



## **Ifield Community College - Managing Medicines Policy**

**Approved by Governing Body: 14<sup>th</sup> March 2024**

**Date of Next Review: March 2025**

**Signed: (Chair of Governors)**

Member of Staff responsible: SENCo

### **Statement of Intent**

Section 100 of the Children and Families Act 2014 places a duty on 'governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting students at their school with medical conditions'. The governing body of Ifield Community College will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting students at school with medical conditions' December 2015'.

Medicines will be administered to enable the inclusion of students with medical needs, promote regular attendance and minimise the impact on a student's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

Graciano Soares

Chair of Governors

## **Organisation**

The governing body will develop policies and procedures to ensure the medical needs of students at Ifield Community College are managed appropriately. They will be supported with the implementation of these arrangements by the Headteacher and school staff.

The Lead for Managing Medicines at Ifield Community College is Mrs Clarke. In their duties staff will be guided by their training, this policy and related procedures.

## **Implementation monitoring and review**

All staff, governors, parents/carers of Ifield Community College will be made aware of and have access to this policy. This policy will be reviewed annually.

## **Insurance**

Staff who follow the procedures outlined in this policy and who undertake tasks detailed in the RMP Medical Malpractice Treatment Table are covered under WSCC insurance policies. The medical audit is available to view on West Sussex Services for Schools under 'guide to insurance for schools'.

Claims received in respect of medical procedures not covered by the insurers will be considered under the Council's insurance fund.

## **Admissions**

When the school is notified of the admission of a student with medical needs the Lead for Managing Medicines will seek parental consent to administer short term-ad-hoc non-prescriptions medication. An assessment of the student's medical needs will be completed and this might include the development of an Individual Health Care Plans (IHP) or Education Health Care Plans (EHC) and require additional staff training. The school will endeavour to put arrangements in place to support that student as quickly as possible. However, the school may decide (based on risk assessment) to delay the admission of a student until sufficient arrangements can be put in place.

## **Students with medical needs**

The school will follow Government guidance and develop an IHP or EHC for students who:

- Have long term, complex or fluctuating conditions
- Require medication in emergency situations

Parents/carers should provide the Headteacher with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, between the parents/carers, the Headteacher, school nurse and other relevant health professionals to ensure that the student's medical needs are managed well during their time in school. Healthcare plans must be kept up to date and parents/carers are expected to inform the school immediately of any health related changes.

## **All prescribed and non-prescribed medication**

On no account should a child come to school with medicine if he/she is unwell. Parents may call into the school and administer medicine to their child, or they may request that a member of school staff administers the medicine. If a student refuses their medication, they should not be forced, the school will contact the parent/guardian and if necessary the emergency services. Students should not bring any medication to school for self-administration.

The school will keep a small stock of paracetamol and antihistamine; all other medication must be supplied by the parent/guardian in the original pharmacist's container clearly labelled and include details of possible side effects e.g. manufacturer's instructions and/or patient information leaflet (PIL).

Medicines must be delivered to the school reception with the appropriate consent form. The school will notify the parent/guardian of the time and dose of any medication administered at the end of each day via go4schools.

### **Confidentiality**

As required by the Data Protection Act 1998, and the new GDPR coming into force in May 2018, school staff should treat medical information confidentially. Staff will consult with the parent, or the student if appropriate, as to who else should have access to records and other information about the student's medical needs and this should be recorded on the IHP or EHC. It is expected that staff who have contact with a student who has medical needs will as a minimum be informed of the student's condition and know how to respond in a medical emergency.

### **Consent to administer medication**

Parental/guardian consent to administer medication will be required as follows:

- **Short term ad-hoc non-prescribed medication** - The school will request parent/guardian consent to administer ad-hoc non-prescription medication when the student joins the school. The school will send annual reminders requesting parents/carers to inform the school if there are changes to consent. If the school is not informed of any changes by the parent/guardian it will be assumed that consent remains current.
- **Prescribed and non-prescribed medication** - each request to administer medication must be accompanied by 'Parental consent to administer medication form' or if applicable on the IHP.

### **Prescription Medicines**

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime. Administration will be recorded and the parent/guardian informed. Parents/carers are expected to remove any remaining medicine from school once the prescribed course has been completed.

### **Non-prescription Medicines**

Requests by parents to administer non-prescription medicines need to be accompanied by written consent. Under exceptional circumstances where it is deemed that their administration is required to allow the student to remain in school the school will administer non-prescription medicines. The school will not administer alternative treatments i.e. homeopathic or herbal potions, pills or tinctures or nutrition supplements unless prescribed or recommended by a Doctor and detailed on an IHP or EHC as part of a wider treatment protocol. As recommended by the Government in Supporting Students at School with Medical Conditions December 2015 the school will also not administer aspirin unless prescribed. The storage and administration for non-prescription medication will be treated as prescription medicines.

