

## Medication Policy

Status: Pending Approval

Date: 03.02.21

Review Date: February 2022

Governor Leadership: Finance, Resources and Health and Safety Committee

Executive Leadership: Andrew Foord

Manager: Welfare Manager / Assistant

Head (Nicky Read)

Consultation/signing group: All staff.

What the pupils need to know:

We will

- Administer medications that you need in school.
- Never force you to take a medication, but will try to explain to you if it's in your best interests.
- Make sure you are safe when we are administering medications.
- Get the permission of your parents/carers to give you medicine.
- Communicate fully with your parent/carer about any medication you have had at school.

What every member of staff needs to know:


We will

- Train you in administering medications where necessary.
- Have a colleague with you to countersign and check for errors.
- Never ask you to administer medications against your wishes.
- Encourage you not to administer a medication if the consent form is not in place/ incomplete.

What every adult needs to know:

Cromwell High School will



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- Administer medication only if a consent form has been signed by parents/carers and the medication is correctly labelled.
  - Two staff members are required to administer medication. No medication will be administered without a counter signatory.





# Medication Policy

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**Last review – February 2021.**

## **General:**

Senior Management are responsible for being familiar with and observing the statutory requirement concerning medications and administered in school and/or on off-site trips and residential settings.

We note the following situation:

- Education staff are not compelled as teachers and support staff to administer medication in school and are sometimes advised by their Trades Unions to refrain from such activity.
- There is currently no Nurse on site for our school and no immediate plan to base a nurse on site for more than visits for brief periods including appointments.
- As all our pupils have Severe Learning Difficulties, the huge majority of children in school are not able to take responsibility for the self-administration of medication.
- The majority of our pupils are not able to indicate accurately how they feel and are not able to self-monitor and indicate many contra-indications of medication.
- No pressure will be brought by management within school on any member of staff to administer medications. It will be a purely voluntary decision.
- The school continues to work to gain sufficient advice, protocols, care plans and risk assessments from ISCAN.

However, in the absence of a school nurse on site and given the ongoing medical needs of many of our pupils, some staff are currently willing to administer medication as and when necessary once the medication consent form is completed by parents or carers.

- For Education staff to refuse to administer medication would, under current conditions, mean many pupils being effectively excluded from school for lengthy periods of their education.

Given the above information, the school has devised the following policy to protect both staff and pupils and ensure safeguarding during the administration of Medicines.

## **Transport, Storage and Security.**


- All medications must be brought into school in the possession of a responsible adult. This would include escorts who are willing to transport pupils' medications.
- No medications should be sent in the bags or possessions of pupils.



- All medications brought into school must be handed immediately to a member of staff for safe storage. That member of staff must then hand the medication in at the office. The office staff will sign the medication into school using the yellow medication sign in sheets and then deliver to the correct class, getting the member of staff to sign that they have received it.
- Once the medication has been signed for in class, each class must complete the pink medication checklist against the parental consent form.
- All medications must be kept in their original containers and the label must not be changed under any circumstances.
- Medications from partly used containers must not be transferred to other containers.
- All medications must be clearly labelled with the medication name, the name of the pupil, instructions for use and date of dispensing plus expiry date. Parents are required to clearly label non-prescription medication with their child's name.
- Parents to ensure each individual rescue medication inside the box is also clearly labelled by the pharmacy.
- On no account are medications to be stored/put in envelopes.
- Medications must only be used for the pupils specified on the label. Medications must not be 'borrowed' e.g., Calpol, etc.
- Medications must not be removed from the medicine cabinet for use by any person other than the owner e.g., paracetamol, etc.
- Any loss or discrepancy of medications must be reported to a member of the Senior Management Team immediately.
- All medications requiring refrigeration will be locked in the strong box labelled as Medication Storage. Each department has a fridge within their own department; Structured and Conceptual are in their staffrooms and Sensory is in their storeroom cupboard.
- Any medication brought in by staff for their personal use must be in quantities that cannot cause major hazard (i.e. no more than a days' dose of paracetamol) and be locked away from pupil access. Any such medication requiring refrigeration must clearly labelled with the name of the member of staff and be locked in the strong box in their Department's Medical Fridge.
- Inhalers, Epipens and daily use medication can be stored in a locked cupboard in the pupils' classroom for quick access.
- Rescue medication, non-prescribed medication and medication which is not given on a daily basis must be stored in the lockable cabinets in each Department's staffroom. The keys to each cabinet are in the key safe located next to each cabinet and a spare set of keys is available from the welfare manager.
- Emergency medication for each class should be kept in one clearly labelled box and all other medication for that class in a separate clearly labelled box.
- All medication cabinets must not be left unlocked at any time.

