

ADMINISTRATION OF MEDICINES

- This policy follows the guidance designed to help all GDST schools put in place effective formal systems and procedures to ensure that the administration of medicines is managed safely.
- This policy is updated annually or sooner as required by the senior School Nurse, bearing in mind updates provided on The Hub by the GDST and matters arising from meetings of the Trust's School Nurses.

Consent

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child under 16 should be given prescription or non-prescription medicines without their parent's written consent - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality.
- Schools should set out the circumstances in which non-prescription medicines may be administered
- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, eg for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed
- Where clinically possible, medicines should be prescribed in dose frequencies.
- Consent for **prescribed medicines** is provided on the 'Consent to Administer Prescribed Medication' form. A new form is be completed for each type of medicine and for each new course of medicine.
- Consent for **non-prescription** and **over-the-counter medicines** is normally provided on the 'Pupil Health Assessment Form or Admission Plus Medical Section (completed before the student joins the school) which includes 'Consent to Administer Over-the-Counter Medication'. (There is no need for consents for non-prescription and over-the-counter medicines to be updated annually.)
- Medical authorisation and parental consent is obtained for the use of emergency adrenaline auto-injector devices on students who are at risk of anaphylaxis. These consents are updated annually to take account of the changes in the child's condition. The annual updates are shown on the BSCAI Allergy Action Plans.
- Medical authorisation and parental consent is obtained for the use of emergency salbutamol
 inhalers by children who have either been diagnosed with asthma and prescribed an inhaler, or
 who have been prescribed an inhaler as reliever medication. These consents are updated annually
 to take account of the changes in the child's condition. Parents will complete an Asthma Uk Child
 Asthma Action Plan.

Administering Medicines

Medicines are only be given by nominated staff in the Medical Centre or Boarding, who have access to up-to-date information about a child's need for medicines and parental consent and have received appropriate training about administering medicines. Before administering the medicine, they check:

- The child's name
- The child's medical consent forms
- Name of medication, that it is in its original container and its expiry date
- Prescribed dose and method of administration
- Time / frequency of administration
- Written instructions provided by the prescriber on the label or container
- Any side effects
- Boarding staff to check online documentation to ensure the medicine has not already been given

Every time a member of staff administers medicine to a child, they complete and sign a record.

If in doubt about any procedure the member of staff does not administer the medicines but checks with the parents or School Nurse before taking any further action. If staff have any other concerns related to administering medicine to a particular child, the issue is be discussed with the parent, if appropriate, or the School Nurse. Boarding staff act *in loco parentis*.

Drug Administration Errors

If an error in administering medication is made, the student's parents are notified immediately, and action taken to prevent any potential harm to the child. The Head is informed, and relevant documentation completed, e.g. Accident/Incident reported on the school online system Sphera.

Non-Prescription and Over-the-Counter Medicines

Non-prescription medicines can be bought 'over-the-counter' in shops and pharmacies. They include paracetamol, ibuprofen and antihistamine.

- Non-prescription medicines are only given by **nominated staff** (Medical Centre and Boarding) who have access to up-to-date information about a child's need for medicines and parental consent and have received appropriate training about administering medicines.
- Nominated staff, i.e. the School Nurse / named First Aider, **never** give a non-prescribed medicine to a child unless there is a specific written consent from the parents.
- Non-prescription medicines are not normally administered to **children under the age of 8** (criteria, in the national standards² for under 8s day care providers).
- When a non-prescribed medicine is administered to a child under 16 years old, a **record** is made and the **parents informed.** (The school may use an electronic means of communicating with parents, e.g. email, hard copy letters, or tell them in person, e.g. on the phone or when the child is collected a record being made of all verbal conversations.)
- Where non-prescribed medicine is administered to an **Early Years (EYFS) child**, the school ensures that the parents/carer are informed as soon as practicable and preferably on the same day, and parents/carer acknowledge receipt of the information, e.g. by signing the record book.
- A child under 16 is never to be given **aspirin** unless prescribed for medical purposes.

Prescribed Medicines

Prescribed medicines, e.g. antibiotics, insulin, are only to be brought into school when it is essential for a dose to be taken during the school day; that is, where it would be detrimental to a child's health if the medicine were not administered during the school day. The school can only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines are always to

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be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration and the child's name.

Prescribed medicines are only to be given by the **nominated staff** who have access to up-to-date information about a child's need for medicines and parental consent and have received appropriate training about administering medicines.

The school arranges for staff to complete and sign a record each time they give medicine to a child. Where the student is in Early Years (EYFS), the school ensures as soon as practicable, preferably on the same day, that the parents/carer are informed that the medication has been administered to the student as directed on the 'Administration of Medication While at School' form.

For boarders, if they are prescribed medicine by the School Doctor during surgery time, and if they are under 16, the medicine is administered by trained boarding staff and recorded on the Administration Record Form (a separate form for each medication).

