

# Jasper City School Medication Policy

*This policy incorporates our Medication Procedure and Medication Care Plan for Emergency Needs*

## Introduction

Jasper City School takes seriously the health and welfare of our children and young people. We wish to ensure that pupils with medication needs receive appropriate care and support at school. The Head Teacher will accept responsibility in principle for members of the school staff giving or supervising pupils taking prescribed medication during the school day, where those members of staff have the suitable first aid training.



The aim of this policy is to effectively support individual children with medical needs and to enable pupils to achieve regular attendance. All medication will be administered to pupils in accordance with the DfE document 'Supporting pupils at school with medical conditions'. The Assistant Head Teacher or Senior Administrator is responsible for accepting medication and checking all relevant information has been provided by parents/carers prior to administering.

Records of administration will be kept by the Senior Administrator.

All non-emergency medication kept in school are securely stored in the lockable cupboard in the school office. Refrigerated meds are kept in clearly labelled containers in the fridge in the kitchen with access strictly controlled. All pupils know how to access their medication.

Where children need to have immediate access to emergency medication i.e. asthma inhalers, epi-pen etc., it will be kept in the lockable filing cabinets within their classrooms, and clearly labelled.

Parents should keep their children at home if acutely unwell or infectious and must notify school staff if a child who has been attending the school becomes ill with a contagious disease. Children who require anti-biotic medicine will only be able to return to school 48 hours after the treatment has commenced. Parents are responsible for providing the Head Teacher with comprehensive information regarding the pupil's condition and medication. ***Prescribed medication will not be accepted in school without complete written and signed instructions from the parent.*** Parents will therefore need to sign a 'Medicine Consent form.' Staff will not give a non-prescribed medicine to a child unless there is specific prior written permission from the parents.

Parents must inform the school about any medical needs a child has before admission to the school or when a child first develops a medical need.

## Medication Procedure

### Non-Prescriptive Medicines

The school will not administer non-prescribed medicine to a child e.g. cough medicine, Calpol without first obtaining the parent's permission. Parents will need to fill in and sign a 'Medicine Consent form.'

### Prescribed Medicines

Each item of medication must be delivered to the Assistant Head Teacher or Senior Administrator in normal circumstances by the parent/carer. Medicines must be provided in the original container as dispensed by a pharmacist and must be clearly labelled with the following prescriber's instructions:

- Name of child
- Name of medicine
- Dose
- Method of administration
- Time/frequency of administration
- Any side effects
- Date of dispensing
- Expiry date
- Storage requirements

The school will not accept items of medication in unlabeled containers. The school will not administer prescribed medicine to a child without first gaining the parent's permission.

Parents will need to fill in and sign a 'Medicine Consent form' to inform the school of any medicines administered to the child, whether non-prescribed or prescribed. The parent must supply information of any medicine already administered on that day.

Medication will be kept in a secure place, out of the reach of pupils. Unless otherwise indicated all medication to be administered in school will be kept in a locked medicine cabinet in the school office. The school will keep records, which they will have available for parents.

Children who require anti-biotics will only be allowed back to school 48 hours after the treatment has commenced.

If the child requires treatment for an on-going condition (i.e. asthma) the parent must sign the medicine consent form.

Only reasonable quantities of medication should be supplied to the school (for example, a maximum of four weeks' supply at any one time). Where the pupil travels on school transport with an escort, parents should ensure the escort has written instructions relating to any medication sent with the pupil, including medication for administration during respite care.

### Self-Management

Children are encouraged to take responsibility for their own medicine from an early age. A good example of this is children keeping their own asthma reliever.

### Refusing Medicine

If children 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. It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased. It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date. *The school will not make changes to dosages on parental instructions.*

### Disposal of Medicine

School staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent who holds the responsibility for ensuring that medicines are returned to a community pharmacy for safe disposal, on the date the medicine expires.

