



**St John's School.**

**Policy for Administration of Medicines in School.**

**Responsibilities.**

### **1. Introduction**

This policy must be seen within the context of the ESC policy entitled 'Administration of Medicines in Schools' which can be accessed via the ESC website and is also available in the Staffroom in a file marked ESC Health & Safety Policies.

### **2 Legal Framework**

- as described within DfESC's policy – Administration of Medicines in Schools

- The DfESC's Schools are responsible and accountable for the health and safety of pupils in their care.
- The Medicines (Jersey) Law 1995 places restrictions on dealings with medicinal products, including their administration. In the case of prescription-only medicines, anyone administering such a medicinal product by injection must be an appropriate practitioner (e.g. a doctor) or else must act in accordance with the practitioner's directions.
- There is no legal or contractual duty on school staff to administer medicine. This is a voluntary role. However, swift action would need to be taken by a member of staff to assist any pupil in an emergency.
- School staff in charge of pupils have a 'common law' duty to act as any reasonably prudent parent would to make sure that pupils are healthy and safe on school premises and this might, in exceptional circumstance, extend to administering medicine and /or taking action in an emergency.
- This duty also extends to teachers leading activities taking place off the school site, such as educational visits, school outings or field trips. The Education (Jersey) Law 1999 provides scope for teachers to do what is reasonable for the purpose of safeguarding or promoting children's welfare.
- The DfESC fully indemnifies its staff against claims for alleged negligence providing they are acting within the scope of their employment, have been provided with adequate training and are following the DfESC's guidelines. For the purposes of indemnity, the administration of medicines falls within this definition and hence staff can be reassured about the protection their employer provides.

### **3. Procedures**

Some pupils who have an ongoing medical condition will require regular medication within school hours. Likewise, children are often well enough to come to school but on medication.

To lessen the number of absences it seems sensible to accept that any necessary medication is allowed to be brought to school.

For these pupils the following procedures should be undertaken:

- It should be the exception rather than the rule for medicines to be brought into school.
- Medication should only be administered after a written request from parents using the agreed Medication Record form obtained from the School Office.
- All medicines must be clearly labelled and given to the school secretary or in her absence, the class teacher or teaching assistant, by the parent.
- Medication should be kept in the secure cupboard located in the Medical Room in the Staff Room
- Potential emergency medication e.g. epi-pens/hypoglaecemia packs or insulin should be kept in a locked cupboard in the Medical Room in the Staffroom.
- Such medication must always be taken on off site or residential trips.
- A note of the date, child's name, medication, dose and time given must be made in the First Aid information book located in the Medical Room.
- Staff administering medication should sign the book, making a note of the time, dose and date the medicine was given.
- Medicines must be administered by the school secretary, First Aid Lead or class teachers, as prescribed and directed by the parent recorded on the Medicine Request Form.
- Analgesics should not be provided to pupils by the school, but if prescribed can be administered under the same procedures described within this policy.
- The lead First Aider in school will ensure that any unused medication is returned to the parents as appropriate.
- Policy and procedures will be communicated to parents through the School Handbook, newsletters and website.

#### 4. Responsibilities

The Headteacher is responsible for informing staff of all medical procedures and giving of medicines in school.

Staff are responsible for acting within the strict guidelines of this policy.

Parents or guardians are responsible for:

- Making a request in writing for medication to be given.
- Providing medication in its original container clearly labelled with the child's name, the name of the medication, the dose and time to be given.
- Informing the school in writing of any changes of medication.
- The school administrator will create a First Aid Book with the names of children using inhalers, epi-pens or on-going medication. This will include the pupil's photo so they are clearly recognised in an emergency, details of their medication and dosage required
- The Lead First Aider in school is responsible for checking the First Aid Book recording administration of Medication on a termly basis, notifying parents of expiry dates and their need to replenish or update the medication.
- It is the responsibility of the parents to ensure that medication is taken home at the end of the day if it is needed at home.

- Parents need to ensure that their child has their inhaler with them at out of school hours sports fixtures.
- Knowing that if they send their child to school without the agreement of the Headteacher/ school administrator, lead First Aider, the school will not be responsible for that medication.

## 5. Individual Health Care Plans

Some pupils have medical conditions that, if not properly managed, could limit their access to education or require emergency treatment. Such pupils are regarded as having medical needs. Such pupils will need an Individual Health Care Plan, to ensure their safety and wellbeing.

Such plans should be drawn up in conjunction with parents, the child and the child's medical carers and should set out in detail the measures needed to support them, including preparing for a medical emergency.

All staff should be aware of the details of these plans and information although confidential, should be displayed in staff areas and where easily accessible. This will be in the school's Medical Room.

Care Plans are carried by staff for off-site visits and passed to paramedics if ambulance treatment required.

## 6. Inhalers

Parents with children in Foundation Stage and KS1 who require inhalers for asthma and allergic conditions should:

- Give the medication to Mrs Love with all written instructions of dosage and frequency of administration. Mrs Love is the school's principle administrator of medicines with Mrs Surcouf supporting when required.
- Mrs Love will place all labelled medication in the central medical cupboard in the year group section for the child.
- Mrs Love will update the First Aid records with the relevant information.
- Mrs Love will administer medication as required on the IHCP or requested by the parent.
- If Mrs Love is away from school, Mrs Surcouf will administer medication
- Class Teachers will ensure pupils have inhalers for all trips and visits.
- The Lead First Aider will check termly that expiry dates are monitored and write to parents when they need to be replaced.

In KS2:

- Pupils will keep their inhalers with them. This encourages independence and responsibility of use.
- Parents should inform Mrs Love of their child's need for an inhaler.
- Mrs Love will update the First Aid records with the relevant information and inform relevant staff.
- It may be appropriate for a spare inhaler to be provided for the school.
- The teacher and child will decide together the best place for the inhaler to be kept in the school.
- All inhalers should be clearly labelled and regularly checked by the Lead First Aider in school to ensure that they are in date. She will write to parents to inform them medication needs to be replaced

It is the parents' responsibility to provide their child/school with a named and in-date inhaler.

**Inhalers must always be taken on school trips.**

**7. Conditions requiring regular or emergency action Staff volunteers will be required in some cases to administer regular or emergency medication. They will receive appropriate training and guidance by the relevant health professionals. Children potentially requiring such medication must have an Individual Health Care Plan. If the normal routine for administering treatment breaks down e.g. a trained member of staff is not available immediate contact with the parent needs to be made to agree alternative arrangements such as the parent attending school to administer the treatment.**

**Such medications may include:**

#### **Epi-pens**

**Children with acute allergies may need an adrenalin injection by means of an Epi-pen. Full training and regular updates will be provided for all school staff in managing such a child's needs and administering medication. The last training was September 2015 and included parents of affected children. Epi-pens must be kept in a known and readily accessible place in the Medical Room and must be taken on any off site visits.**

#### **Insulin**

**The incidence of diabetes in children is becoming more and more prevalent. Children with diabetes must have an IHCP and staff who volunteer to monitor and administer medication i.e. insulin will be provided with training and specific instruction. Insulin and hypoglycaemia treatment kits must be taken on all off-site trips.**

#### **8. Residential visits**

**If a residential visit is planned the procedures laid down above should be followed. As part of the organisation for the trip parents will be asked to provide details of any medication required and to ensure that the trip leader is handed the medication which must be clearly labelled with the child's name and dosage requirements. Extra medication should be provided in case of a delayed return. Written consent to administer analgesia e.g. Calpol if necessary should be sought prior to any residential trip**

**Trudie De La Haye**

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