

Hanover Street School



Administration of Medication Policy

<u>Relevant Performance Indicators</u>		
<i>HGIOS4 & HGIOELC Quality Indicators</i>	2.1	Safeguarding and Child Protection
<i>Health and Social Care Standards (2017)</i>	1.24	Any treatment or intervention that I experience is safe and effective.
	2.23	If I need help with medication, I am able to have as much control as possible.
	3.21	I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing that I may be unhappy or may be at risk of harm.
	4.14	My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.

Policy Written By	In Consultation With	Date(s) of Review & Changes Made	Date of Next Review	Signature(s)
Gael Ross for Aberdeen City Council, and adapted by Gillian Forbes, Depute Head Teacher	Parents, pupils and school teaching staff	November 2018 August 2019 - Addition of Care Inspectorate requirements for nursery (p4) August 2020 -0 Addition of Duty of Candour info (p4)	August 2021	<i>Gillian Forbes</i>



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1. Introduction

Many pupils will need to take medication in school at times. In most cases the administration of medication will be short-term. Other pupils have medical conditions such as asthma or diabetes that if not properly managed could limit their access to education and the administration of medication in these circumstances is likely to be long term. Some children have conditions that also require emergency treatment and plans e.g. severe allergic conditions (anaphylaxis) or epilepsy. Pupils with such conditions are regarded as having health care needs and may require some support or reasonable adjustments to be fully included in the life of the school.

It is important for the school to have sufficient information about the medical needs of any pupil who requires support in school. Early warning of needs will allow necessary plans, procedures and monitoring processes to be put in place. The school therefore needs to know about any health needs before a child starts nursery or school, or when a pupil develops a condition requiring the administration of medication during the day.

2. Working In Partnership

Parents and carers have prime responsibility for their child's health and must provide information about their child's health needs when first enrolling in Nursery or School. Parents and carers should make contact with the school, at the earliest opportunity, where medical conditions are discovered during the pupils' schooling. This will allow appropriate plans to be developed and agreed.

It is helpful if, where possible, medication can be prescribed in dose frequencies, which enable it to be taken outside school hours. Parents should be encouraged to ask the prescribing doctor or dentist about this.

3. Non-Prescription Medicine

If a pupil suffers regularly from acute pain, such as migraine, the parents should authorise and supply appropriate painkillers in the original container, labelled with their child's name and with written instructions about when their child should take the medication. A member of staff should supervise the pupil taking the medication and notify the parents, in writing (Appendix 7), on the day painkillers are taken.

4. Record Keeping and Notifications

When the school is asked to support the administration of medication, parents and carers are asked to complete an **Agreement for Administration of Medication Form** (Appendix 1). Upon receipt of completed forms, we will ensure that there is clarity around who will support the administration of medication and that the



instructions contained within the form are effectively communicated with relevant staff. Parents will be issued with a **School Response Form** (Appendix 2) to confirm that medication will be administered in line with parental request.

When a child has longer term needs parents will, in collaboration with the pupils, health professionals and the Head Teacher, reach an understanding on the school's role in helping support the health care needs. This understanding should form the basis of a **Health Care Plan** (Appendix 3). The Head Teacher should seek parents' and pupils' agreement before passing on information to other school staff. Sharing information is important if staff and parents are to ensure the best care for a pupil. Parents' and pupils' cultural and religious views will always be respected.

The **Health Care Plan** will be completed as soon as reasonably possible and prior to admission where possible.

***In nursery, the school is required keep records, and to inform Care Inspectorate of any accidents or incidents as detailed on the Care Inspectorate site: <https://www.careinspectorate.com/index.php/notifications>**

***There is also another duty – the [Duty of Candour](#), which may need to be triggered in case a significant adverse event occurring, relating to medication.**

The person responsible for this is **Gillian Forbes, Depute Head Teacher.**

5. Head Teacher / School Responsibility

Many pupils will need to take medication (or be given it) at school at some time in their school life. Pupil Support Assistants support the administration of medication in Aberdeen City schools. Mostly this will be for a short period only, e.g. to finish a course of antibiotics. To allow pupils to do this will minimise the time they need to be off school. Medication should only be taken to school when absolutely essential and with the agreement of the Head Teacher.

6. Staff Responsibility

Systems are in place for the appropriate recording of the administration of medication (Appendix 4). All staff who provide support for pupils with health care needs, or administer medication, receive support from the Head Teacher, health service professionals and parents, have access to information and training, and reassurance about their legal liability.



