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MULTI-ACADEMY TRUST

Administration of Medicines Policy

Policy type	Core Trust Policy
Adopted by the Trust Board	Finance and Operations Committee
Date ratified	
For review	Every 3 years
Next review date	Summer 2025
Person responsible	COO

This policy is a mandatory policy for all DSAMAT Academies and must be implemented with no amendments.

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1. Introduction

- 1.1 The aim of the Policy is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

We acknowledge and believe that children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition will be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. The Trust will ensure that children's health is not put at unnecessary risk from, for example, infectious diseases. They, therefore, acknowledge that they do not have to accept a child in school at times where it would be detrimental to the health of that child or others.

2. Roles and Responsibilities

- 2.1 We acknowledge that supporting a child with a medical condition during school hours is not the sole responsibility of one person. We work co-operatively with other agencies.

The Trust will:

- Make arrangements to support children with medical conditions in school and will make sure that this policy for supporting children with medical conditions in school is developed and implemented.
- Ensure that a child with a medical condition is supported to enable the fullest participation possible in all aspects of school life.
- Ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- Ensure that any members of school staff who provide support to children with medical conditions are able to access information and other teaching support materials as needed.

The Headteacher will:

- Ensure that this policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of this policy for supporting children with medical conditions and understand their role in its implementation.
- Ensure that all staff who need to know are aware of the child's condition and that sufficient trained members of staff are available to implement this policy and deliver against all individual healthcare plans, including in contingency and emergency situations. The Deputy Head and designated admin staff will support the implementation of the policy which will be overseen by the Headteacher who will have overall responsibility for the development of individual healthcare plans.
- Make sure that school staff are appropriately insured and are aware that they are insured to support children in this way. They will contact the school nursing service in the case of any child who has a medical condition that may require support at school but who has not yet been brought to the attention of the school nurse.

The School Staff

- Any member of school staff may be asked to provide support to a child with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of the children with medical conditions that they teach.
- School staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.
- Any member of school staff should know what to do and respond accordingly when they become aware that a child with a medical condition needs help.

School Nurses

We have access to the school nursing service. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example, on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

Other healthcare professionals, including GPs and Paediatricians should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Specialist local health teams may be able to provide support in schools for children with particular conditions e.g. Asthma, Diabetes.

Children

Children with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan.

Parents/Carers

Parents should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan and may be involved in its drafting. They should carry out any action that they have agreed to as part of its implementation e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Transition Arrangements

When notification is received that a pupil has a medical condition the school, in conjunction with all relevant stakeholders including parents will:

- Ensure that arrangements are put in place to cover transition from another setting, upon being notified that a child is coming into school with a medical condition. These may vary from child to child according to existing Health Care Plans.
- Ensure that arrangements are implemented following re-integration into the school or when the needs of a child change.
- Put arrangements in place in time for the start of the new school terms

- In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort will be made to ensure that arrangements are in place as soon as possible
- Provide support to pupils where a condition is undiagnosed or difficult to diagnose but there is a possibility that a medical condition is causing difficulties. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right levels of support can be put in place.
- Any staff training needs are identified and met.

3. Individual Health Care Plans

- 3.1 The purpose of individual health care plans are to help ensure that schools effectively support pupils with medical conditions. They provide clarity about what needs to be done, when and by whom. Not all children will require one. The school, healthcare professional and parents should agree, based on evidence, when a healthcare plan would be appropriate. If consensus cannot be reached, the Headteacher will take a final view.

Where a child is returning to school following a period of hospital education or alternative provision, we will work closely with the appropriate agencies and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

We would not necessarily wait for a formal diagnosis before providing support to a child. In cases where a child's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents.

4. Staff Training and Support

- 4.1 Any member of academy staff providing support to a child with medical needs will have received suitable training. We ensure that training is kept up-to-date. Staff have the opportunity to discuss their training needs with the Inclusion Manager. Staff carrying out medical procedures will be monitored by line managers in addition to healthcare professionals. Any member of staff expressing concerns whatsoever will be fully supported until they feel confident.

