

Administration of Medicine Policy

Including EYFS

Introduction

The 'school' refers to all the staff and students of the Prep and Senior School that includes Early Years Foundation Stage (EYFS), Key Stage 1, Key Stage 2 and Senior School (Key Stages 3 and 4).

The school recognises the need for policies and procedures which promote the health and safety of all its students and the need to take account of the requirements of the Equality Act 2010 and the DfE 'Special Education Needs and Disability Code of Practice: 0-25 Years' (May 2015). It further recognises that many students may need to take medication in school at some time. While parents retain responsibility for their child's medication, the school has a duty of care to the students while at school and wishes to do all that is reasonable and practicable to safeguard and promote the welfare of the students.

The following policy has been developed based on the advice given in the DfE Statutory guidance document 'Supporting students at school with medical conditions' (December 2015).

Responsibility

The school will take responsibility for the administration of medicines during school time if medication cannot be given at home, in accordance with the following guidelines:

The Head will implement and oversee the policy and will report to the Health and Safety Committee. Medication will normally be administered by the Receptionist in the Senior School and Form Teachers in the Prep School or in their absence, by staff trained in the administration of medicines.

All members of staff are expected to maintain professional standards of care but have no contractual or legal duty to supervise a student taking medication or to administer medication. However, swift action may need to be undertaken by a member of staff if assisting any student in an emergency.

Some specified staff (e.g., PE staff, staff taking educational visits) who volunteer their services will be given training to administer first aid and/or medication to students.

When a student who has additional health needs comes to school, the Head and EHCP Co-ordinator will consider all factors and train staff appropriately with the help of relevant agencies and by means of an Individual Health Care Plan (IHCP). The Head will also decide and agree with the parents/guardians what level of staff training may be necessary.

Staff Indemnity

The school fully indemnifies all staff against claims for any alleged negligence, providing they are acting within their conditions of service and following school guidelines for the administration of general medicines. The indemnity covers situations where an incorrect dose is administered or where any other mistake in the procedure is made. For students with Individual Health Care Plans, these plans must be registered via our Bursar with our insurers.



Records

On joining the school all parents will be required to provide information giving full details of:

- Medical conditions
- Allergies
- Regular medication
- Emergency contact numbers
- Name of family doctor/consultant
- Special requirements (e.g., dietary needs)
- At the beginning of each academic year all parents will be required to update the medical form.

Administration of Medication

The school expects that normally parents will administer medication to their children. Any requests for medicine to be administered must come from a parent/guardian in writing on the school's **Drug Administration Form**, and each request will be considered on an individual basis. Copies of this form can be requested from Reception or Prep staff and can be seen at the end of this policy.

Drug Administration Form

Any administering of medication will be recorded on the form. The form includes:

- name of parent and contact number;
- name of student, age and form;
- name of medicine;
- Date dispensed;
- name of doctor who prescribed or advised, and contact details;
- how much to give;
- how it should be kept and stored;
- how it is to be administered;
- when to be given;
- the medicine should be in its original pharmacy packaging complete with its patient information leaflet; with the student's name on it and date dispensed;
- any other instructions.

The form ends with the following statement:

The above information is accurate to the best of my knowledge at the time of writing, and I give consent to the school to administer the medication in accordance with the school policy. I will inform the school, in writing, of any changes to the above medication.

This form will be signed and dated by a parent/guardian or someone with parental responsibility.

A new form must be completed for any additional medicine to be administered. If a student needs to be given any other medication on an ad-hoc basis, for example paracetamol, permission to administer it will be sought from parents in advance by the Receptionist.



Procedures

Parents will be expected to notify any requests for the administration of medicines at the earliest opportunity to the Head/Head of Prep and to discuss with them what needs to be done in school before a decision can be made.

The medication must be in a container prescribed by the doctor and dispensed by a pharmacist with the student's name and instructions for administration printed clearly on the label, complete with the patient information leaflet and dated.

If the student is required and able to administer their own medicine (e.g., inhaler for asthma) this should be encouraged to foster respect for medicines and to encourage responsibility. Generally, if the student is responsible for their medication at home, they should be encouraged to manage their medication at school. This will depend on age and level of understanding because the student needs to be 'Gillick competent' if they are to make their own decisions regarding their medication.

Storage of Medicines

Normally medication will be kept under the control of the Receptionist in Senior School and Prep School Staff Room. It will be stored in a locked cupboard, preferably in a cool place, but allowing for ease of access for the student. Items requiring refrigeration will be kept in a clearly labelled closed container in the school's medical fridge located in the school office for Seniors and Prep School Staff Room for Prep students.

Any medication given must be signed, dated, exact time given and recorded on the **Administration of Medicine Form** and saved to iSAMS by the Receptionist. Prep staff must pass completed forms to the Receptionist to be recorded on iSAMS.

For trips, the staff in charge should record on iSAMS on their return to school.

Safe disposal of any unused/out of date drugs/prescription medicines will be returned to parents; bodily waste in biohazard bags then in approved receptacle in First Aid Room (Seniors); sharps – in approved sharps container in the First Aid Room (Seniors).

Long-term Medical Needs

The school will do all it reasonably can to assist students with long-term needs. Each case will be discussed with the parents and if necessary the family doctor. The school also reserves the right to discuss the matter with the school's medical advisor via the Health & Safety committee.