Staff who may need to deal with an emergency will need to know about a pupil's health care needs. Visiting teachers are also fully informed of individual's health care needs where appropriate.

7. School Trips

Sometimes the school may need to take additional safety measures for outside visits. The administration and recording of medicines administered on school trips should be in accordance with this policy.

8. Emergency Procedures

All staff should know how to call the emergency services. All staff should also know who is responsible for carrying out emergency procedures in the event of need. Staff noticing an apparent deterioration in a pupil's health should inform the Head Teacher.

If a pupil is taken to hospital by ambulance they will be accompanied by a member of staff who will remain until the pupil's parent arrives. The member of staff should have details of any health care needs and medication the pupil has. Generally staff should not take pupils to hospital in their own car. However, in an emergency it may be the best course of action. Wherever possible the member of staff would be accompanied by another adult and have public liability vehicle insurance.

9. Communicating With Others / Confidentiality

The Head Teacher and school staff treat medical information confidentially. Information on a pupil's health care needs is likely to be sensitive data covered by the Data Protection Act 1998. Care is therefore to be taken to ensure that consent is obtained before passing information to another party. By virtue of the Age of Legal Capacity (Scotland) Act 1991, a person under the age of 16 has legal capacity to consent to any surgical, medical or dental procedure if, in the opinion of a health professional, that person is capable of understanding the nature of the treatment. Any exchange of information should be with the consent of the child/young person (if he/she has the necessary capacity to understand why) or otherwise the parent or guardian. Once consent has been obtained sensitive information about a pupil should be shared only with those who need to know. Escorts and others should only be told what is necessary for them to know to keep the child safe.

Completed records of administering medication are kept on file in case the administration of medication is ever questioned.

The Head Teacher will need to agree with the parents exactly what support the school can provide for a child with health care needs. Where there is concern about



whether the school can meet a pupil's needs, or where the parents' expectations appear unreasonable, the Head Teacher can seek advice from the school nurse or doctor, or other medical advisers and, if appropriate, Officers from the Authority.

10. Storing Medication (Appendix 5)

Schools should not store large volumes of medication. Parents should supply weekly or monthly supplies of the doses to be taken at school, in their original container with the name of the pupil, the name of the drug, the dosage frequency and expiry date. This may require parents to obtain a separate prescription for the medication to be taken at school.

Where a pupil needs two or more prescribed medicines, each should be in a separate container.

The Head Teacher is responsible for making sure that medicines are stored safely. Pupils should know where their own medication is stored and who holds the key. A few medicines, such as asthma inhalers, must be readily available to pupils and must not be locked away. Pupils will have access to their medicine when required.

11. Administering Medication (Appendix 6)

School staff should not give the first dose of a new medicine to a child. Parents should have already given at least one dose to ensure that the child does not have an adverse reaction to the medication.

Staff who provide support for pupils with health care needs, or administer medication, will be given support from the Head Teacher, health service professionals and parents, have access to information and training, and reassurance about their legal liability.

If in doubt about any of the procedures the member of staff should check with the parents or a health professional before taking further action. Staff administering medication must be aware of this guidance and where possible be witnessed administering all medication. If this is not possible, parents should be made aware of this on the Health Care Plan.

Staff administering prescribed medication to a pupil will have appropriate training and guidance. He or she should also be made aware by a health professional of possible side effects of the medication, how staff can recognise these side effects and what to do if they occur.

School staff should not administer medication without appropriate training from health professionals. Different levels of training will be required for different medications



If too much medication is given, or if it given to the wrong child, parents should be informed and the emergency services should be contacted immediately.

12. Refusal of Medication

If pupils refuse to take medication, school staff will not force them to do so. The school will inform the child's parents as a matter of urgency. If necessary, the school should call the emergency services for an ambulance.

13. Disposal of Medication

School staff should not dispose of medicines. Date expired medicines or those no longer required for treatment should either:

- with the parent's consent be removed by a community pharmacist, or
- returned to the parent/carer for transfer to a community pharmacist for safe disposal.

Medicines which are in use and in date should be collected by the parent/carer at the end of each term/session depending upon the expiry dates.

14. General Awareness

The most common medical conditions in school age children which require support are asthma, diabetes, epilepsy, eczema, allergic reactions (anaphylaxis if severe) and cystic fibrosis. Irrespective of whether staff in schools support pupils with health care needs and administer medication to these pupils they all may come into contact with such pupils during the course of a school day. A basic understanding of these common conditions will help staff recognise symptoms and seek appropriate support. A programme of general awareness training for staff is provided where possible.



