

Saint Norbert's Catholic School

Medicines in Schools Policy

Date Adopted: Summer 2017

Date of Review: Summer 2019



ST. NORBERT'S
CATHOLIC PRIMARY SCHOOL

Our Mission Statement

St. Norbert's strives to nurture and develop the whole child through a

**Love of God
Love of one another
Love of life itself**

Article 24: You have the right to safe water to drink, nutritious food, a clean and safe environment and information to help you stay well.

What is the purpose of this policy?

As a School we aim to:

The purpose of this policy is to ensure that any medicines administered within school are done so in a safe and monitored environment. It has been written using guidance from the DFE guidelines 'Supporting Pupils at School with medical Conditions' September 2014, the Equality Act 2010 and also in line with the 'Children's and Families Act 2014' which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.

The aims of this Policy:

St Norbert's Catholic Primary school welcomes all children with medical needs. Our school recognises that children with medical needs have the same rights of admission to a school or setting as other children.

As a School we aim to:

- Recognise that there are a wide variety medical needs, whether short term or long term, that affect children in a variety of ways
- encourage and help children with any medical needs to participate fully in school life and have full access to education, including school trips and physical education.
- recognise the need for immediate access to certain medicines
- do all we can to make sure that the school environment is favourable to children with medical needs, including making reasonable adjustments as and when necessary.
- ensures that all staff understand each individual child's needs and the procedures to support these children.
- understand what to do in the event of a child requiring medical support, intervention, or the possibility of emergency treatment and inform parents accordingly
- ensure that all school leaders consult and work with health and social care professionals, pupils and parents to ensure the needs of all children with medical conditions are effectively supported.

Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children however have longer term medical needs and may require medicines on a long-term basis to keep them well, for example children with well-controlled epilepsy or Diabetes. In line with government guidelines we would ask that children are not sent to school when they are clearly unwell or infectious.

Parental Responsibility:

Parents/Carers have the prime responsibility for their child's health and should provide St. Norbert's with in depth and updated information about their child's medical condition. This should be done upon admission or when their child first develops a medical need. It is the responsibility of parents to provide updated information regarding a child's needs and/or medication as soon possible. Where a child has a long term medical need then an individual health plan will be drawn up with the Parents/Carers and Health Professionals. The Health care Plans will be reviewed annually but updated as and when required.

Administration of drugs/medicines in schools

Many medications can be prescribed so that doses only need to be given when pupils are at home and parents are encouraged to ask the doctor or dentist about this. However, some may need to be given in school e.g.:

- (i) Those where the child has some form of chronic illness such as diabetes, epilepsy, asthma or hay fever
- (ii) Those where the child has a short term illness such as tonsillitis, chesty cold or ear ache.
- (iii) Ritalin (methylphenidate) as part of a behaviour management/modification programme

In the case of (i) and (iii) - only medicines in their original container, and labelled with the child's name, together with the amount/frequency of dosage, should be accepted into school where they should be retained securely out of reach of children.

Ritalin is a Class A drug and must always be kept under lock and key; it should not be kept in school, rather it should be brought to school on a daily basis.

If the Head teacher feels that there is any ambiguity in the instructions received about medication for a particular child, they should contact either the child's parent/guardian, general practitioner or the school doctor for clarification.

Legal Aspects

There is no legal duty on non-medical staff to administer medicines or to supervise a child taking it. *This is purely a voluntary role.* Staff should be particularly cautious agreeing to administer medicines where: the timing is crucial to the health of the child; where there are potentially serious consequences if medication or treatment is missed; or where a degree of technical or medical knowledge is needed. Generally, the consequences of taking no action are likely to be more serious than those of trying to assist, particularly in an emergency. Schools act in loco parentis to all pupils. A duty of care therefore exists to the pupils. This would include encouraging or persuading pupils to take oral medication where they are reluctant to do so, although clearly force should not be used. Staff who have been identified to administer

medicines should not agree to do so without first receiving appropriate information and / or training specific to the child's medical needs. The school should inform the child's parent/guardian as a matter of urgency. Under no circumstances must any medication be administered without signed parental approval. A record is to be kept of any administration of medicines in the relevant individual pupils medical book or in the general Medicines Book.

Asthma

Most children with Asthma, if adequately treated, are able to, and should be encouraged to, participate in all school activities, but if there is a serious concern on the part the Head teacher should discuss the matter with parents and seek medical advice.

It is important that children with Asthma are encouraged to take exercise. They may need to use their inhaler before exercise as well as taking it with them on any physical activities outside the school premises. **Children who have been prescribed asthma inhalers must have access to them at all times. Inhalers must not be locked away.**

Please see Asthma Policy for further information.