5. The Child's Role in Managing their own Medical needs

- 5.1 Wherever possible, children who are competent to manage their own healthcare needs and medicines, in consultation with healthcare professionals and parents, will be encouraged to do so under the supervision of school staff.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

6. Managing Medicines on School Premises

- No child under 16 should be given prescription medicines without their parent's written consent (Appendix 1)

- No un-prescribed medicines will be given to a child
- Only medicines that are in date, labelled with the child's name, provided in the original container as dispensed by a pharmacist and including instructions for administration will be accepted. This includes Asthma inhalers, EpiPen's, Insulin etc
- All medicines must be stored in a secure area out of reach of children
- Use of emergency Salbutamol inhaler (Appendix 4)

7. Short Term Prescriptions

- Medicines may be administered in school if it is required to be taken four times a day
- Medicines will only be administered if the parent/carer has completed and signed an indemnity form
- When no longer requires, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps
- A record of all medicines administered will be kept and stored (Appendix 2)
- Parents will be informed if their child has been unwell at school (Appendix 3)

8. Day Trips, Residential Visits and Sporting Activities

- 8.1 All medicines will be taken to any of the above activities and administered following all the above procedures.

9. Insurance

- 9.1 Staff who undertake responsibilities within this policy are covered by the school's insurance.

10. Complaints

- 10.1 Should parents/carers be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the complaints procedure outlined in the school's Complaints Policy. The policy can be found on the school website.

Appendix 1

Parental Agreement to Administer Medicine

The school will not give your child medicine unless you have completed and signed this form

Name of Child:.....

Date of Birth:..... Class:.....

Medical condition or illness:.....

Medicine

Name/type of medicine.....
(as described on the container)

Expiry date:..... Duration of medicine.....

Dosage and method:..... Timing.....

Special precautions/other instructions:.....

Are there any side effects that the academy needs to be aware of?

Self-administration – Y / N

Procedures to take in an emergency:.....

NB: Medicines must be in the original container as dispensed by the pharmacy.

Contact Details:

Name:.....

Daytime telephone number:.....

Relationship to child:.....

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the Trust's policy. I will inform the academy immediately, in writing, if there are any changes in dosage or frequency of the medication or if the medicine is stopped.

Signed.....MULTI-ACADEMY TRUST Date.....

Print name:.....

Appendix 2

Record of Medicine Administered

Name of Child:.....

Class:.....

Date					
Time given					
Dose given					
Name of staff member					
Staff initials					

Date					
Time given					
Dose given					
Name of staff member					
Staff initials					

Date					
Time given					
Dose given					
Name of staff member					
Staff initials					

Appendix 3

Bumped Head Slip to Parent/Carer

Date:

Dear Parent/Carer

Today,.....suffered a bump on the head. Your child has been looked after and their injuries checked and monitored by a trained First Aider who assessed that the head injury was not serious enough to seek medical advice.

Please be vigilant however, and if your child suffers later from any of the symptoms below, **please seek medical advice immediately.**

- Excessive tiredness (drowsiness)
- Vomiting
- Headache
- Pupil enlargement (or one eye dilated, other not)
- Weakness of limbs

If you have any further concerns regarding the incident, please do not hesitate to contact us.

Appendix 4

CONSENT FORM FOR USE OF EMERGENCY SALBUTAMOL INHALER

Name of Child:.....

Class:.....

Child showing symptoms of asthma/having an asthma attack

1. I can confirm that my child has been diagnosed with asthma/has been prescribed an inhaler (delete as appropriate)
2. My child has a working, in-date inhaler, clearly labelled with their name, which they bring with them to school every day/is kept in school (delete as appropriate)
3. In the event of my child displaying symptoms of asthma and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies

Signed:.....

Date:.....

Print Name:.....

Contact number Mobile:.....

Contact number Home:.....

Contact number Work:.....

To be completed and filed with your training records

Academy logo

I confirm I have read and will apply the learning from Managing Medicines Policy.

Academy Name:.....

Employees Name (print)	Employees Signature	Date

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