



BENGEWORTH CE ACADEMY

ADMINISTRATION OF MEDICINES FOR LONG AND SHORT TERM MEDICAL CONDITIONS POLICY 2022-2023

September 2022



Bengeworth
Multi Academy Trust

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INTENT AND RATIONALE

Parents have the prime responsibility for ensuring a child's health and for deciding whether they are fit to attend school, with a view to ensuring an attendance of at least 96% in line with the school Attendance Policy. Parents must also provide all necessary information about their child's medical needs to the school and keep this information up to date.

DfE April 2014 – Supporting Pupils At School With Medical Conditions, Key points are:

- Pupils at school with diagnosed medical conditions should be properly supported so that they can have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place to support pupils at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

This policy may be superseded by a child's EHC plan or Individual Care Plan, or may be used in conjunction with such plans.

Staff Duties

School teachers and other school staff have no legal obligation to administer medicines to pupils nor supervise them while they take medicine, unless contracted to do so. Staff may volunteer to assist in the administration of medicines but must be given appropriate training and guidance. As a school, we will train specific staff to administer medicines where necessary, only in the case of children who have a diagnosed, long term medical need or cognitive condition.

As a school, we have a duty to plan how administering medicines can be accommodated in school and on educational visits to allow children who have medical needs to be included.

PROCESS FOR THE ADMINISTRATION OF MEDICINES IN SCHOOL

*(For use of inhalers see **Asthma Policy**)*

Short term medical needs

The school will not accept or administer any creams, salves or tablets, including the following:

- Medicines that are to be administered 3 or 4 times per day (eg antibiotics/pain relief)
- Hayfever/ Allergy medicine (unless prescribed to be given in response to an allergic reaction)
- Paracetamol or Ibuprofen e.g. Calpol, Nurofen or Aspirin.
- Lip salve
- Sun Cream

This is representative and not an exhaustive list of medicines.

Medicines should normally be administered at home and only taken into school as part of an Individual Care Plan or EHCP (*where it would be detrimental to the child's health, or would greatly impact on a child's behaviour, or school attendance, if the medicine were not taken during the school day*). The school will not accept medicines, such as antibiotics, which need to be administered 3 times a day, as this is possible out of school times.

If medicine needs to be administered in these defined exceptional circumstances, the school will only accept:

- Medicines that are in date
- Medicines in their original container, as dispensed by a pharmacist
- Containers with labelling identifying the child by name and with original instructions for administration, dosage and storage.

In order for school staff to accept any medication, the parent must sign a form disclosing all details and giving permission for the medication to be administered by a named person. The medicine must be given to the school office at either setting and must not be sent in with the child.

The medicine must be kept in a locked cupboard (except where storage in a fridge is required) and only accessed by named adults, or with the permission of the Headteacher/Head of School.

When administering medicine, the named adult must complete a record showing the date and time and details/dosage of the medication. This must be counter-signed by another adult.

Under no circumstances should a parent send a child to school with any medicines, eg throat sweets/tablets/lipsalve. These could cause a hazard to the child or to another child if found and swallowed or shared.

Parents are welcome to come into school to administer medicines themselves that the school are unable to administer, for reasons given above.

Long term medical needs

Where a child has long-term medical needs, a care plan must be written, with the assistance of the school nurse if required, and in the presence of the parent/guardian of the named child. This may also result in an individual risk assessment also being required. The care plan must be followed and reviewed at least annually.

It is the parents' responsibility to inform the school of any changes to the child's condition that may require the details of the care plan to be altered.

The Headteacher/Head of School must ensure that named staff are trained to administer or give the level of care required by the details of the care plan.

There will also be regular/annual training for all staff on more generalised needs eg. anaphylaxis training. The school is well supported by the School Nurse who provides staff with advice and any relevant training on request.

As a school, we try to ensure that we have sufficient information about the medical condition of any child with long-term medical needs and will request meetings with parents and recognised medical practitioners regularly to provide the correct level of training. Training should be specific to the individual child concerned.

PROCESS FOR THE ADMINISTRATION OF MEDICINES DURING RESIDENTIAL VISITS – ALL MEDICAL NEEDS

For the purpose of residential visits, there will be at least one named person with responsibility for the administration of medicines and care of children as above. Parents will be asked to complete a form and may be required to meet with the named staff to ensure that staff are aware of all medical requirements.

In the case of higher levels of care eg intimate care, the named members of staff will also meet with the school nurse, or other recognised medical advisor to ensure that they are trained in dealing with the level of care required.

Date reviewed: September 2022

Date for review: September 2023

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