Record Keeping

The following information must be completed by the parent:

Name and date of birth of the child

Name of parents/guardian, contact address and telephone number

Name, address and telephone number of GP

Name of medicines

Details of prescribed dosage

Date and time of last dosage given

Consent given by the parents/guardian for staff to administer these medicines.

Expiry dates of the medicines

Storage details

The Parent Consent form, providing all the information above, will be copied and retained in a central file as a record for future reference.

Safe storage and disposal of medicines

Medicine should be administered from the original container or by a monitored dosage system such as a blister pack. The designated member of staff should not sign the medicine record book unless they have personally administered, assisted, or witnessed the administration of the medicines.

When medicines are used staff will need to ensure that they fully understand how each medicine or drug should be stored. Storage details can be obtained either from the written instructions of the GP/Pharmacist or from parents.

All medicines should be stored in the original container, be properly labelled, and kept in a secure place, out of reach of children. Arrangements may be needed

for any medicines that require refrigeration. These should be clearly labelled and kept separated from any foodstuff. Medicines should only be kept while the child is in attendance. Any unused or outdated medication will be returned to the parent for safe disposal.

Accidental failure of the agreed procedures

Should a member of staff fail to administer any medication as required they will inform the parent as soon as possible. However, the position should not normally arise as any child requiring vital medication or treatment would not normally be in school.

Self-Management

Older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent. Children develop at different rates and so the ability to take responsibility for their own medicines varies. This should be borne in mind when making a decision about transferring responsibility to a child or young person. There is no set age when this transition should be made. There may be circumstances where it is not appropriate for a child of any age to self manage. Health professionals need to assess, with parents and children, the appropriate time to make this transition. Parents/Carers will be required to complete a form which will detail where the medicines are to be stored during the school day. Trained members of staff will be required to supervise administration of any medicines self-managed, if required.

Educational Visits

In line with St Norbert's SEND policy we will make reasonable adjustments to enable children with medical needs to participate fully and safely on visits. Any risk assessments undertaken will allow for such children. Staff supervising excursions will be aware of any medical needs, and relevant emergency procedures. A copy of any health care plans will be taken on visits in the event of the information being needed in an emergency. If staff are concerned about whether they can provide for a child's safety, or the safety of other children on a visit, they will seek parental views and medical advice from the school health service or the child's GP.

Sporting Activities

Most children with medical conditions can participate in physical activities and extra curricular sport. There should be sufficient flexibility for all children to follow in ways 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 child's ability to participate in PE should be recorded in their individual health care plan. The school is aware of issues of privacy and dignity for children with particular needs. Some children may need to take

precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Known medical conditions

A list of all children with in a class with any known medical condition will be given to each class teacher. The medical board in the staffroom informs all staff of any child or adult requiring medical support. Copies of health care Plans and a list of trained staff are also located on this board. When supply staff are asked to cover a classroom it will be the responsibility of the class teacher to ensure correct details and information is in the supply pack.

Training

Any staff required to administer prescribed medicines will receive training to do so. All staff will receive refresher training on the common conditions of Asthma, Epilepsy, Diabetes and Anaphylaxis when appropriate.

Liability Insurance

The County Council liability insurance provides cover for claims in respect of the administration of drugs and the giving of injections by staff of the Education and Cultural Services Directorate, provided that they have acted in accordance with the policies, guidelines and action points set out in this item.

Children returning from long term illness or injury

The Head teacher should seek advice from the appropriate School Health Service professional if they are concerned about the care and management of a child who has returned to school following a long term illness or injury.

Misrepresentation

The Head teacher should inform the Education Welfare Officer if they are concerned about either of the following circumstances so that arrangements can be made for the child to be seen by the School Health Service, if necessary.

- Prolonged or regular periods of absence which are viewed with suspicion although they are certified by a general practitioner;
- Where a child is thought not to be fully fit.

Confidentiality

The Head teacher should encourage parents to share information about their child's health particularly where there is concern that this may affect the child's performance at school. In cases where additional information may be needed from Health Service professionals, consent should be sought from the parents.

Hygiene/Infection Control

All staff should be familiar with the normal precautions for avoiding infections and must follow basic hygiene procedures. Staff will 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. All staff should be aware and follow guidelines set out for specific management and disposal of items such as sharps, through the Sharps Policy.

Signed _____

(Head teacher)

Signed _____

(for and on behalf of the Governing board)

Date _____