



POLICY NAME:	Medicines in School Policy
Frequency of review:	2 Years
Reviewed On:	November 2023
Reviewed By:	K Kowalska and Beth McGreer
Next review (date):	November 2025

Morley Memorial Primary School

Rationale

We believe that all children should be enabled to reach their full potential. We value children's individuality and diversity and celebrate success in all areas.

In support of this, at Morley, we are committed to reducing the barriers to sharing in school life and learning for all its pupils. This policy sets out the steps the school will take to ensure as full access as possible to learning and school life for all children that require medication. Most children will, at some time, have short-term medical needs, while other children may have longer term medical needs and may require medicines on a long-term basis to keep them well. Other children may require medicines in particular circumstances, such as children with severe allergies.

Aims

This policy is designed to support the following aims:

- To support regular attendance of all pupils
- To ensure staff understand their roles and responsibilities in administering medicines
- To ensure parents understand their responsibilities in respect of their children's medical needs
- To ensure medicines are stored and administered safely

Where children are unwell and not fit to be in school, and where they are still suffering from an infection which may be passed to others, children should remain at home to be cared for and looked after. As such, children should not return to school for 48 hours from the last episode if they have been vomiting or suffering with diarrhoea. Similarly, children should not return to school for at least 48 hours into a course of antibiotics.

1.0 Legal Obligation to Administer Medicines

1.1 There is no legal obligation that requires school staff to administer medicines.

1.2 Teachers' conditions of employment do not include giving or supervising a pupil taking medicines. Agreement to do so must be voluntary. However, the school will, where appropriate, administer medicines to enable the inclusion of pupils with medical needs and to enable regular attendance of all pupils. Furthermore, in an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

1.3 Where we, as a school, agree to administer medicines or carry out other medical procedures, staff will receive appropriate training and support from health professionals. They will be made aware of the correct procedures to follow in administering medicines, and in procedures to follow in the event of a child not reacting in the expected way.

See also 'Supporting Children with Medical Conditions in School Policy'

2.0 Medicines in School (Prescription Medicines)

Prescribed Medicine for short term conditions

2.1 Prescribed medicine will only be given by Morley Memorial School School staff for pupils with long-term medical conditions that require medication during the school hours to manage their condition/s and keep them well.

2.2 Staff should not provide medication without training and we acknowledge this is not usually possible for short term episodes of illness. Prescribed medicine for pupils with long term medical conditions will still only be administered at school when it is detrimental to a child's health or school attendance to do so. Every attempt where clinically possible should be made for the medications to be provided by parents / carers at home.

2.3 All medications must be prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines will only be accepted in the original container as dispensed by a pharmacist and include the prescribers instructions for administration.

2.4 Medicines should only be brought to school when it is essential i.e. where it would be detrimental to the child's health if the medicine were not administered during the school day. The prescriber's instructions would need to state times within the pupils working day at school.

2.5 In most cases it is possible for parents/carers to manage the administration of prescription medicines outside of school hours, and we encourage and expect parents/carers to do so whenever possible. Where it is not possible to be

administered outside of school hours this will be discussed with parents on a case by case basis.

2.6 We will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental /carer instructions.

Prescribed medicine for short term conditions: exceptions

2.8 Prescribed medicines **will only be given** if the prescriber has indicated clearly on the medicine that it must be administered four times a day and it is not possible to be administered outside of school hours.

2.9 Medicine will only be accepted for administration in school in the completion of the appropriate consent form by a parent or carer. (see Appendix 1: Parental/Carer Consent form Prescribed Medicines in Schools)

2.10 Prescribed medicine **will not be given:**

- Where the timing of the dose is vital and where mistakes could lead to serious consequences. (See Section Children with Long Term Medical Needs section)
- Where medical or technical expertise is required.
- Where intimate contact would be necessary.

3.0 Children with Asthma

3.1 Children who have inhalers should have them available where necessary. Inhalers should be kept in a safe but accessible place. At Morley Memorial Primary School, it will be indicated clearly in classroom where inhalers are kept. Depending on the needs of the individual, inhalers should be taken to all physical activities. Inhalers must be labelled and include guidelines on administration.

