

Chantlers Primary School Administering Medicines Policy

Approved by:	Governing Body	Date: September 2025
Last reviewed on:	September 2025	
Next review due by:	September 2026	

Aims

This policy aims to:

- Ensure that pupils, staff and parents understand how our school will support pupils withmedical conditions
- Ensure that pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities
- Determine circumstances when the school will administer prescribed medicines on behalf of a pupil's parents.

The governing body will implement this policy by:

- Making sure sufficient staff are suitably trained
- · Making staff aware of pupil's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available tosupport pupils with medical conditions
- Developing and monitoring individual healthcare plans (IHPs)

General Information

No pupil under the age of 16 should be given <u>any</u> medication without their parents' consent

Non-prescribed medicines e.g. Calpol, etc. cannot be administered by school staff. Children are not to bring any non-prescribed medicines into school for their use e.g. medicated throat sweets, decongestions,

It is normally expected that parents administer medicine to their children. It should be the exception rather than the rule for medicines to be brought into school. Each request for medicine to be administered to a pupil in school should be considered on an individual basis.

No Bury Council employee can supervise, or authorise the taking of non- prescription medication including painkillers or analgesics for any pupils. To do so would be operating outside the terms of the Council's insurance policy.

Under no circumstances should any person employed by the school administer medication if they have not received training from someone who understands the medication and then authorisation from the Headteacher.

Medicines can cause harm to anyone for whom they are not prescribed and be harmful to the person for whom they are prescribed if that person takes an incorrect dose.

Headteachers are required to assess the risks presented by a hazardous substance to any person who may come into contact with it. The primary consideration is to eliminate the risk. This may be done by parents requesting that doctors prescribe 3 x daily doses rather than 4 x daily doses.

If a child has a long term or complex medical need, an Individual Healthcare plan will be written see Appendix 1.

Responsibilities

Parents & Carers:

The prime responsibility for a pupil's health rests with the parents.

Parents are advised to ask their GP to prescribe medication in dose frequencies which enable it to be taken outside school hours.

Parents should formally request schools to administer medicines. The school's form is contained in Appendix 2. Where a pupil is acutely unwell, parents should be advised to keep him/her at home.

The parent should provide the school with sufficient information about the pupil's medical condition and the medicine being taken. This should be undertaken in conjunction with the family GP or paediatrician, as appropriate. They should, jointly with the Headteacher, reach an agreement on the school's role in supporting their child's medical needs, following this policy.

The parent should agree with the Headteacher that information can be passed on to other staff about their child's health. Sharing information is important if staff and parents are to ensure the best care for a child. If permission is not given, the school will need to carry out a risk assessment.

It only requires one parent to agree to or request that medicines are administered. As a matter of practicality, this will likely be the parent with whom the school or setting has day-to-day contact. Where parents disagree over medical support, the disagreement must be resolved by the Courts. The school or setting should continue to administer the medicine in line with the consent given and following the prescriber's instructions, unless and until a court decides otherwise.

The Headteacher:

- is responsible for putting the school's policy into practice and for developing detailed procedures. Day-to-day decisions will normally fall to the Headteacher or to whosoever they delegate this too, as set out in their policy.
- should make sure that all parents and staff are aware of the policy and procedures for dealing with medical needs. They should also make sure that the appropriate systems for information sharing are followed.
- supported by health professionals and the Children's Services Additional Needs Team, should ensure that staff members who volunteer to assist with medical procedures or the administration of medication receive suitable and sufficient information, instruction and training from appropriate bodies or people to be ableto undertake these functions safely and effectively.
- should provide other school staff such as Midday Supervisors, administrative or support staff that may, at certain times, be responsible for pupils with medical conditions with sufficient support and advice as above.
- is responsible for ensuring that appropriate arrangements are in place for the safestorage of medicines.

For a child with medical needs, the Headteacher or designated member of staff will need to agree with the parents exactly what support can be provided. Where there is concern that a

pupil's needs may not be able to be met by a school, or where parents' expectations appear unreasonable, the school will seek advice from the school nursing service who willliaise with the child's GP or other health professionals.

Where appropriate, Individual Healthcare Plans (IHP's) for individual pupils should be drawn up in conjunction with the Headteacher, school nursing service, Children's Services Additional Needs Team, Health professionals and parents.

School Staff

Some staff may be naturally concerned for the health and safety of a child with a medical condition, particularly if it is potentially life-threatening. Staff with children with medical needs in their class or group should be informed about the nature of the condition unless prohibited by legal requirements for confidentiality, and when and where the children may need extra attention. The child's parents and health professionals should provide this information.

All staff should be aware of the likelihood of an emergency arising and what action to take if one occurs. A backup cover should be arranged for when the member of staff responsible is absent or unavailable.

Teachers' conditions of employment do not include giving or supervising a pupil taking medicines and therefore, cannot be required to do so. Schools should ensure that they have sufficient members of support staff who are employed and appropriately trained to manage the particular medicines in school as part of their duties and that this is reflected in job descriptions.

Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child should have appropriate training and guidance from a person or body who knows the medication or process.

School Transport/Escorts

Where the School Transport Service transports pupils with medical needs to and from school and escorts supervise them, the LA will ensure that escorts are provided with suitable and sufficient information in respect of the medical conditions and medications of the pupils in their care.

