



St Mary's Church of England Primary School
Established 1845

Medicine management policy & procedures

Aims

To outline the policy and procedure for medicines management at St Mary's C.E. primary, Dilwyn so that it is understood by staff, parents and children so, those with medical needs receive proper care. In order to:

1. Ensure regular attendance at school by all children
2. Encourage and support inclusive practice

We recognise that there are times when medication needs to be given at school to ensure that your child is able to participate fully in school activities. As a school we ask that parents/carers ask their doctor that wherever possible to prescribe medications that can be taken outside of the school day. However, where there are occasions when this is not possible and a child needs to have medication administered during the school day it will be administered in accordance with this policy and the Department for Education and Skills (2007) *Managing Medications in Schools and Early Years Settings*. Only medicines prescribed by a doctor, dentist, nurse practitioner or pharmacist prescriber will be administered by the school.

School Procedures

1. Upon school admission: all parents/carers will be asked to complete a child record which provides the full details of any medical conditions, any regular or emergency medications, parent/carer contact details and emergency contact details, name and address of family doctor and any relevant hospital/community consultants, allergies, special dietary requirements and any other relevant health information. It is the parent/carer's responsibility to update the school with any changes of these.
2. Administration of emergency medication: Those staff members that agree to administer emergency medications must have the appropriate level of training from a registered healthcare professional and this should be updated annually by the staff member. Emergency medications that may be given in school include asthma reliever inhalers (Salbutamol), treatment for allergic reactions (administration of an EpiPen) and rarely, epilepsy and diabetes.

All relevant members of staff will have paediatric first aid training and a list of first aiders and their renewal dates are kept in the first aid room.

3. Administration of prescribed medication

- If a child in school needs to receive medication during the school day, the parent/carer will be required to personally hand over the medication to the school secretary and complete a **pupil medication form** (Appendix 1) and sign it.
- The **medication form** has the child's name, name of doctor, medication name, required dosage, time and date of dose given, date that the medication expires (for long term medication should be replaced every 6 months), any other special instructions i.e. to be kept in the fridge. The school will record all administered doses of the medication given on this form, and this will be signed by the staff member. All completed forms will be kept in the school office.
- The medication should be kept in the original container that it was dispensed in and should be clearly labelled with the child's name.
- Liquid medications will be measured accurately using either a medicine spoon or a syringe provided by the parent/carer. Liquid medication should not be disguised in the pupil's food or drink unless there is no other way of administering.

4. Applications of creams/lotions in school:

- The school may apply non prescribed creams or lotions but this is at the discretion of the Principal in line with this policy. Consent must be provided by the parent/carer if non prescribed creams or lotions are to be applied at school.
- If parents/carers require creams or lotions to be applied in school hours the parent/carer is responsible for providing the school with the cream or lotion.
- If your child is prescribed steroid creams/ointments these usually need applying once or twice daily therefore we would expect these to be applied at home.
- During the warmer weather sun cream will need to be supplied by the parent/carer. As a school we ask that parents/carers apply sun cream in the morning before arriving at school. Children can be provided with sun cream by their parents/carers for use in school but this must be clearly labelled with the child's name, within date, and SPF 25 or above. Older children may be responsible for their sun cream but, the teacher in the early years class will assist the younger children with their sun cream application.

5. Alternative medications

- Homeopathic medications including herbal remedies will not be administered by the school unless it is under the advice of the pupil's GP/consultant.

6. Analgesia (painkillers)

- Analgesia will be administered to a pupil if it is needed as part of a treatment plan for a long-term health condition and this needs to be prescribed by a registered medical professional such as a GP or consultant.

7. Refusal of medication

- Staff will not force a child to take medication if they refuse.
- The refusal will be noted by the person giving the medication and the child's parents/carers will be contacted.
- In the event of the refusal of emergency medications the child's parents/carers will be contacted immediately and a member of the school staff will accompany the child to hospital to allow the parents/carers to arrive.

8. Safe storage and disposal of medications

- All medications will be kept in the school office with the exception of those medications requiring refrigeration.
- Children with an EPI-PEN will need to have **TWO** EPI-PEN's at school - one in the child's classroom and the other as a 'back up' in the school office.
- EPI-PENS should be clearly labelled in the classroom and this **MUST** travel with the child at all times including during P.E. and for off-site visits.
- Parents/carers are responsible for ensuring the EPI-PENS provided are in date.
- Medication that requires refrigeration will be stored in the staff room fridge in the kitchen (out of bounds to the pupils), inside a labelled plastic box.
- Emergency medication will be kept out of reach of children but in that child's classroom, easily accessible by all staff. All staff members will be aware of where the emergency medication will be kept.
- A regular check of all medications in school (office and classroom) will be made every eight weeks and this will be completed by Elaine Stilwell and/or Peter Kyles. Parents/ carers will be asked to collect any medication which is no longer needed, is out of date or is not clearly labelled.
- Any medications which are not collected by parents/carers and is no longer needed by the child it will be safely disposed of at a local pharmacy.

9. Educational Visits/ Off-site activities

- The lead teacher for the visit must ensure that all children have the medication that they require and that any emergency medication is available.

- The medication (including asthma inhalers) will be carried by the lead teacher or nominated named member of staff as well as the medication record sheets.
- Residential visits will require parents/carers to complete a consent form for all medications and this includes over the counter medications.
- All parents will be asked to sign a consent form to give permission for a small dosage of paracetamol to be given should the child require it during the visit. Any administration of paracetamol is recorded and parents/carers are asked to countersign the medication form upon the child's return.

10. Insurance:

Staff are covered by the school's employee and public liability insurance.

11. Staff Training

Staff training needs will be reviewed in accordance with the needs of the children at the school. This policy forms part of the staff induction programme and is reviewed on an annual basis. Training is offered to staff for specific health needs (asthma, anaphylaxis etc.) every year.

Date Implemented: Sept 2016

Approved by: Madeleine Spinks Chair of Governors

Person Responsible: Peter Kyles (Principal)

Review Date: Sept 2017/18

ASTHMA policy & procedure

Background: Asthma UK estimates that every 10 seconds someone in the UK has a potentially life threatening asthma attack and that 3 children in every classroom suffer from asthma in the UK.

Staff at St Mary's CE primary, Dilwyn are not required to administer asthma medication to pupils **except in an emergency situation** but staff can help administer medication if they have received first aid training.

All the school staff understand that it is important for the children to be able to access their reliever medications (usually an inhaler). Pupils are encouraged to carry their own inhaler as soon as their parents/carers, doctor and asthma nurse agree that they are able to do so.

School aims to do the following as part of its responsibility for ensuring the health and safety of employees and pupils:

- Staff and pupils with asthma are known.
- There is appropriate training for all staff and pupils.
- All staff are aware of their roles in ensuring that asthma attacks are dealt with efficiently and effectively.
- Governors and parents know about this policy and asthma procedures.

Responsibilities

The Principal will be responsible for....

- Ensuring that the system in place is well managed and reviewed on an annual basis.
- Ensuring there is an effective system in place for recording asthma sufferers.
- Ensuring that there is an effective training programme for all staff.
- Open communication with teaching staff/support staff/parents and carers.
- Reporting back to the governing body on an annual basis any incidents and how the system is working within the school environment.

The School secretary will be responsible for....

- Maintaining records (admissions, parents/carers pupil medication forms)
- Ensure that all staff are aware of known asthmatics and their medication
- Obtaining and circulating up to date evidence based guidance (asthma cards in first aid kit)

- Appropriate storage is available for the medicines.
- Reporting back to the Principal.

All staff will be responsible for.....

- Knowing which of their pupils are asthmatic (information from school secretary).
- Allowing pupils to take their medication as needed (only if deemed appropriate by parents and medical staff) otherwise staff will administer.
- Being aware of what to do in the event of an asthma attack (see first aid kits)
- Ensuring asthma inhalers are clearly labelled with the child's name and kept in a box within the respective classroom (this MUST go with the child to P.E. and off site visits). However all children with asthma must have TWO inhalers at school - one to be kept in the classroom/with the child at all times and a back up in the school office.
- Informing the appropriate person that a pupil has used their inhaler.

