### **Administration of Medication**



# Wheatley Hill Community Primary School

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The Governing Body is committed to safeguarding and promoting the welfare of children and young people and expects all staff, volunteers and visitors to share this commitment.

#### Policy aims

- The main aim of this policy is to support individual children with medical needs to achieve regular attendance.
- A second aim is to reduce cross-infection risk between children, to increase wholeschool attendance.
- A third aim is to ensure that medicines given at school are stored and administered safely.

Parents should not send children to school if they are unwell. Common childhood illnesses and recommended exclusion timescales are listed at the bottom of this policy for guidance.

#### Non-prescribed medicines

The school will not be able to store or give medicines that have not been prescribed to a child (e.g. Calpol, Piriton, Bonjela, throat lozenges or cough medicines). Please make arrangements to come into school if you wish to give your child these medicines.

#### **Prescribed medicines**

In line with other schools' policies, if medicines are prescribed up to 3 times a day, the expectation is that parents or carers will give these medicines outside of school hours.

If medicines are prescribed 4 times a day, the school strongly encourages parents or carers to make arrangements to come into school to administer these medicines themselves. Parents and carers will definitely be required to administer the first 24 hour dose of any new prescription, for example antibiotics.

## Please consider whether your child is well enough to be at school if they require medicine 4 times a day.

If the school agrees to assist parents and carers to administer a medicine to their child, on a temporary basis, the medicine must be provided in its original container and must have been dispensed by a pharmacist and must have a label showing:

- Name of child.
- Name of medicine.
- Dose.
- · Method of administration.
- Time/frequency of administration.

The instruction leaflet with prescribed medicines should show:

- Any side effects.
- Expiry date.

The school will provide blank medicines record forms, and parents/carers must complete and sign one of these forms if they leave medicine at school.

#### **Procedure for Administering Medicines**

- 1. Medicines to be received, stored, administered and recorded by the designated members of the first aid team.
- 2. Parents to complete the necessary pro forma and to personally hand the form and the medicine to the designated members of the first aid team or other staff member nominated by the Headteacher.
- 3. Medicines to be stored in a secure, locked cupboard or fridge as appropriate.
- 4. Medicines to be administered at 12:05 pm. There are to be no exceptions to this time. Where this does not meet the requirements of the prescription, parents will need to make alternative arrangements.
- 5. Children who are to receive medicines will be collected by the designated member of the first aid team or other staff member nominated by the Department Leader / Headteacher and accompanied to the dedicated first aid area.
- 6. A visual check, against the name of the child on the medicine packet/bottle will be carefully checked with the name of the child who is attending the medicine administration.
- 7. A second member of staff will be present to ensure and verify that the correct dosage is given to the correct child.
- 8. A record will be made to certify that the name/visual check has been made (see point 6) and that the dosage has been checked. A record will also be made of the date and time of the administration.
- 9. In the event that the designated member of the first aid team is absent from work the above duties will be undertaken by a member of staff appointed by the Department Leader / Headteacher.

#### Longer term needs

Where a child has a long term medical need a written health care plan will be drawn up with the parents and health professionals. In this case, school staff will assist with medicines if this is in the care plan.

#### **Self-Management**

Children are encouraged to take responsibility for their own medicine from an early age. A good example of this is children using their own asthma reliever. Parents/carers must still complete a medicine record form, noting that the child will self-administer and sign the form. The school will store the medicine appropriately.

#### **Refusing Medicine**

When a child refuses medicine the parent or carer will be informed the same day.

#### **Storage and Disposal of Medicine**

The school will store medicine in a locked cabinet, or locked fridge, as necessary. Medicines **must** be collected by parents at the end of each term.

#### **Emergency treatment and medicine administration**

The school will call for medical assistance and the parent or named emergency contact will be notified. The Governing Body will support any member of staff who assists with medicine in a reasonable good faith attempt to prevent or manage an emergency situation, regardless of outcome.

#### **School Illness Exclusions Guidelines**

Please check your child knows how to wash his/her hands thoroughly to reduce risk of cross infection. School attendance could be improved for all children and families wash and dry their hands well 5 or more times a day.

Chickenpox	Until blisters have all crusted over or skin		
Control 1915	healed, usually 5-7 days from onset of rash.		
Conjunctivitis	Parents/carers expected to administer relevant creams. Stay of school if unwell.		
Nausea	Nausea without vomiting. Return to school 24		
	hours after last felt nauseous.		
Diarrhoea and /or vomiting	Exclude for 48 hours after last bout (this is 24		
	hours after last bout plus 24 hours recovery		
	time). Please check your child understands why		
	they need to wash and dry hands frequently.		
	Your child would need to refrain from		
	swimming for 2 weeks.		
German Measles / Rubella	Return to school 5 days after rash appears but		
Cerman Measies / Nabella	advise school immediately as pregnant staff		
	members need to be informed.		
Hand, Foot and Mouth Disease	Until all blisters have crusted over. No		
riaria, i oot aria widatii biscase	exclusion from school if only have white spots.		
	If there is an outbreak the school will contact		
	the health protection unit.		
Head Lice	No exclusion, but please wet comb thoroughly		
neau Lice	for first treatment and then every 3 days for		
	the next2 weeks to remove all lice.		
Cald Carra			
Cold Sores	Only exclude if unwell. Encourage		
	handwashing to reduce viral spread.		
Impetigo	Until treated for 2 days and sores have crusted		
Manalan	over.		
Measles	For 5 days after rash appears.		
Mumps	For 5 days after swelling appears.		
Ringworm	Until treatment has commenced.		
Scabies	Your child can return to school once they have		
	been given their first treatment although		
	itchiness may continue for 3-4 weeks. All		
	members of the household and those in close		
	contact should receive treatment.		
Scarletina	For 5 days until rash has disappeared or 5 days		
	of antibiotic course has been completed.		
Slapped Cheek	No exclusion (infectious before rash).		
Threadworms	No exclusion. Encourage handwashing		
	including nail scrubbing.		
Whooping Cough	Until 5 days of antibiotics have been given. If		
	mild form and no antibiotics exclude for 21		
	days.		
Antibiotics	First dose must be given at home and first 24		
	hour dose must be given by parent or carer.		
Viral Infections	Exclude until child is well and temperature is		
	normal (37degrees).		
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