



**WEST BOROUGH**  
PRIMARY SCHOOL

# **MEDICINES IN SCHOOL POLICY**

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## **Introduction**

This policy has been formulated from local authority guidance by school staff in conjunction with the Headteacher and with approval by Governors. There is no legal requirement for school staff to administer medicines. Staff are expected to do what is reasonable and practical to support the inclusion of all pupils.

## **Aims of this Policy**

- To ensure the safe administration of medicines to children where necessary and to help support attendance
- To ensure the on-going care and support of children with long term medical needs via a health care plan
- To explain the roles and responsibilities of school staff in relation to medicines
- To clarify the roles and responsibilities of parents in relation to children's attendance during and following illness
- To outline to parents and school staff the safe procedure for bringing medicines into school when necessary and their storage
- To outline the safe procedure for managing medicines on school trips

## **Roles and Responsibilities**

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the care plan.

Advice and guidance will be provided by the relevant Health Professionals, when needed, to carry out the actions in a care plan. Where a condition is potentially life-threatening all staff will need to be aware what action to take.

Specific advice and support from relevant Health Professionals will be given to staff who agree to accept responsibility, as delegated by the Headteacher, for administering medicines and carrying out procedures.

When all planning to manage a condition has taken place, schools can consult their insurer directly to check that their employees are covered.

Guidance about Risk Management and Insurance is contained in KCC document 'Insurance Provision for Medical Treatment/Procedures'.

In the event of legal action over an allegation of negligence, the employer rather than the employee is likely to be held responsible. It is the employer's responsibility to ensure that the correct procedures are followed; keeping an accurate record in school is helpful in such cases. Teachers and other staff are expected to use their best endeavour at all times particularly in emergencies. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

## **Headteacher**

- To bring this policy to the attention of school staff and parents and to ensure that the procedures outlined are put into practice
- To ensure that there are sufficient First Aiders and appointed persons for the school to be able to adhere to this policy

- To ensure that staff receive appropriate support and training
- To ensure that parents are aware of the school's Medicines Policy
- To ensure that this policy is reviewed annually

## Staff

- To follow the procedures outlined in this policy using the appropriate forms
- To complete a health care plan in conjunction with parents and relevant healthcare professionals for children with complex or long term medical needs
- To share medical information as necessary to ensure the safety of a child
- To retain confidentiality where possible
- To take all reasonable precautions to ensure the safe administration of medicines
- To contact parents with any concerns without delay
- To contact emergency services if necessary without delay
- To keep the first aid room and first aid boxes stocked with supplies
- Educational Visits Leader – see 'MEDICINES ON SCHOOL TRIPS' below

## Parents/Carers

- To give the school adequate information about their children's medical needs prior to a child starting school
- To follow the school's procedure for bringing medicines into school
- To only request medicines to be administered at school when essential
- To ensure that medicines are in date and that asthma inhalers are not empty
- To notify the school of changes in a child's medical needs, e.g. when medicine is no longer required or when a child develops a new need, e.g. asthma

## Managing Medicines During The School Day

Medicines should only be brought to school when essential. However, if it would be detrimental to a child's health if a medicine was not administered, the school will administer a medicine under certain conditions.

Parents should be encouraged to look at dose frequencies and timing so that if possible medicines can be taken out of school hours. Parents can ask Doctors for timed-release medication for a minimum number of daily doses.

The National Service Framework encourages prescribers to explore medicines which:

- Need only be administered once a day or
- Provide two prescriptions - one for home use, one for school/setting use, so that the medicine can be kept in the original containers when the illness is long-term

Medicines fall into two types:

a) Prescription medicines and b) Non-prescription medicines

### a) Prescription

- Prescription medicines should only be taken during the school day when essential

- A member of staff (usually a first aid trained member of office staff) may administer such a drug for whom it has been prescribed, according to the prescribed instructions and dosage
- If agreed with the parents, the school may look after the drug on behalf of the child
- The school will keep the drug safely locked up with access only by named staff and record keeping for audit and safety
- Prescription drugs should be returned to the parents when no longer required
- The medicine must be in the original container as dispensed by the pharmacist and include the instructions. The school **will not** accept medication which is not in the original container
- Parents must have completed and signed the authorisation form (Appendix 3).

## b) Non-prescription

- Non-prescription medicines, including Paracetamol, can only be given to children when parents have given written permission and for no longer than 5 days (or the maximum time period stated on the medicine instructions if this is shorter) without a doctor's note or as part of a healthcare plan for a diagnosed medical condition.
- Please note that Calpol bottles state it can only be given for a maximum of 3 days before consulting a doctor and we cannot exceed this. If non-prescription Paracetamol is required on a long-term recurring basis (eg for headaches or period pains) then we would suggest speaking to a doctor about alternative treatment options or for their confirmation that it is advisable to take it longer term. We will contact you each time before administering to obtain your consent and to check that the 3 day limit has not already been reached outside of school hours.
- We can only administer medications at the dosage listed on the packaging and following the listed instructions.
- The school staff will never give aspirin or ibuprofen unless prescribed by a Doctor

All medicine should be brought to the school office by the parent/carer where it will be stored out of reach of children. At no time should children keep hold of any medication whilst in school, including throat lozenges. The exception to this will be asthma inhalers which need to be handed to a teacher so they are readily available if the need arises. (see Appendix 5)

If children are on an educational visit, opportunities for administering the medication must be made available. Relevant outside agencies may be involved if additional guidance needs to be sought especially for a residential visit. A Health Care Plan may be drawn up in these circumstances. In all cases, when a medicine has been administered a record should be kept.

## Safe Administration of Medicines at School

- Medicines should only be brought to school when essential, i.e. where it would be detrimental to the child's health if the medicine were not administered during the school day. In the case of antibiotics, only those prescribed four times a day may be administered at school
- Only prescribed medicines (including eye drops) in the original container labelled with the child's name and dosage will be accepted in school
- Medicines that require medical expertise will only be administered once full training has been undertaken with the relevant Health Professionals

- Medicines (such as creams or ointments) that require intimate contact will be administered by the child themselves, with adult supervision
- All medicines must be brought to the school office by an adult. Medicines must NEVER be brought to school in a child's possession
- The adult is required to complete a parental agreement form (see appendix 3 or 4) via a ParentMail Form for the medicine to be administered by school staff
- The Headteacher must be informed of any controlled drugs required by children, e.g. equasym
- If the person administering the medicine does not know the child, they will check the school's database (ARBOR), matching the child to the photograph held by the school
- If the child is in Year R, 1 or 2, a member of staff who knows the child will bring them to the office for the medicine to be administered as a double check that it is the correct child
- Tablets should be counted and recorded when brought to the office and when collected again
- Painkillers such as Aspirin and Ibuprofen, must NOT be brought in to school (paracetamol can be administered)
- Administration of medicines at school must be recorded on the parental agreement form (to be kept together with the medication in the cupboard)
- Parents may come to the school office to administer medicines if necessary
- Some children may self-administer medication (with adult supervision), only if this has been directed by the parents when filling in the medicine form. This will be recorded on the parental agreement form.
- If a child refuses to take medicine, staff must not force them to do so. The refusal should be recorded and parents informed

## **Storage of Medicines**

- All medication must be stored in the locked filing cabinet, unless stated that it must be refrigerated. In this instance, medication will be stored in the locked first aid fridge
- Epipens should be stored appropriately in the prescribed child's classroom, with a spare held in the school office
- All asthma pumps will be stored in the child's classroom, within the child's reach in the original box with the prescription label and should be taken with the child during physical activities
- No medicines, other than asthma inhalers or epipens, may be kept in the classroom
- Parents are responsible for the safe return of expired medicines to a pharmacy

## **School Attendance During/After Illness**

- Children should not be at school when unwell, other than with a mild cough/cold
- Symptoms of vomiting or diarrhoea require a child to be absent from school and not to return until clear of symptoms for 48 hours
- Children should not be sent to school with earache, toothache or other significant discomfort
- Children should not be sent to school with an undiagnosed rash or a rash caused by any contagious illness
- Any other symptoms of illness which might be contagious to others or will cause the child to feel unwell and unable to fully participate in the school day require the child to be absent from school

## **Managing Medicines on Trips and Outings**

Children with medical needs will be encouraged to take part in visits. The responsible member of staff will carry out a specific and additional risk assessment and a care plan will be drawn up considering parental and medical advice. This will allow reasonable adjustments to be made. When travelling abroad on a trip, best practice would be to translate these documents to the language of the country being visited. The international emergency number should be on the care plan (112 is the EU number and works for mobiles in UK when out of reach of a signal.)

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known, and copies of care plans (where they exist) will be taken by the responsible person.

