The Trinity Catholic Academy



Administering Medication Policy

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Signed by:			
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A Shepherd	Chair of governors	Date:	19/01/24

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Statement of intent

The Trinity Catholic Academy will ensure that pupils with medical conditions receive appropriate care and support at school, in order for them to have full access to education and remain healthy. This includes the safe storage and administration of pupils' medication.

The school is committed to ensuring that parents feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe whilst at school.

For the purposes of this policy, "medication" is defined as any prescribed or over the counter medicine, including devices such as asthma inhalers and adrenaline auto-injectors (AAIs). "Prescription medication" is defined as any drug or device prescribed by a doctor. "Controlled drug" is defined as a drug around which there are strict legal controls due to the risk of dependence or addiction, e.g. morphine.

1. Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Equality Act 2010
- Children and Families Act 2014
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2017) 'Using emergency adrenaline auto-injectors in schools'

This policy operates in conjunction with the following school policies:

- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Allergen and Anaphylaxis Policy
- Complaints Procedures Policy

2. Roles and responsibilities

The governing board is responsible for:

- The implementation of this policy and procedures.
- Ensuring that this policy, as written, does not discriminate on any grounds, including the protected characteristics as defined by the Equality Act 2010.
- Ensuring the correct level of insurance is in place for the administration of medication.
- Ensuring that members of staff who administer medication to pupils, or help pupils selfadminister, are suitably trained and have access to information needed.
- Ensuring that relevant health and social care professionals are consulted in order to guarantee that pupils taking medication are properly supported.
- Managing any complaints or concerns regarding this policy, the support provided to pupils, or the administration of medication in line with the school's Complaints Procedures Policy.

The headteacher is responsible for:

- The day-to-day implementation and management of this policy and relevant procedures.
- Ensuring that appropriate training is undertaken by staff members administering medication.
- Ensuring that staff members understand the local emergency services' cover arrangements and that the correct information is provided for the navigation system.
- Organising another appropriately trained individual to take over the role of administering medication in case of staff absence.
- Ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.

All staff are responsible for:

Adhering to this policy and supporting pupils to do so.

Carrying out their duties that arise from this policy fairly and consistently.

Parents are responsible for:

- Keeping the school informed about any changes to their child's health.
- Completing an administering medication parental consent form prior to them bringing any medication into school for their child.
- Discussing medication with their child prior to requesting that a staff member administers the medication.

It is both staff members' and pupils' responsibility to understand what action to take during a medical emergency, such as raising the alarm with other members of staff. This may include staff administering medication to the pupil involved.

3. Training staff

The headteacher will ensure that a sufficient number of staff are suitably trained in administering medication. All staff will undergo basic training on the administering of medication to ensure that, if exceptional circumstances arise where there is no designated administrator of medication available, pupils can still receive their medication from a trained member of staff. The headteacher will also ensure that a sufficient number of staff have been trained in administering medication in an emergency by a healthcare professional or first aid provider.

Where it is a necessary or vital component of their job role, staff will undertake training on administering medication in line with this policy as part of their new starter induction.

Staff will be advised not to agree to taking on the responsibility of administering medication until they have received appropriate training and can make an informed choice. The school will ensure that, as part of their training, staff members are informed that they cannot be required to administer medication to pupils, and that this is entirely voluntary, unless the supporting of pupils with medical conditions is central to their role within the school, e.g. the school nurse.

Training will also cover the appropriate procedures and courses of action with regard to the following exceptional situations:

- The timing of the medication's administration is crucial to the health of the child
- Some technical or medical knowledge is required to administer the medication
- Intimate contact with the pupil is necessary

Staff members will be made aware that if they administer medication to a pupil, they take on a legal responsibility to do so correctly; therefore, staff will be encouraged not to administer medication in the above situations if they do not feel comfortable and confident in doing so, even if they have received training.

Training for administering AAIs

The school will arrange specialist training for staff on a yearly basis where a pupil or member of staff in the school has been diagnosed as being at risk of anaphylaxis. Designated staff

members with suitable training and confidence in their ability to use AAIs will be appointed to administer this medication. As part of their training, all staff members will be made aware of:

- How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
- Where to find AAIs in the case of an emergency.
- How the dosage correlates with the age of the pupil or staff member.
- How to respond appropriately to a request for help from another member of staff.
- How to recognise when emergency action is necessary.
- Who the designated staff members for administering AAIs are.
- How to administer an AAI safely and effectively in the event that there is a delay in response from the designated staff members.
- How to make appropriate records of allergic reactions.

