



We always prefer parents/carers to come into school and administer medication themselves, where possible.

Parents must inform school of the reason why medication is being given and make staff aware of any possible symptoms/side effects the child may have. Medication will only be administered if it is not possible to maintain the regime at home (ie 4 times a day regimes) or in case of emergency for pupils who have medication in school for such a purpose.

Medication will not be administered without the permission of parents/carers.

#### STAFF RESPONSIBILITY

SMT staff will usually be responsible for the internal administration of medication. The exception to this will be when the pupil is out of school. All class based staff are responsible for the management of inhalers, creams etc

### PRESCRIPTION MEDICINE

We can only administer medication which has been prescribed by a doctor and cannot be given by the parent/carer as they are unable to come into school - unless we have specific written permission in extenuating circumstances. An example of this would be the use of over the counter versions of a previously prescribed medicine for an ongoing condition such as hay fever.

#### EMERGENCY MEDICATION

This must be recorded in the First Aid folder (on a blue sheet) and reported to parents (see LOG)

Permission must be given by parents when the medication is left in school. A healthcare plan (see HEALTHCARE PLAN) will be recorded to show the emergency needs of the child - it will include signs and symptoms and any procedures which need to be followed.

#### REFUSAL TO TAKE MEDICINES

If a child refuses to take medicine, staff shouldn't force them to do so. Parents should be informed in person and a record kept on the permission form.





### CONSENT FORMS FOR MEDICATION

All parents/carers have to sign to say we are allowed to administer the medication. The signed copy is kept in the green Medication folder in the office. The medical information provided by parents will be written down on the form and read back to the parent for clarity before they sign.

#### **VISITS - CONSENT**

Parents will sign to say that a class teacher can administer the medication if the child is out on a visit/residential. Medication must be stored appropriately and kept by the appropriate teacher at ALL times.

It is the appropriate teacher/visit leader's responsibility to store and administer medication. They must also report the use of emergency medication to the Head Teacher and the parents of the child concerned.

#### RESIDENTIALS

Parents must sign a consent form to allow staff to administer medication on a residential. This MUST be clearly recorded on a blue First Aid sheet when administered and placed in the First Aid log on return.

All pupils are entitled to attend residential, where it is medically possible for them to do so. Staff will make appropriate changes to practice to allow this to happen. However, the advice of parents and medical professionals will always be sought and taken.

#### RECORDS OF GIVING MEDICATION AND LETTERS HOME

A log of all emergency medication given is kept in the First Aid book. If staff have given emergency medication, it must be put on a blue sheet and inserted in the correct place in the folder.

If emergency medicine has been given, for example Piriton for an allergic reaction, parents/carers must be informed. Staff must fill in a letter and give to the parent OR child to take home (if they go home on their own). If the child goes home on their own, the office staff will be asked to telephone parents and let them know what has been given and when, in case the letter goes astray.

If routine medication has been given, the daily medication sheet (on the wall in the HT's office) must be completed and saved.

All master letters/permission slips etc are kept in the green Medication folder in the HT's office.





#### STORAGE

All medicines must be stored correctly in school. Use the office fridge if cold storage is required. Otherwise store in the locked cupboard in the HT's office.

On visits, medication should be kept cool by using cool blocks if necessary. It must be stored securely at all times.

### CARRYING MEDICINES

Children are not allowed to carry any medication except inhalers. Inhalers are kept in a container in the classroom or by children. They are carried by children/staff during visits/out of school activities/PE.

Children's medication is kept in the office or with the group leader on a trip. Children are allowed to self administer (if appropriate) only if monitored closely by an adult. This will be reviewed in individual circumstances and we will make decisions based on need and health and safety for ALL pupils.

#### LONG TERM MEDICAL NEEDS

School will work with parents/carers and outside agencies to support children with long term medical needs wherever possible. Appropriate training will be given where required. School will liaise with medical services, including the school nurse, for help and advice. An INDIVIDUAL HEALTHCARE PLAN will be set up.

#### STAFF TRAINING

Appropriate specialist training will be sourced for staff where necessary eg the administration of Epi pens etc when it becomes necessary.

The lead first aiders (Ellen Greaves, Diane Sisson) will provide in house training where appropriate - for the use of inhalers/other basic needs etc.

Where a pupil is present in school with a long term medical condition, whole school awareness training will be organised.

Up to date medical information will be provided to relevant staff as soon as it becomes available.





### DEFIBRILLATORS

We have a defibrillator in school. Ellen Greaves is the person responsible for providing staff training and induction with this. This will be updated yearly.

### SPARE INHALERS AND SPACERS

These are to be kept in the top drawer of the medical filing cabinet. They can only be used for children who have already been prescribed an inhaler by their GP. They are maintained by Ellen Greaves, as lead First Aider.

### RISK ASSESSMENTS

Appropriate risk assessments are kept in the medicines folder of the current year's RAs in the Health and Safety file. They are also kept in the Key Stage RA folders.

### INDIVIDUAL HEALTHCARE PLANS

These will be set up in line with the flow charts provided at the back of the supporting DfE document (at the front of the green file)

These will be written by the HT/SENCO/AHT or medical professional, depending on the nature of the pupil's needs. The plans will detail the medical needs of individual pupils and the actions required to meet those needs. They will be reviewed yearly.

Pupils with special needs have detailed plans, which are carried out alongside School Health. A copy of these plans are kept in the Medication file. It is the duty of ALL appropriate adults to make sure that they are familiar with the contents of these plans.

Pupils requiring an inhaler will have an individual healthcare plan. Parental permission will be gained for the use of the emergency inhalers/spacers, which are kept in school. This will be recorded on their plan.

Pupils requiring emergency medication such as Piriton will have an individual healthcare plan.

#### CLASS DATA SHEETS

Class data sheets detail brief medical information and all staff working with those children must make sure that they are aware of individual needs. It is the responsibility of staff who work across a range of classes to familiarise themselves with this information.





## **INSURANCE**

Under the terms of our insurance, we are allowed to administer medication in school.

## POLICY REVIEW

This policy was written in line with Statutory Guidance - May 2015 and will be reviewed in line with new guidance.

A review will take place yearly OR in the event of new guidance.

Reviewed - May 2016

May 2017

July 2018