3.2 Parents/Carers are required to complete and return an Asthma Card when a child with an already diagnosed asthma condition starts school, or on diagnosis of such a condition. It is the parent/carer's responsibility to keep the information on the Asthma Card up-to-date and inform the school of any changes in their child's condition.

3.3 It is the responsibility of parents to regularly check the condition of inhalers and ensure that they are working, within date and have not been completely discharged.

4.0 Non-prescription Medicines (Over-the-counter (OTC) medicines)

4.1 Non-prescription medicines are generally not administered in school and pupils should not bring them to school for self-administration.

Travel-sickness medication (OTC)

4.2 Non-prescription travel sickness medication will be administered by staff provided they are supplied in the original packaging and accompanied by the appropriate consent form (see Appendix 2: Parental/Carer Consent form Over-the-Counter (OTC) Medicines in Schools)

4.3 Travel-sickness medication must be suitable for the pupil's age. It must be supplied by the parent (not the school) and must be in its original packaging, with manufacturer's instructions included. The child's name should be written on the OTC medicine container by the parent/carer. The requested dosage must be in line with the manufacturer's instructions. The school will check that the medicine has been administered without adverse effect to the child in the past and parents must certify this is the case – a note to this effect should be recorded on the consent form.

4.4 The medication will be stored and administration recorded as for prescription medicines.

Pain Relief medication (OTC)

4.5 A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.

4.7 The school will not administer medicines that contain aspirin or ibuprofen unless under prescription. (see Section 9 Children with long term or complex medical needs and Section 2 Prescriptions for short term medical conditions.)

4.8 The school will not routinely administer paracetamol as its primary use is to control raised temperature for which a child should be at home.

4.9 Pain relief OTC medicines, such as paracetamol and aspirin, must not be brought to school by pupils.

4.10 In certain exceptional circumstances, the Safeguarding Lead (with parent/carer consent), may authorise pain relief to be administered by school staff in which case, the same routines as for prescription medicines will be followed. Decisions will be made on a case-by-case basis.

5.0 Safe Storage of Medicines

5.1 All medicines should be delivered to the school office by the parent/carer and the appropriate consent forms completed and signed.

5.2 In no circumstances should medicines be left in a child's possession. (See Section 10 Pupils taking their own medication below and Section 3 Children with

Asthma).

5.3 Teachers and teaching assistants should not take receipt of any medicines.

5.4 All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines will normally be kept in the fridge (if refrigeration required) or in the school office.

5.5 All medicines must be stored in the supplied container and be clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration.

Safe Storage of Emergency Medication

5.6 All emergency medicines, such as asthma inhalers and adrenalin auto-injector devices (AAI) devices, should be readily available to children and staff and kept in an agreed place in the classroom or First Aid cupboard (see 5.7 and 5.8)

5.7 At Morley Memorial Primary School AAI devices for those children who require one, are stored in named containers in a labelled cupboard in the staff kitchen (in accordance with guidance from the NHS Medical Needs in Schools Team).

5.8 Asthma inhalers are normally stored in the child's classroom. Children may carry their own inhalers, where appropriate, on receipt of signed permission from the parent/carer (see Consent forms).

5.9 Staff ensure that emergency medication is available to hand during outside PE lessons and that it is taken on educational visits (see Section 7 Offsite Visits below). Children who require emergency medication will not be able to participate in school trips if they do not have their medication in school to take with them.

Safe storage of medicines: Controlled Drugs

5.10 Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Regulations 2001, and therefore have to be strictly managed.

5.11 The amount of medication handed over to the school will always be recorded. All controlled drugs will be kept secure in a locked non-portable container, and only specific named staff will have access.