There will be a sufficient number of staff who are trained in and consent to administering AAIs on site at all times.

4. Receiving, storing and disposing of medication

Receiving prescribed medication from parents

The parents of pupils who need medication administered at school will be sent an administering medication parental consent form to complete and sign; the signed consent form will be returned to the school and appropriately filed before staff can administer medication to pupils. A signed copy of the parental consent form will be kept with the pupil's medication, and no medication will be administered if this consent form is not present. Consent obtained from parents will be renewed annually.

The school will only store and administer prescribed medication. The school will store a reasonable quantity of medication, e.g. a maximum of four weeks' supply at any one time in the case of tablets, a week long course of antibiotics or 1 inhaler. Aspirin will not be administered unless the school has evidence that it has been prescribed by a doctor.

Parents will be advised to keep medication provided to the school in the original packaging, complete with instructions, as far as possible, particularly for liquid medications where transfer from the original bottle would result in the loss of some of the medication on the inside of the bottle. This does not apply to insulin, which can be stored in an insulin pen.

Storing pupils' medication

The school will ensure that all medications are kept appropriately, according to the product instructions, and are securely stored. Medication that may be required in emergency circumstances, e.g. asthma inhalers and AAIs, will be stored in a way that allows it to be readily accessible to pupils who may need it and can self-administer, and staff members who will need to administer them in emergency situations. Inhalers, eczema creams and antihistamines will be stored in class boxes which can be taken to PE, on yard and out of school during evacuations. All other medication will be stored in a place inaccessible to pupils, e.g. in the medical storage unit in the school office or in the case of antibiotics the school office fridge..

The school will ensure that pupils know where their medication is at all times and are able to access them immediately, e.g. by ensuring that the location is known and the children knows who to speak to.

Medication stored in the school will be:

- Kept in the original container alongside the instructions for use.
- Clearly labelled with:
 - The pupil's name.
 - the name of the medication.
 - The correct dosage.
 - The frequency of administration.
 - Any likely side effects.
 - The expiry date.
- Stored alongside the accompanying medical plan.

Medication that does not meet the above criteria will not be administered.

Disposing of pupils' medication

The school will not store surplus or out-of-date medication. Where medication and/or its containers need to be returned to the pupils' doctor or pharmacist, parents will be asked to collect these for this purpose.

Needles and other sharps will be disposed of safely and securely, e.g. using a sharps disposal box.

5. Administering medication

Medication will only be administered at school if it would be detrimental to the pupil not to do so. Only suitably qualified members of staff will administer controlled drugs. Staff will check the expiry date and maximum dosage of the medication being administered to the pupil each time it is administered, as well as when the previous dose was taken.

Medication will be administered in a private, comfortable environment and, as far as possible, in the same room as the medication is stored; this will normally be the school office. The room will be equipped with the following provisions:

- Access to a space for increased privacy where intimate contact is necessary
- Nearby facilities to enable staff members to sanitise / wash their hands before and after administering medication, and to clean any equipment before and after use if necessary
- Available PPE for use where necessary

Before administering medication, the responsible member of staff should check:

- The pupil's identity.
- That the school possesses written consent from a parent.
- That the medication name, dosage and instructions for use match the details on the consent form.

- That the name on the medication label is the name of the pupil being given the medication.
- That the medication to be given is within its expiry date.
- That the pupil has not already been given the medication within the accepted frequency of dosage.

If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.

If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.

Where appropriate, pupils will be encouraged to self-administer under the supervision of a staff member, provided that parental consent for this has been obtained. 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 medical plan, and parents will be informed so that alternative options can be considered.

The school will not be held responsible for any side effects that occur when medication is taken correctly.

Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible. Records will be stored securely.

6. Medical devices

Asthma inhalers

All pupils with inhalers will know that they are stored in the medical box outside their classroom. The school will ensure that replacement inhalers for pupils are requested from parents before the old one reaches its expiry date or runs out altogether. Emergency inhalers are stored in the school office in case there are issues with one of the inhalers belonging to a child.

AAIs

AAI's will be stored in the school office. If there are no children or staff needing AAI's within the school there will still be spare devices held in the building in case of an emergency.

