

Burstwick Community
Primary School



Branching Out
Into The Community

BURSTWICKCOMMUNITY PRIMARY SCHOOL

ADMINISTERING MEDICINE POLICY

At Burstwick Community Primary School we aim to provide a safe, secure and stimulating environment within which all children feel cared for, supported and happy, where children can achieve highly and let their imagination flourish.

We aim to prepare children for adult life and the world of work through developing an enthusiasm for learning and a willingness to persevere in the face of challenge.

Believe, Unique, Resilient, Safe, Tolerant, Worthy, Independent, Creative, Kind-hearted

We are **BURSTWICK!**

Introduction

The purpose of this policy is to put into place effective management systems and arrangements to support children and young people with medical needs in the school and to provide clear guidance for staff and parents/carers on the administration of medicines.

This document, where appropriate, must be considered in conjunction with all other relevant policies, for example, health and safety.

All staff in schools and early year's settings have a duty to maintain professional standards of care and to ensure that children and young people are safe. It is expected good practice that schools and settings will review cases individually and administer medicines in order to meet the all-round needs of the child. However, there is no legal duty requiring staff to administer medication or to supervise a child when taking medicines. This is a voluntary role.

Roles and Responsibilities

Under the Disability Discrimination Act (DDA) 1995, schools and settings should be making 'reasonable adjustments' for disabled children, including those with medical needs, and are under a duty to plan strategically to increase access over time. Schools and settings should consider what reasonable adjustments they need to make to enable children with medical needs to participate fully in all areas of school life, including educational visits and sporting activities.

The Headteacher/Manager, in consultation with the Governing body, staff, parents/carers, health professionals and the local authority, is responsible for deciding whether the school or setting can assist a child with medical needs. The Headteacher/Manager is responsible for: implementing the policy on a daily basis ensuring that the procedures are understood and implemented ensuring appropriate training is provided making sure there is effective communication with parents/carers, children and young people, school/settings staff and all relevant health professionals concerning the pupil's health needs

It is good practice that staff, including supply staff should always be informed of a child's medical needs where this is relevant and of any changes to their needs as and when they might arise. All staff will be informed of the designated person with responsibility for medical care. A list of medical needs must be clearly known and accessible in order to support the child's day to day care.

Parents/Carers

It is the responsibility of parents/carers to:

- a) inform the school of their child's medical needs
- b) provide any medication to the (schools designated area) in a container clearly labelled with the following: ☐
 - CHILD'S NAME
 - NAME OF MEDICINE
 - DOSE AND FREQUENCY OF MEDICATION
 - SPECIAL STORAGE ARRANGEMENTS
- c) Ensure that medicines have not passed the expiry date

Pupil Information

Parents/carers should be required to give the information about their child's long-term medical needs and to update it at the start of each school year or update school when changes arise:

- *Details of pupil's medical needs*
- *Medication, including any side effects*
- *Allergies*
- *Name of GP/consultants*
- *Special requirements e.g. dietary needs, pre-activity precautions. Parents/Carers may be required to provide evidence in this case.*
- *What to do and who to contact in an emergency*
- *Cultural and religious views regarding medical care*

Administering Medication

Staff are not legally required to administer medicines or to supervise a child when taking medicine. Any employee may volunteer to undertake this task but it is not a contractual requirement and appropriate training should be given before an individual takes on a role which may require administering first aid or medication.

All schools should ensure that they have sufficient members of support staff, who are appropriately trained to manage medicines as part of their duties. Within the Health & Safety Policy it should incorporate managing the administration of medicines and supporting children with complex health needs. For staff following documented procedures, they are fully covered by their Employers Public Liability Insurance should a parent/guardian complain. Staff are made aware when a child may need extra attention due to changes to their medical requirements as agreed with parents/carers and their care plan altered as necessary. In the likelihood of an emergency arising, all staff should be aware of what action to take, and back up cover should be arranged if the staff member normally responsible for the child's care is absent.

It is expected that parents/carers will normally administer medication to their children at home. No medication will be administered without prior written permission from the parents/carers. A 'Parental agreement for school to administer prescribed medicine' form must be completed. These staff are: **Mrs Spencer & Mrs Winn.**

- *Prescribed medication requiring 3 times per day should be administered before school, after school and before bedtime, unless otherwise stated on the medication instructions from the GP. This means that medication requiring 3 times per day will not be administered at school.*
- *Prescribed medication requiring 4 times per day should be administered before school, at lunch time, after school and before bedtime. The school will administer only one of the required doses.*

Over the counter/un-prescribed medication will only be administered by school staff for a maximum period of 2 days...except Liquid Paracetamol in pre-measured pouches or melt form (this is due to new prescription regulations preventing parents from accessing paracetamol from their GP. However, in exceptional circumstances this may be discussed with a senior member of staff who may need clarification from your family G.P.