## Medication Consent Forms

- Before any medication can be administered, a form must be completed by the pupil's parent or a carer with delegated responsibility for agreeing to medication. This applies to all medication both regular and/or temporary e.g., anti-biotics, inhalers, creams, drops, etc. Telephone authorisation is not usually sufficient. In urgent cases where the risks of



the medication are assessed as low, the Headteacher may authorise medication to be given for one day when the parent has repeated the request over the phone to a witness and this has been logged. On no account can any medication be taken over a one day period unless the written request form is in place. Parents are asked to sign that there is no reason why they would suspect that their child would have an adverse reaction to the medication. Medications containing aspirin should only be given to children under 16 with a doctor's advice. It is parental responsibility to inform school either verbally or in writing when a pupil's medication has ceased.

- Parents need to complete a medication consent form. This is available from the school office and these are also available on the school website for parents to access from home.

## Complex Medical Needs/Epilepsy and Asthma

All pupils with complex medical needs/epilepsy and asthma have a health care plan written by the school nurse and signed by a doctor, parents, the school nurse and the headteacher. These identify what constitutes an emergency for the pupil and the measures/medication to be undertaken in an emergency.


- These should be kept in the pupil's file (office), in the individuals CCP (locked in the classroom store cupboard) and in the welfare manager's file. i.e. not in general view. Healthcare plans will be updated as needed by the school nurse.
- A record should be kept of all seizures/absences/asthma attacks etc and these should be kept out of public view and be recorded in each Department's blue record file on a separate sheet per pupil on the blue recording sheet.
- The office staff are responsible for receiving the updated health care plans and ensuring these are uploaded to the pupil's Cpoms record and copies are made and distributed to the office file, pupil CCP and welfare manager. For the Sensory Department a copy also needs to be made for NHS employed staff's file. In the case of an Emergency plan such as, epilepsy, a copy also needs to be made for the pupil's individual medication file and given to class staff to update.

## Inhalers

- All pupils requiring an Inhaler will have one available in school. School have an emergency inhaler for each Department which are clearly labelled and stored in each Departments locked cabinet within each staff room. The emergency inhaler is only to be used by pupils who have asthma or who have been prescribed a reliever inhaler, and for whom written parental consent has been given.
- Maximum of 10 puffs. These must be disposed of once used- please give to SLT who will take to a pharmacy.

## Administration of Medication- Recording in School

Visitors and volunteers will not be expected to dispense or administer any medication. Supply staff, casual staff and new members of staff can dispense and administer medication once they have completed the school's medication training and at the class teacher's discretion.



All doses of medication should be recorded on the log sheet kept in the pupil's individual medication file in **each Department's staff room** so no other record should be kept to avoid reliance on a record that may not have been updated.

Each pupil has a medical file, which is colour coded and has their photograph on the front. These files contain the parental consent form and the medication administration sheet.

**Emergency meds forms need to be at the front along with the Epilepsy care plan. The class staff will be responsible for ensuring the plan is the most up to date version once they have received an update from the office. The setting up of these files is the responsibility of the class teams. The colour coding is:**

**Blue= Regular medication that is required daily**

**Yellow= Occasional medication (Eg, piriton, occasional use inhalers)**

**Red= Emergency medication (Eg, Buccal, Emergency inhalers)**

**Where pupils require emergency medication and any other medication they will have only a red file.**

**Where pupils require regular and occasional medication they will have only a blue file.**

All doses given should be marked with the doses, date, time dispensed and time administered (or clearly marked as "safely disposed of") and signed for. **Staff should follow stringent hygiene procedures eg, wash hands and wear gloves when administering medication. On each occasion that a medicine is administered, 2 staff members should be present, one staff member should dispense and administer the medication the other should be the counter signatory. All doses given should be signed by a counter signatory that has agreed the correct dose has been dispensed and administered.** Parents will be given at least 2 days' notice when medication is going to need replenishment. **No further medication may be dispensed if the previous dose was dispensed, but there is no record of its administration** (or that it has been safely disposed of)!

**School must check with parents what time the last dose and amount of medication was given at home, where necessary.**

**Some pupils require their medication to be administered in specialised ways eg, via gastrostomy, tablets crushed and hidden etc. On these occasions staff may only administer at the class teacher's discretion.**


**In each pupil's medication file there will be a plastic wallet- this is for archiving medical records/ fully completed forms/ when a pupil no longer requires that medication etc. At the end of the school year a member of the admin team will scan all these records onto CPOMS and shred the paper copies.**

## **Out of School**

**If a pupil requires medication or has a Health Care Plan, this should be taken on all out of school outings along with their individual colour coded file. Medication must be signed out of school in the pink file in each Department's staffroom. Once a medication has been removed it should be placed in the outings rucksack and the padlock should be attached, securing the bag is locked shut. Pupils who require either routine or emergency medication should be identified on the risk assessment for the outing. Staff must also sign the medication back into school in the same pink file. The medication must be locked away again on return to school and the pupil medication files returned, fully completed for any medication administered out of school.**

