



MANAGING MEDICINES POLICY

Revised February 2019

Next Review February 2023

1. Aim

We aim to help all children attend school regularly. Some children have specific medical conditions, i.e. asthma or diabetes that require support to achieve this. It is not our policy to routinely administer medicines such as antibiotics or cough linctus. Any parent who is not happy with this arrangement should make an appointment with the Head Teacher to discuss the matter. This policy sets out our support for long term conditions.

2. Medicines

2.1 Medicines may only be brought to School when essential, that is, where it would be detrimental to a child's health if the medicine were not administered during the school day

2.2 We will **only accept** medicines:

- Prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber
- Provided in the original container, as dispensed, including the prescriber's instructions
- For inhalers, this includes the box on which the prescriber instructions are shown

2.3 We will **not accept**:

- Medicine taken out of its original container
- Medicine that has not been prescribed – unless in exceptional circumstances.
- Change to prescribed dosage on parental instruction

3. Long Term Medical needs

We believe it is important to have enough information about the medical condition of any child with long-term medical needs. When a child has complex needs, staff will develop a written health care plan involving parents and relevant health professionals to ensure that child is supported when in school.

4. Administering Medicines

4.1 To administer a medicine, we require written parental consent (see form 1) and the appropriate dosing spoon or syringe

4.2 A member of staff giving medicine must check:

- The child's name
- Name of drug
- Prescribed dose
- Expiry date
- The prescriber's written instructions on the label/container

4.3 A member of staff giving medicine must complete and sign the record of medicines administered (see form).

4.4 Self-management: Where it is appropriate and safe, we encourage children to take responsibility to manage their own medicines. We will judge each case individually bearing in mind the child's stage of development and any medical advice

4.5 Refusing medicines: A child who refuses will not be forced to take medicine. The member of staff should note the refusal on the record and inform a parent immediately

5. Safe Storage of medicines

5.1 Medicines can be harmful, and the School has a duty to ensure that the risks to the health of others are properly controlled

- Set out in the Control of Substances Hazardous to Health Regulations, 2002 (COSHH)

5.2 Emergency medicines, such as asthma inhalers or adrenaline pens need to be readily available to a child. We will not lock these away. Instead, a child should be allowed to carry his or her inhaler

5.3 We will store other medicines in a secure place in accordance with product instructions and legal requirements. We will tell children where their medicine is stored and who has the key to access it

5.4 We will not dispose of any medicine. Parents are responsible for safe disposal of unused or date-expired medicines

6. Educational visits

6.1 We encourage all children to take part in visits. In this, we will take account of arrangements for necessary medicines and make suitable adjustments.

6.2 Children with medical conditions can take part in most physical activities. Some children may need to take precautionary measures before or during exercise and may need immediate access to their medicines (such as asthma inhalers) however where possible all children will be able to access all activities.

7. Staff Training

The school will give appropriate guidance and training to a member of staff who agrees to accept responsibility to administer medicines to a child. The type of training necessary will depend on an individual case.

8. Emergency procedures

The school has procedures for dealing with emergencies and reporting to parents.

9. Monitoring & Review

The Head Teacher is responsible for implementing this policy and monitoring it is working. The policy will be reviewed every two years in accordance with the review timetable.

