



BEDALE

HIGH SCHOOL

Policy **MANAGING MEDICINE POLICY 2020/21**

Headteacher **TOM KELLY**

Named personnel with designated responsibility for this policy

Academic year	Designated Senior Person	Nominated Governor	Chair of Governors
2014	S Rees		Gerry Price
2017	T Rawdin		Gerry Price
2020	T Kelly		J Reed/S Ingram

Policy Review dates

Review Date	Changes made	By whom	Date Shared with staff
2014	Full review of policy		
2017	Full review	A Knight	
2020	Full review	A Knight / R Spence	

Date Ratified by Governors	Review Date
November 20	November 21

Managing Medicines Policy

Bedale High School

1. General

In preparing this policy the school has regarded guidance given in: Department of Education's publication entitled 'Supporting pupils at school with medical conditions' (December 2015), Primary Professional Development's Publication 'Managing Medicines in Schools' written by Joe Harvey, 'Managing the Health Care Needs of Children and Young People' document produced by North Yorkshire County Council and 'Guidance on Infection Control In Schools and other Child Care Settings' provided by the Health Protection Agency.

2. Aims

Our school aims to provide all students, with any medical conditions, the same opportunities as others at school. We will help to ensure they can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being.

3. Rationale

It is the school's view that medicines should 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.

Wherever possible (which is in most cases) medicines should be prescribed in dose frequencies which enable them to be taken outside school hours. Parents/carers are encouraged to ask the prescriber about this. It is noted that where medicines need to be taken three times a day, this could be done before and after school, and at bedtime.

4. Role of the Headteacher

The Headteacher has overall responsibility for implementing the policy and procedures for dealing with medical needs and will make sure all parents are aware of this policy at the time of admission, through newsletters and via the school's website.

The Headteacher will ensure that suitable training and support is offered to staff, identified as supporting students with medical conditions, provided by appropriate healthcare professionals.

The Headteacher will, where parents/carers expectations appear unreasonable, seek advice from the school nurse or doctor, the child's GP or other medication adviser, as appropriate.

The Headteacher will ensure that attention is paid to the safe storage, handling and disposal of medicines.

5. Role of Teachers and Support Staff

Staff who have a student with medical needs in their class will be told of the nature of the condition and as to when the student may need extra attention. They will also be made aware of what action should be taken if an emergency should arise. All curriculum activities will be risk assessed appropriate to their medical needs.

All supply staff will be made aware of the medical needs of individual students, where appropriate.

At different times during the school day other staff may be responsible for the students (e.g. midday supervisors). They too will be informed, where appropriate.

6. Role of the Parent/Carers

Parents/carers are a child's main carer. They are responsible for making sure that their child is well enough to attend school in the first instance. Parents/carers are also responsible for informing school, in writing, of their child's medical condition and/or needs.

Parents/carers should keep children at home when they are acutely unwell – guidance from the Health Protection Agency advises children who are suffering from sickness and diarrhoea should be kept away from school for 48 hours from the last episode of diarrhoea or vomiting and should be excluded from swimming for 2 weeks following last episode of diarrhoea.

It is the parent/carer's responsibility to inform the school of any medical condition that could impact on the student's health and safety welfare, behaviour etc. during the school day, either at the time of the child's admission to the school or when a medical condition develops.

Where necessary, parents/carers will be asked to provide the school with sufficient written information about their child's medical needs.

All information received will be treated with the utmost confidentiality.

It is the parent/carer's responsibility to ensure any medication required to be kept in school is collected and replaced when use by date has expired e.g. epipens, inhalers.

7. School Staff Administering Medication

Teachers' conditions of employment do not include giving medication or supervising a student taking it.

The school has a number of designated first aid officers, among the Support Team, who are not medically trained but are available to supervise/administer medication during the school day.

There is no legal duty that requires school staff to administer medicines. However, any member of staff who agrees to accept responsibility for administering on-going/life sustaining prescribed medication to a student will have proper training and guidance if required. The type of training will depend on each individual case and the advice of the School Nurse Service.

School will not accept any medicines: without written parental/carer consent; that have been taken out of the container as originally dispensed; or make changes to dosages on parental/carer instructions.

8. Students

The School will support and encourage students, in consultation with their parents/carers, who are able to take responsibility for managing their own medicines.

