



Snape Wood Primary and Nursery School

Excellence for All

We are a small school that makes a big difference'

'To provide excellence for all within a happy, safe, and stimulating learning environment'

MEDICATION POLICY

SNAPE WOOD PRIMARY AND NURSERY SCHOOL	
Approved by: Full Governing Body	Date: Spring 2023
Review Date:	Spring 2024

Managing Medicines at Snape Wood Primary School

As part of the government's agenda to improve the lives of children and young people, we at Snape Wood Primary School are pleased to be able to introduce our policy on managing prescription medicines in school.

Our policy is to ensure that children requiring prescription medicines during the school day receive the support they need. The policy ensures that everyone, including parents/carers, is clear about their respective roles.

We have in place an effective system to help support individual children with medical needs and make sure that within school, medicines are handled responsibly and ensure that all school staff is clear about what to do in the event of a medical emergency.

Children with Medical Needs

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. Others may require medicines in particular circumstances, such as children with severe allergies who may need medication. Children with severe asthma may have a need for daily inhalers and additional doses during an attack.

Most children with medical needs can attend school and take part in normal activities, sometimes with some support. However, staff may need to take extra care in supervising some activities to make sure that these children, and others, are not put at risk.

An individual health care plan can help staff identify the necessary safety measures to support children with medical needs and ensure that they and others are not put at risk.

Support for Children with Medical Needs

Parents/Carers have the prime responsibility for their child's health and should provide schools with information about their child's medical condition. Parents should obtain details from their child's General Practitioner (GP) or paediatrician, if needed. The school doctor or nurse or a health visitor and specialist voluntary bodies may also be able to provide additional background information for staff.

Snape Wood Primary School Office Staff will administer prescription medicines only.

Snape Wood Primary School Office Staff will be fully trained in the administration of medicines and will have the full support of health professionals.

Some children with medical needs have complex health needs that require more support than regular medicine. In such instances Snape Wood Primary School will seek professional medical advice and support. We will also develop a partnership with the child's parent/carer, thus ensuring the child safety is paramount.

Prescribed Medicines that need to be taken during the school day

Medicines should only be taken in school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. Snape Wood Primary School staff should only accept medicines that have been prescribed by a medical practitioner. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.

Snape Wood Primary School must never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

Medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime. Whenever possible this should happen and wherever possible parents should be asked to follow this procedure.

Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children, e.g. methylphenidate.

Staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions.

A child who has been prescribed a controlled drug may legally have it in their possession. It is permissible for school to look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed.

Snape Wood Primary School must keep controlled drugs in a locked, nonportable container and only Snape Wood Primary School Office staff should have access. A record should be kept for audit and safety purposes.

A controlled drug, as with all medicines, must be returned to the parent when no longer required to arrange for safe disposal (by returning the unwanted supply to the local pharmacy). If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label).

Misuse of a controlled drug, such as passing it to another child for use, is an offence.

Non-Prescription Medicines

Snape Wood Primary School Staff must **never** give non-prescribed medicine to a child unless the Head Teacher has agreed to this procedure with the parent/carer and the relevant form has been signed.

Where a non-prescribed medicine is administered to a child it should be recorded.

A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Short -Term Medical Needs

Many children will need to take medicines during the day at some time during their time in school. This will usually be for a short period only, perhaps to finish a course of antibiotics or to apply a lotion. To allow children to do this will minimize the time that they need to be absent. However such medicines should only be taken in school where it would be detrimental to a child's health if it were not administered during the school day.

Long-Term Medical Needs

It is important to have sufficient information about the medical condition of any child with long-term medical needs. If a child's medical needs are inadequately supported this may have a significant impact on a child's experiences and the way they function in or out of school. The impact may be direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state.

School need to know about any particular needs before a child is admitted, or when a child first develops a medical need. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. It is often helpful to develop a written health care plan for such children, involving the parents and relevant health professionals.

Administering Medicines

No child under 16 should be given medicines without their parent's written consent. Members of the Office Staff giving medicines to a child should check the child's name, prescribed dose, and expiry date, written instructions provided by the prescriber on the label or container. If in doubt about any procedure staff should not administer the medicines but check with the parents or a health professional before taking further action.

If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent, if appropriate, or with a health professional attached to school.

Snape Wood Primary School Office staff **MUST** complete and sign the necessary record each time they give medicine to a child.

Self-Management

It is good practice to support and encourage children, who are able, to take responsibility to manage their own medicines from a relatively early age and school should encourage this. The age at which children are ready to take care of, and be responsible for, their own medicines, varies. As children grow and develop they should be encouraged to participate in decisions about their medicines and to take responsibility.

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.

Children can take their medicines themselves, our staff may only need to supervise. However, if this is to happen a signed consent form from the parent/carer must be obtained and the medicine concerned **MUST** be kept in a secure, locked first aid cabinet, which cannot be accessed by other children.

Where children have been prescribed controlled drugs, staff need to be aware that these should be kept in safe custody. However, children can self-medicate if it is agreed that it is appropriate, under the supervision of office staff.

Refusing Medicines

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and immediately inform the child's parents/carer.

If a refusal to take medicines results in an emergency, the school's emergency procedures should be followed.

Record Keeping

A record will be kept of all prescribed medicines given to children throughout the school day, although there is no legal requirement for schools to keep such records.

Educational Visits

It is good practice for schools to encourage children with medical needs to participate in safely managed visits.

All reasonable adjustments/risk assessments will be made to educational visits to enable children with medical needs to participate fully and safely on visits. If necessary additional safety measures and/or additional staff or the parent of the child concerned may need to accompany the child on educational visits.

Arrangements for taking any necessary medicines on the Educational Visit will be the responsibility of the Trip Organizer.

A copy of health care plans will be taken on any visits in case this information is needed in an emergency.

Sporting Activities

Most children with medical conditions can participate in physical activities and extra-curricular sport. Our policy is that there should be sufficient flexibility for all children to follow in ways appropriate to their own abilities. For many, physical activity can benefit their overall social, mental and physical health and well-being.

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.

Teachers supervising sporting activities should consider whether risk assessments are necessary for some children, be aware of relevant medical conditions and any preventative medicine

The Employer

Snape Wood Primary School must ensure that proper procedures are in place; and that all staff members are aware of the procedures, are fully trained and that accurate records are kept.

Parents and Carers

Parents, as defined in section 576 of the Education Act 1996, include any person who is not a parent of a child but has parental responsibility for or care of a child. In this context, the phrase 'care of the child' includes any person who is involved in the full-time care of a child on a settled basis, such as a foster parent, but excludes baby sitters, child minders, nannies and school staff.

It only requires one parent to agree to or request that medicines are administered. As a matter of practicality, it is likely that this will be the parent with whom the school or setting has day-to-day contact.

Where parents disagree over medical support, the disagreement must be resolved by the Courts. The school should continue to administer the medicine in line with the consent given and in accordance with the prescriber's instructions, unless and until a Court decides otherwise.

It is important that professionals understand who has parental responsibility for a child. The Children Act 1989 introduced the concept of parental responsibility. The Act uses the phrase “parental responsibility” to sum up the collection of rights, duties, powers, responsibilities and authority that a parent has by law in respect of a child.

In the event of family breakdown, such as separation or divorce, both parents will normally retain parental responsibility for the child and the duty on both parents to continue to play a full part in the child’s upbringing will not diminish. In relation to unmarried parents, only the mother will have parental responsibility unless the father has acquired it in accordance with the Children Act 1989. Where a court makes a residence order in favour of a person who is not a parent of the child, for example a grandparent, that person will have parental responsibility for the child for the duration of the Order.

If a child is ‘looked after’ by a Local Authority, the child may either be on a care order or be voluntarily accommodated. A Care Order places a child in the care of a Local Authority and gives the Local Authority parental responsibility for the child. The Local Authority will have the power to determine the extent to which this responsibility will continue to be shared with the parents. A Local Authority may also accommodate a child under voluntary arrangements with the child’s parents. In these circumstances the parents will retain parental responsibility acting so far as possible as partners of the Local Authority. Where a child is looked after by a Local Authority day-to-day responsibility may be with foster parents, residential care workers or guardians.

Parents should be given the opportunity to provide the head with sufficient information about their child’s medical needs if treatment or special care needed. They should, jointly with the head, reach agreement on the school’s role in supporting their child’s medical needs, in accordance with the employer’s policy. Ideally, the head should always seek parental agreement before passing on information about their child’s health to other staff. Sharing information is important if staff and parents are to ensure the best care for a child.

Some parents may have difficulty understanding or supporting their child’s medical condition themselves. Local health services can often provide additional assistance in these circumstances.

The Governing Body

Individual schools should develop policies to cover the needs of their own school. The policies should reflect those of their employer. The governing body has general responsibility for all of the school’s policies even when it is not the employer. The governing body will generally want to take account of the views of the head teacher, staff and parents in developing a policy on assisting pupils with medical needs.

Where the Local Authority is the employer, the school’s governing body should follow the health and safety policies and procedures produced by the Local Authority.

Criteria under the national standards for under 8s day care make it clear that day care providers should have a clearly understood policy on the administration of medicines. If the administration of prescription

medicines requires technical or medical knowledge then individual training should be provided to staff from a qualified health professional.

Training is specific to the individual child concerned. Ofsted's guidance on this standard sets out the issues that providers need to think through in determining the policy.

The Head Teacher

The Head Teacher is responsible for putting the employer's policy into practice and for developing detailed procedures. Day to day decisions will normally fall to the Head Teacher.

The employer **must** ensure that staff receive proper support and training where necessary. Equally, there is a contractual duty on head teachers to ensure that their staff receive the training. As the manager of staff, it is likely to be the head teacher who will agree when and how such training takes place. The Head Teacher should make sure that all parents and all staff are aware of the policy and procedures for dealing with medical needs. The Head Teacher should also make sure that the appropriate systems for information sharing are followed.

The policy should make it clear that parents should keep children at home when they are acutely unwell. The policy should also cover the approach to taking medicines at Snape Wood Primary School. The Head Teacher and governors of schools must ensure that the policy and procedures are compatible and consistent with any registered day care operated either by them or an external provider on school premises.

For a child with medical needs, the Head Teacher will need to agree with the parents exactly what support can be provided. Where parents' expectations appear unreasonable, the Head Teacher should seek advice from the school nurse or doctor, the child's GP or other medical advisers and, if appropriate, the employer. In early years settings advice is more likely to be provided by a health visitor.

If staff follow documented procedures, they should be fully covered by their employer's public liability insurance should a parent make a complaint. The Head Teacher should ask the employer to provide written confirmation of the insurance cover for staff who provide specific medical support. Registered persons are required to carry public liability insurance for day care provision.

Teachers and Other Staff

Some staff may be naturally concerned for the health and safety of a child with a medical condition, particularly if it is potentially life threatening. Staff with children with medical needs in their class or group should be informed about the nature of the condition, and when and where the children may need extra attention. The child's parents and health professionals should provide this information.

All staff should be aware of the likelihood of an emergency arising and what action to take if one occurs. Back up cover should be arranged for when the member of staff responsible is absent or unavailable. At

different times of the day other staff may be responsible for children, such as lunchtime supervisors. It is important that they are also provided with training and advice.

School Staff Giving Medicines

Teachers' conditions of employment do not include giving or supervising a pupil taking medicines. Schools should ensure that they have sufficient members of support staff who are employed and appropriately trained to manage medicines as part of their duties.

Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child should have appropriate training and guidance.

They should also be aware of possible side effects of the medicines and what to do if they occur. The type of training necessary will depend on the individual case.

The Local Authority

In community, community special and voluntary controlled schools and community nursery schools, the Local Authority, as the employer, is responsible for all health and safety matters. For local authority day nurseries, out of school clubs (including open access schemes), holiday clubs and play schemes the registered person, which may be the authority itself, is responsible for all health and safety matters.

The Local Authority should provide a general policy framework to guide schools in developing their own policies on supporting pupils with medical needs. Many Local Authorities find it useful to work closely with their Primary Care Trusts (PCTs) when drawing up a policy. The Local Authority may also arrange training for staff in conjunction with health professionals.

Local Authorities have a duty under the Children Act 1989 to provide advice and training for day care providers. However, providers should seek appropriate training from qualified professionals to deal with the needs of specific children.

Primary Care and NHS Trusts

PCTs have a statutory duty to purchase services to meet local needs. PCTs and National Health Service (NHS) Trusts may provide these services. PCTs, Local Authorities and school governing bodies should work in co-operation to determine need, plan and co-ordinate effective local provision within the resources available.

PCTs **must** ensure that there is a medical officer with specific responsibility for children with special educational needs (SEN)¹⁶. Some of these children may have medical needs. PCTs and NHS Trusts, usually through the school health service, may provide advice and training for staff in providing for a child's medical needs.

Health Services

The nature and scope of local health services to schools and settings varies between Health Trusts. They can provide advice on health issues to children, parents, teachers, education welfare officers and Local Authorities. The main health contact for schools is likely to be a school nurse, whilst early years settings usually link with a health visitor.

The school health service may also provide guidance on medical conditions and, in some cases, specialist support for a child with medical needs.

Most schools will have contact with the health service through a school nurse or doctor. The school nurse or doctor should help schools draw up individual health care plans for pupils with medical needs, and may be able to supplement information already provided by parents and the child's GP. The nurse or doctor may also be able to advise on training for school staff on administering medicines, or take responsibility for other aspects of support. In early years settings, including nursery schools, a health visitor usually provides the support and advice.