If pupil's refuse to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

Address: Yew Tree Lane, Dukinfield, SK16 5BJ Tel: 0161 338 9730 Email: admin@cromwell.tameside.sch.uk  
*Please note that CCTV operates on our site and that all telephone calls to and from school are recorded for training and monitoring purposes.*





## Administration of buccal midazolam

Health care plans are signed by a doctor, parents and the school nurse for dealing with specific pupils with epilepsy are provided by ISCAN and these should be kept in the pupil's file (office), in the individuals CCP (locked in store cupboard), the individual's medical file and in the welfare manager's file. i.e. not in general view. A record of seizures should be kept which should be out of public view in the class blue record file. If a pupil has or is having a seizure, staff should follow the general Epilepsy Guidelines and the Health Care Plan and help should be sought from a first-aider and/or a member of the senior management team who will decide what treatment is needed and whether the emergency services need to be called. Parents must always be informed by both telephone and home/school book on the same day as the occurrence of the seizure.

Rescue medication should only be administered by staff who have received training from the school nurses.

A dynamic risk assessment will be made by a member of Senior Management for pupils who have a seizure prior to travelling home by Local Authority Transport.

Buccal Midazolam will be locked in the Department staffroom and the rooms will be locked at evenings and weekend to ensure the "double lock" rule regard-controlled substances is followed.

A list of all pupils with epilepsy and asthma, the medication they require, what it looks like, and the triggers for seizures/attacks should be kept inside the class medication cupboard door, out of public view. This will be updated by the Level 3 or 4 Teaching Assistant. Hydrotherapy teacher's need to check the chart in class before taking a pupil into the hydrotherapy pool. It is the responsibility of all staff to read this along with the CCPS so that they know which pupils may need emergency medication.

## Administration of long-term medication


Creams, inhalers and the like may be administered in school, however where possible we urge our parents to limit their requirement in school by adjusting the time of doses. We request that parents keep us adequately stocked and that they check replenishment and expiry dates of the medications supplied. Where it is necessary to administer medication for an extended period, a prescription or doctors' instruction will be required.

## Administration of short term medication

Where a pupil needs a short course of medication, e.g. antibiotics, the same procedure needs to be followed. There must be a medication request form completed. Again we remind parents to try to time the doses so that where possible it is not necessary for the medication to come into school. If this is not possible, we will administer in school as and when necessary. Parents must inform school of any medication the pupil is having out of school. If we are unable to contact a parent and we do not know if the pupil has had paracetamol before school, we will wait for 4 hours from when the pupil arrived at school before administering.

## First Aid

We have first-aiders trained in school who are listed on the Essential information document, which is displayed around school. This details who has full first aid and defibrillator training. We



have first aid boxes that are in line with Health and Safety (first aid) Regulations 1981 and do not include medications of any kind. **Any first aid given must be recorded on IRIS.**

## Staff Training

This policy will be reviewed with staff annually. It will form part of the induction of all new staff. **Key written guidance will be given to all staff, displayed in each classroom and a copy is in the staff handbook.**

**All staff required will be trained on the administration of rescue medication for epilepsy, EpiPen, giving medication via gastrostomy by the school nursing team.**

## Calling an ambulance

Where there is time, a member of the SLT will be called to any incident that may require an ambulance. However, in exceptional circumstances, staff will call an ambulance directly. An ambulance will be called in the event of an emergency, which would include those indicated in Health Care Plans (such as anticipated circumstances regarding seizures, blood sugar levels, etc.) plus unexpected occurrences such as a seizure for someone without a plan, fainting, difficulty breathing etc. The school mobile will be used so that it may be taken to the “casualty” in order to stay in contact with the ambulance control room. A member of the administration team or SLT will be detailed to meet the ambulance and show them to the casualty.

## Finding unidentified medication in school

**If a member of staff finds any unaccounted for/ unidentified medication, eg, a single tablet they should take it immediately to a member of SLT stating when and where they found it. If it is found to be belonging to a pupil, SLT will contact the parent and ask them what they would like us to do with it. If we do not know who it belongs to, SLT will try to investigate and safely dispose of the medication by taking it to a pharmacy.**

## Involvement of the school nurses

The school will send copies of this policy and all health risk assessments, guidance and completed record forms to the line manager responsible for nursing for our school. We will expect that this person will contact school with advice immediately should we be contravening any guidance or inadvertently experiencing intolerable risk.

## Monitoring and Review

This policy will be monitored by the **Welfare Manager and Assistant Head (Nicky)**. They will report to the Headteacher and the Governors Health and Safety Committee.

## Key to supporting documents:

- 1. Medication signing in sheet- office**
- 2. Pupil medication checklist- class**
- 3. Record of medications given in school- pupil individual files**
- 4. Epilepsy/absence/asthma record- class**

In Pink file: Medication removed from school (signing out sheet)- Department staff rooms.





**This policy will be regularly reviewed by the Governors Health and Safety Committee**

Date of last review: Summer 2018 – Health and Safety Committee.

