

Edendork Primary School



Administration of Medication Policy

February 2022



POLICY FOR THE ADMINISTRATION OF MEDICATION IN EDENDORK PRIMARY SCHOOL

The Board of Governors and staff of Edendork Primary school wish to ensure that pupils with medication needs receive appropriate care and support at school. The Principal will accept responsibility in principle for members of the school staff giving or supervising pupils taking prescribed medication during the school day where those members of staff have volunteered to do so.

Please note that parents should keep their children at home if acutely unwell or infectious.

Parents are responsible for providing the Principal with comprehensive information regarding the pupil's condition and medication.

<u>Prescribed medication will not be accepted in school without complete written and signed instructions from the parent.</u>

<u>Staff will not give a non-prescribed medicine to a child unless there is specific prior written permission from the parents.</u>

Only reasonable quantities of medication should be supplied to the school (for example, a maximum of four weeks supply at any one time).

Each item of medication must be delivered to the Principal or Authorised Person, in normal circumstances by the parent, in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the following information:

- Pupil's Name.
- Name of medication.
- Dosage.
- Frequency of administration.
- Date of dispensing.
- Storage requirements (if important).
- Expiry date.

The school will not accept items of medication in unlabelled containers.

Medication will be kept in a secure place, out of the reach of pupils.

Unless otherwise indicated all medication to be administered in school will be kept in a locked cupboard in school office.



- The school will keep records of administered medicine, which they will have available for parents. Agreed members of staff will agree to administer the medicine for each child. See for AM2. In the event of school trips this may change.
- The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed.
- If children refuse to take medicines, staff will not force them to do so, and will inform
 the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take
 medicines results in an emergency, the school's emergency procedures will be
 followed.
- It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased.
- It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
- The school will not make changes to dosages on parental instructions.
- School staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term.
- Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.
- For each pupil with long term or complex medication needs, the Principal, will ensure that a Medication Plan and protocol is drawn up, in conjunction with the appropriate health professionals. Risk assessments will also be carried out where required.
- Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in school.
- Staff who volunteer to assist in the administration of medication will receive appropriate training/guidance through arrangements made with the School Health Service.
- All staff will be made aware of the procedures to be followed in the event of an emergency.



Form AM1 MEDICATION PLAN FOR A PUPIL WITH MEDICAL NEEDS

Name of School: Edendork Primary School

Date	Review Date
Name of Pupil	Date of Birth / /
Class	National Health Number
Medical Diagnosis	
Contact Information	
1 Family Contact 1	
Name	Relationship
Phone No (home/mobile)	(work)
2 Family Contact 2	
Name	Relationship
Phone No (home/mobile)	(work)
3 GP	
Name	
Phone No	
4 Clinic/Hospital Contact	
Name	
Phone No	



Plan prepared by		
Name	Designation	Date
Describe condition and give	e details of pupil's individu	ual symptoms
Daily care requirements (e.	g. before sport, dietary, th	nerapy, nursing needs)
Members of staff trained to activities)	administer medication fo	or this child (state if different for off-site
Describe what constitutes a this occur	an emergency for the child	d, and the action to take if
Follow up care		
I agree that the medical inf		s form may be shared with individuals
SignedParent/carer	Date	
Distribution		
School Doctor	School Nurs	e
Parent	Other	



Form AM2 REQUEST FOR A SCHOOL TO ADMINISTER MEDICATION

Name of School: Edendork Primary School

Edendork Primary school will not give your child medicine unless you complete and sign this form, and the Principal has agreed that school staff can administer the medicine.

Details of Pupil
Surname Forename(s)
Address
Date of Birth / M F Class
Condition or illness
Medication
Parents must ensure that in date properly labelled medication is supplie
Name/Type of Medication (as described on the container)
Date dispensedExpiry Date
Full Directions for use
Dosage and method
NB Dosage can only be changed on a Doctor's instructions
Timing
Special precautions
Are there any side effects that the School needs to know about?

Self Administration Yes/No (delete as appropriate)



Procedures to take in an Emergence	у	
Contact Details		
Name	Relationship to Pupil	
Phone No (home/mobile)	(work)	
Address		
member of staff) and accept that th	medicine personally to is is a service, which the school is not notify the school of any changes in w	obliged to
Signature(s)	Date	_
Agreement of Principal		
I agree that	(name of child) will receiv	/e
	quantity and name of medicine) ev	very day at
(time(s) medicine	e to be administered e.g. lunchtime or	afternoon break).
This child will be given/supervised w	vhilst he/she takes their medication b	y
(name of staff	member).	
This arrangement will continue unti	l(e	ither end date of
course of medicine or until instructe	d by parents).	
Signed	Date	_
(The Principal/authorised member of	of staff)	

The original should be retained on the school file and a copy sent to the parents to confirm the school's agreement to administer medication to the named pupil.



Form AM3 REQUEST FOR PUPIL TO CARRY HIS/HER MEDICATION

Name of School: Edendork Primary School

This form must be completed by parents/carers.

If staff have any concerns discuss this request with healthcare professionals.

Details of Pupil	
Surname	Forename(s)
Address	
Date of Birth / /	Class
Condition or illness	
Medication	
Parents must ensure that in date	e properly labelled medication is supplied.
Name of Medicine	
Procedures to be taken in an em	ergency
Contact Details	
Name	
	(work)
I would like my child to keep his	/her medication on him/her for use as necessary.
Signed	Date
Relationship to child	
Agreement of Principal	
self-administer his/her medication	(name of child) will be allowed to carry and on whilst in school and that this arrangement will continue (either end date of course of medication or until instructed
Signed(The Principal/authorised member	Date er of staff)

The original should be retained on the school file and a copy sent to the parents to confirm the school's agreement to the named pupil carrying his/her own medication.



Form AM6 RECORD OF MEDICAL TRAINING FOR STAFF

Name of School Edendork Primary School

name	
Type of training received	
Name(s) of condition/	
Medication involved	
Date training completed	
Training provided by	
confirm thatabove and is competent to administer the	has received the training detailed medication described.
Trainer's signature	Date
confirm that I have received the training	detailed above
Trainee's signature	Date
Proposed Retraining Date	
Refresher Training Completed -	
Trainer	_ Date
Trainee	



Edendork Primary School Contact Form

Principal: Anne Mc Alinden

Learning Support Co-ordinator/SENCO: Mrs Shields

Trained First aiders: Mr. N. Morgan, Mrs E. Mc Causland,

Mrs A. Mc Ateer, Mrs A. Mc Alinden

Education Authority

SEN Section: 02837512200

02837415355

Educational Psychology: Fiona Treanor 02887726430

Health and Safety: David Orr 02837512429

Southern Health and Social Care Trust

Diabetes Specialist Nurse: Olivia Creaney

07841101953

Anaphylaxis (Armagh / Dungannon) