



Medicine in School Policy

Date reviewed by School	Autumn 2022
Date ratified by FGB	22 November 2022
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1 Introduction

- 1.1** The Children and Families Act places a duty on the Governing Board and Senior Leadership Team (SLT) to make arrangements for supporting pupils at Uplands Primary School and Nursery with medical conditions. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common-law duty to act in the place of the parent and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine. However, the prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information.
- 1.2** At Uplands Primary School and Nursery, we are determined to ensure that all necessary steps are taken to protect children and young people from harm. We believe that every pupil should be able to participate in all school activities in an enjoyable and safe environment and be protected from harm. This is the responsibility of every adult employed by or invited to deliver services at Uplands Primary School and Nursery. As an organisation, we recognise our responsibility to safeguard and promote the welfare of all our pupils, which includes all aspects of health promotion and prevention.
- 1.3** This document should be read in conjunction with the Health and Safety Policy.

2 Aims of the policy

- 2.1** The aims of this policy are:
- To assist parents/carers/carers by providing ongoing care and support of children with long term medical needs via a health care plan
 - To ensure the safe administration of medicines to children where necessary and to help to support attendance
 - To explain the roles and responsibilities of school staff in relation to medicines and provide ongoing training in relation to children with medical needs
 - To clarify the roles and responsibilities of parents/carers in relation to children's attendance during and following illness



- To outline to parents/carers and school staff the safe procedure for bringing medicines into school when necessary and their storage
- To outline the safe procedure for managing medicines on school trips.

3 Roles and responsibilities

3.1 Roles and responsibilities of Headteacher:

- To bring this policy to the attention of school staff and parents/carers and to ensure that the procedures outlined are put into practice
- To ensure that there are sufficient First Aiders and appointed persons for the school to be able to adhere to this policy
- To ensure that staff receive appropriate support and training
- To ensure that parents/carers are aware of the school's 'Medicine in School Policy'
- To ensure that this policy is reviewed every three years.

3.2 Roles and responsibilities of staff:

- To follow the procedures outlined in this policy, using the appropriate forms
- To complete a health care plan in conjunction with parents/carers and relevant healthcare professionals for children with complex or long term medical needs
- To share medical information as necessary to ensure the safety of a child
- To retain confidentiality where possible
- To take all reasonable precautions to ensure the safe administration of medicines
- To contact parents/carers with any concerns without delay
- To contact emergency services, if necessary, without delay
- To keep the medical room and first aid boxes correctly and fully stocked with supplies
- To ensure a medical list is available in all class registers
- To update the medical lists annually and distribute to teachers and displayed on designated boards
- To ensure medical needs are identified via forms for children who are new to the school and ensure appropriate staff are informed
- To follow the procedures when on an offsite or residential visit (see 'Medicines on school trips' section).

3.3 Roles and responsibilities of parents/carers:

- To give the school adequate information about their child's medical needs prior to a child starting school
- To follow the school's procedure for bringing medicines into school
- To request medicines to be administered at school only when essential or prescribed
- To ensure that medicines are in date and that asthma inhalers are not empty
- To notify the school of changes in a child's medical needs (e.g. when medicine is no longer required or when a new condition arises, such as asthma).



4 School attendance during and after illness

- 4.1** Children should not be at school when unwell, other than with a mild cough/cold. Symptoms of vomiting or diarrhoea require a child to be absent from school and not to return until clear of symptoms for 48 hours.
- 4.2** Children should not be sent to school with a rash caused by any contagious illness. Any other symptoms of illness which might be contagious to others or will cause the child to feel unwell and unable to fully participate in the school day require the child to be absent from school.

5 Safe administration of medicines in school

- 5.1** Medicines should only be brought to school when essential; for example, where it would be detrimental to the child's health or attendance if the medicine were not administered during the school day. In the case of antibiotics, only those prescribed four times a day may be administered at school.
- 5.2** Uplands Primary School and Nursery only accept medicines that are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage.
- 5.3** If deemed appropriate to administer medicines in school, the parent/carer is required to complete a parental agreement form (see appendix).
- 5.4** Prescription or non-prescription medicines will not be administered to children without a parent/carer's written consent.
- 5.5** All medicines must be brought to the school office by an adult for pupils of Uplands Primary School. For Uplands Nursery pupils, these may be given to the nursery staff. Medicines must never be brought to school in a child's possession.
- 5.6** Medicine will never be administered without checking the maximum dosage and when the last dose was taken, even if this was at home.
- 5.7** Tablets should be counted and recorded when given to a member of staff and when collected.
- 5.8** Children will never be given medicine that contains aspirin, unless prescribed by a doctor.
- 5.9** Medicines will not be accepted in school that require medical expertise or intimate contact, unless prior arrangement through a health care plan or personal care plan has been made.
- 5.10** The Headteacher must be informed of any controlled drugs required by children.