### Home to school transport

If a pupil's care plan describes emergency procedures which might occur on the journey to and from school, then the escorts will be trained to carry out the duties and the care plan will be carried on the vehicle. Further advice is available through the Health Needs Education Service and school nurses.

### PE / Sports

Any restriction to PE / sports activities must be noted in the care plan. Flexibility will be planned to allow pupils to benefit in ways appropriate to them (this constitutes differentiation of the curriculum).

## **Children's Medical Needs – Parental Responsibilities**

The school will liaise closely with parents, carers or those who hold this responsibility (such as in the case of Looked after Children) so that information is shared and the care plan reflects all information.

The care plan will be agreed jointly by the school and parents, and agreed with the advice of Health Professionals.

The school will seek parents' written agreement about sharing information on their children's needs where information needs to be shared outside of school. However, in cases of emergency the health and safety needs of the child and the people affected must take precedence.

Parents should provide the school with information about their child's condition and be part of the health care plan arrangements, in all cases Parents know their child best. They should sign the appropriate agreement forms for the administration of medicines (see Appendix 3 or 4). The Headteacher should seek their agreement before passing information to other school staff.

## **Parents' Written Agreement**

The attached forms (Appendix 3 & 4) are to be completed and signed by the parents for the administration of medicines to their child. These will be sent as a Form on ParentMail, as required.

It is the responsibility of parents to ensure that medicines sent to school are 'in date'. Medicines should be collected at the end of the course or when they reach their expiry

date. If new supplies are needed it is the responsibility of the parents to supply medication as needed.

## **Supporting Children with Complex or Long-Term Health Needs**

The school will aim to minimise any disruption to the child's education as far as possible, calling on the Health Needs Education Service for support and advice as needed, on the impact on learning and supportive strategies.

The school will carry out a risk assessment (Appendix 2) and a care plan (Appendix 1a), with the agreement of parents, and advice from Health Professionals.

The school will call on the Community Nursing Service or other relevant professionals as required, to deliver advice and support and receive appropriate documented training on procedures.

Where school staff carry out glucose monitoring, records will be kept with parents and specialist nurses advice.

## **Policy on Children Taking and Carrying their own Medicines**

When administered by staff, drugs will be kept in a locked secure place and only named staff will have access. When drugs are administered, the school will keep records.

Epipens need to be kept with or near the pupils who need them.

Where younger pupils have their insulin administered by staff then records will need to be kept.

Asthma medication to be kept in or near children's classrooms until children can use it independently. It must be taken on school trips (see Appendix 5).

## **Advice and Guidance for Staff**

The school will arrange and facilitate staff training for children with complex health needs, calling on:

- The School Nursing Service
- Community Children's Nurses
- Paediatric Diabetes Nurse Specialists
- Paediatric Epilepsy Nurse Specialists
- Eleanor Nurses
- The Health Needs Education Service
- The Specialist Teaching Service (about potential impact of medical / physical conditions and the implications on teaching and learning)

## **Record Keeping**

### Appendices

- 1a. Health Care/Emergency Plan
- 1b. Care Plan following Accident/Injury
- 1c. Contacting Emergency Services
2. Risk Assessment Form
3. Parental Agreement for the Administration of Prescribed Medicines
4. Parental Agreement for the Administration of Non-Prescribed Medicines
5. Asthma Pumps in Primary Schools



These forms can be amended to fit individual circumstances with the advice of relevant nursing staff and therapy colleagues.

NB. All risk assessments and care plans must be updated at least annually or when needed by a change in a pupil's condition.

## **Emergency Procedures**

The school will agree any procedures with parents and health care partners and the plan will be signed by all parties.

All staff will be made aware of the plans in order to discharge their common law 'duty of care' should the need arise.

## **Risk Assessments and Arrangement Procedures (Care Plans)**

Where a pupil has a complex health need or requires long term medication, risk assessments and care plans will be drawn up and signed by parents, class teachers and Health Professionals as needed (Appendix 1a and 2). Samples are available from the Health Needs Education Service and Specialist Nurses.

### **Related Documents**

- "Managing Medicines in Schools and Early Years Settings" by DCSF and Department of Health
- "Including Me (Managing Complex Health Needs in Schools and Early Years Settings)" by Jeanne Carlin, published in 2005 by the DCSF and the Council for Disabled Children
- Mencap
- Royal College of Nursing
- Health and Safety Commission "Principles of Sensible Risk Management" 2006 [www.hse.gov.uk](http://www.hse.gov.uk)
- "Medical Conditions at School" Produced by the Anaphylaxis Campaign, Asthma UK, and Epilepsy Action
- "Medical Conditions Awareness Sessions" A school healthcare professionals resource. Produced by the Anaphylaxis Campaign, Asthma UK, Cystic Fibrosis Trust, Diabetes UK and Epilepsy Action

# APPENDIX IA

## West Borough Primary School Administration of Medicines in Schools Policy Health Care / Emergency Plan

Medical Condition: .....

Child's Name: ..... Class: .....

Description of Medical Condition: .....

.....

Description of Signs and symptoms: .....

.....

Any Hospital / Specialist Contacts related to this condition (including name/position and contact details): .....

.....

.....

Current medication taken **at home**: (Including name, dose and frequency) .....

.....

.....

Daily treatment/medication needs **in school**: (e.g. before sport/at lunchtime) .....

.....

.....

.....

Occasional treatment/medication needs **in school**: (give details of when this would apply) .

.....

.....

.....

EMERGENCY treatment/medication needs in school: (give details of what is considered an emergency and what actions should be taken) .....

.....  
.....  
.....  
.....

Parents should be contacted by phone if this EMERGENCY treatment is needed: Yes / No

---

Plan will be copied to Headteacher & Class Teacher

**Parent and School Agreement**

To the best of our knowledge the above information is correct. The staff, in agreement, will do their best to support and care for these medical and emergency needs.

Parents signature: ..... Date: .....

School staff signature: ..... Date: .....

Head teacher's signature: ..... Date: .....

## APPENDIX IB

**West Borough Primary School**  
Medicines in Schools Policy  
Care Plan Following accident/injury

<b>Pupil Name</b>	
<b>D.O.B.</b>	
<b>Class</b>	
<b>GP</b>	
<b>Injury</b>	
<b>Special requirements within school</b>	
<b>Medication, dosage, frequency</b>	
<b>Other information</b>	
<b>Parents signature</b>	
<b>Staff Signature</b>	
<b>Dated</b>	

## APPENDIX IC

West Borough Primary School  
Medicines in Schools Policy  
This form is to be kept by the telephone

### CONTACTING EMERGENCY SERVICES

To request an ambulance:

**Dial 999 from a mobile phone and be ready with the following information:**

1. Your telephone number - 01622 726391
2. Your location (school/setting address) -  
  
West Borough Primary School, Greenway,  
Maidstone, Kent
3. Your postcode - ME16 8TL
4. Exact location (brief description e.g. next to church) - off Queens Road
5. Your name
6. Child's name and brief description
7. The best entrance for ambulance crew and advise crew will be met and taken to child - Main school Entrance - (raise the barriers in advance)

## APPENDIX 2

### West Borough Primary School Medicines in Schools Policy Risk Assessment Form

#### CONTACT DETAILS

Name of person completing the form : .....

Date: .....

Child's Name: .....

Age: ..... Year Group: ..... Class: .....

Medical Condition.....

List significant hazards	Who is at risk?	Existing controls	List additional controls needed	Date of assessment	By Whom (e.g. Parent, School, Doctor)

## APPENDIX 3

### West Borough Primary School Medicines in Schools Policy Prescribed Medicines

#### Headteacher agreement to administer medicine where a Risk Assessment or Health Care Plan is not needed (Short Term Illness)

I give permission for a member of the school staff to administer medication to my child in accordance with the Medicines in School Policy as follows:

Name of child: ..... Class: .....

Date of Birth: ..... Age: .....

Name of medication: .....

Where medicine is to be stored: ..... Quantity Supplied: .....

Possible side effects: .....

Expiry Date: ..... Dosage: ..... Time to be given: .....

Medical condition/illness: .....

Date instruction is to commence on: ..... until (review after 1 month): .....

I understand that whilst the school will make every endeavour to carry out my request, I will not hold them liable if, for whatever reason, the medication is not administered as per my instruction.

**Note : MEDICINES MUST BE IN THE ORIGINAL CONTAINER AS DISPENSED BY THE PHARMACIST.**

**,Students should not self-administer medication, with the exception of medicines (such as creams or ointments) that require intimate contact. These will be administered by the child themselves, with adult supervision**

If medicine is to be administered on an 'as and when needed' basis we will need to telephone a parent/carer **BEFORE** we are able to administer to ascertain if and when any medicine has already been administered at home. If it is difficult for us to be able to contact a parent during the day, then the parent MUST write in the child's contact book if any medicine has been given before school. We will then issue your child with a sticker stating the dose and time the medicine was administered.

Emergency contact number of parent/carer: .....

Name and contact number of GP: .....

This information is, to the best of my knowledge, accurate at time of writing and I give consent to the school staff, to administer the medicine in accordance with the school Medicines in School Policy. I will inform the school immediately in writing if there is any change in dosage or frequency of the medication or if the medicine is to be stopped.

Signed: ..... (parent/guardian) Date: .....

Signed.....(Headteacher / Staff) Date: .....

**Ensure:**  
The right medicine for the right child at the right time at the right dose

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			



## APPENDIX 4

### West Borough Primary School Medicines in Schools Policy Non - Prescribed Medicines

#### Headteacher agreement to administer medicine where a Risk Assessment or Health Care Plan is not needed (Short Term Illness)

I give permission for a member of the school staff to administer medication to my child in accordance with the Medicines in School Policy as follows:

Name of child: ..... Class: .....

Date of Birth: ..... Age: .....

Name of medication: .....

Where medicine is to be stored: ..... Quantity Supplied: .....

Possible side effects: .....

Expiry Date: ..... Dosage: ..... Time to be given: .....

Medical condition/illness: .....

Date instruction is to commence on: ..... until: ..... (Maximum 1 week)

I understand that whilst the school will make every endeavour to carry out my request, I will not hold them liable if, for whatever reason, the medication is not administered as per my instruction.

If medicine is needed for more than 5 days (or the limit specified on the dosage instructions), then we would recommend a doctor's appointment is made and any further medication to be prescribed by the GP.

**Note : MEDICINES MUST BE IN THE ORIGINAL CONTAINER AS DISPENSED BY THE PHARMACIST.**

**Students should not self-administer medication, with the exception of medicines (such as creams or ointments) that require intimate contact. These will be administered by the child themselves, with adult supervision**

If medicine is to be administered on an 'as and when needed' basis we will need to telephone a parent/carer **BEFORE** we are able to administer to ascertain if and when any medicine has already been administered at home. If it is difficult for us to be able to contact a parent during the day, then the parent **MUST** write in the child's contact book if any medicine has been given before school. We will then issue your child with a sticker stating the dose and time the medicine was administered.

Emergency contact number of parent/carer: .....

Name and contact number of GP: .....

This information is, to the best of my knowledge, accurate at time of writing and I give consent to the school staff, to administer the medicine in accordance with the school Medicines in School Policy. I will inform the school immediately in writing if there is any change in dosage or frequency of the medication or if the medicine is to be stopped.

Signed: .....(parent/guardian) Date: .....

Signed.....(Headteacher / Staff) Date: .....

**Ensure:**  
The right medicine for the right child at the right time at the right dose

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

Date	/ /	/ /	/ /
Time given			
Dose given			
Name of Staff Member			
Staff Signature			

## APPENDIX 5

### West Borough Primary School Medicines in Schools Policy

#### Asthma Pumps in Primary Schools

Dear Parent / Carer

#### Asthma Pumps

Your child .....has an asthma pump in school.

I am writing to inform you of the School's guidelines with regard to asthma pumps in school.

All asthma pumps will be stored in the child's classroom, within the child's reach in the original box with the prescription label.

The class will have a copy of the Health Care Plan, with evidence of the frequency of usage necessary for each individual child. A record of usage will be kept in class to ensure that if a child appears to need their pump rather too frequently, then the parent can be informed.

We strongly encourage independence so your child will not be restricted from using their pump during the course of the school day, but it is considered courteous to make the normal requests of the teacher first.

If the child needs their pump during break time or lunchtime, a request to a member of staff must be made first before entering the building.

In the event of my child displaying symptoms of asthma, and if their inhaler is not available or unusable, I consent for my child to receive Salbutamol from an emergency inhaler held by the school for such emergencies.

If you wish to see the Medicines in School Policy, please make a request to the school office.

Would you please sign and return the slip below indicating either your agreement or your wish not to keep the pump in the care of the teacher or other staff, thereby taking full responsibility yourself.

Yours sincerely

Headteacher

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#### **Asthma Pumps in School**

I agree and consent to the above guidelines regarding asthma pumps in school

Signed .....Parent/Guardian

Date .....Child's name .....