



CLITHEROE PENDLE PRIMARY SCHOOL

MEDICINES POLICY

Introduction

This document is a statement of the aims, principles and strategies associated with administering medicines to pupils.

It is worth noting that there is no legal duty which requires school staff to administer medication; this is a voluntary role.

Purpose of the Policy

This policy should be read in conjunction with the School's Health and Safety Policy, Supporting Pupils with Medical Conditions Policy and the First Aid Policy.

Aims

Our aims for this policy:

- To provide guidelines and procedures on the administering of medicines to pupils. Children who are, however, acutely unwell should be kept at home.
- To provide a statement on medicines in school which outlines their storage and accessibility.

Aims

Our aims for health and safety are to:

- Provide a safe and healthy environment for children, teaching and non-teaching staff and all other people who come onto the premises during school hours;
- To ensure that all members of the school community understand their own responsibilities in maintaining a healthy and safe environment.

School will only store medicines for those pupils who have a care plan or other such documentation from a named medical professional. These medicines and care plans will be held in the Medical Cupboard in the main office of school. The cupboard itself must not be locked; however, the school office doors should be closed on the keypad lock if no adult member of staff is present.

Medicines will only be administered in school when it would be detrimental to a child's health or school attendance not to do so. Where possible medicines should be prescribed in dose frequencies which enable parents to administer the medicines outside of school hours. Parents are able to call into school at lunchtimes if necessary to give a dose of medicine.

School will only accept medicines in school if presented in the original container, are in date with written instructions for the administration, dosage and storage. (If the prescribed dosage has to

be altered from how the medication is presented e.g. half a tablet, then the parent of the child should provide the original package but split the dosage accordingly using a tablet dispenser box or other appropriate dispenser).

When no longer required medicines will be returned to parents for safe disposal.

If necessary a sharps box must be provided for safe disposal of needles or other sharps via the child's parent or medical professional. Parents will be requested to exchange the boxes on a regular basis.

If a parent is unable to administer medicine that is essential for the child then a dated letter of consent must be given to the school office stating the dose and time of administration. A member of school staff will supervise a child who is deemed able to self-administer. If a child is not deemed able to self-administer then two members of school staff will measure and administer as per the parental instructions/ to the named child.

A record of any medicines given will be recorded in the Medication book in the school office and will indicate which staff member/s administered the medicine.

Procedures for inhalers

- Parents must decide if their child keeps an inhaler permanently in school or if a phone call home is sufficient at the point of need. (Depending on frequency/severity of previous "attacks" and parents locality to school during the day).
- If inhalers are deemed necessary in school ideally 2 should be provided by parents.
- It is the responsibility of parents to ensure that their child's inhaler/s in school are in date and clearly named.
- Class teachers should familiarise themselves with the up-to-date information in the school's medical registers.
- Teachers should retain one inhaler which should be kept in the classroom in an inhaler box.
- The inhaler box accompanies the class when sessions are held outside eg PE, outdoor learning.
- Children should be encouraged to develop responsibility for their inhalers, knowing how to use them independently.
- The second inhaler should be kept in the medical cupboard in the school office for emergency use.

Taking medicines off site

Classroom inhaler boxes should be taken off site if the children attend events, trips, competitions etc. for those children whose parents have deemed it necessary for school to hold inhalers.

Emergency / Life saving medications should also be taken from the office medical cupboard and signed out/in.

Hygiene/infection control

All staff should be familiar with the normal precautions for avoiding infections and must follow basic hygiene procedures. Staff should have access to disposal gloves and take care when dealing with spillages of blood and other body fluids and disposing of dressings or equipment. Further guidance is available in the DFEE publication *HIV and AIDS: A guide for the education service*.

Emergency procedures

All staff should know how to call the emergency services. In the event of need a First Aider is responsible for carrying out emergency procedures. A pupil taken to hospital by ambulance should be accompanied by a member of staff who should remain until the pupil's parent arrives.

Generally staff should not take children to hospital in their own car. However, in an emergency it may be the best course of action. The member of staff should be accompanied by another adult and have public liability insurance. They should also take a copy of the emergency contact form with them.

All staff must be aware of the location of the defibrillator (on the wall outside the main entrance in school) and the location of the code to access the defibrillator (on the cupboard in the main office). Full instructions for operation are provided.

Monitoring and Evaluation

The above policy and practices will be reviewed regularly by a representative group of members of the school in the light of the changing needs of the school and health and safety issues raised.

Dated: February 2024

Date policy issued to staff & method of distribution: Staff briefing March 2024

Review Date: February 2025