

The Rydal Academy

Policy for Administration of Medication

Accepted by: The Rydal Academy LGB October 2023

Approving Body : Local Governing Body

Committee : LGB

Review Cycle: 1 year

Last reviewed: July 2024

Date for next review: July 2025

Rationale

At The Rydal Academy, we take seriously our duty of care and consent to administer medication, subject to the conditions set out in this policy. This policy sets out general guidance, but each case will be dealt with on its own merits. This policy applies to all pupils attending The Rydal Academy.

Definitions

Short Term Medication – This is prescription medication, which only needs to be taken for a few days e.g., a course of antibiotics. The administration of this medication should be for a couple of weeks or less. An 'Individual Health Care Plan – requiring short term medication' form will need to be completed.

Long Term Medication – This is medication required to manage a long-term medical need, i.e., asthma or epilepsy etc. where the prescribed medication will be required for extended periods. An Individual Health Care Plan (IHCP) will need to be completed. Where there is a change of medication, needs or circumstances, it is the responsibility of parents/carers to inform school.

School Procedures

During the admissions process, information regarding medical conditions is requested and gathered. This information will then be shared with all staff. If pupils will require medication or support with managing medication in school, an Individual Health Care Plan (IHCP) will be written alongside the parent/carer.

Early Years Procedures

At least one person who has a current paediatric first aid (PFA) certificate must be on the premises and available at all times when pupils are present, and must accompany pupils on outings. Paediatric First Aid must be renewed every three years. All newly qualified entrants to the early years workforce who have completed a level 2 and/or level 3 qualification on or after 30 June 2016, must also have either a full PFA or an emergency PFA certificate within three months of starting work in order to be included in the required staff:child ratios at level 2 or level 3 in an early years setting. Providers should display (or make available to parents/carers) staff PFA certificates or a list of staff who have a current PFA certificate. Providers must have and implement a policy, and procedures, for administering medicines. It must include systems for obtaining information about a child's needs for medicines, and for keeping this information up-to-date. Training must be provided for staff where the administration of medicine requires medical or technical knowledge.

Prescription medicines must not be administered unless they have been prescribed by a doctor, dentist, nurse or pharmacist (medicines containing aspirin should only be given if prescribed by a doctor). Medicine (both prescription and non-prescription) must only be administered where written permission for that particular medicine has been obtained from the pupil's parent/carer. Providers must keep a written record each time a medicine is administered to a pupil.

Prescription Medication

The school will only administer medication where the necessary paperwork has been completed by the parent/carer of a pupil. No medication will be given unless required paperwork is completed. Medication must be prescribed and must have the pupil's name and address clearly indicated alongside the medical instructions, including dosage, attached to the medication. If a child, simply turns up with medication it will not be administered and the parent will be informed.

No pupils should have in their possession any form of medication, other than inhalers or such medicine as is described in their 'request to administer medication' form or 'Individual Health Care Plan'.

Parents/carers should be encouraged to ask their doctor or dentist, where possible to prescribe medication in dose frequencies which enable it to be taken outside school hours. (Guidelines: when medication is prescribed for three times per day, this will not be administered in school, as doses may be taken before school, after school and at bedtime with the exception of pupils who attend breakfast and after school clubs on the same day, if medication is prescribed three times a day, a dose can be administered mid-day). Four doses would include a midday requirement and would be suitable to consider for administration. If pupils refuse to take medication, then parents/carers will be informed. Pupils who are known to have extreme allergic reactions (anaphylaxis) to some food i.e., nuts or dairy products – will be encouraged to have their auto immune injectors with them at all times. If an attack does take place, then their Individual Health Care Plan will be followed. It is the responsibility of the parent to ensure their child's medication is in date and that there is the sufficient amount to be administered. If the school is unsure of the source or purpose of the medication staff should refuse to accept it.

Pain medication

Pain relief medication will not be administered without first checking with parent/carers when the previous dose was taken.

- **Paracetamol**

Children can only be given one dose of paracetamol every four hours, as such pupils will not have paracetamol administered until they have been in school for this period.

