



Hunsbury Park Primary School

Administering Medication Policy

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Statement of intent

Hunsbury Park Primary School will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy.

This policy has been developed in line with the DfE's guidance: 'Supporting pupils at school with medical conditions.'

The school is committed to ensuring that parents feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

1. Legal framework

- 1.1. This policy has due regard to statutory legislation and guidance including, but not limited to, the following:
- Children and Families Act 2014
 - DfE (2015) 'Supporting pupils at school with medical conditions'
 - DfE (2017) 'Using emergency adrenaline auto-injectors in schools'
- 1.2. This policy is implemented in conjunction with the following school policies:
- Supporting Pupils with Medical Conditions At School Policy (Statutory DfE guidance updated 2017)
 - First Aid Policy
 - Record Management Policy
 - Complaints Procedures Policy

2. Definitions

- 2.1. Hunsbury Park Primary School defines "medication" as any prescribed or over the counter medicine.
- 2.2. The school defines "prescription medication" as any drug or device prescribed by a doctor.
- 2.3. The school defines a "staff member" as any member of staff employed at the school, including teachers.
- 2.4. For the purpose of this policy, "medication" will be used to describe all types of medicine.
- 2.5. The school defines a "controlled drug" as a drug around which there are strict legal controls due to the risk of dependence or addiction, e.g. morphine.

3. Key roles and responsibilities

- 3.1. The governing body is responsible for:
- The implementation of this policy and procedures.
 - Ensuring that this policy, as written, does not discriminate on any grounds, including but not limited to: ethnicity or national origin, culture, religion, gender, disability or sexual orientation.
 - Handling complaints regarding this policy, as outlined in the school's Complaints Procedures Policy.

- Ensuring the correct level of insurance is in place for the administration of medication.
- Ensuring that members of staff who provide support to pupils with medical conditions are suitably trained and have access to information needed.
- Ensuring that relevant health and social care professionals are consulted in order to guarantee that the needs of pupils with medical conditions are properly supported.
- Managing any complaints or concerns regarding the support provided or administration of medicine using the school's Complaints Procedures Policy.

3.2. The headteacher is responsible for:

- The day-to-day implementation and management of this policy and relevant procedures.
- Ensuring that appropriate training is undertaken by staff members administering medication.
- Ensuring that staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system.
- Organising another appropriately trained individual to take over the role of administering medication in the case of staff absence.
- Ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.

3.3. All staff are responsible for:

- Adhering to this policy and ensuring pupils do so also.
- Carrying out their duties that arise from this policy fairly and consistently.

3.4. Parents are responsible for:

- Keeping the school informed about any changes to their child's health.
- Completing a medication administration form ([appendix A](#)) prior to bringing any medication into school.
- Discussing medications with their child prior to requesting that a staff member administers the medication.

- 3.5. It is both staff members' and pupils' responsibility to understand what action to take during a medical emergency, such as raising the alarm with the school nurse or other members of staff.

4. Training of staff

- 4.1. Where it is a necessary or vital component of their job role, staff will undertake training on administering medication in line with this policy as part of their new starter induction.
- 4.2. The headteacher will ensure that a sufficient number of staff are suitably trained in administering medication.
- 4.3. All staff will undergo basic training on the administering of medication to ensure that, if exceptional circumstances arise where there is no designated administrator of medication available, pupils can still receive their medication from a member of staff.
- 4.4. Staff will be advised not to agree to taking on the responsibility of administering medication until they have received appropriate training and can make an informed choice.
- 4.5. The school will ensure that, as part of their training, staff members are informed that they cannot be required to administer medication to pupils, and that this is entirely voluntary, unless the supporting of pupils with medical conditions is central to their role within the school, e.g. the school nurse.
- 4.6. Training will also cover the appropriate procedures and courses of action with regard to the following exceptional situations:
- The timing of the medication's administration is crucial to the health of the child
 - Some technical or medical knowledge is required to administer the medication
 - Intimate contact with the pupil is necessary
- 4.7. Staff members will be made aware that if they administer medication to a pupil, they take on a legal responsibility to do so correctly; hence, staff members will be encouraged not to administer medication in the above situations if they do not feel comfortable and confident in doing so, even if they have received training.