5.12 Each time the drug is administered it will be recorded, including if the child refused to take it.

6.0 Disposal of Medicines

6.1 Parents/carers are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. Parents/carers should collect medicines

before expiry and replace with a new prescription where applicable. Morley Memorial Primary School sends regular, general reminders to parents/carers about the collection of medicines and the date-expiry of emergency medicines (asthma inhalers and AAI devices).

6.2 If any date-expired medicines remain uncollected at the end of the summer term, they will be disposed of at a local pharmacist by a member of the office staff.

7.0 Off-site visits

7.1 Children with medical needs are given the same opportunities as other children. Staff may need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This may include carrying out a risk/benefit assessment for such children. The school's Educational Visits Co-ordinator will be responsible for reminding staff of the need to consider and prepare for children with medical needs on participating in off-site visits. On the visit one member of staff will be nominated as having responsibility for the administration of all medication.

Roles and responsibilities of parents/carers as outlined below will apply.

8.0 Refusing Medication

8.1 If a child refuses to take medication, staff will not force them to do so. The refusal will be recorded and the parents informed immediately or as soon as is reasonably possible. If necessary, the school will call the emergency services.

9.0 Children with long-term or complex medical needs

9.1 Parents/carers should provide the school with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made between the parents/carers, the school and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. This will usually be in the form of a Care Plan (or Health Care Plan).

9.2 Parents/carers must provide the school with a copy of the child's specific medical protocols/health care plan as provided by the child's medical professional team. The school will use this as its guidance to respond to the child's listed medical needs.

9.3 Parents/carers are responsible for ensuring that all medication kept in school e.g. asthma inhalers, AAI devices, are kept up to date.

9.4 Parents/carers are responsible for providing a suitable container for the medication to be stored in, which is clearly labelled with the child's name and has an up-to-date photograph of the child. The container must also include the child's

medical protocols form/health care plan. AAI devices are stored in school issued bags.

9.5 Parents/carers are responsible for notifying the school if there is a change in circumstances e.g. if a child is deemed to be no longer asthmatic.

10.0 Pupils taking their own medication

10.1 For certain long-term medical conditions, it is important for children to learn how to self-administer their medication. The most important condition where this applies is asthma. For other conditions, appropriate arrangements for medication should be agreed and documented in the pupil's health care plan/medical protocols form. The appropriate consent form should be completed and signed by the parent/carer (See Appendices)

11.0 Record Keeping

11.1 Medicines should be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. Staff should check that written details include:

- name of the child
- name of the medicine
- dose
- method of administration
- time and frequency of administration
- any side effects
- expiry date

11.2 The appropriate consent form (see appendices) must be completed and signed by the parent, before medicines can be administered. At the time of administering medicines, the member of staff must complete the medicines record sheet. No medication should be given unless it has been checked by a second adult.

12.0 Staff Training

12.1 At Morley Memorial Primary School we seek to ensure that staff who administer medicine are fully briefed in general procedures for medicines and that they receive appropriate training to administer specific medicines. Training in the administration of specific medicines is arranged via the School Nurse team. Records are maintained of all training completed by staff.

13.0 Emergency Procedures

13.1 In a medical emergency, first aid is given (as appropriate), and staff will follow usual emergency procedures (for example, calling 999). Parents/carers are notified.

13.2 Should an emergency situation arise for a pupil who has a Health Care Plan,

the emergency procedures detailed in the plan will be followed and a copy of the health plan is given to the ambulance crew.

14.0 Confidentiality

14.1 The head teacher and staff should always treat medical information confidentially, within usual safeguarding procedures. In exceptional circumstances, medicine may be prescribed to a child without the knowledge of the parents. In such cases staff will follow guidance of the professional agencies involved, in line with safeguarding procedures.

15.0 ROLES AND RESPONSIBILITIES

15.1 Parents/Carers*

In most cases the Parent/Carer will be able to administer any medicines outside of school hours. Where this is not possible parents/carers:

- Should give sufficient information about their child's medical needs if treatment or special care is required.
- Must deliver all medicines to the school office in person.
- Must complete and sign the appropriate consent form. (see Appendices)
- Must keep staff informed of changes to prescribed medicines.
- Keep medicines in date – particularly emergency medication, such as adrenaline auto-injector devices.