For those students considered to be disabled and/or with special educational needs who have a medical condition, provision detailed within the health section of their Education, Health and Care (EHC) plan will be used in line with: Special Educational Needs and Disability (SEND) Code of Practice; Disability Discrimination Act 1995; and Equality Act 2010.

Students with a long-term illness should, whenever possible, assume complete responsibility, under the supervision of their parent/carer, for managing their own medicines.

Students should know where their own medicines are stored and who holds the key.

Students are allowed to carry their own inhalers where appropriate, with spares kept in the medical cupboard and completed 'School Asthma Cards' by parents/carers returned to school (please see our school Asthma Policy).

If a child refuses to take medicine, staff at the school will not force them to do so, but instead will note this on the students 'Record of Medication Administered in School' log (Form 4) and follow agreed procedures on Individual Health Care Plan (if applicable). Parents/carers will be informed by telephone message of any refusal as soon as possible and always on the same day.

9. Short-Term Medical Needs

Many children will need to take medication or be given it at some time during their school life. Generally this will be for a short period only e.g. to finish a course of antibiotics or apply a lotion.

Where it is necessary for medication to be administered, parents/carers will be encouraged to ask the prescribing doctor or dentist to prescribe dose frequencies that enable it to be taken outside school hours.

10. Long-Term Medical Needs

It is essential that the school has sufficient information about the medical condition of any student with long-term medical needs, this may need to be in the form of an Individual Health Care Plan – see item 13.

The following information is required:

- Details of the condition.
- Special requirements (dietary, pre-activity precautions etc.)
- Medication and any side effects
- What to do and who to contact in an emergency
- The role the school plays

11. Educational Visits and Sporting Activities

On occasions the school may need to take additional measures for outside visits and/or sporting activities, an annual consent form is required to be completed at the beginning of each school year and parents/carers are required to inform school of any changes throughout the year.

Parents/carers should inform staff if their child is to be involved in either of the above and has any medical needs, together with any relevant emergency procedures.

Bedale High School encourages and supports all students irrespective of medical needs to participate as much as possible in the life of the school.

12. Emergency Procedures

The school has written procedures for students who require hospital attention which can be reviewed on request.

If a student needs to be taken to hospital in an ambulance, a parent/carer will be required to accompany their child to hospital. In the event that a parent/carer does not arrive in time for the ambulance to depart, the pupil is to be accompanied by a member of staff who will stay with pupil until parent/carer arrives. Relevant medical/medication information will be taken, as appropriate.

Guidance stipulates that staff should never take students to hospital in their own car and the school supports this.

13. Individual Health Care Plans (IHCP)

Some students have medical conditions, either short-term or long-term, that if not properly managed could limit their access to education. In such cases it may be necessary to provide an IHCP which will ensure that school staff have sufficient information to understand and support a child with long-term medical needs.

In this instance the school will complete an IHCP in conjunction with the parent/carer and the appropriate health care professional for the student.

Where students have life threatening conditions, specific IHCPs should be carried on vehicles to and from school.

IHCPs are to be reviewed annually or if any changes occur to condition and/or treatment, to be initiated by Parents/Carers in conjunction with their child's form tutor, appropriate Medical Professional and First Aider.

14. Storing Medicines

Large volumes of medicines will not be stored in school. Staff will only store, supervise and administer medicine that has been prescribed for an individual child.

Staff should **never** give a non-prescribed medicine to a child unless there is specific prior written permission from the parents/carers – Form 2 is required to be completed by a parent/carer and handed in to the office with the medication. The Headteacher will also be required to complete Form 3 agreeing to administer the medication in school.

A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor and parents/carers have given written consent. Staff will not administer Ibuprofen to children under 12 unless prescribed by a doctor and parents/carers have given written consent.

Medicines will be stored strictly in accordance with product instructions and in the original container as dispensed by the pharmacist. The first aid team will also ensure termly checks on medication expiry dates are completed parents/carers will only be informed if life-saving medication has expired.

Where a child needs two or more prescribed medicines, each must be in a separate container and each have their own completed 'Form 2 – Request for school to administer medication'.

Short-term medicines should be collected by parents/carers at the end of each school year. Those that are not collected will be sent to a local pharmacy for safe disposal.

All Forms mentioned in this document can be obtained from the school website.