



# Administering Medication and Intimate Care Policy

Beam County Primary School

**Approved by:** Chair of Governors

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*This policy has been written in order to promote the good health of the children in our care, in line with the safeguarding and welfare requirements of the Statutory Framework for the Early Years Foundation Stage; Children and Families Act 2014 and Supporting Pupils at School with Medical Conditions 2015.*

**Medicine not in its original packaging or without a pharmacist label cannot be administered or given to a child for self-administration.**

**No medicine can be administered or accepted for self-administration without prior written consent.**

## **1. Policy Statement and Principals**

Beam County Primary is committed to ensuring that children return to school as soon as possible after an illness, (subject to the health and safety of the school community) and that children with chronic health needs are supported. This policy statement sets out how we ensure that children with medical needs receive proper care and support.

Where children are unwell to the extent that they should not be in school, and where they are still suffering from an infection which may be passed to others, children should remain at home to be cared for and looked after.

## **2. Our Policy AIMS**

- To support regular attendance of all pupils;
- To ensure staff understand their roles and responsibilities in administering medicines;
- To ensure parents understand their responsibilities in respect of their children's medical needs;
- To ensure medicines are stored and administered safely.

The Headteacher, in consultation with the Governing Body, Staff, Parents, Health Professionals and the Local Authority, is responsible for deciding whether the school can assist a child with medical needs.

## **3. Roles and Responsibilities**

### **3.1. Parents and Carers**

Parents have the prime responsibility for their child's health.

- In most cases, parents will administer medicines to their children themselves out of school hours, but where this is not possible, parents of children in need of medication must ensure that the school is accurately advised about the medication, its usage and administration. Parents must complete the parental agreement form kept in the office before a medicine can be administered by staff. See Appendix 1
- Children may be able to manage their own medication e.g. asthma inhalers, under adult supervision;
- Parents are responsible for ensuring that all medication, including asthma inhalers, Epipens, insulin and any emergency medication that is kept in school is in date and that physical equipment is in working order;

- Parents are responsible for notifying the school if there is a change in circumstances. Medical information will be invited at the start of each academic year or during transition midyear. However, if there is a change to a child's diagnosis, medicine dosage or if a new medicine is prescribed (including emergency medicine) parents must inform school immediately. A health care plan (see section 8) may need to be drawn up in collaboration with the school nursing team.
- A child's parent or carer must complete a new Medication Record form (Appendix 1) if there are any changes to a child's medication (including dosage or frequency). A new medication record would also need to be completed for each time the child is required to take medication at school.
- All medication and all medical equipment must be clearly labelled and must have a doctor's or pharmacist's label on the item or original packaging that includes the child's name and dosage.
- Parents and Carers are requested to provide the following information about medical needs to update school records at the start of each academic year.
  - Details of pupil's medical needs including any that are being investigated
  - Medication; including side effects and any emergency medication prescribed
  - Allergies
  - Name of GP/Consultants
  - Special requirements eg dietary needs, pre-activity precautions
  - What to do and who to contact in an emergency
  - Cultural and religious views regarding medical care
  - A copy of a health care plan, if one has been previously written

### 3.2. Staff

- All staff at Beam County Primary have a duty to maintain professional standards of care and are expected to do what is reasonable and practical to support the inclusion of all pupils. This will include administering medicines or supervising children in self-administration. However, as they have no legal or contractual duty, staff may be asked, but cannot be directed, to do so;
- All medicines are stored securely with access only for staff;
- Emergency Asthma reliever inhalers are kept in the main office, first aid room and Nursery kitchen. Emergency Epi pens are stored in the main office and first aid room. Both are easily accessible by staff but not children. Refer to the asthma and allergy friendly school policy document for more information.
- The member of staff who administered the medication must complete the appropriate form kept in the office each time medicine is administered; this will also be updated on Medical Tracker and a notification will be sent to parents.
- Certain medications require specialist training before use, eg Epi Pens or insulin. If a child requires such medication the Headteacher will arrange appropriate training as soon as possible through the school nursing team. In some circumstances, it may be necessary to absent the child until such training has been undertaken. Where specialist training is required, only appropriately trained staff may administer the medication;
- School staff members who have agreed to do so, will be responsible for administering medication or for witnessing self-administration by the child and where possible will be involved in writing the medication record with parents

initially. Once administered details are saved on Medical Tracker and this information is automatically sent to parents where necessary.

- During the initial meeting with parents/carers to fill out the medication record, the designated person must ensure that the medication is properly labelled and safely stored during the session. Before any medication can be given, the designated person must ensure that:
  - The school has received written consent.
  - Another member of staff acts as a witness to ensure that the correct dosage is given.
- When the medication has been administered, the designated person must:
  - Record all relevant details on the Record of Medication Form (Appendix 1).
  - Update medical tracker detailing the administration
- If a child refuses to take their medication, staff will not attempt to force them to do so. The Headteacher and the child's parent or carer will be notified via telephone, and the incident recorded on the Record of Medication as well as Medical Tracker.

### 3.3 Children

- Where appropriate and agreed by parents, we encourage children to be independent when managing certain medical conditions. KS2 children are offered a Beam waist bag to wear so that they can carry their medication with them, this includes asthma pumps, epi pens and other emergency medication.
- When meeting with parents to discuss administering short term medication such as antibiotics, if appropriate, it may be suggested that children administer their own medication under adult supervision.

## 4. Pupil information and Confidentiality

The information parents and carers are expected to provide is listed at clause 3.1 (*Parents and Carers*).

We respect the child's right to confidentiality so information will only be shared with staff who need to know following a discussion with parents about information sharing.

## 5. Recording

The medicine file will include:

- Copies of consent forms (originals to be kept in pupils' files)
- A record of all medicines on site and their location
- Records of administration of medicines to individual children
- Copies of Health Care Plans
- Copies of Parent and School Agreement for self-administration

## 6. Administration of Medicines

In many cases it is possible for children's GPs to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering

medicines will only be done where it would be detrimental to the child's health if not given in the setting.

## **7. Safe Storage of Medicines**

- All medication must be in the original container with pharmacist label, or it cannot be given.
- All medication for children must have the child's name clearly written on the original container and kept in a closed box, which is out of reach of all children and in an area inaccessible to children under adult supervision.
- All prescription medications and emergency medication, such as inhalers and epi-pens should have the pharmacist details and notes attached to show the dosage needed and the date the prescription was issued. This will be checked, along with expiry dates, before staff agree to administer medication. It is parents' responsibility to ensure that medications are replaced before their expiration dates.
- Emergency medication will be within easy reach of staff in case of an immediate need but will remain out of children's reach and under adult supervision.
- Any antibiotics requiring refrigeration will be kept in an area inaccessible to children.

## **8. Health Care Plans**

Some children have medical needs that require a Health Care Plan. Health Care Plans (HCP) are developed in partnership between the school, parents, pupils and relevant health care professionals who can advise on a child's individual case. The aim of a HCP is to ensure that a child is supported effectively in the management of a health need and may detail, for example, what to do in an emergency. Plans are reviewed when required or annually, this review is led by the school nursing team.

In the event of a child joining the school with significant health needs that require a HCP it may be necessary to absent that child until the HCP is written and/or when there has been relevant training provided. It is the duty of the parent to ensure that any medication described on the HCP is at school on the first day that the child attends school or is agreed during the health care plan meeting.

## **9. Emergency Procedures**

Actions to be taken in an emergency and what constitutes an emergency for a particular child are included in the Child's Health Care Plan.

## **10. Intimate or Invasive Treatment**

This will only take place under exceptional circumstances if confirmed to be a medical necessity and only with written permission from parents. Advice may be sought from the school nursing team and/or medical professionals involved. It will always be, only at the discretion of the Headteacher and Governors. It will not happen without the agreement of the staff members once they have received training from a relevant health professional. Two adults, at least one of whom must be the same gender as the child, must be present for the administration of such treatment which

may include but is not limited to support with peg feeding, rectal medication or assisting with a catheter. All such treatment will be recorded.

Please refer to the nappy changing policy for specific information for this area of intimate care.

## **11. Residential and Off-Site Visits**

Parents are welcomed to express their concerns with regards to their children attending off site or residential trips. This may involve parents sharing information the school may not already be aware of such as travel sickness or bed wetting. An individual plan to care for the child and maintain dignity would be discussed on a case by case basis.

Children with health care plans may have a designated part of their health care plan which describes how best to support that child away from the familiarity of school and home. Any medicines that are kept on site for children will be taken during trips and visits. A designated member of staff will hold these unless the child usually has their own in their waist bag.

If additional supervision is needed during any activity such as swimming, the school may request a parent or carer to help as an extra supervisor for their child only.

# Appendix 1 – Medication Record

Name of Child	
Name of Doctor	
Name of medication	
Expiry date	
Dosage	
Method of administration	
Time(s) at which medication is to be administered	
Circumstances in which medication is to be administered (if for emergency use)	
I confirm that the medication, dosage and timings indicated above are correct and authorise the setting to administer them.	
Parent's signature	
Date:	
<i>Office use only</i>	
Agreed by:	
Name:	
Signature:	
Date:	

Date	Quantity administered	Time administered	Signature of staff administering dosage and witness	
			Administer	Witness
			(Print)	(Print)
			(Signature)	(Signature)
			(Print)	(Print)
			(Signature)	(Signature)
			(Print)	(Print)
			(Signature)	(Signature)
			(Print)	(Print)
			(Signature)	(Signature)