**Parents, as defined in section 576 of the Education Act 1996, include any person who is not a parent of a child but has parental responsibility for or care of a child. In this context, the phrase 'care of the child' includes any person who is involved in the full-time care of a child on a settled basis, such as a foster parent, but excludes baby sitters, child minders, nannies and school staff.*

15.2 Head teacher

- To ensure that the school's policy on the administration of medicines is implemented.
- Ensure there are members of staff within the school willing to volunteer to administer medication to specific pupils if required.
- Ensure that staff receive support and appropriate training where necessary.
- To share information, as appropriate, about a child's medical needs.
- Ensure that parents are aware of the school's policy on the administration of medicines.

15.3 Staff

- On receipt of medicines, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber should be checked.
- Ensure that the parent/carer completes the appropriate consent form for the administration of medicines following the prescriber's instruction.
- Ensure that medicines are stored correctly.
- Ensure that a second member of staff is present when medicines are administered, where possible.
- Complete the 'administration of medicines' record sheet each time medication is given.
- Ensure a refusal to take medicine is communicated to parents/carers immediately or as soon as reasonably possible, and the refusal is recorded.
- Ensure that medicines are returned to parents for safe disposal

OTHER RELATED POLICIES AND PROCEDURES

This policy links to our:

Attendance policy
Complaints procedure
Health and Safety policy
Intimate Care policy
Safeguarding Policy
Safer Recruitment policy
SEN/Inclusion Policy
Staff Code of Conduct/Safer Working Practice
Supporting Children with Medical Conditions in School
Whistleblowing policy

Appendix 1 Consent form to administer prescription medicines

Appendix 2 Consent form to administer over the counter medicines

References:

CCC Sample Medicines in Schools Policy
Medicines Optimisation Team (Cambridgeshire & Peterborough Clinical Commissioning Group) guidance
PrescQIPP 'Administration of medicines in schools and early years settings' (NHS summary guidance)
DfE 'Supporting Pupils at school with Medical Conditions' 2015

If you have any concerns regarding medicines in school and how they are being administered, the following members of staff have also received the Designated Safeguarding Lead training:

Katy Kowalska	DSL	Deputy Head, DA Lead, Online Safety Lead
Nikki Brown	DDSL	Head teacher, Prevent, Mental Health Lead
Beth McGreer	DDSL	Inclusion Lead
Ruby Camper	DDSL	Safeguarding Admin
Matt Casey	DDSL	Spectrum ASC Manager
Helen Harper	DDSL	Spectrum ASC Deputy Manager

In general, this is also the point of contact sequence, other than for After School/Holiday Club.

Appendix 1 Consent form to administer prescription medicines

Parental/carer consent to administer a prescribed medicine

- All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included on the pharmacy label.
- **A separate form is required for each medicine.**

Child's name	
Child's date of birth	
Class/ Year	
Name of medicine	
Strength of medicine	
How much (dose) to be given <i>For example: One tablet, One 5ml spoonful</i>	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry their own salbutamol asthma inhaler/Adrenaline auto injector pen for anaphylaxis [delete as appropriate].	Yes	
	No	
	Not applicable	
I give permission for my son/daughter to carry their own salbutamol asthma inhaler and use it themselves in accordance with and the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	
I give permission for my son/daughter to administer their own medication in accordance with and the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

Appendix 2 Consent form to administer over the counter medicines

Parental/carer consent to administer an over-the-counter (OTC) medicine

- **The school will not administer aspirin or ibuprofen based OTC medicines unless under prescription.**
- All OTC medicines must be in the original container with the child's name written clearly on the container.
- **A separate form is required for each medicine.**

Child's name	
Child's date of birth	
Class/ Year	
Name of medicine	
Strength of medicine	
How much (dose) to be given <i>For example: One tablet, One 5ml spoonful</i>	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry and administer their own medication in the presence of and in accordance with the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

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