5. Receiving and storing medication

- 5.1. The parents of pupils who need medication administered at school will be sent a Medication Consent Form to complete and sign; the signed consent form will

be returned to the school and appropriately filed before staff can administer medication to pupils under the age of 16.

- 5.2. A signed copy of the parental consent form will be kept in the First Aid Room with a copy also kept in the classroom for reference. No medication will be administered if this consent form is not present.
- 5.3. Consent obtained from parents will be renewed annually according to pupil medication requirements.
- 5.4. The school will not, under any circumstances, administer aspirin unless there is evidence that it has been prescribed by a doctor.
- 5.5. The school will only allow prescribed medication, and only a maximum of four weeks' supply, to be stored in the school – with the exception of asthma inhalers and Epi-Pens.
- 5.6. Parents will be notified that medication must be provided to the school in the original packaging, complete with instructions, particularly for liquid medications where transfer from the original bottle would result in the loss of some of the medication on the sides of the bottle. This does not apply to insulin, which can be stored in an insulin pen.
- 5.7. The school will ensure that all medications, are kept appropriately, according to the product instructions, and are securely stored in a place inaccessible to pupils, e.g. locked cupboards.
- 5.8. Medication will be stored according to the following stipulations:
 - In the original container alongside the instructions
 - Clearly labelled with the name of the pupil and the name and correct dosage of the drug
 - Clearly labelled with the frequency of administration, any likely side effects and the expiry date
 - Alongside the parental consent form
- 5.9. Medication that may be required in emergency circumstances, e.g. asthma inhalers and EpiPens, will not be kept in locked cupboards. Such medication will be stored in such a way that they are readily accessible to pupils who may need them and can self-administer, and staff members who will need to administer them in emergency situations. Stored in clearly labelled bags in the classroom cupboard.
- 5.10. The school will allow pupils who are capable of carrying their own inhalers to do so, provided parental consent has been obtained.
- 5.11. The school will not store surplus or out-of-date medication, and parents will be asked to collect containers for delivery back to the chemist.

- 5.12. Needles and sharp objects will always be disposed of in a safe manner, e.g. the use of 'sharp boxes'.

6. Administering medication

- 6.1. Medication will only be administered at school if it would be detrimental to the pupil not to do so.
- 6.2. Staff will check the expiry date of each medication being administered to the pupil each time it is administered.
- 6.3. Prior to administering medication, staff members will check the maximum dosage and when the previous dose was taken.
- 6.4. Only suitably qualified members of staff will administer a controlled drug.
- 6.5. Medication will be administered in a private and comfortable environment and, as far as possible, in the same room as the medication is stored; this will normally be the school medical room.
- 6.6. The room will be equipped with the following provisions:
- Arrangements for increased privacy where intimate contact is necessary
 - Facilities to enable staff members to wash their hands before and after administering medication, and to clean any equipment after use if necessary
 - Available PPE for use where necessary
- 6.7. Before administering medication, the responsible member of staff should check:
- The pupil's identity.
 - That the school possesses written consent from a parent.
 - That the medication name and strength and dose instructions match the details on the consent form.
 - That the name on the medication label is the name of the pupil who is being given the medication.
 - That the medication to be given is within its expiry date.
 - That the child has not already been given the medication within the accepted timeframe.
- 6.8. If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.
- 6.9. If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication

must be provided by the pupil's parent, following advice from a healthcare professional.

- 6.10. Where appropriate, pupils will be encouraged to take their own medication under the supervision of a staff member, provided that parental consent for this has been obtained.
- 6.11. If a pupil refuses to take their medication, staff will not force them to do so and parents will be informed so that alternative options can be considered. This may result in parents being required to collect from school.
- 6.12. The school will not be held responsible for any side effects that occur when medication is taken correctly.
- 6.13. Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible.
- 6.14. Each time an asthma inhaler is used, a record should be made in the red book in their asthma wallet.
- 6.15. Records are stored in accordance with the Record Management Policy.

