



Medication Policy

Ratified & adopted by Governors	Thursday 15 th June 2017
Date for Review	June 2018 (or sooner if guidance changes)

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Version Control- LA HR Policies information:

Version	Date Approved	Changes	Reasons for Alterations
Issue 3	September 2014	Reflect new supporting documentation	Children and Families Act 2014

Success Indicators

To ensure the safety and well-being of all pupils we will use the following indicators to demonstrate our level of compliance with this policy and its procedures:

- a) At Two Gates we **manage** medicines and have **effective local procedures** in place;
- b) Employees who are required to administer medication have received **suitable training**;
- c) Administration of medication is effectively **recorded** and pupils with chronic long term medical conditions have individual **healthcare plans**.
- d) The Head Teacher **monitors medication arrangements** to ensure local procedures are working effectively.
- e) **No adverse incidents** have occurred
- f) Should an adverse incident occur it is reported immediately, suitably investigated and action taken to prevent reoccurrence.

1. Application

This policy applies to **all employees** involved in the assistance and administration of medication for pupils and reflects **legal requirements** and statutory guidance.

2. Introduction

At Two Gates **only** named employees are permitted to assist pupils to self-administer and are administering medicines, either as part of long term therapy for a chronic health condition or as an emergency measure, e.g. allergic reactions / seizures/ diabetes/Asthma.

Any assistance or administering of medicines is conducted in a safe and competent manner, procedures are followed and relevant legislation complied with.

3. Aims and Objectives

The overall aim of the policy is to ensure that Two Gates School has in place **clear and well documented local procedures** which detail how medication will be managed.

The policy operates on the principle of an **individual assessment** being undertaken to establish the extent of the pupil's ability to safely and effectively administer their medication. This takes into consideration their age, condition and their overall care plan, where one exists, and procedures are in place to outline how this takes place.

It is acknowledged that employees at Two Gates are not health professionals. They do receive appropriate information, instruction and,

where need identified, training and support to enable them to become competent in the administration of medication.

4. Arrangements for Applying the Policy

Ensuring compliance with the legal requirements and maintaining the rights of the pupil is paramount. Therefore medication procedures are put into place to assist designated employees to manage medication systems. Pupils have the right to expect that any assistance offered is carried out in a **professional manner by competent employees.** The pupil (Parent where pupil cannot consent) must agree to any assistance provided.

4.1. Local Procedures

Where medication administration/assistance is required, detailed management procedures and Health Care Plans are developed and communicated to all relevant employees.

We follow the **guidance** in the two supporting documents:

‘Medication Guidance for Children and Young People’ (LA Policy HR G11) &

‘Supporting pupils at school with medical conditions 2014’

Our procedures comply with legislation and guidance and are as follows:

a) ***Consent Arrangements***

Written consent on a school pro forma is given by the parent to administer a **short term** prescribed medication such as antibiotics. **Long term** health conditions have detailed consent arrangements which are detailed on healthcare plans.

b) **Cultural and Religious requirements** – we will observe any as long as it is in the **best interest of the child.** Any of these are detailed in the school red file.

c) **Authorisation arrangements for employees to administer medication**

Mrs Llewelyn-Cook, Mrs Pugh, Miss Ansell, Mrs Chetwynd, Miss Hammond, Miss Kitchen & Mrs Bell are all authorised to administer short term medication such as antibiotics.

*Mrs Pugh, Miss Ansell & Mrs Chetwynd have undergone **competency training** to administer **Insulin** to 3 Diabetic children in accordance with their individual care plans. **Mrs Warren-Brownhill** has had **competency training** to support 1 child in his diabetic care when needed at dinner times.*

d) **Communication arrangements & Arrangements with regards to Prescription Only Medications and Over the Counter Medications**

At Two Gates we **do not** administer over the counter medication. For prescription medication, office staff will liaise with parents re written permission and receiving and storing medication. They will also liaise with administering staff.

If the dosage is 4 x a day then we **will** administer medication at lunchtime. If the dosage is 3 x a day then we **do not**.

Medication has to be in its **original container** with the **pharmacy sticker** visible.

Within our arrangements consideration is given to the plans for **administering medicines for a long term health condition**; such cases involve individual healthcare plans.

For pupils with **healthcare plans**, meetings will be planned with relevant staff, parents and any external agencies involved. All staff involved with the care of these pupils are fully informed, trained and involved.

e) **Assessment of pupil's abilities and support needs**

This is undertaken by the **trained professional** when completing the care plan.

