



## **MEDICINE POLICY**

**January 2018**

**Signed:**  
**Headteacher: Alison Gibson**

**Signed:**  
**On behalf of the Governing Body**

**Proposed Review Date: January 2019**

# MEDICINE POLICY

## MISSION STATEMENT

“Learning, growing, achieving and caring together within our Christian family”.

The Aims of our School are:

- To help everyone realise their full potential
- To promote spiritual, moral and social growth
- To understand the fast changing, diverse world in which we live
- To encourage intellectual and physical development
- To learn about and live our Christian Faith
- To promote mutual respect and responsibility

And to wholeheartedly play our part, whether that part is to learn, to lead, to teach or to support others

## OVERVIEW

Where children have been prescribed medications by a doctor or other appropriately qualified health care professionals **or require over the counter pain relief medicine (current legal guidance allows this)**, it may be necessary for them to continue with the treatment in school. Our policy is to ensure that children who need medication during school hours have their special needs met in such a way that they retain the fullest access to the life and work of the school.

This policy sets out how the school will establish safe procedures and should be read in conjunction with ‘Supporting Children with medical conditions in school’ policy.

### **School aims related to this policy**

- To see education as a partnership between home and school

### **Policy aims**

- To provide a structured system for the safe administration of medication to meet children’s needs.

### **Rationale**

Whilst there is no legal duty requiring school staff to administer medicine, teachers, and other school staff, are charged with the duty of behaving as a responsible parent to ensure the health and safety of pupils on school premises. This duty might, in exceptional circumstances extend to include the administration of prescribed medication and /or taking emergency action/ or supervising over the counter pain relief. The duty extends to teachers and other staff leading or supervising off site activities.

## **Responsibility - Parents/guardians**

Parents and guardians have prime responsibility for safeguarding their child's health and administering medication. They have responsibility for keeping the school informed as to the state of their child's health and medication requirements in writing.

## **Headteacher**

The headteacher has responsibility for:

- deciding if the school can assist in the administration of medication. No member of staff should agree to administer medicine without first consulting with the headteacher. Decisions made by the headteacher in regard to the administration of medicine will be based on the need to encourage full attendance and the child's full participation in school life
- the actions of staff in regard to the administration of medication.
- day to day responsibility for the safe management of medication in school. This duty derives from COSHH Regulations 2002 regarding control of hazardous substances.
- keeping staff informed about the medical needs of pupils.
- ensuring that staff who administer medication have the appropriate information and/or training.
- the implementation of the policy and its review for continued relevance and compliance to statutory responsibilities and referral to Governors and for updating parents on its content.
- if children make a visit without school staff e.g. Y6 transition days the headteacher is responsible for ensuring that the receiving school knows about a child's medical needs.
- ensuring a child's medical needs are included in transfer information.

## **Other school staff**

School staff are responsible for:

- informing the headteacher of any medication known to be in school which has not been reported to them.
- directing requests for a child to be given medication to the headteacher.

## **Teaching staff are responsible for:**

- the safe management of medication kept in the classroom e.g. asthma inhalers in the bottom drawer of the teacher's desk.
- ensuring that children in their class are aware that medicines are drugs and that they must not share their medication, inhaler etc. with others.

Staff may administer medication only after consultation with the headteacher.

**In order to ensure the implementation of this policy the following procedures must be followed.**

## **STRATEGIES**

### **Administering medication**

There is no legal requirement to administer medication, this is a voluntary role. No pupil should be given prescribed medication or over the counter pain relief without parental consent in writing, stating dosage and time for administration. Parents should preferably complete a school consent form at the office. If the headteacher decides that the administration of a certain medication is a responsibility they are not willing to undertake they will contact the child's parents.

### **Storing medication**

All medicine stored in school will belong to a named child. It must be provided in the original container and clearly labelled marked with the dosage and other requirements for medication. Where a child needs two or more medications these should be in separate original containers. Medicines should never be transferred to alternative containers. Medicines should be kept in the school office in the designated First aid cabinet or in the staff room fridge, if necessary.

Medication which is needed on quick access e.g. asthma sprays will be kept in the classroom in a place designated by the class teacher and known to the child. It should be clearly labelled with the child's name. Inhalers and spacers will be taken out at playtime, PE lessons, swimming lessons, school visits and other events.

### **Administering medication:**

1. **Medication prescribed by a doctor, or authorised health care worker, will be administered in school and current legislation allows school to supervise the administration of over the counter medication such as pain relief if written permission is received from parents/carers beforehand.**
2. Only members of staff that have been trained and authorised by the headteacher may supervise and administer medication. In emergency, the headteacher will make appropriate alternative arrangements. In some circumstances, as determined by the headteacher, a child's parents or qualified, specialist, nursing staff may be asked to visit school to administer the medication.
3. Parents must send written requests to the headteacher when they wish the school to supervise or administer medication.
4. Parents must visit the school to discuss what is being requested and to agree the procedures proposed by the school.
5. Medication must be sent into school in its original container.
6. Medication will be kept safely according to the instructions on its container and stored in a refrigerator if required.
7. When pupils needing medication are on visits away from school, the school will do its best to see that, as far as possible, within the available resources, special arrangements are made to allow the pupil to participate. This may mean that the child's parent will be requested to accompany them on such visits and outings.

### **Confidentiality**

All medical information should be treated confidentially and used on a 'need to know' basis.

## **Emergency Procedures – See Critical Incident Policy**

In the event of a serious accident or a person in school becoming extremely ill the procedure printed below should be followed.

- 1) Summon adult help.**
- 2) Try to ensure that the casualty is out of immediate risk using your best judgement.**
- 3) Err on the side of caution by contacting the emergency services via the office telephone.**
- 4) Inform the emergency contact for the casualty.**

## **Invasive or intimate Treatment**

If a child (or children) requiring this type of procedure applies for admission their needs will be subject to a full investigation and clarification before a decision to admit is made. If the decision is to admit, this will not be done until full training has been identified and completed, and procedures to support and protect the child have been agreed.