



# **Administering Medication Policy**

**September 2021**

DATE FOR REVIEW: September 2022

**James Montgomery Academy Trust**

## Statement of intent

The **James Montgomery Academy Trust (JMAT)** will ensure that pupils with medical conditions receive appropriate care and support at JMAT schools, 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 JMAT is committed to ensuring that parents/carers feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

## COVID-19

This policy includes provisions which the school will have due regard for during the coronavirus pandemic. The information in this policy is under constant review and is updated to reflect changes to government guidance as it is released.

## Legal framework

This policy complies with the following legislation, including, but not limited to:

- The Education Act 2011
- The Children Act 1989
- The Equality Act 2010
- Coronavirus Act 2020

This policy has consideration for, and is compliant with the following statutory guidance:

- The Children and Families Act 2014
- DfE 'Supporting pupils at school with medical conditions' 2015
- DfE 'Working together to safeguard children' 2018
- DfE and PHE (2020) 'Coronavirus (COVID-19): implementing social distancing in education and childcare settings'
- PHE (2020) 'COVID-19: cleaning of non-healthcare settings'

The JMAT will implement this policy in conjunction with our Safeguarding and Child Protection Policy, Health and Safety Policy, Infection Control Policy, Behaviour Policies and Equality Policy.

## Definitions

**James Montgomery Academy Trust** makes the following definitions:

- "medication" as any prescribed or over the counter medicine.
- "prescription medication" as any drug or device prescribed by a doctor.
- a "staff member" as any member of staff employed at the school, including teachers.
- for the purpose of this policy, "medication" will be used to describe all types of medicine.

## Key roles and responsibilities

### The role of the Local Governing Body (LGB)

The LGB has overall responsibility for the implementation of the Administering Medication Policy and procedures of the JMAT and its schools.

The LGB has overall responsibility of ensuring that the Administering Medication Policy, as written, does not discriminate on any grounds, including but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.

The LGB is responsible for handling complaints regarding this policy, as outlined in the JMAT's Complaints Policy.

The LGB is responsible for ensuring the correct level of insurance is in place for the administration of medication.

The LGB is responsible for ensuring that members of staff who provide support to pupils with medical conditions are suitably trained and have access to information needed.

The LGB is responsible for 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.

The LGB will manage any complaints or concerns regarding the support provided or administration of medicine using the JMAT's Complaints Policy.

### **Headteacher:**

The headteacher is responsible for the day-to-day implementation and management of the Administering Medication Policy and relevant procedures of the school.

The headteacher is responsible for ensuring that appropriate training is undertaken by staff members administering medication, for example EpiPen training for children with allergies.

The headteacher (in consultation with school nurse if appropriate) is responsible for ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.

In the case of staff absence, the headteacher is responsible for organising another appropriately trained individual to take over the role of administering medication.

### **Staff:**

Staff, including teachers, support staff and volunteers, are responsible for following the policy and for ensuring pupils do so also.

Staff, including teachers, support staff and volunteers, are responsible for implementing the agreed policy fairly and consistently.

If a pupil is sent to hospital, at least **one** member of staff will accompany the pupil until their parent/carer has arrived.

### **Parents/carers:**

Parents/carers are expected to keep the school informed about any changes to their child/children's health.

Parents/carers are expected to complete a medication administration form (Appendix 1) prior to bringing medication into school.

Parents/carers are expected to discuss medications with their child/children prior to requesting that a staff member administers the medication.

### **NB**

It is both staff members' and pupils' responsibility to understand what action to take in general terms during a possible medical emergency, such as raising the alarm with other members of staff.

### **COVID-secure measures (when applicable) for administering medication**

In the circumstance of a pandemic, all protocols for administering medication must be followed by the staff member in order to protect themselves, for example social distancing and hygiene practices such as handwashing, etc. This includes the use of PPE when administering medicine, such as gloves, aprons and face mask.

If a child is displaying symptoms of coronavirus and is isolated awaiting pick up by parent, **no further medication must be administered.**

## **Training of staff**

Teachers and support staff will receive regular and on-going training as part of their development.

The headteacher will ensure that a sufficient number of staff are suitably trained in administering medication, for example Epi-pen training.

All school staff (including office staff, lunchtime supervisors, etc) staff will be made aware of a pupil's medical condition.

The headteacher will ensure that supply teachers are appropriately briefed regarding pupils' medical conditions.

A first aid certificate does not constitute appropriate training in supporting children with medical conditions.

The JMAT and its schools will provide whole-school awareness training where appropriate, so that all staff are aware of the Administering Medication Policy and understand their role in implementing the policy.

## **Medication**

**Only prescribed medication will be administered to children.**

Liquid paracetamol and other non-prescribed medication **will not** be administered without a prescription. Please note this does not include the external application of cream used during the process of changing nappies, for example products, such as Sudacrem, and other soothing ointments.

No member of staff, under any circumstances should administer medicine to a child in school or offsite such as on offsite visits/residential trips, unless trained to do so. This includes over the counter (OTC) medicines such as:

- Eye drops
- Paracetamol/aspirin/ibuprofen
- Travel sickness medication
- Topical creams (excluding nappy rash creams)
- Cough medicine
- Antihistamine/hay fever products
- Homeopathic remedies.

Where a child has been prescribed medication such as antibiotics, it is the parent/carers responsibility to administer it to their child. Therefore we advise and encourage parents to ask their child's doctor to prescribe medicines which can be administered outside of school hours. If this is not possible (for example, antibiotics prescribed four times daily) then a medication administration form ([see Appendix 1](#)) must be completed by the parent/carer prior to staff members administering the prescribed medicines.

The medication should be as dispensed, in the original container and must be clearly labelled with:

- name of child
- name of medication
- strength of medication
- how much to give i.e. dose

- when it should be given
  - length of treatment /stop date, where appropriate
  - any other instructions
- expiry date (where there is no expiry date the medication should have been dispensed within the last 6 months)

**NB:** The label “To be taken as directed” does not provide sufficient information. Precise information must be supplied.

No pupil will be given medicines without written parental consent. Medicines must be only given to the child named on the prescription/label.

Medicines which do not meet these criteria will not be administered, with the exception of insulin which is acceptable to use if it is in date but in a different container, such as an insulin pen.

Before administering medication the member of staff should check:

- the child’s identity
- that there is written consent from a parent/carer
- that the medication name, strength and dose instructions match the details on the consent form
- that the name on the medication label is that of the child being given the medication
- that the medication to be given is in date
- that the child has not already been given the medication

When medicines are no longer required, they will be returned to the parents/carers of the pupil.

Medication will be stored safely either in the school office, or refrigerated if required.

In the event of a school trip or activity which involves leaving the school premises, medicines and devices, such as insulin pens and asthma inhalers, will be readily available to staff and pupils.

Staff members have the right to refuse to administer medication. If a class teacher does refuse, the headteacher will delegate the responsibility to another staff member.

Any medications that run out of date or are left over at the end of the course will be returned to the pupil’s parent/carer.

Written records will be kept for any medication administered to pupils.

Where appropriate, pupils will be encouraged to take their own medication (e.g asthma inhaler) under the supervision of a teacher.

Parents/carers will be consulted before a pupil is given approval to be responsible for their own medication e.g. asthma inhaler.

These arrangements will be reflected in their individual healthcare plan (IHCP).

If a pupil refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their IHCP and parents/carers will be informed so that alternative options can be considered.

The JMAT and its schools cannot be held responsible for side effects which occur when medication is taken correctly.

### **Individual healthcare plans (IHCP)**

For chronic or long-term conditions and disabilities, an IHCP will be developed in liaison with the pupil,

parents/carers, headteacher/head of school, special educational needs and disabilities coordinator (SENDCo) and medical professionals (see 'Supporting pupils with medical conditions policy' for full details).

## **Monitoring and review**

**This policy is reviewed annually by the Trust DSL.**

Any changes made to this policy by the above will be communicated to all members of staff. The policy is available for public view on the JMAT website.

All members of staff are required to familiarise themselves with all processes and procedures outlined in this policy as part of their induction programme.

The next scheduled review date for this policy is **September 2022**.

## APPENDIX 1

*Insert school name and address*

# Medication Administration Form

I give my permission for my child \_\_\_\_\_

to receive \_\_\_\_\_ (name of medication)

### **Prescribed Medication**

This will need to be given \_\_\_\_\_ time/s a day at \_\_\_\_\_

Or

When necessary with reference to Individual Health Care Plan.

Use by date for medicine \_\_\_\_\_

Signed \_\_\_\_\_

Dated \_\_\_\_\_

### **Please note:**

Only prescribed medicines will be administered by school staff.