Date 09/25
Review 09/26

Rush Green Primary School

Medication Policy

Medication Policy

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AIMS OF THE POLICY

The school will ensure that the appropriate measures are taken to ascertain whether any staff or pupils have any medical conditions which may need to be taken into consideration and the necessary controls and systems implemented.

The school will consider all medical conditions on an individual basis and where necessary and appropriate, will implement suitable arrangements. Parents will be asked to advise the school of any medical conditions or needs that their children have. Where necessary, the school (including the class teacher) will meet with the parent of a child who has specific medical needs and if necessary, a health care plan will be prepared and implemented.

The information will be held by the school and will **only** be shared with relevant and authorised staff members. All health care plans will be stored in the medical room, SENCo office, uploaded on Medical Tracker and with the children's medication in class.

The school's policy will be shared with all staff and parents of the school. This policy provides a sound basis for ensuring that children with medical needs receive proper care and support in school.

The policy aims to enable regular attendance. Formal systems and procedures in respect of administering medicines, developed in partnership with parents and staff are clearly outlined.

PROCEDURES FOR MANAGING PRESCRIPTION MEDICINES

- Medicines are not administered at school by staff for short term medical needs unless prescribed by a GP.
- Staff do not administer medicines unless a child has a long term or complex medical need requiring e.g. insulin, an inhaler or an antibiotic.
- The school only accepts prescribed short-term medication to be administered 4 x times per day.
- Only prescribed medicines are stored in the medical room and in the classrooms in separate named containers.
- Prescribed medicines must be stored, out of children's reach, in a cupboard displaying a medical label.
- All inhalers must be in the original containers, labelled and in date, as dispensed by a pharmacist and include instructions for administration.
- Parents have a responsibility to check that all medications are 'in date'.
- Parents will advise the office if medicine has been administered outside of the school day.
- Records, via Medical Tracker, will be kept by the school detailing any medication administered to a pupil, along with date and time.
- Where appropriate the school will contact parents if a pupil refuses to take their medication when required.
- The school will contact parents to ensure that the appropriate procedures for medication are in place during educational/offsite visits and that all information is shared with the appropriate members of staff.
- Parents must sign the appropriate consent form should medication be needed on a school trip.
- All medication needs to be discussed with providers of before and after school clubs.
- Staff will be clear about the roles and responsibility of managing the administration of prescribed inhalers/insulin/antibiotics.

RESPONSIBILITIES

The Head Teacher will ensure that:

- The school's medication policy is implemented and all staff are aware of their responsibilities.
- Staff receive adequate training for the administering of specific medication where required, e.g. EpiPen's.
- The school agrees with parents exactly what support can be provided.
- All relevant members of staff are informed of any pupil that has a medical condition and/or a specific medical need.
- Information relating to pupil's medical needs are obtained from parents and where necessary, a health care plan implemented. Class Teachers **MUST** attend all HCP's meetings.
- Information relating to any pupil's medical needs, provided by parents, is accurate, up to date and secure.
- Additional safety measures are in place if needed for outside visits.
- A copy of the health care plan is taken on visits.

Identified staff are responsible for ensuring that:

- Appropriate procedures for medication are in place for trips and visits after consultation with parents.
- Medication is appropriately stored and not accessible to unauthorised persons.
- All medication should be easily accessible in an emergency. Emergency medication stored in the classroom, should be stored in an unlocked cupboard with a First Aid sign. It should be kept where an adult can reach the medication and out of children's reach.
- Records are kept via Medical Tracker of any medication that is administered and will ensure that it is replenished by parents as necessary. (Records offer protection to staff and proof that they have followed agreed permissions).
- The Head Teacher or SENDCo are informed immediately of any concern regarding medicine administration. E.g. medication taken in error.

All staff are responsible for ensuring that:

- Sharps boxes are used for the disposal of needles and other sharps.

- They are aware of, and familiar with the school’s medication policy and arrangements in

place.

- They are aware of the agreed procedures and work in accordance to these procedures should any pupil in their care require medication.
- That they work in accordance to any training that they have received.
- That they advise Miss Fellowes and Mrs Strizovic should they be advised of any new or additional information relating to a pupil's medical needs.