The Headteacher/Manager will decide whether any medication will be administered in school/early years setting and following consultation with staff, who will be responsible. All medicine will normally be administered during breaks and lunchtime. If, for medical reasons, medicine has to be taken at other times during the day, arrangements will be made for the medicine to be administered at other prescribed times. Where appropriate, pupils will be told where their medication is kept.

Any member of staff, on each occasion, giving medicine to a pupil should check: a)

Name of pupil

b) Written instructions provided by the parents/carers or doctor

c) Prescribed dose

d) Expiry date

Only one day's dosage of Liquid Paracetamol can be delivered to the school office each day and appropriate instructions given. We cannot store a supply of this medication in school.

Storage

Where appropriate all medicine will be safely stored appropriate to the access to the child. All medicine will be logged on the school's medical file. Class teachers in Foundation Stage and KS1 will store children's' inhalers, which must be labelled with the pupil's name. Pupils in KS2, where parents think it is appropriate, may keep their inhalers.

Records

Staff will complete and sign a Record of medicine administered to an individual child each time medication is given to a child and these will be kept in the administration office. The sheets will record the following: *a) Name of pupil*

b) Date and time of administration

c) Who supervised the administration

d) Name of medication

e) Dosage

f) A note of any side effects

Form 5: Record of long term prescribed medicine administered to an individual child

Form 6: Record of short term prescribed medicines

Refusing Medication

If a child refuses to take their medication, staff will not force them to do so. Parents/carers will be informed as soon as possible. Refusal to take medication will be recorded and dated on the child's record sheet. Reasons for refusal to take medications must also be recorded as well as the action then taken by the teacher.

Training

Training may be required as part of a pupils individual care plan specific to the pupils requirements. This will be provided on a range of medical needs, including any resultant learning needs, as and when appropriate. The Headteacher/Manager will ensure there are trained and named individuals to undertake first aid responsibilities, ensuring training is regularly monitored and updated.

Advice on the treatment of Asthma will be available from either the school nurse or the school first aiders who will also brief all staff with any updates/changes on a yearly basis.

Individual training required to meet the needs of identified children will take place when required and from the specialist team.

Health Care Plan

Where appropriate, a personal Health Care Plan will be drawn up in consultation with the school/setting, parents/carers/carers and health professionals. The Health Care Plan will outline the child's needs and the level of support required in school. Health Care Plans will be reviewed annually.

The Headteacher/Manager will ensure that all staff are aware of the school's planned emergency procedures in the event of medical needs.

School Trips

To ensure that as far as possible, all children have access to all activities and areas of school life, a thorough risk assessment will be undertaken to ensure the safety of all children and staff. No decision about a child with medical needs attending/not attending a school trip will be taken without prior consultation with the parents/carers.

Residential trips and visits off site:

a) Sufficient essential medicines and appropriate Health Care Plans will be taken and controlled by the member of staff supervising the trip;

b) If it is felt that additional supervision is required during activities e.g. swimming, the school/setting may request and expect the assistance of the parent/carer

Intimate or Invasive Treatment

This will only take place at the discretion of the Headteacher/Manager and Governors, with written permission from the parents/carers and only under exceptional circumstances. Two adults, where possible, one of the same gender as the child, must be present for the administration of such treatment. Cases will be agreed and reviewed on an individual basis. Training will be given to members of staff involved where necessary and all such treatment will be recorded. See *Intimate Care Policy*

Safeguarding

The school is committed to safeguarding and promoting the welfare of all children and staff. We expect all staff and volunteers to share this commitment. Through the construction and writing of policies, we share our commitment; and through our curriculum provision, safeguarding is taught both explicitly (directly) and implicitly (indirectly). We believe that all children have the right to learn in a supportive, caring and safe environment, which includes the right to protection from all types of abuse. Staff are vigilant for signs of any child in distress and we are confident about applying our safeguarding procedures to avert and alleviate any problems.

Monitoring and Review

Burstwick Community Primary School's Administering Medicine Policy is monitored regularly by the Senior Leadership Team (SLT), who report to the governors about its implementation and effectiveness. Governors are kept informed via the termly Headteacher's Report.

This policy will be reviewed at least in line with updated government guidance and implemented with immediate effect. This will be communicated to all staff and Governors.

Date Reviewed: September 2025

Review Date: September 2027

Reviewed by: Mr I Cutts