If the relevant symptoms develop during the school day as detailed under the paragraph 'short term ad-hoc non-prescribed medication' the school will administer the following non-prescription medications:

- paracetamol (to students of all ages)
- antihistamine

All other non-prescription medications will only be administered by staff, providing:

- The parent/guardian gives written consent and confirms daily the time the medication was last administered (and this is recorded) and administered previously without adverse effect;

- medication is licensed as suitable for the student's age;
- medication is suitable for the student i.e. if a child is asthmatic the medication is suitable for that condition;
- administration is required more than 3 to 4 times per day;
- medication is supplied by the parent or guardian in the original packaging with the manufacturer's instructions and/or (PIL);

The school will NOT administer non-prescription medication:

- as a preventative, i.e. in case the student develops symptoms during the school day;
- if the student is taking other prescribed or non-prescribed medication, i.e. only one non-prescription medication will be administered at a time;
- any requirement for a non-prescription medication to be administered during school hours for longer than 48 hours must be accompanied by a Doctor's note.
- a request to administer the same or a different non-prescription medication that is for the same/initial condition will not be repeated for 2 weeks after the initial episode and not for more than 2 episodes per term. It will be assumed that the prolonged expression of symptoms requires medical intervention and parents/carers will be advised to contact their Doctor.
- medication that is sucked i.e. coughs sweets or lozenges, will not be administered by the school.
- if parents/carers have forgotten to administer non-prescription medication that is required before school, requests to administer will be at the discretion of the school and considered on an individual basis.

Note: Only prescribed skin creams will be stored for self-administration of skin conditions such as Eczema.

#### **Short term ad-hoc non-prescribed medication**

A small stock of standard paracetamol and antihistamine will be kept by the school for administration if symptoms develop during the school day.

ONLY the following will be administered following the necessary procedures:

- For relief from pain
  - Standard Paracetamol will be administered in tablet form for the relief of pain i.e. period pain, migraine.
  - Ibuprofen will NOT be administered to students. Parents/Carers will be expected to administer Ibuprofen to their child either before coming to school, or after school.
- For mild allergic reaction – Standard Piriton tablets
- For travel sickness – medication will be administered if required before educational visits and must be age appropriate and supplied by the parent/guardian in its original packaging with the PIL if available.

Only 1 dose of any of the above medications suitable to the weight and age of the student will be administered during the school day.

#### **Pain relief protocol for the administration of paracetamol and ibuprofen**

If a request for non-prescribed pain relief is made by a student or carer/staff (advocate for a non-verbal/non-communicating student) before 12pm:

- The school will contact the parent/guardian and confirm that a dose of pain relief was NOT administered before school, parents/carers and if appropriate the student will also be asked if they have taken any other medication containing pain relief medication i.e. decongestants e.g. Sudafed, cold and flu remedies e.g. Lemsip and medication for cramps e.g. Feminax etc. and these conversations will be recorded.

- If the school cannot contact the parent/guardian and therefore cannot confirm if pain relief was administered before school, then the school will refuse to administer pain relief.

If a dose of pain relief has been administered before school:

- PARACETAMOL - The school will not administer paracetamol until 4 hours have elapsed since the last dose (assume 8am) and no more than 4 doses can be administered in 24 hours. This includes products that contain paracetamol.
- IBUPROFEN - The school will NOT administer Ibuprofen at all during the school day; parents/carers will be expected to administer Ibuprofen before school or after school.

If a request for pain relief is made after 12pm:

- The school will assume the recommended time between doses has elapsed and will administer 1 standard of dose of PARACETAMOL without any need to confirm this with the parent/guardian but if appropriate the student will still be asked if they have taken any other medication containing pain relief medication and this conversation will be recorded.
- If the student's symptoms require the administration of IBUPROFEN then the school requests that parents/carers provide a dose before the school day starts as no further doses will be provided during the school day. Further doses will need to be administered by parents/carers after the school day.

The school will inform the parent/guardian if pain relief has been administered this will include the type of pain relief and time of administration.

### **Asthma**

The school recognises that students with asthma need access to relief medication at all times. The school will manage asthma in school as outlined in the Asthma Toolkit. Students with asthma will be required to have an emergency inhaler and a spacer (if prescribed) in school. The school may ask the students parent or guardian to provide a second inhaler. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required and a record of these communications will be kept. The school inhaler will only be used in an emergency and will always be used with a spacer. The school will develop IHP's for those students with severe asthma, and complete the Individual Protocol for students with mild asthma.