Administration of paracetamol will only be considered if prescribed. Parents/carers must have given written consent prior to paracetamol being administered. In no circumstances will paracetamol be administered without written consent. If paracetamol does not relieve the pain, school will contact parent/carers or the emergency contact. The member of staff responsible for giving medicines must witness the pupil taking the paracetamol and make a record of it. Any time a pupil is administered paracetamol, this information will be shared with parent/carer at the end of the school day.

- **Ibuprofen**

Children can only be given ibuprofen a maximum of 3 times in 24 hours, as such pupils will not have any ibuprofen administered in school unless prescribed and have been in school for 8 hours.

Administration of ibuprofen will only be administered in school if prescribed and a dose is required, as stipulated on the prescription. If a pupil requires ibuprofen, where possible it will be given with food so that they do not get indigestion.

- **Aspirin**

No pupil will be given medication containing aspirin unless prescribed by a doctor.

- **Adrenaline Auto-Injector (A.A.I)**

Pupils who suffer from severe allergic reactions may be prescribed an A.A.I for use in the event of an emergency. Pupils will be provided with a lockable container which is easily accessible, with the code clearly visible on the box and recorded on the medical register. Pupils who require an A.A.I will be encouraged to carry it with them at all times. At the end of the school day, pupils are encouraged to store their A.A.I in a known, safe space.

- **Inhalers**

Inhalers are stored in classrooms or shared areas so that they are easily accessible.

- **Controlled drugs**

Controlled drugs are accepted for those they have been prescribed to in school. Controlled drugs are signed into school and a record is kept of how many are received, when they are administered and how many remain.

Non-Prescription Medication

The school, with the exception of nursery, will not accept non-prescription medication. If needed, parents/carers will be asked to come into school to administer non-prescription medication to their child.

- **Barrier cream**

In line with NICE guidance (revised, May 2024), if there is a mild erythema (skin reaction), an over-the-counter, barrier preparation, which has been provided by parents/carers, can be applied at each nappy change.

Recording Procedure

Staff administering medicines should do so in accordance with the prescribers' instructions. School will keep a record of all medicines administered to individual pupils, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should also be noted.

Storage Procedure

All medications will be stored in designated medical areas as appropriate. Inhalers will be kept centrally, either in classrooms or close to the appropriate classroom and are easily accessible. Auto immune injector pens (A.I.I's) are locked in a portable safety box and carried with pupils around school, the combination is recorded on both the box and on the medical register. Controlled drugs, that have been prescribed for a pupil will be securely stored in a non-portable container which is only accessible by staff; however, these are easily accessible in an emergency.

Disposal Procedure

At the end of the Summer Term, (July) all medication - including asthma medication will be signed out to parents/carers and MUST be signed into school at the start of the new academic year in September. If this is not collected within the prescribed time, it will be disposed of at a local pharmacy. A communication will be sent out to remind parents of this. Sharp boxes should always be used for the disposal of needles and other sharps.

Emergencies

If a child requires hospital treatment, attempts will be made to contact parents/carers. If parents/carers are unsuccessfully contacted, then at least one member of first aid trained staff will accompany the child and remain with them until a parent/carer arrives.

Staff Liability

There is no legal or contractual duty on teachers to administer medicine or to supervise a pupil taking it. This is a purely voluntary role and is recognised as such by the Government. While teachers have a general legal duty of care to their pupils, this does not extend to a requirement to routinely administer medicines.

Support staff may, as part of their contract, have specific duties to administer medication. However, if they do not have a contractual requirement to administer medicines, then they cannot be made to do so.

In cases of accident and emergency teachers and other staff must always be prepared to help, as they and other school staff in charge of pupils have their general legal duty of care to act as any reasonably prudent parent would. In such emergencies, staff should do what is obviously necessary and appropriate to relieve extreme distress or prevent further and otherwise irreparable harm. Qualified medical treatment should be secured in emergencies at the earliest opportunity.

The prime responsibility for a child's health however lies with the parents.