If the boarder is over 16 and Fraser Competent, then a Self-Administration Form is filled in after discussion with the School Nurse *re* how to take the medication, storage, recording etc. and then signed by the School Nurse and student prior to filing in the medical notes.

Controlled Drugs

The supply, possession and administration of some medicines, e.g. Morphine, are controlled by the Misuse of Drugs Act 1971 and its associated regulations. This is of relevance to schools because they may have a child that has been prescribed a controlled drug. The Misuse of Drugs (Amendment No.2) (England, Wales and Scotland) Regulations 2012 allows 'any person' to administer the drugs listed in the regulations. Staff administering medicine is do so in accordance with the prescriber's instructions.

Controlled drugs are kept in a locked non-portable container (one per boarding house and one in the Medical Centre) and only named staff have access. A record is kept in a Controlled Drug Book for safety and audit purposes. A controlled drug is returned to the student's parents/carer when it is no longer required to arrange for safe disposal.¹ Or it may be returned to school for safe disposal by the school chemist. School Nurse will do weekly medication checks in both Boarding and Medical Centre.Lead Nurse to do monthly medication checks.

Self-Management of Emergency Medicines

Generally, students do not carry medicines whilst at school. However, students are encouraged to carry and be responsible for their own **emergency medicines**, e.g. adrenaline auto-injectors and inhalers, when staff, in conjunction with parents (bearing in mind the safety of other children and medical advice), judge that they are sufficiently capable and competent to do so. Other non-emergency medicines are generally be kept in a secure place, not accessible to students.

Refusing Medicines

If a child refuses to take medicine, staff do not force them to do so, but this is noted in their records. Parents are informed on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures is be followed.

For boarders, if a child is under 16, their parents will be informed by email. The School Doctor will be informed if a student refuses to take prescribed medication. Boarding staff act *in loco parentis*.

RESPONSIBILITIES

¹ Supporting Pupils at School with Medical Conditions (DFE 2014)

² National standards for under 8s day care and child-minding (DFES/0649/2003)

Parental / Carer Responsibilities

Parents / carers must inform the school about any conditions or illness that their child suffers from that requires them to take medication whilst at school (including on school trips / educational visits) and provide written consent for the school to administer the medication on the 'Pupil Health Assessment Form' or via Admissions Plus system (completed before the student joins the school), which includes 'Consent to Administer 'Over-the-Counter Medication' form.

Parents / carers are to inform the school of any changes in their child's medical needs, condition or illness that results in any changes to the medication, prescription or the support they require.

Boarding parents are emailed by the School Nurse if the School Doctor has prescribed medication to someone under the age of 16. If over 16, the School Nurse seeks permission from the student to contact the parents.

Staff are to check that any details provided on the consent forms are consistent with the instructions on the container.

Parents are to give any medication required by children under the age of 16 to an appropriate member of school staff. Parents must ensure that the medication is presented in the original packaging with the prescription information on it. This must include details of the medicine to be taken, the child's name and date of birth and the dosage required.

If a student has been unwell with a temperature and requiring Paracetamol or similar medication, we request that they do not return to School/Nursery until your daughter's temperature is within a normal range (36-37.5oc)

Teachers and Other Staff Administering Medicine

During the School Day

Any member of staff who agrees to accept responsibility for administering prescribed medicines to a student must have appropriate guidance, including an awareness of any possible side effects of the medicine and what to do if they occur. Normally the School Nurse, or in her absence a named First Aider, undertakes this responsibility during the school day. Kate Nokes who is a three-day First Aider will triage Students and trained to administer Paracetamol medication if required or telephone the Nurse on Duty if more urgent if unable to wait until lunchtime surgery. Staff are also nominated in the Boarding Houses and undergo annual competency training with the School Nurse.

Designated staff have been trained to give certain medication in the Prep School.

The School Nurses act in accordance with the Nursing and Midwifery Council (NMC) Code of Professional Conduct (2024) and Professional Guidance on administration of Medicines (RCN-Royal College of Nursing 2023). In administering any medication, or assisting or overseeing any self-administration of medication, the nurses exercise their professional judgement and apply their knowledge and skill in the given situation.

Sporting Activities

Some children may need to take precautionary measures before or during exercise and may need immediate access to their medicines such as asthma inhalers/ Diabetes equipment/Epilepsy medication or adrenaline pens. [See the GDST Chronic / Long Term Conditions Protocol July 2024 on the Hub]

School Trips / Educational Visits

Arrangements for students to take any necessary medication, either routinely or in emergency situations, will need to be taken into consideration when planning the trip / visit. Staff supervising school trips / educational visits are always to be aware of any individual student's medical needs and relevant emergency procedures. A copy of individual health care/allergy action /asthma plans is taken on visits in the event of the information being needed in an emergency. This will be on the trip lpad.

Medication required on Prep School trips and visits will be held by the trip leader and given when appropriate. Prep School students who are at risk from anaphylaxis must carry their own adrenaline autoinjectors (eg Epipen, Jext pen) with them always and the trip leader must hold a second adrenaline autoinjector for use in an emergency.