Spare AAIs are not located more than five minutes away from where they may be required. The emergency AAIs can be found at the following locations:

School office

Medical authorisation and parental consent will be obtained from all pupils believed to be at risk of anaphylaxis for the use of spare AAIs in emergency situations. The spare AAIs will not be used on pupils who are not at risk of anaphylaxis or where there is no parental consent.

Where consent and authorisation has been obtained, this will be recorded in the pupil's medical plan.

Pupils' and spare AAIs will be obtained, stored and administered in line with the school's Allergen and Anaphylaxis Policy.

7. Individual Healthcare Plans

For pupils with chronic or long-term conditions and disabilities, a healthcare plan will be developed by school in liaison with the pupil, their parent and any other relevant medical professionals. When deciding what information should be recorded on the healthcare plan, the following will be considered:

- The medical condition and its triggers, signs, symptoms and treatments
- The pupil's resulting needs, such as medication, including the correct dosage and possible side effects, medical equipment, and dietary requirements
- The specific support needed for the pupil's educational, social and emotional needs
- The level of support needed and whether the pupil will be able to take responsibility for their own health needs
- The type of provision and training that is required, including whether staff can be expected to fulfil the support necessary as part of their role
- Which staff members need to be aware of the pupil's condition
- Arrangements for receiving parental consent to administer medication
- Separate arrangements which may be required for out-of-school trips and external activities
- Which staff member can fulfil the role of being a designated, entrusted individual to whom confidentiality issues are raised
- What to do in an emergency, including whom to contact and contingency arrangements
- What is defined as an emergency, including the signs and symptoms that staff members should look out for

The governing board will ensure that healthcare plans are reviewed annually or more regularly if the needs of the pupil change. Healthcare plans will be routinely monitored throughout the year by a designated staff member.

8. Educational trips and visits

In the event of educational trips and visits which involve leaving the school premises, medication and medical devices will continue to be readily available to staff and pupils. The adult who is responsible for the child on the trip will carry their medication and remain close to them at all times.

There will be at least one staff member who is trained to administer medication on every outof-school trip or visit which pupils with medical conditions will attend. Staff members will ensure that they are aware of any pupils who will need medication administered during the trip or visit, and will ensure that they know the correct procedure, e.g. timing and dosage, for administering their medication. If the out-of-school trip or visit will be over an extended period of time, e.g. an overnight stay, a record will be kept of the frequency at which pupils need to take their medication, and any other information that may be relevant. This record will be kept by a designated trained staff member who is present on the trip and can manage the administration of medication.

All staff members, volunteers and other adults present on out-of-school trips and visits will be made aware of the actions to take in a medical emergency related to the specific medical needs and conditions of the pupil, e.g. what to do if an epileptic pupil has a seizure.

9. Medical emergencies

Medical emergencies will be handled in line with the First Aid Policy.

For all emergency medication stored by the school, the school will ensure it is readily accessible to staff and the pupil who requires it and is not locked away. A spare copy of any key instructions will be kept by the school in the school office.

10. Monitoring and review

This policy will be reviewed annually by the governing board and headteacher. The next scheduled review is January 2025.

Records of medication administered on the school premises, or on school trips and visits, will be monitored, and the information recorded will be used to improve school procedures.

Staff members trained in administering medication will routinely recommend any improvements to the procedure. The school will also seek advice from any relevant healthcare professionals as deemed necessary. Any changes made to this policy will be communicated to the relevant stakeholders, including pupils whose medication is stored at school and their parents.

Individual healthcare	plan
Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc
Other information
Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)
Plan developed with
Staff training needed/undertaken – who, what, when
Form copied to

Parental agreement for school to administer medicine.

school has a policy that the sta	
Date for review to be initiated I	ОУ
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	
Medicine	
Name/type of medicine (as described on the container Expiry date)
Dosage and method	
Timing	
Special precautions/other instr	ructions
Are there any side effects that school/setting needs to know a Self-administration – y/n	
Procedures to take in an emer	gency
	ginal container as dispensed by the pharmacy
Contact Details Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must delive medicine personally to	r the
give consent to school/setting school/setting policy. I will info	the best of my knowledge, accurate at the time of writing and I staff administering medicine in accordance with the rm the school/setting immediately, in writing, if there is any y of the medication or if the medicine is stopped.
Signature(s)	Date