All parents are responsible for ensuring that:

- They inform the school, before children are admitted, of any known medical condition/need.
- A health care plan is agreed with parent/carer/staff/health care professional to ensure the school has sufficient information about the medical condition of a child with medical needs.
- They inform the school of any medication the child is currently taking that might affect their functioning in the school setting e.g. poor concentration.
- Inform the school about any changes to prescribed medication.
- Provide medicines in the original container as dispensed by a pharmacist and include the prescribed instructions. This should list:
  - name of child
  - name of medicine
  - dose
  - method of administration
  - time/frequency of administration
  - any side effects
  - expiry date
- Report any restriction on a child's ability to participate in PE on the individual health care plan.
- Should keep children at home if they are acutely unwell.

Any member of staff who agrees to accept responsibility for administering prescribed

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

In school the Local Authority, as the employer, is responsible for all health and safety matters. For all out of school clubs with an outside provider, they are responsible for all health and safety matters.

For all children with medical needs Mrs Brown- SENCO, Mrs Strizovic, and Miss Fellowes will agree with the parents exactly what support can be provided. Where necessary, advice will be sought from the school nurse, GP or other medical adviser, or LA.

The school will ensure that there are sufficient members of support staff who are employed and appropriately trained to manage medicines as part of their duties.

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 when a member of staff is absent or unavailable.

DRAWING UP A HEALTH CARE PLAN

Rush Green Primary 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. For this reason, the school draw up a health care plan which includes:

- details of a child's condition
- special requirements e.g. dietary needs, pre-activity precautions and any side effects of the medicines
- what constitutes an emergency
- what action to take in an emergency
- what not to do in the event of an emergency
- who to contact in an emergency
- the role the staff can play

The health care plan is to identify the level of support that is needed and who will provide it.

The health care plan clarifies for staff, parents and the child the help that can be provided. The health care plan is reviewed annually unless there are changes within that period of time. The health care professional will lead the meeting. Class Teachers **MUST** be present.

It identifies:

- The medical condition, its triggers, signs, symptoms and treatment.
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time facilities, equipment, testing access to food and drink where this used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons.
- Who in school needs to be aware of the child's condition and the support required.
  • Arrangements for written permission from parents for medication to be administered by a member of staff
- Separate arrangements or procedures required for school trips or other school activities outside the normal school timetable that will ensure the child can participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent, the designated individuals to be entrusted with information about the child's condition and what to in an emergency, including whom to contact and contingency arrangements.
- Once the HCP is drawn up, the class teacher and year group TA's **MUST** read and sign the HCP to say they have understood the HCP.

Contacting Emergency Services

Request for an Ambulance

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

1. Your telephone number 0208 270 4940

2. Give your location as follows: Rush Green Primary School
   Dagenham Road
   Romford, Essex
3. State that the postcode is: **RM7 0TL**

4. Give exact location in the school/setting (entrance to car park is on Dagenham Road)

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 taken to

Speak clearly and slowly and be ready to repeat information if asked Put a completed copy of this form by the telephone.

Parental agreement of administration of medicine.

Date	
Name of Child	
Class	
Date of Birth	
Medical Condition	

Name / Type of medicine		
Expiry Date		
Dosage and method		
Between the dates of:	From:	To:
Timing		
Special precautions / other instructions		
Procedures to take in an emergency		
If Asthma, consent for School emergency inhaler to be used if own inhaler is unavailable	Please tick: ☐ Yes ☐ No	

Name of Parent / Guardian	
Relationship to child	
Contact number: Home	
Work	
Mobile	

NB : Medicines must be in the original container as dispensed by the pharmacy

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the staff administering medicine in accordance with school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency or if the medication is stopped.

Signature: _____ Date: _____

Record of Medicines Administered in School/Setting to all Children

Pupil Medication Register ***(if medical tracker is unavailable)***

Child's Name: _____Class: _____

Medication Details

Date	Name of Person who brought it in	Name of Medication	Amount Supplied	Form Supplied	Expiry Date	Dosage regime

Register of Medication Administered

USEFUL CONTACTS

Allergy UK

Allergy Help Line: (01322) 619 898

Website: www.allergyuk.org

The Anaphylaxis Campaign Helpline:

(01252) 542 029

Website: www.anaphylaxis.org.uk and www.allergyinschools.co.uk

Asthma and Lung UK

Adviceline: 0300 222 5800

Website: www.asthma.org.uk

Council for Disabled Children Tel:

(020) 7843 1900

Website: www.councilfordisabledchildren.org.uk

Contact a Family (information about caring for disabled and special needs children)