### **Anaphylaxis**

Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to students diagnosed with anaphylaxis within the school population. The school complies with the School Nursing Service recommendation that all staff are trained in the administration of auto injectors and that training is renewed annually.

In accordance with the Medicines and Healthcare Products Regulatory Agency (MHRA) advice the school will ask parent/ guardian(s) to provide 2 auto-injectors for school use. Parents are responsible for this medication being in date and the school will communicate with the parents if new medication is required and a record of these communications will be kept.

Some antihistamine medication can cause drowsiness and therefore the school will consider if it is necessary for students to avoid any contact hazardous equipment after administration of the medication i.e. P.E. Science, Design and Technology.

### **Hot Water Bottles**

Hot water bottles are not allowed in school due to health and safety reasons.

## **Mild Allergic Reaction**

Non-prescription antihistamine will be administered for symptoms of mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes), the student must be monitored for signs of further allergic reaction. If antihistamine is not part of an initial treatment plan, anaphylaxis medication will be administered following the guidance for short term ad-hoc non-prescribed medication.

## **Hay fever**

Parent(s)/carer(s) will be expected to administer a dose of antihistamine to their child before school for the treatment of hay fever. The school will only administer antihistamine for symptoms of allergic reaction and not as a precautionary measure.

## **Severe Allergic Reaction**

Where a GP/Consultant has recommended or prescribed antihistamine as an initial treatment for symptoms of allergic reaction this will be detailed on the students IHP. The school will administer 1 standard dose of antihistamine (appropriate to age and weight of the student) and it is very important that symptoms are monitored for signs of further allergic reaction. During this time, students must NEVER be left alone and should be observed at all times.

***If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms, then if the student has been prescribed an adrenaline auto injector it will be administered without delay, an ambulance called and the parents informed.***

## **Medical Emergencies**

In a medical emergency, first aid is given, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a student who has an IHP or EHC, the emergency procedures detailed in the plan are followed, and a copy of the IHP or EHC is given to the ambulance crew. If applicable the student's emergency medication will be administered by trained school staff; if the student's medication isn't available staff will administer the school's emergency medication with prior parental consent.

In accordance with amendments made to the Human Medicines Regulations 2012, from October 2014 a sufficient number of salbutamol inhaler(s) spacer(s) will be held by the school to cover emergency use. Parents are expected to provide 2 in date auto-injectors for administration to their child, if the school does not hold 2 in date auto-injectors for each student then a suitable number of auto-injectors will be purchased for use by the school in an emergency.

Parental consent to administer the 'school inhaler and/or auto-injector' will be gained when the student joins the school. The school will hold a register of the students diagnosed with asthma and/or anaphylaxis, and if parental consent has been given to administer the school medication. The school will be responsible for ensuring the school medication remains in date.

Instructions for calling an ambulance are displayed prominently by the telephone in the welfare office.

## **Controlled Drugs**

The school does not deem a student prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves whilst in school. Controlled drugs will be stored securely in a non-portable locked medicines cabinet in a locked room and only named staff will have access. Controlled drugs for emergency use e.g. midazolam will not be locked away and will be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any medication, a record will be kept of any doses used and the amount of controlled drug stock held in school.)

## **Students taking their own medication**

For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. Appropriate arrangements for medication should be agreed and documented in the student's IHP or EHC and parents should complete the self-administration section of 'Parental consent to administer medication' form.

### **Storage and Access to Medicines**

All medicines apart from emergency medicines (inhalers, adrenaline auto injector, midazolam etc.) will be kept securely (where access by students is restricted). Medicines are always stored in the original pharmacist's container. Students are told where their medication is stored and who holds the key and staff will be fully briefed on the procedures for obtaining their medication.

Emergency medicines such as inhalers, adrenaline auto injectors and midazolam must not be locked away. If appropriate, certain emergency medication can be held by the student, or kept in a clearly identified container in his/her classroom. The school will make an assessment as to the competency of each individual student to carry their own medication. Parents will be asked to supply a second adrenaline auto injector and/or asthma inhaler for each child and they will be kept in the school office. Staff must ensure that emergency medication is readily available at all times i.e. during outside P.E. lessons, educational visits and in the event of an unforeseen emergency like a fire.

Medicines that require refrigeration are kept in the welfare room to which student access is restricted, and will be clearly labelled in an airtight container. There are specific arrangements in place for the storage of controlled drugs.

