical Needs

Purpose of a Health Care Plan

42. The main purpose of an individual health care plan for a student with medical needs is to identify the level of support that is needed at school. A written agreement with parents clarifies for staff, parents and the student the help that the school can provide and receive. The school will agree with parents how often they should jointly review the health care plan. It is sensible to do this at least once a year. The school will judge each student's needs individually as children and young people vary in their ability to cope with poor health or a particular medical condition. The school's medication policy must, however, be applied uniformly. The SENCO will not make value judgements about the type of medication prescribed by a registered medical or dental practitioner.
43. Each plan will contain different levels of detail according to the needs of the individual student. The school uses a standard form [Appendix 3]. Those who may need to contribute to a health care plan are:
- the SENCO;
 - the parent of guardian;
 - the child (if sufficiently mature);
 - class teacher (primary schools)/form tutor/Head of Year (secondary schools);

- LSA;
- school staff who have agreed to administer medication or be trained in emergency procedures;
- the child's GP or other health care professionals (depending on the level of support the child needs).

Co-ordinating Information

42. The SENCO is responsible for co-ordinating and disseminating information on an individual student with medical needs on a need to know basis. The SENCO is the first contact for parents and staff and liaises with external agencies.

Information for Staff and Others

43. Staff who may need to deal with an emergency need to know about a student's medical needs. The SENCO will ensure that supply teachers know about any medical needs. When a secondary school arranges work experience, the SENCO will ensure that the placement is suitable for a student with a particular medical condition. Students should be encouraged to share relevant medical information with employers.

Staff Training

44. A health care plan may reveal the need for some school staff to have further information about a medical condition or specific training in administering a particular type of medication or in dealing with emergencies. School staff should not give medication without appropriate training from health professionals. If school staff volunteer to assist a student with medical needs, the school will arrange appropriate training in conjunction with the Health Authority, who will be able to advise on further training needs.

Confidentiality

45. All school staff should treat medical information confidentially. The SENCO should agree with the student (where s/he has the capacity) or otherwise the parent, who else should have access to records and other information about a student. If information is withheld from staff they should not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

Intimate or Invasive Treatment

46. The school has a separate policy for Intimate Care provided to students.

Last update: January 2010

GB approved: To be taken to the Finance Committee, 4th March 2010

Next review: Autumn 2013

ST MARY'S COLLEGE

APPROVAL FOR SCHOOL TO ADMINISTER NON-PRESCRIPTION MEDICINE

The school will not give your child non-prescription medication (painkillers) unless you complete and sign this form.

DETAILS OF STUDENT

Surname

Forename(s)

Address M/F:

..... Date of Birth:

..... Form:

MEDICATION

Paracetamol BP 500mg 1 tablet or 2 tablets (please circle)

CONTACT DETAILS

Name Date

Relationship to Student

.....

Address

.....

- 1. I accept that this is a service which the school is not obliged to undertake.
2. In the event that the school cannot make contact to seek verbal approval, I do/do not wish medication to be administered.
3. I understand that the governing body and school staff cannot accept responsibility for any adverse reaction my child may suffer as a consequence of being administered non-prescription medication.

Date Signature

.....

Relationship to student

.....

{date}

{name}

{address}

Dear {name}

MEDICATION

I should like to confirm that your {son/daughter}, {forename} took {one/two} Paracetamol tablets (Paracetamol BP 500mg) ortoday, at {time}. This was authorised by {name}, following a telephone conversation.

{Forename} must not take any other product containing Paracetamol within four hours of the above time.

I advise you to monitor {forename}'s condition carefully and seek further medical advice if you are concerned.

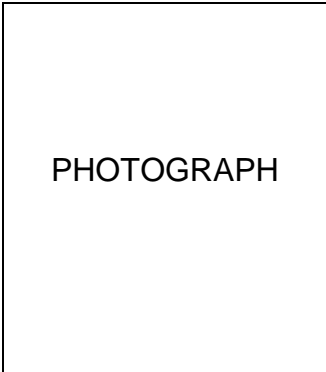
Yours sincerely

Student Services Officer

ST MARY'S COLLEGE

HEALTHCARE PLAN FOR A STUDENT WITH MEDICAL NEEDS

Name
Date of Birth
Form group
Date
Review Date



Family contact 1

Family contact 2

Name
Phone No. (work)
(home)
Relationship

Name
Phone No. (work)
(home)
Relationship

Clinic/Hospital contact

GP

Name
Phone No.

Name
Phone No.

Describe condition and give details of student's individual symptoms:

.....
.....
.....
.....

Daily care requirements (e.g. before sport/at lunchtime)

.....
.....
.....

.....
.....

Describe what constitutes an emergency for the student, and the action to take if this occurs:

.....
.....
.....
.....
.....

Follow up care:

.....
.....
.....
.....

Who is responsible in an emergency (state if different on off-site activities):

.....
.....
.....
.....
.....

Form copies to:

.....
.....
.....

ST MARY'S COLLEGE

REQUEST FOR SCHOOL TO ADMINISTER MEDICATION

The school will not give your child medication unless you complete and sign this form, and the Office Manager or SENCO has agreed that school staff can administer the medicine.

DETAILS OF STUDENT

Surname

Forename(s)

Address M/F:

..... Date of Birth:

..... Form:

Condition or illness:

MEDICATION

Name/Type of Medication (as described on the container)

For how long will your child take this medication?

Date dispensed

Full Directions for use:

Dosage and method

Timing

Special Precautions

Side Effects

Self Administration

Procedures to take in an Emergency

CONTACT DETAILS

Name Date

Relationship to Student

.....

Address

.....

4. I understand I must deliver the medicine personally to (agreed member of staff) and accept that this is a service which the school is not obliged to undertake.

5. I understand that the LEA, governing body and school staff cannot accept responsibility for any adverse reaction my child may suffer as a consequence of being administered the prescribed medication at my request.

Date Signature

.....

Relationship to student

.....

Not Applicable.

ST MARY'S COLLEGE

REQUEST FOR STUDENT TO CARRY HIS/HER MEDICATION

This form must be completed by parent

Student's Name

Form

Address

.....

.....

Condition of Illness

.....

.....

Name of Medicine

.....

.....

CONTACT INFORMATION

Name

Daytime Telephone No.

Relationship to Child:

I would like my son/daughter to keep his/her medication on him/her for use as necessary.

Signed: Date:

Relationship to Child