Helpline: 0808 808 3555

Website: www.cafamily.org.uk

Cystic Fibrosis Trust Tel:

0300 373 1000

Website: www.cysticfibrosis.org.uk

Diabetes UK

Careline: 0345 123 2399

Website: www.diabetes.org.uk

Department for Education and Skills Tel:

0870 000 2288

Website: www.dfes.gov.uk

Disability Rights Commission (DRC) Helpline:

08457 622 633

Website: www.drc.org

Epilepsy Action

Helpline: 0808 800 5050 (Mon – Thurs 9am to 4:30pm, Fri 9am - 4pm)

Website: www.epilepsy.org.uk

Health & Safety Executive (HSE)

HSE Infoline: 08701 545 500 (Mon-Fri 8am – 6pm)

Website: www.hse.gov.uk

Hyperactive Children's Support Group Tel:

(01243) 539 966

Website: www.hacsg.org.uk

MENCAP

Tel: (020) 7454 0454

Website: www.mencap.org.uk

National Eczema Society

Helpline: 0870 241 3604 (Mon-Fri 8am – 8pm)

Website: www.eczema.org

National Society for Epilepsy

Helpline: (01494) 601 400 (Mon-Fri 10am – 4pm)

Website: www.epilepsynse.org.uk

Psoriasis Association

Tel: 0845 676 0076 (Mon-Thurs 9:15 am-4:45 pm Fri 9:15 am – 4:15pm) Website: www.psoriasis-association.org.uk

Sure Start

Tel: 0870 000 2288

Website: www.surestart.gov.uk

Asthma is the most common chronic condition for children. Even if you only have occasional symptoms, you can still have a serious Asthma attack. Common Asthma triggers at school include pollen, animals, cold, viral infections, dust, pollution and cold weather.

Rush Green Primary School have a responsibility to be prepared about what to do when a pupil has an Asthma attack while at school. We will make sure that when a child has an attack everything possible is done to ensure they receive the best care as quickly as possible.

Being part of a school community, which is Asthma-aware and understands our children's needs, will help them to reach their full potential.

It is the parent's responsibility to ensure new and in date inhalers, in original packaging are in school at all times.

Rush Green Primary School Support Asthma in school by:

Holding a **Central Asthma Record** which is managed by Miss Fellowes. She is responsible for checking the dates of inhalers, informing parents when they require renewing and arranging for the disposal of those that have expired. This check is completed at the start of each term. The Central School Asthma Pump Register includes child's name, class, expiry date, notes on medication administration and date of medical form completed by parents/carer.

All children have **immediate access** to their inhalers. Children's Asthma pump are held in class, clearly labelled in individual bags and kept in an accessible but secure place. At lunchtimes the Asthma pumps move to the children's allocated first aid station.

As a school we know how important it is to ensure **excellent home/school communication** and record keeping. It is important that we are kept informed of any changes in a child's Asthma management.

It is the responsibility of the Teacher and Teaching Assistant to ensure there is a record of a child using them Asthma Pump on Medical Tracker.

From 1 October 2014, all schools can choose to keep a **spare inhaler** in school for use in an emergency (if the child's own inhaler is not immediately accessible). This is not mandatory and should not replace the requirement that parents/carers arrange for children to have their own inhaler. The school holds **emergency inhalers**.

All school staff have read and understand The Asthma Policy and Appendix so that they have the skills to support pupils.

Date:2024 **Review Date: 2026**

How to Recognise an Asthma Attack

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)

- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body)
- Nasal flaring
- Unable to talk or complete sentences. Some children will go very quiet
- May try to tell you that their chest "feels tight" (younger children may express this as tummy ache)

What to do in the event of an Asthma Attack

- Keep calm and reassure the child
- Encourage the child to sit up and slightly forward
- Use the child's own inhaler – if not available, use the emergency inhaler
- Remain with the child while the inhaler and spacer are brought to them
- Immediately help the child to take two separate puffs of inhaler (use spacer if they have one)
- If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs
- Stay calm and reassure the child again. Say with the child until they feel better.
- If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, call an ambulance
- Continue to give puffs

Call an ambulance without delay if the child

- If the child does not feel better after inhaler or if you are worried at ANYTIME
- Appears exhausted
- Has a blue/white tinge around lips
- Is going blue
- Has collapsed