- 5.11 Administration of medicines at school must be recorded on the medicines form and witnessed by a second member of staff. A record is made of any medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of medication at school should be noted.
- 5.12 Parents/carers may come to the school office to administer medicines if necessary.
- 5.13 Some children may self-administer medication, e.g. insulin, if this has been directed by the parents/carers when filling in the medicine form.
- 5.14 If a child refuses to take medicine, staff must not force them to do so. The refusal should be recorded and parents/carers informed immediately.
- 5.15 Class teachers and support staff should arrange administration of all medicines. Medicines must be kept in the locked cabinet in either the medical room or in a secure fridge (such as in the school's cookery room, which is locked) or in the nursery office (either in a fridge or cupboard, both inaccessible to children, or in a locked cabinet).

6 Storage of medicines

- 6.1 All medicines are stored securely. Children should know where their medicine is and be able to access them immediately (with adult support, to ensure the safety of the child). The keys are located in key boxes or above the fridge / cupboard, out of child reach but providing quick access for adults in an emergency.
- 6.2 Asthma medicines are kept in class cupboards, to ensure easy access. A staff member is required to support the child in taking asthma medication and will also note down the time and how many puffs were required.
- 6.3 Medicines (including antibiotic and antihistamine eye drops) must be stored in a fridge.
- 6.4 Tablets must be stored in the locked medicine cupboard in the medical room or nursery.
- 6.5 Medicines such as blood glucose testing meters and auto injectors are always available on staffroom noticeboard or in the medical room. These medicines should be labelled with the child's name and should be taken with the child during physical activities and offsite visits.
- 6.6 No medicines, other than asthma inhalers, may be kept in the classroom.
- 6.7 Parents/carers are responsible for the safe return of expired medicines to a pharmacy.

7 Supporting children with long-term medical needs



- 7.1** If a child has long-term medical needs which require medication (either prescribed or non-prescribed) to be administered during the school day then these should be discussed with the Headteacher.
- 7.2** Staff must be trained and a record kept of any medication administered.
- 7.3** All medicines which are controlled drugs should be kept in a locked cupboard in the medical room and only named staff should have access.
- 7.4** If a child has health needs which mean that they cannot attend school for fifteen days or more, the school will work with the local authority to ensure that the child has the same opportunities as their peer group, including a broad and balanced curriculum through alternative provision. The nature of the provision must be responsive to the demands of what may be a changing health status. As far as possible, children with health needs and who are unable to attend school should receive the same range and quality of education as they would have experienced at their own school; for example, the child might be educated in a hospital by an on-site hospital school.

8 Individual Health Care Plans (IHCPs)

- 8.1** An individual health care plan may be needed for a child with special medical needs. It is important for staff to be guided by the child's GP, paediatrician or other health care professionals involved. This plan can be reviewed as needed but should be checked annually.
- 8.2** Specific training on dealing with emergencies may be required. Staff should not give medicines without this appropriate training from health professionals. This training can be arranged in collaboration with the local health services.
- 8.3** The health care plan should include:
- The medical condition, its triggers, signs, symptoms and treatments
 - The pupil's resulting needs, including medication and other treatments, dietary needs and environmental issues
 - Specific support for the pupil's educational, social and emotional needs
 - The level of support needed
 - Who will provide this support, their training needs, expectations of their role and confirmation of proficiency and cover arrangements when they are not available
 - Who in school needs to be aware of child's condition and support required
 - Arrangements for written permission from parents/carers and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
 - Separate arrangements or procedures required for school trips or other school activities outside of the school timetable
 - Where confidentiality issues are raised by parent/carer, the designated individuals to be entrusted with information about the child's condition



- What to do in an emergency, including who to contact and contingency arrangements

9 Administration of non-prescribed medicine

- 9.1** Changes to the classification of some medication has meant that paracetamol or ibuprofen suspension ie Calpol do not require a prescription. The following statements outline the school's policy on the administration of this type of medication:
- 9.2** If parents/carers feel their child requires paracetamol or ibuprofen suspension or another non-prescribed medicine, they are invited to come to school to administer the medicine, and to bring the medicine with them.
- 9.3** If a child has a long-term medical need which requires non-prescribed medicine (for example: Paracetamol or ibuprofen suspension for migraines or antihistamines ie, Piriton for allergies), this may be administered by a member of staff but only after receiving written notification from a doctor and administered only after the parent/carer has completed the relevant forms.

10 Medicines on extra-curricular trips and visits

10.1 Medicines on trips

10.1.1 Children with medical needs are given the same opportunities as others. Staff may need to consider what is necessary for all children to participate fully and safely on school trips. Staff should discuss any concerns about a child's safety with parents/carers and a risk assessment will be carried out for any medical requirements on a trip.

10.1.2 When organising a school trip:

- The trip leader is responsible for designating a school paediatric First Aider for the trip
- The trip leader is responsible for ensuring that arrangements are in place for any child with medical needs prior to a trip taking place, including ensuring that asthma inhalers are carried as required. A copy of any relevant health care plan should be taken on the trip
- The designated school First Aider on the trip will administer any medicines required and record the details on the School Trips Medical Form (see appendix)
- The First Aider will return the form and any unused medicines to the First Aid cabinet on return to school, or to the relevant parent/carer.

