

Balcombe C E (C) School



Management of Medical Needs and Administration of Medicines Policy

Adopted by Governors: Mar 2015

Reviewed: Oct 2015

Next Review: Jul 2017

IMPLEMENTATION MONITORING AND REVIEW

All staff, governors, parents/carers and members of Balcombe C E Primary School community will be made aware of and have access to this policy. This policy will be reviewed bi-annually by a member of the FGB.

INTRODUCTION

Parents have the prime responsibility for ensuring a child's health and for deciding whether they are fit to attend school. Parents should also provide all necessary information about their child's medical needs to the school.

As a school, we fulfil our duty to plan how administering medicines can be accommodated in school and on educational visits to allow children who have medical needs to attend.

NON-PRESCRIPTION MEDICINES

Only 2 non-prescription medications will be administered in school, all other non-prescription medication will not be administered at school and pupils should not bring them to school for self-administration. The majority of medication lasts 4-6 hours, therefore non-prescription medication can be administered at home prior to the start of the school day and it will last the duration of the school day. A parent or guardian may attend school to administer additional doses if necessary.

Only non-prescription travel sickness medication and antihistamine (Piriton) can be administered in school. Antihistamine can only be administered where a GP/Consultant has recommended or prescribed antihistamine for the treatment of a mild allergic reaction (i.e. itchy eyes or skin, rash or/and redness of the skin or eyes). The school can administer 1 standard dose of antihistamine (appropriate to age and weight of the pupil) and it is very important that symptoms are monitored for signs of further allergic reaction until the parent (or nominated adult) arrives to resume parental responsibility. During this time pupils must never be left alone and should be observed at all times. If symptoms develop or there are any signs of anaphylaxis or if there is any doubt regarding symptoms in specific cases, where prescribed, then an adrenaline auto injector should be administered without delay and an ambulance called. Piriton can cause drowsiness and therefore the school will consider if it is necessary for pupils to avoid any contact with equipment that might cause harm i.e. P.E. Science, Design and Technology.

PROCESS FOR THE ADMINISTRATION OF MEDICINES IN SCHOOL – SHORT TERM MEDICAL NEEDS

Medicines should normally be administered at home and only taken into school when absolutely necessary (where it would be detrimental to the child's health, or would greatly impact on a child's school attendance, if the medicine were not taken during the school day).

The school will only accept:

- Medicines prescribed by a medical practitioner
- Medicines that are in date
- Medicines that need to be administered in excess of 3 times per day.
- Medicines in their original container, as dispensed by a pharmacist

- Containers with labelling identifying the child by name and with original instructions for administration, dosage and storage.

On accepting medication, the parent must sign the school's Medical Register disclosing all details and giving permission for the medication to be administered by a member of staff.

The medicine will be kept in the medical cupboard (except where storage in a fridge is required) and only accessed by the adult administering it.

When administering, the named adult must sign the Medical register which is kept in the medical cupboard showing the date and time and details/dosage of the medication.

In the case of the child being allowed to administer their own medication, an adult will be present with the child and this must again be added to the record and signed by the adult.

Under no circumstances should a parent send a child to school with any medicines, e.g. throat sweets/tablets, without informing the school. These could cause a hazard to the child or to another child if found and swallowed.

Parents are encouraged to come into school to administer medicines themselves that the school are not willing to administer.

RECORD KEEPING

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during educational visits. A parent or guardian will be informed if their child has been unwell during the school day.

ASTHMA

Parents of any child requiring an inhaler to be kept at school or child keeping an inhaler in their own possession at school will be required to complete our Asthma Pupil Health Form. On this form they are required to state whether their child:

1. requires a spacer and assistance with administration of the inhaler
2. Does not require a spacer but does need assistance with the administration of the inhaler
3. Can administer their inhaler personally but in the presence of a staff member
4. May retain their inhaler in their school bag/locker/on their person and administer the inhaler as and when required on their own without supervision.

In accordance with the Human Medicines Regulations 2014 the school will keep a small supply of salbutamol inhalers which will be supplied to the school by the parents and parental consent gained. These will be kept in the school office.

PROCESS FOR ADMINISTERING MEDICINES IN SCHOOL – LONG TERM MEDICAL NEEDS

Where a parent requires medication for their child to be kept at school they must complete the school's Pupil Health Form giving full details of the medication and dosage.

Where a child has long-term medical needs, a care plan will be written with the assistance of the school nurse provided by West Sussex county Council as required and in the presence of the parent/guardian of the named child. This may also result in an individual risk assessment also being required. The care plan will be followed and reviewed at least annually.

It is the parent's responsibility to inform the school of any changes to the child's condition that may require the details of the care plan to be altered. In these circumstances the care plan will be updated and revised arrangements put in place as soon as practicable.

It is the Headteacher's responsibility to ensure that all procedures are in place to enable the child to attend school safely, including regular review of the policy, liaison with healthcare professionals and providing training for staff ensuring IHPs are developed, shared and followed.

PROCESS FOR ADMINISTERING MEDICINES DURING EDUCATIONAL VISITS – ALL MEDICAL NEEDS

For the purpose of residential visits, there will be a named person with responsibility for the administration of medicines and care of children as above. Parents will be asked to complete a form and may be required to meet with the named staff to ensure that staff are aware of all medical requirements.

In the case of higher levels of care eg intimate care, the named member of staff will also meet with the school nurse, or other recognised medical advisor to ensure that they are trained in dealing with the level of care required.

EMERGENCY SITUATION

In the event of an emergency staff should

- ✚ call 999 and request an ambulance.
- ✚ contact parents
- ✚ a member of staff will stay with the child at all times until parent arrives including accompanying child to hospital if parent not arrived

