School Medicine Policy

Introduction

The purpose of this policy is to ensure that any medicines administered within school are done so in a safe and monitored environment. It has been written using guidance from the DFES notes "Managing Medicines in School and Early Years Settings" from March 2005 and is in line with the LA guidelines.

Children with medical needs have the same rights of admission to a school or setting as other children. Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children however have longer term medical needs and may require medicines on a long-term basis to keep them well, for example children with well-controlled epilepsy or cystic fibrosis. In line with government guidelines we would ask that children are not sent to school when they are clearly unwell or infectious.

Parental Responsibility

- Parents/Carers have the prime responsibility for their child's health and should provide school with information about their child's medical condition. This should be done upon admission or when their child first develops a medical need.
- Where a child has a long term medical need then a health plan will be drawn up with the Parents/Carers and Health Professionals

Prescribed Drugs

- Medicines should only be taken to school where it would be detrimental to a child's health if the medicine were not administered during the school day. School can only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.
- Medicines will be stored in a secure cabinet during the day or a fridge where necessary.
- Parents will be required to sign a permission form to allow school staff or the child to self administer under supervision in accordance with the prescription.
- The Headteacher, Deputy Headteacher or Administrative staff will usually be

responsible for the administering of medication where self administration does not take place.

- A record will be made of when the medicine was dispensed, the dose and by whom.
- Parent/Carer should make arrangements to collect the medicine from the school office at the end of the day unless alternative arrangements are made with the school staff. Medicines will not be handed to a child to bring home unless agreed as in Self Management below.

Non Prescribed drugs

We will only administer non-prescribed drugs (e.g. paracetomol suspension) where parents have brought in the medicine and signed a consent form.

Records

Records of the administered medication and authorisation will be kept by the school admin staff.

Refusal of Medicine

If a child refuses to take medicine, we will not force them to do so, but will note this in the records and contact the named contact on the medicine record form. If a refusal to take medicines results in an emergency then our emergency procedures will be followed.

Self-Management

Older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent. Children develop at different rates and so the ability to take responsibility for their own medicines varies. This is borne in mind when making a decision about transferring responsibility to a child or young person. There is no set age when this transition should be made. There may be circumstances where it is not appropriate for a child of any age to self manage. Health professionals need to assess, with parents and children, the appropriate time to make this transition. Parents/Carers will be required to complete a "Self Management" form which will detail where the medicines are to be stored during the school day.

Educational Visits

We will make reasonable adjustments to enable children with medical needs to participate fully and safely on visits. Any risk assessments undertaken will allow for such children. Staff supervising excursions will be aware of any medical needs, and relevant emergency procedures. A copy of any health care plans will be taken on visits in the event of the information being needed in an emergency.

If staff are concerned about whether they can provide for a child's safety, or the safety of other children on a visit, they will seek parental views and medical advice from the school health service or the child's GP.

Sporting Activities

Most children with medical conditions can participate in physical activities and extracurricular sport. There should be sufficient flexibility for all children to follow in ways appropriate to their own abilities. Any restrictions on a child's ability to participate in PE should be recorded in their individual health care plan. The school is aware of issues of privacy and dignity for children with particular needs. Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Known medical conditions

Children within a class with any known medical condition will be recorded in the class file each classroom. A central register is held in the office to ensure that all staff have access to the information. When supply staff are asked to cover a classroom it will be the responsibility of the member of staff showing the supply teacher to the room where the list is held.

Training

Any staff required to administer prescribed medicines will receive training to do so. All staff will receive regular refresher training on the common conditions and procedures for managing prescription medicines which need to be taken during the school day.

Review This policy will be reviewed every 3 years or in line with new guidance or change of practice