It should not be necessary, in normal circumstances, for escorts to be trained to administer any form of medication. If appropriate the Children's Services Additional Needs Team will obtain an assessment of the pupil's medical needs in conjunction with the school, parentsand health professionals.

School Nurses

All School Health Advisers in Bury are registered nurses with a wealth of experience and trained in school health matters. Additionally, Bury has Specialist Public Health Nurses (School Health) who are highly trained community practitioners within school health. They offer healthinterviews, advice and counselling at certain key ages. The school Health Advisers are the key figures in ensuring effective communication between School Health-Based Services, Primary Care teams, teachers, parents and other professionals.

Individual Healthcare Plans (IHP)

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Plans will be developed with the pupil's best interests in mind and will set out:

- · What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This willbe based on evidence. If there is not a consensus, the Headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on thepupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) oreducation, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

Administration of Prescription Medicines

- Parents wishing the school to administer <u>prescribed</u> medication (in *loco parentis*) should give the Headteacher a written request (using the form in appendix 2) detailing the medication to be given along with the frequency, dosage and any other relevant information (e.g. interaction with other medicines such as paracetamol). A copy of the form required from parents can be obtained from the office or downloaded from the school website).
- Consent can only be given by the parent or carer who has parental responsibility.
 - Parents must supply the medication in a suitable container with a dispensing label including:
 - child's name
 - name of the medicine
 - method, dosage and timing of administration
 - storage information
 - date of issue
 - expiry date
 - batch number
 - Details of possible side effects should also be given.
- Medicines will be kept in the classroom. Alternatively, medicines may need to be stored in the fridge.
- Where an individual pupil's permanent or long-term medical need requires administration of prescribed medicine or a medical procedure, then an Individual Healthcare Plan will be completed and reviewed annually (Appendix 1).
- Staff who are aware of the dosage and frequency and who have spoken to parents healthcare professionals regarding the child and the medicine should administer the medicine. Staff will attempt to give the medicine as near to the required time as possible.
- Staff will familiarise themselves with all the information supplied by the parents before administration.
- Staff will check the container label for the information listed above.
- Where possible another member of staff should be present whilst a member of staff is administering medicine.
- The person administering the medication will record it on Medical Tracker and notify the parent by email and/or letter.

Storing Medicines

- The school will only hold a small amount of medicine.
- It is the parent's responsibility to ensure their child's medication is in date.
- Medicines will be stored following the product instructions (paying particular

attention to temperature) and in the original packaging.

- Medicines will be clearly labelled with the name of the child, the name and dose of themedicine and the frequency of administration.
- Children with inhalers and adrenaline pens should know where their medicines are stored.
- Adrenaline pens will be stored in an unlocked cupboard, in an unlocked room.
- Medicines for long-term conditions will be kept in unlocked First Aid boxes in the classrooms.
- Medicines no longer required will be handed back to the parent. If parents do not collect medicines after a reasonable time they will be given to a pharmacist for disposal, following GDPR regulations.

Educational Visits

Schools should encourage pupils with medical needs to participate in educational visits as long as the safety of the pupil, other pupils and/or staff are not placed at significant risk.

The school will ensure that on an educational visit:

- Medical needs are considered as part of the risk management process
- There are procedures in place for managing prescription medicines on educational visits
- Staff administering medicines, or supervising the administration of medicines, are awareof their roles and responsibilities
- Staff receive appropriate information and/or training
- Medicines are stored safely whilst on educational visits

Sporting Activities

Most pupils with medical conditions can participate in regular sporting activities. Any restrictions ona child's ability to participate in sporting activities should be recorded on their Individual Healthcare Plan.

Some pupils may need to take precautionary measures before and/or during exercise and may need immediate access to medication or nutrition afterwards e.g. Inhaler.

Staff supervising pupils involved in P.E and sporting activities must be aware of the relevant medical conditions and emergency procedures for any pupil participating in the lesson or activity.

Refusal to Take Medicine

No pupil can be forced to take medicine should they refuse.

If a pupil refuses to take medicine and the information provided by the pupil's parent and/or GP suggests that the pupil is at great risk if they do not take their medication, parents will be contacted immediately. If a parent cannot be contacted the school will seek medical advice and in the event of an emergency, call the emergency services.

Where the information provided indicates that the pupil will not be at great risk if they do not take their medication, but the parent has informed the school that their child should receive their medication, the school will contact the parent as soon as possible. The school will communicate directly to the parent and not via a note sent home with the pupil.

Emergency Procedures

As part of general risk management processes, the school has arrangements in place for dealing with emergencies.

All staff know who is responsible for carrying out emergency procedures in the event of need. A member of staff will always accompany a child taken to hospital by ambulance and will stay until the parent arrives. Health professionals are responsible for any decisions on medical treatment when parents are not available.

Staff should avoid wherever possible taking children to the hospital in their car but call the emergency services.

Individual health care plans should include instructions as to how to manage a child in an emergency, and identify who has the responsibility in an emergency, for example, if there is an incident in the playground a Midday Supervisor would need to be very clear of their role.

APPENDIX LIST

Appendix 1: Individual Healthcare Plan

Appendix 2: Request to Administer Medicines Form