Administration of Medication Policy

APPENDICES



Appendix 1 - Agreement for Administration of Medication

General Information

Name of Pupil			
Address			
Date of Birth		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Class			
Medical Condition			
Describe medical condition and give details of pupil's individual symptoms			

Medication

Name of Medication		
Strength of medication (as appropriate)		
Form of medication (tablet, liquid etc.)		
Dosage of medication		
Method and time of administration		
Daily Care Requirements / Special precautions (e.g. before sports, nursing needs)		
Action to be taken in an emergency		
Follow up care / Side Effects		
How long will your child take this medication?		Date dispensed / /

Parent / Guardian Signature: _____ Date: _____

Reviewed:

Parent / Guardian Signature: _____ Date: _____

Parent / Guardian Signature: _____ Date: _____

Parent / Guardian Signature: _____ Date: _____

The information on this form should be reviewed every 28 days in accordance with Care Commission recommendation.



Appendix 2 - School Response Form

Name of Pupil:	Date of Birth:
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I agree that (pupil name)	
will receive (name and quantity of medication)	
daily at (time medication to be administered)	
They will be supervised by (name/s of staff)	
This arrangement will continue until (Either end date of course of medication or until instructed by parent / guardian)	

Signed _____ Date: _____

Head Teacher

The information on this form should be reviewed every 28 days in accordance with Care Commission recommendation.



Appendix 3 - Health Care Plan

Health Care Plan for a Pupil with Medical Needs

General Information

Name of Pupil	
Date of Birth	
Medical Condition	
Class	
Describe medical condition and give details of pupil's individual symptoms	

Medication

Name of Medication	
Strength of medication (as appropriate)	
Form of medication (tablet, liquid etc.)	
Dosage of medication	
Method and time of administration	
Daily Care Requirements (e.g. before sports, nursing needs etc.)	
Action to be taken in an emergency	
Follow up care / Side Effects	
Name/s of staff trained to administer medication	

The information on this form should be reviewed every 28 days in accordance with Care Commission recommendation.

Storage

Medication will be stored:



Contact Information

Family Contact 1

Name		
Phone Number	(Home)	(Work)
	(Mobile)	
Relationship		

Family Contact 2

Name		
Phone Number	(Home)	(Work)
	(Mobile)	
Relationship		

GP

Name	
Clinic	
Phone Number	

Plan Prepared by

Name		
Designation		(Date)

Distribution

Parent	
School Doctor	
School Nurse	
Other	
Other	
Other	

I agree that the medical information contained in this form may be shared with individuals involved with the care and education of:

_____ (insert child's name)

Parent / Guardian Signature: _____ Date: _____

Reviewed:

Parent / Guardian Signature: _____ Date: _____

Parent / Guardian Signature: _____ Date: _____

Parent / Guardian Signature: _____ Date: _____



Appendix 4 -Administration of Medication Record

General Information

Name of Pupil	
Name of Medication	

Record of Administration

Date	Time	Dose given	Name of Staff	Signature	If refused / not administered record reason

If a child refuses to take medication or if it is not given at the correct time please contact the parents immediately and take appropriate action (see Medical Procedures Policy)



Appendix 5 - Storage of Medication

Inhaler

- Plastic container clearly labelled with picture, name and DOB
- (P4-7) Stored in individual child's tray
- (Nursery - P3) Stored by class teacher

Epi-pen etc

- Plastic container clearly labelled with picture, name and DOB
- Plastic container should contain epi-pen and Health Care Plan
- Annex building - Epi-pen to be kept in class and staff should transfer it to the main office during break, lunch etc.
- All other Epi-pens to be kept in the main office at all times

Controlled Drugs

- Clearly labelled with name and DOB
- Stored in lockable medicine cabinet in Medical Room

Medication to be refrigerated

- Clearly labelled with name and DOB
- Stored in an airtight container
- Stored in staffroom refrigerator

