



and



Abbots Farm Preschool

Administering Medication

Policy

October 2021

Review by October 2023

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Statement of intent

Abbots Farm Infant School and Abbots Farm Preschool will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy.

This policy has been developed in line with the DfE's guidance: 'Supporting pupils at school with medical conditions'.

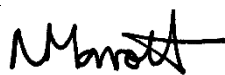
The school is committed to ensuring that parents feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

Signed by:



Headteacher

Date: 14/10/21



Chair of governors

Date: 14/10/21

1. Legal framework

- 1.1. This policy has due regard to statutory legislation and guidance including, but not limited to, the following:
 - Children and Families Act 2014
 - DfE (2015) 'Supporting pupils at school with medical conditions'
 - DfE (2017) 'Using emergency adrenaline auto-injectors in schools'
- 1.2. This policy is implemented in conjunction with the following school policies:
 - Supporting Pupils with Medical Conditions Policy
 - Retention Policy
 - Complaints Policy and Procedures

2. Definitions

- 2.1. Abbots Farm Infant School and Abbots Farm Preschool defines “medication” as any prescribed or over the counter medicine.
- 2.2. The school defines “prescription medication” as any drug or device prescribed by a doctor.
- 2.3. The school defines a “staff member” as any member of staff employed at the school, including teachers.
- 2.4. For the purpose of this policy, “medication” will be used to describe all types of medicine.
- 2.5. The school defines a “controlled drug” as a drug around which there are strict legal controls due to the risk of dependence or addiction, e.g. morphine.

3. Key roles and responsibilities

- 3.1. The **governing body** is responsible for:
 - The implementation of this policy and procedures.
 - Ensuring that this policy, as written, does not discriminate on any grounds, including but not limited to: ethnicity or national origin, culture, religion, gender, disability or sexual orientation.
 - Ensuring the correct level of insurance is in place for the administration of medication.

- Ensuring that members of staff who provide support to pupils with medical conditions are suitably trained and have access to information needed.
- Ensuring that relevant health and social care professionals are consulted in order to guarantee that the needs of pupils with medical conditions are properly supported.
- Managing any complaints or concerns regarding the support provided or administration of medicine using the school's Complaints Procedures Policy.

3.2. The **headteacher** is responsible for:

- The day-to-day implementation and management of this policy and relevant procedures.
- Ensuring that appropriate training is undertaken by staff members administering medication.
- Ensuring that staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system.
- Organising another appropriately trained individual to take over the role of administering medication in the case of staff absence.
- Ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.

3.3. All **staff** are responsible for:

- Adhering to this policy and ensuring children do so also.
- Carrying out their duties that arise from this policy fairly and consistently.

3.4. **Parents** are responsible for:

- Keeping the school informed about any changes to their child's health.
- Completing a medication administration form ([Appendix A](#)) prior to bringing any medication into school.
- Discussing medications with their child prior to requesting that a staff member administers the medication.

3.5. It is both staff members' and childrens' responsibility to understand what action to take during a medical emergency, such as raising the alarm with other members of staff and informing a first aider.

4. Training of staff

4.1 Any specific training required by staff on the administration of medication (e.g. adrenaline via an “EpiPen”) will be provided by or through the school nurse.

4.2 Staff will not administer such medicines until they have been trained to do so. The school will keep records of all staff trained to administer medicines and carry out other medical procedures. Training will be updated as appropriate.

5. Receiving and storing medication

5.1. The parents of children who need medication administered at school will need to complete a medicine form which can be collected from the school office or downloaded from the school website.

5.2. Routine medication given with a syringe needs to be handed in at the school office. Medication that may be required in emergency circumstances, e.g. asthma inhalers and “EpiPens” should be handed directly to the class teacher. All medication needs to be handed in with the appropriate medical form.

5.3. Consent obtained from parents will be renewed every time new medication is required or annually for long term medication such as inhalers.

5.4. The school will not, under any circumstances, administer aspirin unless there is evidence that it has been prescribed by a doctor.

5.5. The school will only allow prescribed medication, and only a maximum of doses required for that day, to be stored in the school.

5.6. Medication will be stored according to the following stipulations:

- In a premeasured syringe with the original container alongside the instructions
- Clearly labelled with the name of the child
- Clearly labelled with the frequency of administration, any likely side effects and the expiry date
- Alongside the medicine form

Medication that does not meet these criteria will not be administered.

5.7. The school will ensure that all medications are kept appropriately, according to the product instructions, and are securely stored in a place that is inaccessible to children.

5.8. Medication that may be required in emergency circumstances, e.g. asthma inhalers and “EpiPens”, will be not be kept in locked cupboards. Such

medication will be stored in such a way that they are readily accessible to children who may need them and can self-administer, and staff members who will need to administer them in emergency situations.

- 5.9. The school will not store surplus or out-of-date medication, and parents will be asked to collect containers for delivery back to the chemist.
- 5.10. The school will ensure that children know where their medication is at all times and are able to access them immediately.
- 5.11. Needles and sharp objects will always be disposed of in a safe manner, e.g. the use of 'sharp boxes'.
- 5.12. At the end of a school year all medication will be sent home.