### **Waste medication**

Where possible staff should take care to prepare medication correctly. If too much medication is drawn into a syringe the remainder (amount above the required dose) should be returned to the bottle before administration. If only a half tablet is administered the remainder should be returned to the bottle or packaging for future administration.

If a course of medication has been completed or the medication date has expired, it will be returned to the parent/guardian for disposal.

### **Spillages**

A spill must be dealt with as quickly as possible and staff are obliged to take responsibility/follow the guidelines. Spillages will be cleared up following the school's procedures and considering the control of infection. Any spilled medication will be deemed unsuitable for administration and if necessary parents will be asked to provide additional medication.

If the school holds any cytotoxic drugs, their management will be separately risk assessed and follow Health and Safety Executive (HSE) guidance.

### **Record Keeping – administration of medicines**

For legal reasons records of all medicines administered are kept at the school until the student reaches the age of 24. This includes medicines administered by staff during all educational or residential visits. The student's parent/ guardian will also be informed if their child has been unwell during the school day and medication has been administered.

### **Recording Errors and Incidents**

If for whatever reason there is a mistake made in the administration of medication and the student is:

- Given the wrong medication
- Given the wrong dose

- Given medication at the wrong time (insufficient intervals between doses)
- Given medication that is out of date
- Or the wrong student is given medication

incidents must be reported to the Schools Senior Leadership Team who will immediately inform the student's parent/guardian. Details of the incident will be recorded locally as part of the school's local arrangements. Local records must include details of what happened, the date, who is responsible and any effect the mistake has caused. Senior Management will investigate the incident and change procedures to prevent reoccurrence if necessary. NB: Incidents that arise from medical conditions that are being well managed by the school do not need to be reported or recorded locally.

### **Staff Training**

The school will ensure a sufficient number of staff complete Managing Medicines in Schools training before they can administer medication to students. The school will also ensure that other staff who may occasionally need to administer a medicine are trained in the procedure adopted by the school by the person who has completed the Managing Medicines course.

Supply and locum staff will be given appropriate instruction and guidance in order to support the students with medical needs in their care. All school staff are trained annually to administer an auto-injector and asthma inhaler in an emergency.

A record of all training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required.

The school will ensure that the staff who administer medicine for specific chronic conditions are trained to administer those specific medicines, for example, Diabetes (insulin) Epilepsy (midazolam). Training in the administration of these specific medicines is arranged via the school nurse.

### **Educational Visits (Off - site one day)**

Staff will administer prescription medicines to students when required during educational visits. Parents should ensure they complete a consent form and supply a sufficient amount of medication in its pharmacist's container. Non-prescription medicines as detailed in this policy can be administered by staff, students must not carry non-prescription medication for self-administration.

All staff will be briefed about any emergency procedures needed with reference to students where needs are known and copies of care plans will be taken by the responsible person.

### **Residential Visits (overnight stays)**

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the care plan.

Occasionally it may be necessary to administer non-prescription medicines as described in this policy i.e. antihistamine to students suffering from an allergic reaction or paracetamol for acute pain from things like headache, period pain, toothache etc. Parents must give written consent prior to the residential visit and sign to confirm that they have administered the medication without adverse effect.

The school will keep its own supply of the following non-prescription medication:

- Standard Paracetamol
- Standard Ibuprofen
- Standard Piriton

for administration to students during a residential visit and parental consent will be required in order for the school to administer their supply (*Appendix 2 Template C and C1*). The medication will be stored and administration recorded as for prescription medicines. Students should not bring non-prescribed medication on the residential visit for self-administration.

### **Risk assessing medicines management on all off site visits**

Students with medical needs shall be included in visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals so that extra measures (if appropriate) can be put in place. A copy of the students IHP or EHP will be taken on the visit and detail arrangements relating to the management of their medication(s) during the visit should be included in the plan.

If a student requires prescribed or non-prescribed medication during a visit and an IHP or EHP has not been developed and the management of their medication differs from procedures followed whilst in school, the school will conduct a risk assessment and record their findings.

Travelling abroad – a risk assessment will be developed considering parental and medical advice and documented on the students IHP or EHP. If an IHP or EHP has not been developed, the school will record their findings. Best practice would be to translate these documents to the language of the country being visited. The international emergency number should be on the care plan (112 is the EU number). European Health Insurance Cards (EHIC) should be applied for by parents and supplied to the school prior to travel for all students that travel abroad.

The results of risk assessments however they are recorded i.e. IHP, EHP etc. will be communicated to the relevant staff and records kept of this communication.

### **Complaints**

Issues arising from the medical treatment of a student whilst in school should in the first instance be directed to the Headteacher. If the issue cannot easily be resolved the Headteacher will inform the governing body who will seek resolution.