All prescription medication for short term use is **administered** by named staff only and **witnessed** by another member of staff.

f) **Record Keeping**

Records of all medication administered to a pupil are **kept with the medication** until it is no longer required or the course is completed, the record is kept securely.

Detailed records of the administration of Insulin are in a daily home/school diary, on a weekly record form (transferred to child's file termly) and on the healthcare plan for LC.

g) **Safe storage and transportation of medication**

All medication is handed over to office staff by parents; written consent forms are completed **prior** to any medication being administered.

All medication is kept in the **locked fridge** in the medical room. Children have **no access** to medication. The **key** is kept in the main school office.

Insulin pens are carried around with the individual pupil.

Currently one child at Two Gated requires an EpiPen. There is one in his classroom **in view of the child but out of reach**.

h) **Controlled Drugs**

Controlled drugs are kept in the **locked fridge** in the medical room. We do have one child who takes a controlled drug on a daily basis.

i) **Disposal of medication and management of sharps**

Parents provide and dispose of their own sharps box. Sharps boxes are kept out of reach in the medical room.

Unfinished medication is returned to the parent.

j) **Management of errors and incidents**

In the case of an error/incident in administering medication **emergency help for the child will be sought immediately** and parents informed. Following this a **meeting** with the Headteacher and all staff concerned will be convened to **establish the facts** about the error/incident and identify the reasons. This will be **recorded**. Any residual actions such as warnings or disciplinary procedures will follow the school policies in this area. All lessons learned will be communicated and risk assessments/plans amended accordingly. Parents will be kept **fully informed** throughout.

4.2 Incident Reporting

Procedures are in place for the **reporting** of adverse reactions or errors in administration of medication.

This procedure covers:-

- a. The facts of the incident
- b. Persons involved,
- c. Reason for the incident,
- d. Details of any ill health or injuries sustained (if this is the case an accident/incident report form must be completed and forwarded to the Health, Safety and Wellbeing Service),
- e. Witness Statement.
- f. Details of persons informed (Parents/Carers, Pharmacist, GP, CQC/OFSTED),
- g. Corrective and Remedial action taken.
- h. Outcome of investigation by senior manager

4.3 Risk Assessment and Individual Healthcare Plans

It is the **responsibility** of the Head Teacher in discussion with Hayley Pugh and other health care professionals to determine the scope of a pupil's ability to manage their medication.

An individual healthcare plan (this may be called a Care Plan) is developed which **identifies** and **documents** the **range of support** required by the pupil. This plan is reviewed at regular intervals (at least annually) and following any changes in circumstances. The details within the plan must be communicated to employees and other relevant persons.

4.4 Control of Substance Hazardous to Health (COSHH) Assessments

As local medication policy guidelines are established, implemented and monitored in accordance with this policy there is **no requirement** to complete COSHH Assessments for medication products, as these arrangements will ensure safe storage, handling, administration and disposal.

4.5 Information, Instruction and Training

All employees at Two Gates who have to assist or administer any medication in the course of their duties **receive appropriate information, instruction** and where the need is identified **attend training in the completion of such tasks**. **Changes** in pupil's healthcare plans and needs are effectively communicated to staff .

5. Monitor and Review

Local procedures are **reviewed at least annually** to ensure they are up to date, reflect current best practice and are working effectively. This happens when this policy is reviewed or if legislation/guidance changes at any time, or in response to changes within school.

Any changes to local procedures are incorporated into staff instruction and training arrangements and effectively communicated to staff and other relevant parties.

6. Staff Behaviour & Conduct Code

All staff at Two Gates are required to **abide by** our Staff Behaviour and Conduct Code.

All staff at Two Gates are required to **sign for a copy** of the Code and are instructed to read it. This policy is also read out and discussed in detail during **induction and refresher training**.

A specific reference to MEDICATION is on page 5 in the last paragraph.

7. Legislative Framework

1. Health and Safety at Work Act 1974
2. Control of Substances Hazardous to Health Regulations 2003
3. Health and Safety (Miscellaneous Amendment) Regulations 2002
4. Management of Health and Safety at Work Regulations 1999
5. Children and Families Act 2014

6. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
7. Hazardous Waste Regulations 2005
8. Medicines Act 1968
9. Misuse of Drugs Act 1971
10. Human Rights Act 1998
11. Data Protection Act 1998

Other related School Policies:

- 'Medication Guidance for Children and Young People' (LA Policy HR G11) &
- 'Supporting pupils at school with medical conditions 2014'
- Staff Behaviour & Conduct Code
- First Aid Policy
- Health & Safety Policy
- Accidents Policy