Parents/carers of asthma sufferers will be responsible for.....

- Completing the pupil medication record accurately and updating that information.
- Providing TWO inhalers to school each individually labelled with their child's name.
- Ensuring their child inhaler is within date.

Pupils will be: made aware of asthma.

P.E./Games:

P.E./Games is an essential part of school life for all pupils including those with asthma. All pupils will be encouraged to take part in P.E./games and staff will be aware of which pupils are asthma sufferers. Those whose asthma is triggered by exercise they will be reminded to take their reliever inhalers by the class teachers and to warm up/down before and after the lesson. The same also applies to other lessons that may include physical activity.

Guidance: www.asthma.org.uk

Monitoring and review:

Staff will report all incidents of asthma to the principal and the principal will keep a record of those incidents. This policy will be reviewed annually.

Anaphylaxis & allergic reactions

Background: Anaphylaxis is an extreme and severe allergic reaction that requires immediate medical attention. The individual's body is affected within seconds or minutes of exposure to certain foods or substances, but also after a few hours.

Causes:

The main causes of anaphylaxis are foods such as peanuts, tree nuts (walnuts, almonds, cashews etc.), eggs, cows milk, fish and shellfish. Other common causes are non-food products such as penicillin, latex, certain drugs/injections and insect bites (wasp, bee and hornet).

Signs and symptoms of an allergic reaction:

Anaphylaxis is life threatening as the person's blood pressure falls dramatically and this can lead to a loss of consciousness. This is rare in young pupils but not unknown.

Common signs to observe in a pupil with an allergic reaction:

- Hives (appearance of nettle rash)
- Flushing of the skin
- The sense of impending doom
- Swelling to the airways (including mouth and throat)
- Change to the heart rate
- Wheezing/severe asthma
- Abdominal pain including nausea and vomiting
- Sudden weakness (due to drop in blood pressure)

A pupil may not present with all of the above symptoms. Therefore, when a child presents with one or more of the symptoms they will be closely observed by staff and parents/carers contacted as soon as possible if the reaction gets worse.

Medication:

Auto injectors are prescribed for those at risk of a significant reaction. Auto injectors are pre-loaded injections which contain a dose of adrenaline and these are available in two strengths (adult and junior). Adrenaline (epinephrine) acts quickly to constrict the blood vessels and relax smooth muscle in the lungs to help breathing and stimulate the heartbeat. It also helps to stop the swelling to the lips/face.

Main auto injectors are Emerade, Epipen (Epipen Junior) and Jext. Should anaphylaxis

occur the auto injector should be administered by the trained staff member into the muscle of the upper outer thigh and an ambulance called immediately.

Staff responsibilities in anaphylaxis:

All members of staff will have training in recognising the signs/symptoms of an allergic reaction/anaphylaxis and the measures in place if this were to happen. Most staff members are paediatric first aid trained. Staff at school are not obliged to give injections, however if a child enters the school and requires an auto injector for anaphylaxis, training will be provided to key members of staff. This will be updated on an annual basis from an accredited source.

Allergy and off site visits/P.E.

If a pupil is known to have a severe allergic reaction then the pupils auto injector will be carried at all times including during P.E and off site visits. If a pupil is known to have a food allergy safe alternatives will be provided to the pupil whilst off site or a packed lunch should be provided by the parent/carer. Insect stings need consideration and careful management especially during activities such as forest school and outdoor play. The school will ensure that pupils are wearing suitable footwear at all times to prevent such incidents. In addition, food and drink will be appropriately covered with a lid until it is time to be eaten.

Guidance: Anaphylaxis Campaign UK (www.anaphylaxis.org.uk/schools/)

Monitoring and review:

If there are any incidents of anaphylaxis within the school the principal will be informed and the incident recorded appropriately. If a child enters the school with a known severe allergic reaction then an appropriate member of staff will be trained on an annual basis. This policy will be reviewed annually.