### Medication Care Plan for Emergency Needs

In the event of a child becoming sick or ill whilst at school, the following procedure will be followed:

- The child's needs will be attended to appropriately. Where and when possible the school medical bay may be used to allow a child to lie down peacefully.
- No member of staff will administer any medication unless a Medicine Consent form has been completed by the parent/carer.
- If the child needs to go home, the school will contact the child's parent/carer and ask them to collect their child as soon as possible, explaining the nature of the sickness. If the parent or first named carer cannot be contacted, then the next name on the emergency contact list will be informed.
- A member of staff will observe and supervise the child until the appropriate person arrives to collect them.
- Prior to the collection of the child a brief record will be made and entered in the Sick Children file, stating the nature of the sickness and action taken. This record will be signed by the member of staff responsible and the parent or carer.
- If it is suspected that a child is suffering from a contagious disease or illness they will be isolated and their parents contacted immediately and asked to pick the child up as soon as possible.
- Medicines will be administered under strict supervision of the school staff and will only be given with the parent's permission.
- The staff must inform the parent of any medicines administered whilst at school using the appropriate form

## Health Care Plans

For each pupil with long-term or complex medication needs, the Head Teacher, will ensure that a written Health Care Plan and Protocol is drawn up, in conjunction with the appropriate health care professionals.

Individual health care plans are in place for those pupils with significant medical needs e.g. chronic or ongoing medical conditions such as diabetes, epilepsy, anaphylaxis etc. These plans will be completed at the beginning of the school year/when child enrolls/on diagnosis being communicated to the school and will be reviewed annually by the paediatric first aiders, Senior Administrator and Assistant Head Teacher.

All staff are made aware of any relevant health care needs and copies of health care plans are available in the school office.

Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in school.

Parents/carers are responsible for providing the school with up to date information regarding their child's health care needs and providing appropriate medication.

Staff will receive appropriate training related to health conditions of pupils and the administration of medicines by a health professional as appropriate.

## Contagious Illnesses

If a child has any of the following contagious illnesses, they must be kept away from the School for a specified period of time (see guide to communicable diseases): Diarrhoea, Vomiting, Fever, Chicken Pox, Measles, Mumps, Meningitis, Hepatitis A, Conjunctivitis, Rubella, Head Lice, Impetigo, Influenza, Meningococcal Disease, Polio, Ringworm of the body, feet, scalp, Scabies, Thrush, Whooping Cough and the Common Cold.

If a child is brought to the school with a contagious disease or illness the staff will not accept them until the minimum exclusion period has elapsed and they have recovered fully.

In addition:

- If it is suspected that a child is suffering from one of the above illnesses, they will be isolated and their parents contacted immediately and asked to pick the child up as soon as possible.
- If a child is brought to the school with any of the above illnesses the staff will not accept them until the minimum exclusion period has elapsed and they have recovered fully.
- If the child requires treatment for an on-going condition (i.e. asthma) the parent must sign the medicine consent form.
- Medicines will be administered under strict supervision of the school staff
- Children who require anti-biotics will only be allowed back to school, 48 hours after the treatment has commenced.
- Parents must ensure that school staff can contact them in an emergency.
- A parent/carer must notify school staff if a child who has been attending the school becomes ill with a contagious disease.

The table below gives the incubation period parents/carers must adhere to:

<i>Disease</i>	<i>Minimum period of exclusion</i>
Chicken Pox	5 days from appearance of rash
Common Cold	1 - 3 days whilst symptoms persist
Conjunctivitis	None unless evidence of spread, then exclusion until healed
Dysentery	Until clinically fit with no diarrhoea for at least 24 hours
Ear Infection	48 hours after starting anti-biotics
Food Poisoning	Until clinically fit with no diarrhoea for at least 24 hours
German Measles (Rubella)	5 days from appearance of rash
Head Lice	None, but ensure treatment
Jaundice	Until clinical recovery
Measles	5 days from appearance of rash
Meningitis	Until clinical recovery
Mumps	5 days from onset of swollen glands
Scarlet Fever	5 days after starting antibiotic treatment
Thrush	Until lesions have gone
Vomiting	Until 24 hours after the last sickness and the child is back on a normal diet.
Whooping cough	21 days from start of cough. Or 5 days if antibiotic treatment has commenced

### Emergency situations

- In the event of an emergency, school staff may make direct contact with the emergency services.
- Where a first aider considers it necessary, the injured person will be sent directly to hospital (normally by ambulance). Parents/carers will be notified immediately of all major injuries to pupils.
- No casualty will be allowed to travel to hospital unaccompanied and an accompanying adult will be designated in situations where the parents/carers cannot be contacted in time.
- Please refer to our First Aid Policy.

### Medication for off-site visits

The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed. All staff will be made aware of the procedures to be followed in the event of an emergency.

Policy Adopted by Directors and Governors on: \_\_\_\_\_

Policy Last Reviewed on: \_\_\_\_\_

Policy Due for Review on: \_\_\_\_\_