10.2 Medicines on residential trips



10.2.1 On a residential trip, parents/carers are asked to supply medicines (either prescription or non-prescription) in a named container and written permission of dosage and frequency that is required. The trip leader is acting In loco parentis ie, "in the place of a parent" and assumes some of the functions and responsibilities of a parent/carer. Therefore they can be instructed to assist in the administering of either prescribed or non-prescribed medicines. The Medicines must be in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. It is the responsibility of the qualified First Aider to administer it and a record is kept of medication and dosage administered. Medicines are stored securely and safely.

11 Injuries, accidents and emergencies

11.1 Injuries and accidents

11.1.1 All accidents or injuries must be recorded. Each class and lunchtime controller has a First Aid book, where all incidents are recorded. If the patient should require hospital treatment, an accident report must be submitted to Bracknell Forest. The First Aider must wear disposable gloves and all blood-stained materials should be disposed of in the appropriate container. The accident form includes:

- Date and time
- Pupil's name and class
- Nature of injury and where the accident happened*
- First aid administered
- Name and signature of First Aider
- Witness (if appropriate)

*This section should include where the accident happened, the area(s) of the body injured and on which side of the body the injury is.

11.2 Emergencies

11.2.1 If a child needs to be taken to hospital, staff should stay with the child until the parent/carer arrives, or accompany a child taken to hospital in the ambulance.

11.3 First aid kits

11.3.1 There are clearly marked and fully operational first aid kits at all of the first aid sites:

- Medical room
- Main school office
- Nursery building.

11.3.2 There are also smaller kits available, which can be taken off school premises for school or sports trips.



- 11.3.3 Each class and lunchtime controller has a portable First Aid kit, and further supplies can be located in the medical room.

12 Further information and guidance

12.1 Inhalers

- 12.1.1 If a child has been prescribed an inhaler for treatment of asthma, a form should be completed and handed into the school office. The inhaler will be kept in the classroom and taken with the class whenever they take part in outside activities such as PE, swimming or other offsite activities.
- 12.1.2 Emergency salbutamol inhalers are kept in the medical room and are for use by children for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. Guidance on the storage, use and disposal of the emergency inhalers can be found in the Department of Health's [Guidance on the use of emergency salbutamol inhalers at school](#).

12.2 Allergies

- 12.2.1 If a child (or adult), has an allergy serious enough to need an EpiPen in emergencies, this should be kept in school in a box in the staffroom with parental written consent. It is the parents/carers' responsibility to make sure that this does not go out of date. All staff have regular training in the use of adrenaline medicine (such as an EpiPen).

12.3 Defibrillator

- 12.3.1 In the event of a respiratory arrest, cardiac arrest or anaphylactic shock, immediate medical help should be sought via 999. A defibrillator is available by the school office (to the left of the trophy cabinet). There is no code, although 'tamper tape' seals the door to ensure equipment is safe.

12.4 Medical alerts

- 12.4.1 Any child with specific medical conditions that may need urgent attention will have a poster with their name, photograph and year group clearly displayed. These posters will have their medical condition in bold print, followed by their symptoms and clear medical procedures to follow. These are displayed in the first aid room and in the staff room.

12.5 Disposal of medicines



- 12.5.1 Staff should not dispose of medicines. Parents/carers are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. Sharp boxes must be used for the disposal of needles and any sharp points. These can be obtained by parents/carers on prescription from their GP. Collection and disposal of the boxes should be arranged with the LA by the school.

13 Staff training

- 13.1.1 First Aiders must hold a current certificate that lasts for the duration of three years. Designated staff will attend auto injector, asthma and epilepsy update training as necessary.

14 Complaints

- 14.1 Should parents/carers or pupils be dissatisfied with the support provided, they should discuss their concerns with the school. If, for any reason, this does not resolve the issue, they may make a formal complaint via the schools complaints procedure.



Parental agreement for school to administer prescribed medicine

The school cannot give your child prescribed medicine unless you complete and sign this form.

Name of child			
Class		Date	
Name of medicine			
Expiry date		Dose to be given	
Times to be given		For how long?	
Time of last dose		Amount of last dose	
Staff member name		Signature	

PLEASE NOTE ALL MEDICINE MUST BE IN ORIGINAL CONTAINER AS DISPENSED BY PHARMACIST. WHERE NECESSARY, MEDICINE WILL BE KEPT IN A SECURE FRIDGE.

I confirm that the medicine detailed has been prescribed by a doctor, and that I give my permission for a member of staff to administer the medicine to my child during the school day. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication, or if the medicine is stopped.

Parent/Carer name		Date	
Signature			

NOTES OF GUIDANCE:

- Uplands staff will only administer current prescription medicine.
- All medicines should be taken to the school office (They will not be accepted by classroom staff) for Uplands Primary School children. For Nursery children, this form and the medicines should be given to nursery staff. This form should be completed by the parent/carers of the pupil.
- The following information will be checked by the office staff: contents; patient's name; expiry date; dosage; prescribing doctor's name
- The information given is requested, in confidence, to ensure that the school is fully aware of the medical needs of your child.
- While no staff member can be compelled to give medical treatment to a pupil, the school will endeavour to be as supportive as possible and see this arrangement as being part of the pastoral role in school.

RECORD OF MEDICATION

