

Policy for the Administration of Medicines in School

Agreed by Governors: Spring 2023

To be reviewed: Spring 2025

The Board of Governors and staff of Dothill Primary School wish to ensure that pupils with medication needs receive appropriate care and support at school. The Head 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 volunteered to do so.

Please note that parents should keep their children at home if acutely unwell or infectious.

Parents are responsible for providing the school 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 on the school MED1 form. School will usually only administer medication with a dose of 4 times per day.

Staff will not give a non-prescribed medicine to a child unless there is specific prior written permission from the parents on the school MED1 form, authorised by the Head Teacher.

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.

Each item of medication must be delivered to the Head Teacher or Authorised Person, in normal circumstances by the parent, in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the following information:

- . Pupil's Name.
- . Name of medication.
- . Dosage.
- . Frequency of administration.
- . Date of dispensing.
- . Storage requirements (if important).
- . Expiry date.

The school will not accept items of medication in unlabelled containers.

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.

The school will keep records, which they will have available for parents.

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.

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 for transfer to a community pharmacist for safe disposal.

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

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.

Staff who volunteer to assist in the administration of medication will receive appropriate training/guidance through arrangements made with the School Health Service.

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.

All staff will be made aware of the procedures to be followed in the event of an emergency.

Signed	EBUTU	Date 23.3.23
(Head teacher)		
Signed	LGoodpellow	Date 23.3.23
(Chair of Gover	rnors)	

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School: Dothill Primary School

Address: Severn Drive, Wellington, TF1 3JB

REQUEST FOR SCHOOL TO ADMINISTER MEDICATION – MED 1

DETAILS C	OF PUPIL (Capitals please)							
Name			M/F	Date of Birth	/ /	Class		
Condition or illness (eg Asthma; Diabetes; Epilepsy, Cystic Fibrosis, Anaphylaxis, Recovery from? Illness, etc):								
DOCTOR'S	S DETAILS							
Doctor's Name		Medical Pract	ice			Telephone Number		
MEDICAT	TON AND ADMINISTRA	TION						
Name of r	nedication (give full deta	ils given on the co	ntainer	label issue	ed by the phar	macist)		
Type of M	edication (eg tablets, mi	xture, inhaler, Epip	en, oth	er (<i>please</i>	specify)			
Date Disp	ensed:	Dosage and method	od:					
Times to b		Is precise timing c	ritical?	Yes/ No				
For how lo	ong will your child need t	o take this medicat	ion?					
	ation that need not be a onset of asthma attack,			es please i	ndicate when	it should be giv	en: (eg b	efore
The medic	cation needs to be admir	nistered by a memb	er of s	taff			Yes	No
My child is of staff	s capable of administerir	g the medication h	im/hers	self under t	he supervisio	n of a member	Yes	No
	cation needs to be readil	y accessible in cas	e of en	nergency			Yes	No
	NAL INFORMATION							
Precaution	ns or Side Effects:							
What to de	o in an emergency:							
	ad the notes on the rev must seek the advice o						medicine	e is to be
time. I under However, I who may not responsibility mentioned staff have be	named above has advise restand that teachers have request that the medical of have had any first aid ty for any injury, death of in this form, other than a seen negligent and dispose	ve no obligation to partion named above to or medical training or damage suffered ny injury, death or	give or be adm . The s by a po damag	supervise inistered b school, the upil as a re e which ar	the administra y/taken under Headteacher sult of the adr ises because	ation of medicin supervision of and staff accep ministration of n the school or a	es at sch a membot no nedicine	nool. er staff,
Signed: Pa	arent/Carer			Date:				

NOTES

- 1. The school will consider each request on its merits. Where it is practicable the school may well prefer parents to come into school at appropriate times to administer the medicine themselves or make arrangements at break or lunchtime for the pupil to go home to receive the medication.
- 2. The school may refuse to undertake administration where this is seen to be the reasonable decision in the best interests of the school. For example where timings of administration are critical and crucial to the health of the pupil and cannot be guaranteed; where specific technical or medical knowledge and/or training is required or where administration would make unacceptable intimate contact with the pupil necessary.
- 3. The school will not agree to administer any medication in school without a written request using this form, having first been made.
- 4. The school will not agree to administer any medication in school that is not essential to be administered during the course of the school day. (If it is acceptable for doses to be given before and after school the school should not be being asked to administer during the school day, eg medicines taken 3 times per day can be administered at home before school, after school and at bedtime).
- 5. All requests will need to be discussed fully with the head teacher or other authorised member of staff before any medicines are sent into school.
- 6. The school will only administer prescribed medicine which must be supplied to the school in the original container labelled by the pharmacist with the name of the medicine, full instructions for use and the name of the pupil. The school may refuse to administer any medicines supplied in inappropriate containers.
- 7. For pupils on long-term medication the request form should be renewed by the parent/carer when required by the school and in any event at the beginning of each new school year.
- 8. Parents are responsible for notifying the school immediately in writing of any subsequent changes in medicines or doses.
- 9. Parents are responsible for notifying the school immediately the doctor has stopped the medication.
- 10. Parents are responsible for collecting and disposing of any unused or expired medicine at the end of each term.
- 11. A record will be kept by the school of all medicines administered and when in respect of each pupil for whom it has agreed to administer medicines.
- 12. Where they feel it to be necessary the school reserves the right to ask parents to supply a doctors note to support/confirm the information given on the request form.
- 13. You may find it necessary to seek your Doctor's help in completing this form.

DOTHILL PRIMARY SCHOOL - RECORD OF ADMINISTRATION OF MEDICATION - MED2

- 1. No medication should be administered to any pupil without a parental request form (Med 1) having been received. Med 1 should be held at the back of this administration record file.
- 2. Any administration of medication including analgesic (pain reliever) to any pupil must be recorded.

Date	Time	Pupil's Name & Class	Name of Medication	Dose Given	Any Reactions/Remarks	Signature of Staff (please print name also)



Form MED 3

School: Dothill Primary School

Address: Severn Drive, Wellington, TF1 3JB

Misadministration of Medications for Schools Form

Name of child who received the Incorrect medication.		Name: Address:				
Date incident occurred						
Time incident occurred						
Who was the original medication prescribed for?						
Please list the incorrect	Name of Medication	Dose given	Co	omments	}	
medication administered						
Was the child		Yes		No		
Hospital (pleased)						
If yes, which hospital and what time were they admitted						
Advice sought from a doctor or Pharmacist (other than hospital)		Yes		No		
		Date and t	ime advid	e sough	t	
Name of Doctor or Pharmacist						
Contact details: (address, telephone, number)						
Persons on duty at the time incident occurred						

Child's parents contacted	Record summary of conserva	tion:			
107 41			T		
was the mer	nber of staff administering tl	ne medication			
trained and a	authorised to do so (please ci	rcle)	Yes	No	
	(p. 100 to 100 t	,			
How did	Describe in full details:				
the					
incident					
occur					
	Outcome:	Pleas	e tick/add	comments	
Devente info	Outcome:	Pleas	e tick/add (comments	
	rmed and incident report	Pleas	e tick/add (comments	
Parents info	rmed and incident report	Pleas	e tick/add (comments	
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