

### ADMINISTRATION OF MEDICINES AND GUIDANCE

Shenstone Lodge are committed to supporting children with long-term conditions or complex needs. There are a number of clinical procedures that non-health qualified staff may be trained to undertake if a child has a specific need. In the main, this training will be delivered by School Health Nurses or Community Nurses/Specialist Nurses employed by NHS organisations (see section 7 and 17 of Management of Children with Medical Needs in Schools Guidelines).

Children with complex/long term conditions may require a written health care plan to be kept in school. The healthcare plan may be solely written by or written in conjunction with a School Health Nurse/Community Children's Nurse/Specialist Nurse in collaboration with the child (where possible), parent/carer and school.

### **Staff Training**

Teacher's conditions of employment do not include the administering of medication or the supervision of pupils who administer their own medication. Some staff however, may volunteer to administer medication. Any staff willing to accept this responsibility must have the appropriate training delivered by a healthcare professional (See section 4.4 of Management of Children with Medical Needs in Schools Guidelines). Staff must receive annual updates for asthma, epilepsy and anaphylaxis.

A training record should be completed by the employee and the registered healthcare professional who delivers the training. In addition, staff must sign the indemnity form the administration of medication in schools (See section 17 of 'Management of Children with Medical Needs in Schools Guidelines').

### Consent

In order for staff at Shenstone Lodge to administer medication, all parent/carers must sign written consent to allow non-medical staff/non-healthcare staff to administer medication:



Appendix 2 (form SS12) of Management of Children with Medical Needs in Schools Guidelines must be completed by the parent/carer for every child on an annual basis in order to give written consent for staff at Shenstone Lodge to administer medication to children and young people.

If a child has medication that needs to be administered for an interim period (i.e. antibiotics), parent/carers must complete Appendix 5 of 'Management of Children with Medical Needs in Schools Guidelines' consent forms.

Appendix 4 needs to be signed by parent/carers on an annual basis to enable administration of non-controlled drugs (See non-controlled drugs section).

### Storage

Any medication received into school must be stored in locked, wall mounted cabinet and the key kept in an accessible place known to designated staff members (see sections 6.3 and 6.5 of Management of Children with Medical Needs in Schools Guidelines).

Where pupils require regular analgesia (e.g. for migraine utilising non-prescription medication) it is advisable for them to have a healthcare plan detailing under what circumstances they may take the analgesia. An individual supply of their medication should be kept in school and consent/record keeping guidelines as detailed in section of 'Management of Children with Medical Needs in Schools Guidelines', should be adhered to. Al pupils should have a completed consent form signed by parent/carer (See Appendix 4 of 'Management of Children with Medical Needs in Schools Guidelines').

Emergency medications should be readily available to all pupils who need them and stored in unlocked cupboard/outside bags.

All asthmatics should have their own inhaler and spacer device that is available when required.

All pupils with possible anaphylactic reactions should have an epipen readily available should it be required.

All controlled drugs (CD's) will be kept in a locked cupboard within a locked cupboard in the medical room.



Prescription and non-prescription medications should be delivered to the medical room either by the parent/guardian or transport escort in the original packaging, with the pharmacy label attached stating:

- The contents/name of medication
- The pupils name
- The dosage
- The method/route of administration
- The expiry date

Medications should not be transported to school by children.

All medications that come into school should be recorded on the appropriate documentation.

In the case of controlled drugs these will be recorded in the controlled book. This ensures that the school know what medications are coming into the school and their destination.

A stock check of all medications should be carried out on a weekly basis. Any discrepancies should be reported to the HOS.

### **Record Keeping**

Shenstone Lodge will keep a system of record keeping including an authorised staff list, pupil health care plans, records of parental consent and the administration of medicines.

A parental request form must be completed each time there is a request to administer a new medication (See appendix 4 of 'Management of Children with Medical Needs in Schools Guidelines').

A confirmation form, signed by school and parent/carer must be kept on file, with a copy of the confirmation form retained by the parent/carer (See appendix 5 of 'Management of Children with Medical Needs in Schools Guidelines').

Please refer to 6.10 of 'Management of Children with Medical Needs in Schools Guidelines' for further guidance in terms of record keeping.



### **Administration of Medication**

When a medicine is administered by staff the following procedure will be followed:

- Check what the pupil has been prescribed: on the drug administration chart and the medication label
- Check the identity of the pupils
- Ask whether the pupil wants medication
- Make sure no one else has already given the medication
- Prepare the medication
- Prepare the correct dose for the time of day
- Give the medication and offer a drink of water
- In the case of CD's the individual medication record sheet should be completed as well in the controlled drugs book.

#### **Self-Medication**

All children who have a diagnosed acute or medical condition will be encouraged to take responsibility for it and may be considered able to self-administer the medications where appropriate.

Before allowing a pupil to self-administer a risk assessment should be completed and consideration should be given to the following:

- Is the pupil of the age/maturity to understand instructions and details of medication?
- Can the medication be stored safely?
- Will other pupils have access to the medicine who may be unknowingly/knowingly misuse?
- Is the medication dangerous?

The pupil will need to sign a statement to say they know when and how they should take the medication, that it is for their own use only and that they will keep the medicine safely, in a locked cupboard provided. If this contract is broken the pupil will lose the right to self-administer.



Whilst Shenstone Lodge acknowledge the need to ensure that where possible children are given the opportunity to self-administer it is important to acknowledge the client group within Shenstone Lodge and the need for this decision to be made adhering to the above point as well as ensuring a thorough risk assessment has been completed.

#### First Aid

Under the Health and Safety (First Aid) Regulations 1981 employers are required to provide for employees adequate and appropriate equipment, facilities and qualified first aid personnel.

How much first aid provision a school has to make depends on its own circumstances. There are no fixed levels or fixed ratios.

Before taking up First Aid at duties, first aiders must hold a valid certificate of competence (Se section 10 of Management of Children with medical Needs in School Guidelines).

It is recommended that that a record be kept of any treatments given by first aiders and this should be recorded on the recommended form, Appendix 7 of Management of Children with medical Needs in School Guidelines.

#### **Non-Controlled Medication**

Shenstone Lodge Staff will administer non-controlled medication to pupils as and when it is required. This will be recorded on appendix 4.

Telephone contact or text message contact will be made with parent/cares prior to administering medication as a matter of courtesy. However, medication will be administered without aforementioned contact if consent (Appendix 15) has been previously acquired within a 12 month period.



### Care of Boarders who are unwell

In the event of a child staying in residence becoming unwell, a phone call home is made to discuss the illness with either the parent or carer. The child depending on the illness is then either monitored by an RCCO or sent home. When sending a child home, we request collection by either parent or carer or transport is arranged by staff on duty in accordance with on call staff member.