Care plans should be provided by the consultant/doctor, specialist nurse and parents/guardians. These should be reviewed at least yearly. The information contained in the plans will be treated in confidence and will be used for no other purposes than for the school to set up an appropriate support system. The care plans should be attached to iSAMS.

Emergency Medication

The medication below can be classed as emergency medication;

- Asthma emergency inhaler (blue Salbutamol)
- Automatic adrenalin injector (EpiPen, Jext, Emerade)
- Antihistamines



These are kept with students, at Reception, PE department and in the Prep School Staff Room. Management of these in an emergency is taught to first aiders but can be administered by the general public under the direction of ambulance personnel in a life-threatening incident. They must only be used for students who have been diagnosed and prescribed these medications.

Administration of Medicine in EYFS and Prep School

This section clarifies the procedure for storing and administering medication in the EYFS. We ask parents to bring medication to school only when absolutely necessary. It should not be administered without written direction.

Procedure

If the administration of any medication requires specific training, this must be in place before any medication can be given.

Information as to medication/medical need is given to staff and updated on the computer system.

Only medicines prescribed or advised by a doctor or pharmacist will be administered to a student, this includes medicines containing aspirin. Parents are encouraged to administer medicine at home where possible.

Medication takes two forms:

- 1. Regular medication for an ongoing condition e.g. asthma.
- 2. A short course of prescribed medication e.g. antibiotics.

Parents must fill in a **Drug Administration Form** which includes times and dosage. They must do this on each and every day for which they are requesting the administration of medicine and both member of staff and parent must complete the **Medication Sign In/Out Form**.

The member of staff administering must complete the **Administration of Medicines Form** and sign. Medicine must be in original packaging with clear instructions for dosage amounts and times. Staff can only administer the stated dosage at the stated time.

If a student administers their own medication, e.g., an inhaler, the member of staff present should fill in the **Administration of Medicines Form** and update iSAMS.

All forms must be scanned and added to iSAMS. Forms are confidential, classed as a legal document to be kept until the student's 25th birthday.

A nominated member of staff will check medication for expiry dates termly and report to parents if any need to be replaced.

Staff with medication in both the Prep and Senior schools must store this securely out of the reach of children.



This policy is to be read in conjunction with:

First Aid Policy Admissions Policy Allergy Policy Health & Safety Policy

Government guidance: Supporting Students at School with Medical Conditions: https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

Approved by SLT:	February 2023
Next Review Due:	February 2024



Drug Administration Form

Request for school to administer medication - this form must be completed for school to administer.

Name of Student:			Year/Form:			
Date of Birth:						
Condition or Illness:						
MEDICATION						
Name/Type of Medication: (as described on the containe	er)					
How long will your child take t medication?	his					
Date dispensed:						
FULL DIRECTIONS FOR USE OF MEDICATION						
Dosage and Method:						
Timing:						
Special Precautions:						
Side Effects:						
Self-Administration:						
Procedures to take in an eme	rgency:					
Should the medicine be stored fridge?:	d in a					
		CONTACT DETAILS				
Name:						
Contact Telephone Number:						
Relationship to Student:						
Name of Doctor and Address:						
Parent Signature(s):						
Date:						
Prep School Only: I understand that I must deliver the medicine personally to my child's Class Teacher each day (or in their absence to the Head of Prep School)						
Staff to Check and Complete:		Medication is prescribed to nan Medication is in date Medication is in its original cont Medication includes details of d Date dispensed on label	ned child tainer	ctions		
Staff Signature:						

The above information is accurate to the best of my knowledge at the time of writing, and I give consent to the school to administer the medication in accordance with the school policy. I will inform the school, in writing, of any changes to the above medication.

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Medication Sign In/Out Form

Date	Class Teacher (Signing in Medication)	Parent (Signing Out Medication)			
	I have received the medicine from:	I have received the medicine from:			
	Parent's Name:	Teacher's Name:			
	Signed by Teacher:	Signed by Parent:			
	I have received the medicine from:	I have received the medicine from:			
	Parent's Name:	Teacher's Name:			
	Signed by Teacher:	Signed by Parent:			
	I have received the medicine from:	I have received the medicine from:			
	Parent's Name:	Teacher's Name:			
	Signed by Teacher:	Signed by Parent:			
	I have received the medicine from:	I have received the medicine from:			
	Parent's Name:	Teacher's Name:			
	Signed by Teacher:	Signed by Parent:			
	I have received the medicine from:	I have received the medicine from:			
	Parent's Name:	Teacher's Name:			
	Signed by Teacher:	Signed by Parent:			
	I have received the medicine from:	I have received the medicine from:			
	Parent's Name:	Teacher's Name:			
	Signed by Teacher:	Signed by Parent:			
	I have received the medicine from:	I have received the medicine from:			
	Parent's Name:	Teacher's Name:			
	Signed by Teacher:	Signed by Parent:			



Administration of Medicines Form

Name of Student:									
Year/Forn	n:								
Name of I	Medication:								
Dosage to be given:									
Date	Time	Dos Giv	age ven	Any Reactions	Signature of Staff	Print Name	Witness Signature	Print Name	Sign out Medication