All other medication

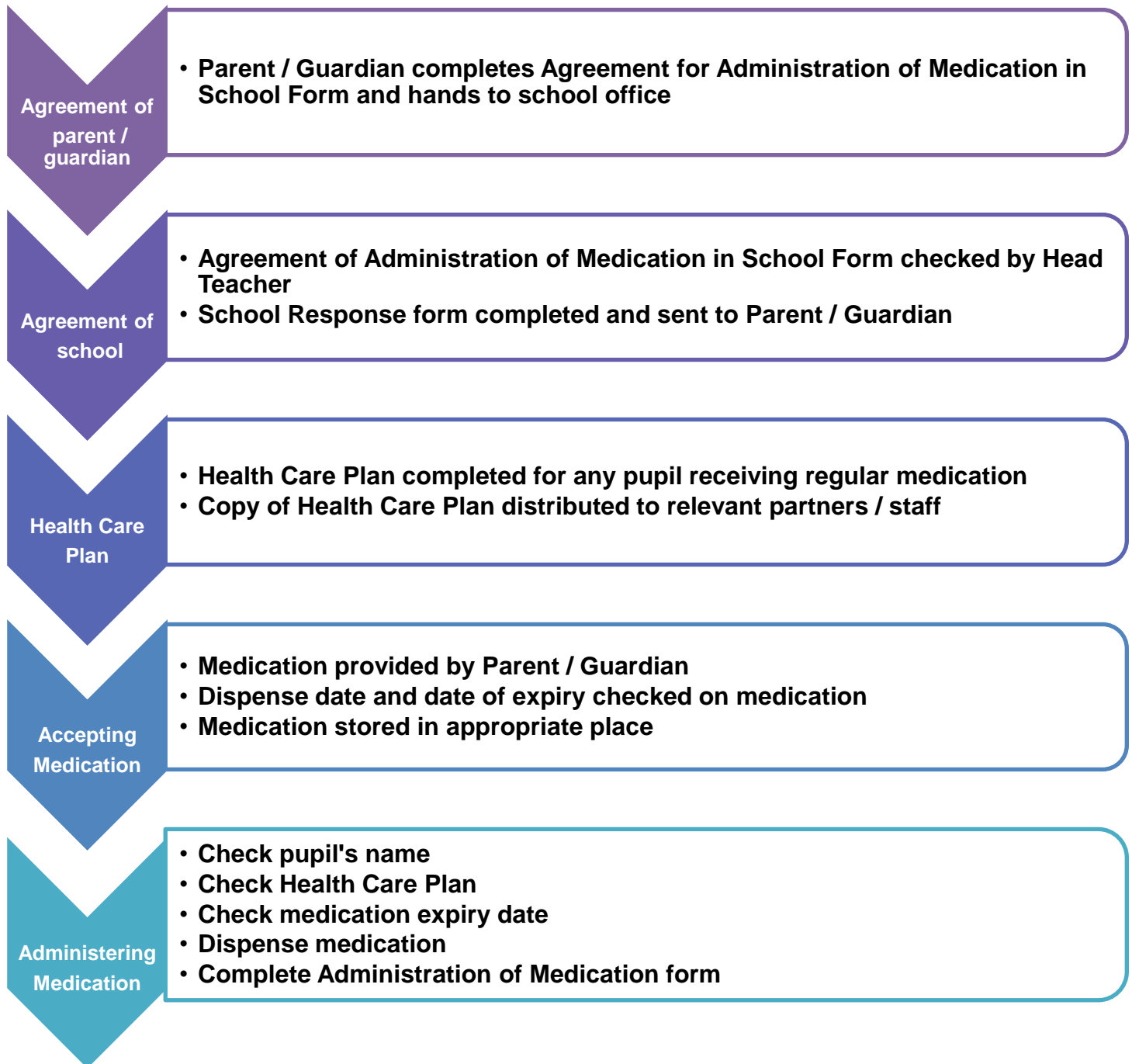
- Clearly labelled with name and DOB
- Stored in lockable filing cabinet in Medical Room

Medical Forms

- **All medical forms are available in a confidential folder which is stored within the nursery.**
- **Copy of completed forms are filed in individual pupil confidential files.**



Appendix 6 - Procedures for Staff



Administration of Medication out of school

- SMT to identify a suitable member of staff to transport and administer medication
- Health Care Plan shared
- Medication administered with time and dose noted
- Administration of Medication form completed on return to school



Appendix 7 - Administration of Non-prescription Medication



Administration of Non-Prescription Medication

Today your child received the agreed non-prescription medication.

Name of Pupil			
Date of Birth		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Class			
Medication given			
Dose given			
Time given			
Reason for administration of non-prescription medication:			
Signed (member of staff)			
Date			



Administration of Non-Prescription Medication

Today your child received the agreed non-prescription medication.

Name of Pupil			
Date of Birth		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Class			
Medication given			
Dose given			
Time given			
Reason for administration of non-prescription medication:			
Signed (member of staff)			
Date			