7. Out of school activities and trips

- 7.1. In the event of a school trip or activity which involves leaving the school premises, medication and devices such as insulin pens and asthma inhalers, will be readily available to staff and pupils.
- 7.2. If possible and appropriate, pupils will carry certain medications themselves, e.g. asthma inhalers.
- 7.3. If the medication is not one that should be carried by pupils, e.g. capsules, or if pupils are very young or have complex needs that mean they need assistance with taking the medication, the medication will be carried by a designated staff member for the duration of the trip or activity.
- 7.4. There will be at least one staff member who is trained to administer medication on every out-of-school trip or activity.
- 7.5. Staff members will ensure that they are aware of any pupil who will need medication administered during the trip or activity and will make certain that they are aware of the correct timings that medication will need to be administered.
- 7.6. If the out-of-school trip or activity will be over an extended period of time, e.g. an overnight stay, the school will ensure that there is a record of the frequency at which pupils need to take their medication, and any other information that may be relevant. This record should be kept by a designated trained staff member who is present on the trip and can manage the administering of medication.

- 7.7. All staff members, volunteers and other adults present on out-of-school trips or activities will be made aware what should be done in the case of a medical emergency with regard to the specific medical needs and conditions of the pupil, e.g. what to do if an epileptic pupil has a seizure.

8. Individual healthcare plans

- 8.1. For chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the pupil, their parents, the headteacher, the SENCO and any relevant medical professionals. IHPs are provided by the School Nursing Team.

9. Adrenaline auto-injectors (AIs) (Epi Pen)

- 9.1. The school has obtained a spare AIs from a pharmaceutical supplier that can be used in the case of a medical emergency for pupils who are at risk of anaphylaxis, but whose devices are not available or not working.
- 9.2. Where possible, the school will hold one brand of AI to avoid confusion with administration and training; however, subject to the brands pupils are prescribed, the school may decide to purchase multiple brands.
- 9.3. The school will purchase AIs in accordance with age-based criteria, relevant to the age of pupils at risk of anaphylaxis, to ensure the school adheres to the correct dosage requirements. These are as follows:
- For pupils under age 6: 0.15 milligrams of adrenaline
 - For pupils aged 6-12: 0.3 milligrams of adrenaline
- 9.4. Spare AIs are stored as part of an emergency anaphylaxis kit, which includes the following:
- One or more AIs
 - Instructions on how to use the device(s)
 - Instructions on the storage of the device(s)
 - The manufacturer's information
 - A checklist of injectors, identified by the batch number and expiry date, alongside records of monthly checks
 - A note of the arrangements for replacing the injectors
 - A list of pupils to whom the AI can be administered
 - An administration record
- 9.5. The school will arrange specialist training for staff where a pupil in the school has been diagnosed as being at risk of anaphylaxis.

- 9.6. Designated staff members who are suitably trained and confident in their ability to do so will be appointed as the administrators of AAls.
- 9.7. As part of their training, all First Aiders will be made aware of:
- How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
 - Where to find AAls in the case of an emergency.
 - The correct dosage amounts in correlation with the age of the pupil.
 - How to respond appropriately to a request for help from another member of staff.
 - How to recognise when emergency action is necessary.
 - Who the designated staff members who will administer AAls are.
 - How to administer an AAI safely and effectively in the event that there is a delay in response from the designated staff members.
 - How to make appropriate records of allergic reactions.
 - Whenever an AAI is used an ambulance must be called followed by contact with parents/carers.
- 9.8. The school will ensure that risk assessments regarding the use and storage of AAls on the premises are conducted and up-to-date, as well as any risk assessments pertaining to minimising the risk of anaphylaxis in the school, e.g. with regard to food preparation.
- 9.9. There will be a sufficient number of staff who are trained, and consent, to administer AAls on site at all times.
- 9.10. Spare AAls are not located more than five minutes away from where they may be required. The emergency anaphylaxis kit(s) can be found at the following locations:
- School medical room
- 9.11. Medical authorisation and parental consent will be obtained from all pupils believed to be at risk of anaphylaxis for the use of these spare AAls in emergency situations.
- 9.12. The spare AAls will not be used on pupils who are not at risk of anaphylaxis or where there is no parental consent.
- 9.13. Where consent and authorisation has been obtained, this will be recorded in their IHP.
- 9.14. The school will maintain a Register of AAls, copies of which will be available in the medical room, which lists pupils to whom spare AAls can be administered. This includes the following:

- Name of pupil
- Known allergens
- Risk factors for anaphylaxis
- Whether medical authorisation has been received
- Whether written parental consent has been received
- Dosage requirements as per individual consent

10. Administering of Non-Prescribed Medication (i.e. Calpol, Ibruprofen, Anti-Histamine)

10.1 Medication may be given following verbal consent from a parent/carer obtained by a member of the School Office. Confirmation of the dosage and and time given will be recorded and communicated to the parent/carer either over the telephone, a message on Class Dojo or Parentmail.

11. Medical emergencies

- 11.1. The school will ensure that the Medical Emergency Risk Assessment is kept up-to-date for individual pupils.
- 11.2. Medical emergencies will be handled in line with the First Aid Policy.
- 11.3. The school will ensure that emergency medication is always readily accessible and never locked away, whilst remaining secure and out of reach of other pupils.
- 11.4. The headteacher will ensure that there is a sufficient number of staff who have been trained in administering emergency medication by an appropriate healthcare professional.
- 11.5. For all emergency and life-saving medication that is to be kept in the possession of a pupil, e.g. EpiPens or prescribed AAls, the school will ensure that pupils are told to keep the appropriate instructions with the medication at all times, and a spare copy of these instructions will be kept by the school in the school office.

12. Monitoring and review

- 12.1. This policy will be reviewed every year by the governing body and the headteacher.
- 12.2. Records of medication which have been administered on school grounds will be monitored and the information will be used to improve school procedures.
- 12.3. Staff members who are trained to administer medication will routinely recommend any improvements to the procedure.
- 12.4. Hunsbury Park Primary School will seek advice from any relevant healthcare professionals as deemed necessary.



HUNSBURY PARK PRIMARY SCHOOL



MEDICATION CONSENT FORM



The school will not give your child any medication unless you complete and sign this form and the head teacher has confirmed that school staff have agreed to administer the medication.

DETAILS OF PUPIL

NAME: _____ CLASS: _____

DATE OF REQUEST: _____ CONDITION MEDICATION IS NEEDED FOR: _____

PARENTAL SIGNATURE: _____

DETAILS OF MEDICATION

NAME OF MEDICATION: _____ (as described on container)

WHEN MEDICATION SHOULD BE ADMINISTERED: _____

HOW MUCH TO BE ADMINISTERED: _____ (as per instructions on the container)

SCHOOL ADULT TO ADMINISTER _____ OR CHILD TO ADMINISTER _____

START AND END DATES OF DATE OF MEDICATION TO BE ADMINISTERED:

START: _____ END: _____

STORAGE

Please tick appropriate box

TO BE KEPT IN CUPBOARD	
TO BE KEPT IN FRIDGE	
TO BE KEPT IN CHILD'S CLASSROOM (ie asthma inhalers)	
TO BE WITH THE CHILD AT ALL TIMES (asthma inhalers)	
OTHER INSTRUCTIONS	

ANY OTHER IMPORTANT INFORMATION THE SCHOOL SHOULD BE AWARE OF WHILST THE CHILD IS TAKING THIS MEDICATION

Please add any details below:

MEDICINES TO BE TAKEN HOME AT NIGHT: At the end of the day parents/carers must collect the medication from the school office **and not** the child.