Senior School students are responsible for bringing emergency medicines with them on visits. So students with asthma inhalers must carry theirs with them, likewise their adrenaline auto-injectors (AAI, carrying two pens).

However, **staff must check that students have this medication** with them before departing on the visit especially if the student has an allergy or is diabetic. The trip leader must also carry a spare asthma inhaler provided by the Medical Centre and a spare AAI.

Competency of staff to administer emergency medicines is be taken into account when preparing risk assessments for educational visits and the appropriate training is be provided by the School Nurse where necessary, e.g. how to administer an adrenaline auto-injector.

Staff Duty of Care

Anyone caring for children including teachers or other school staff have a common law duty of care to act like any reasonably prudent parent. In some circumstances the duty of care could extend to administering medicine and /or taking action in an emergency. This duty also extends to staff leading activities off site, such as PE fixtures, school trips or educational visits.

Any giving of medicine needs to be recorded on a trip medical form provided by the Medical Centre.

Certain medicines can be given or supplied without the direction of a doctor for the purpose of saving life. For example, the parental administration of adrenaline (1mg in 1ml), chlorpheniramine and hydrocortisone are among those substances listed under Article 7 of the POM order for administration by anyone in an emergency for the purpose of saving life (Prescription Only Medicines (Human use) Order 1997.

Staff assisting in an emergency in good faith and acting reasonably and responsibly, whilst carrying out their duties, will be covered by the GDST's insurance against claims of negligence.

Record Keeping

The school has accurate documentation in place and ensures that all staff complete and sign a record each time they administer medicine (prescribed or over the counter) to a child, including on school trips and educational visits.

The School Nurses record the information in the Medicine Administration Folder, which is kept in the Medical Centre for day students. It is also recorded on a form, which the student takes home to give to parents.

For boarders, the information is recorded on an on-line medication form in the boarding medical section on the General Drive. All boarding staff and School Nurses have access to this form.

The record includes:

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- Name of child
- Group, class or form name
- Name and strength of medicine
- Expiry date of medicine
- Prescribed dose, method & frequency of administration
- Date and time medicine administered
- Dose given
- Name & signature of staff administering the medicine
- Date medicine provided by the parent
- Quantity received and quantity returned to parent

In some circumstances, such as the administration of rectal diazepam, it is good practice to have the dosage and administration witnessed by a second adult.

Storing Medicines

The school only stores, supervises and administers medicine that has been prescribed for an individual child. Medicines is be stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which dispensed. Staff ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration. Where a child needs two or more prescribed medicines, each is be in a separate container and an individual 'Consent to Administer prescribed Medication' form is be completed for each medicine and provided to the school.

- All medicines should be stored safely Children should know where their medicines are at all times
 and how to access them immediately. Medicines and devices such as asthma inhalers, blood
 glucose testing meters and adrenaline pens should be always readily available to children and not
 locked away. This is particularly important to consider when outside of school premises eg on
 school trips.
- Emergency medication is kept in the main school office. It is kept behind a locked door but is easy to access for the students in need. The School Nurses check the emergency medication regularly. The staff in the main office are fully aware of where the medication is stored. Some students may carry their own emergency medicines, see the 'Self-Management' section above.

The school keeps **controlled drugs** in a double locked, non-portable container and only named staff is have access to it. Prescribed and non-prescription medicines is be kept in a locked cupboard or fridge. Both boarding houses and the Medical Centre have their own controlled drugs cabinets and controlled drugs record books.

Some medicines must be stored in a **refrigerator** because they may break down or 'go off'. The patient information leaflet supplied with the medicine will state whether the medicine needs to be stored in a refrigerator. Local pharmacists can also give advice.

There is restricted access to a refrigerator holding medicines. (Medicines can be kept in a refrigerator containing food in a clearly labelled airtight container unless there is a constant need to refrigerate medicines that a student takes regularly, e.g., insulin, or if vaccines are stored; in these cases, separate, sole use, refrigerators must be provided.)

The temperature of the medicine refrigerator must be between 2° and 8°C and monitored daily when it is in use and recorded. A maximum/minimum thermometer is recommended for this. In the event of the refrigerator breaking down it is important to identify the fault quickly, otherwise medicines may be wasted. Medicines must be returned and parents informed if this occurs. The refrigerator is cleaned and defrosted regularly.

Staff Medicines

Staff who bring prescribed or over-the-counter medications to school, or on school trips / educational visits, for personal use, must ensure that their medicines are securely stored, especially in EYFS settings.

Disposal of Medicines

Staff must not dispose of medicines. Parents are responsible for ensuring that date expired medicines are returned to the pharmacy for safe disposal. If parents do not collect medicines, they must be taken to a local pharmacy for disposal.

Boarders' medication, either expired or no longer required, is returned to the Medical Centre by boarding staff. It is then returned to Hawes Whiston pharmacy for safe disposal.