6. Administering medication

- 6.1. Medication will only be administered at school if it would be detrimental to the child not to do so.
- 6.2. Staff will have available:
 - Facilities to enable staff members to wash their hands before and after administering medication, and to clean any equipment after use if necessary
 - PPE for use where necessary
- 6.3. Before administering medication, the responsible member of staff should check:
 - The child's identity.
 - That the school possesses a completed medicine form from a parent.
 - That the medication name and strength and dose instructions match the details on the medicine form.
 - That the name on the medication label is the name of the child who is being given the medication.
 - That the medication to be given is within its expiry date.
 - That the child has not already been given the medication within the accepted timeframe.
- 6.4. If there are any concerns surrounding giving medication to a child, the medication will not be administered and the school will consult with the child's parent documenting any action taken.
- 6.5. Staff will support the child in using the premeasured syringe or inhaler.
- 6.6. If a child refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their Individual Healthcare Plan (See

section 8), and parents will be informed so that alternative options can be considered.

- 6.7. The school will not be held responsible for any side effects that occur when medication is taken correctly.
- 6.8. Written records will be kept of all medication administered to children, including the date and time that medication was administered and the name of the staff member responsible.
- 6.9. Records are stored in accordance with the Record Management Policy.

7. Out-of-school activities and trips

- 7.1. In the event of a school trip or activity which involves leaving the school premises, medication and devices such as insulin pens and asthma inhalers, will be readily available to staff and children.
- 7.2. The medication will be carried by a designated staff member for the duration of the trip or activity.
- 7.3. There will be at least one staff member who is trained to administer medication on every out-of-school trip or activity which children with medical conditions will attend.
- 7.4. Staff members will ensure that they are aware of any child who will need medication administered during the trip or activity and will make certain that they are aware of the correct timings that medication will need to be administered.
- 7.5. If the out-of-school trip or activity will be over an extended period of time, e.g. longer than the school day, the school will ensure that there is a record of the frequency at which children need to take their medication, and any other information that may be relevant. This record should be kept by a designated trained staff member who is present on the trip and can manage the administering of medication.
- 7.6. All staff members, volunteers and other adults present on out-of-school trips or activities will be made aware what should be done in the case of a medical emergency with regard to the specific medical needs and conditions of the child, e.g. what to do if an epileptic pupil has a seizure.

8. Individual healthcare plans

- 8.1 For chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the child, their parents and medical professionals. Parents need to share this with the Headteacher who will then ensure that all staff are aware of:

- Triggers, signs and symptoms
- Procedures for medication
- What is defined as an emergency, including the signs and symptoms that staff members should look out for
- What to do in an emergency, including whom to contact and contingency arrangements

9. Adrenaline auto-injectors (AAIs)

- 9.1. The school will arrange specialist training for staff on an annual basis where a child in the school has been diagnosed as being at risk of anaphylaxis.
- 9.2. All staff members who are suitably trained and confident in their ability to do so will be appointed as the administrators of AAIs.
- 9.3. As part of their training, all staff members will be made aware of:
 - How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
 - Where to find AAIs in the case of an emergency.
 - How to respond appropriately to a request for help from another member of staff.
 - How to recognise when emergency action is necessary.
 - How to administer an AAI safely and effectively.
 - How to make appropriate records of allergic reactions.
- 9.4. There will be a sufficient number of staff who are trained, and consent, to administer AAIs on site at all times.
- 9.5. The child's AAIs are stored in a bag and are not located more than two minutes away from where they may be required.
- 9.6. Staff will check expiry dates on AAIs termly and contact parents if close to an expiry date.

10. Medical emergencies

- 10.1. The school will ensure that emergency medication is always readily accessible and never locked away, whilst remaining secure and out of reach of other children.
- 10.2. The headteacher will ensure that there is a sufficient number of staff who have been trained in administering emergency medication by an appropriate healthcare professional.

- 10.3. For all emergency and life-saving medication where a child has an IHP e.g. an AAI, the school will ensure that a copy of the IHP will be kept:
- With the AAI
 - In the year group medical file
 - On the staffroom notice board
 - On the headteacher's noticeboard

11. Monitoring and review

- 11.1. This policy will be reviewed every two years by the governing body and the headteacher.
- 11.2. Records of medication which have been administered on school grounds will be monitored and the information will be used to improve school procedures.
- 11.3. Staff members who are trained to administer medication will routinely recommend any improvements to the procedure.
- 11.4. Abbots Farm Infant School and Abbots Farm Preschool will seek advice from any relevant healthcare professionals as deemed necessary.



ABBOTS FARM INFANT SCHOOL

Abbots Way, Rugby, Warwickshire, CV21 4AP

Tel: (01788) 543093

Headteacher: Mrs J Lovejoy

The school will not give your child medicine unless you complete and sign this form, and the Headteacher has agreed that school staff can administer the medication.

DETAILS OF PUPIL		
Surname:	M / F:	
Forename(s):	Date Of Birth:	
Class:		
Condition or illness:		
MEDICATION		
Name / Type of medication (as described on the container)		
For how long will your child take this medication:		
Date dispensed:		
FULL DIRECTIONS FOR USE:		
Dosage and method:	Timing:	
Special precautions:		
Side effects:		
Self-administration:	Yes / No	
Procedures to take in an emergency:		
CONTACT DETAILS:		
Name:	Relationship to pupil:	
Contact number:		
I understand that I must deliver the medicine personally to either the school office for routine medication or the class teacher for emergency medication and accept that this is a service, which the school is not obliged to undertake.		
Signature:	Date:	
Relationship to pupil:		
For office use only :-		
Received by:	Status:	Date:
For Class use only :-		
Received by:	Status:	Date: