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# **Ashfield Junior School Medicines Policy**

#### Introduction

This guidance describes how we support individual pupils who have medical needs and who may need to take medication in school. Its purpose is to clarify procedures and responsibilities for parents, to safeguard pupils and support staff.

#### **Routine Medication**

As far as possible, school should not become involved in the administration of routine medication. Wherever possible, parents should ensure that their children's medication is prescribed and taken in dose frequencies that enable it to be taken outside of school time.

Where medicines have to be given during the school day,

- Parents must ensure that medicine is taken to the school office or given to the class teacher.
- Medicine must be fully labelled and staff will check that this is the case.
- Complete and sign a parental request form (MED1) which is attached to this document in Appendix 1 and which can be found on the school website.

School will not store large volumes of medication. Parents or children will be asked to bring in a daily dose, or a short course such as with penicillin. In the case of long term medication, separate arrangements may be agreed between teacher and parent and detailed on the parental request form. Medication will be stored according to the procedures outlined below.

# **Emergency Medication**

Any child who has been diagnosed with a condition that may lead to a medical emergency must have an individual healthcare plan (IHP), Appendix 2. This will be completed by class teacher, SENDco, Educational Support manager or head teacher in consultation with parents. Staff may need to contact the appropriate health professional(s) for further information or support.

The IHP can be updated in response to any changes in the child's care or condition but **must** be updated at the beginning of every school year.

IHPs with photographs of each child are displayed on the wall in the staffroom. Supply staff and volunteers supporting activities should be directed to this record as part of their induction process.

#### **Generic Medication**

On occasion, it may be appropriate for children to be given generic medicines at school. Parental permission must be obtained in all cases as children may have already had a dose at home, or may be allergic to some medicine eg. Calpol. This may be through an e mail or phone call which must be logged.

If a pupil suffers regularly from acute pain, parents must supply and authorise the administration of painkillers through completion of a parental request form (MED1) following the procedure for routine medicine as above.

Pupils may be given access to a school inhaler for asthma but only if they already have a completed IHP under the emergency medication procedure.

## **Storage of Medicines**

Where medicine is stored, the supplied container must be labelled with the name of the pupil, the name and dose of the drug, and the frequency of administration. Where a pupil needs two or more prescribed medicines, each must be in a separate container.

Medicines may be stored in 3 possible locations:

- In the staff room refrigerator. It must be in an airtight container and clearly labelled as above. Access to the refrigerator must be restricted to adults only.
- In the locked medicine cabinet in the medical room. The location of the key is known to all staff. (Eg. Routine medication, back-up emergency medication, generic medication).
- In a clearly labelled location in the classroom where it cannot be accessed by children. (Eg. Emergency medication). Supply staff should have this pointed out to them as part of their induction process.

Where appropriate, pupils should know where their medicine is stored. They should know who to ask if they need to gain access to it. Children with asthma keep their inhaler in their tray or in an accessible box in class. Children with Epi-pens must have **two** Epi-pens in school at all times. One pen will be stored in the emergency medication box in the classroom, the second will be stored in the locked medical cabinet in the medical room.

# **Medicines Off- Site**

For example: on excursions, going swimming or for sports activities. Teachers will complete a risk assessment for off-site activities and medical needs will form part of this assessment. Emergency medicines are checked before leaving and kept in their boxes when taken off site.

# **Refusing Medication**

If a pupil refuses to take medication, staff will not force them to do so. The school will contact the pupil's parent or carer. If necessary, the GP will be contacted. In urgent cases, the school may contact emergency services.

## **Information sharing**

Staff and supply staff will be given information on medical conditions that is necessary for keeping children safe and cared for. Supply staff will be directed to the IHP information centre in the staff room and shown the emergency medication store in the classroom as part of their induction.

Apart from this, head teachers and all school staff will treat medical information confidentially. Where information has to be shared, the head teacher will agree with the parent or guardian who else can have access to medical records about the pupil.

## **Disposal of Medicines**

School staff must not dispose of medicines. Parents will collect medicines held at school at the end of each term. Parents are also responsible for the disposal of date-expired medicines.

## **Appendices:**

Appendix 1. MED1 parental permission form

Appendix 2. IHP Individual health plan.

Appendix 3. Emergency Action Plan – Anaphylaxis

Appendix 4. Emergency Action Plan – Asthma

Review: March 2018