Every child should be registered with a GP. GPs work as part of a primary health care team. Parents usually register their child with a local GP practice. A GP owes a duty of confidentiality to patients, and so any exchange of information between a GP and a school should normally be with the consent of the child if appropriate or the parent. Usually consent will be given, as it is in the best interests of children for their medical needs to be understood by school staff. The GP may share this information directly or via the school health service. 100. Many other health professionals may take part in the care of children with medical needs. Often a community paediatrician will be involved. These doctors are specialists in children's health, with special expertise in childhood disability, chronic illness and its impact in the school setting. They may be directly involved in the care of the child, or provide advice to schools in liaison with the other health professionals looking after the child.

Most NHS Trusts with school health services have pharmacists. They can provide pharmaceutical advice to school health services. Some work closely with local authority education departments and give advice on the management of medicines within school. This could involve helping to prepare policies related to medicines in school and training school staff. In particular, they can advise on the storage, handling and disposal of medicines.

Some children with medical needs receive dedicated support from specialist nurses or community children's nurses, for instance a children's oncology nurse. These nurses often work as part of a NHS Trust or PCT and work closely with the primary health care team. They can provide advice on the medical needs of an individual child, particularly when a medical condition has just been diagnosed and the child is adjusting to new routines.

Disposal of Medicines

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each term. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained by parents on prescription from the child's GP or paediatrician. Collection and disposal of the boxes should be arranged with the Local Authority's environmental services.

Hygiene and Infection Control

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

Purpose of a Health Care Plan

The main purpose of an individual health care plan for a child with medical needs is to identify the level of support that is needed. Not all children who have medical needs will require an individual plan. A short-written agreement with parents may be all that is necessary for the child's particular needs.

Staff should judge each child's needs individually as children and young people vary in their ability to cope with poor health or a particular medical condition.

Staff Training

Staff should not give medicines without appropriate training from health professionals.

Confidentiality

School staff should always treat medical information confidentially.

SNAPE WOOD PRIMARY SCHOOL

Contacting Emergency Services Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information

1. Your telephone number: 01159 159146
2. Give your location as follows:
Snape Wood Primary School
Aspen Road
Snape Wood
Bulwell
Nottingham
3. State that the postcode is: NG6 7DS
4. Give exact location in the school: Off Sellars Wood Road Bulwell
5. Give your name.
6. Give name of child and a brief description of child's symptoms.
7. Inform Ambulance Control of the best entrance and state that the crew will be met and the school gates will be already open.

Speak clearly and slowly and be ready to repeat information if asked.

SNAPE WOOD PRIMARY SCHOOL

Health Care Plan

Child's Name	
Class	
Date of Birth	
Child's Address	
Medical Diagnosis/Condition	
Contact Name	
Contact Telephone Number	
Clinic/Hospital Contact	
Telephone Number	
Doctor Name	
Doctor Number	
Describe medical needs/symptoms	
Daily Care Requirements	
Describe what constitutes an emergency, and the action to be taken should this occur	
Parent/Carer Signature	
Date	

SNAPE WOOD PRIMARY SCHOOL

Parental Agreement for School Office Staff to Administer Prescription Medicine, or Child to Self-Administer Prescription Medicine

Snape Wood Primary School Office Staff will not give your child prescribed medicine unless you complete and sign this form.

Name of child	
Date of birth	
Class	
Medical condition/Illness	
Medicine	
Name/type of medicine	
Date dispensed	
Expiry date	
Dosage/method/time	
Special precautions	
Are there any side effects that the school needs to know about?	
Self Administration	Yes/No Please indicate
Contact Details	
Name	
Daytime Contact telephone no.	

I understand that I must deliver the medicine personally to the School Office.

I accept that this is a service that the school is not obliged to undertake.

I understand that I must notify the school of any changes in writing.

DateSignature

SNAPE WOOD PRIMARY SCHOOL

Request for child to carry his/her own medicine

This form must be completed by parents/guardian.

Child's name
Class
Address
Name of medicine
Dosage /method /time
Procedures to be taken in an emergency.
Contact Information
Name
Daytime phone no
Relationship to child

I would like my son/daughter to keep his/her medicine on him/her for use as is necessary.

Signed

Date

Record of medicines administered to all children

[illegible]

SNAPE WOOD PRIMARY SCHOOL

Head Teacher Agreement to Administer Non Prescription Medicine

Name of Child **Class**

It is agreed that will receive at
every day/to day only /times per day at

The child will be given/supervised whilst she/he takes their non-prescription medicine by
Office Staff.

The arrangement will continue for

Signed Head Teacher..... **Date**

Signed Parent **Date** '.....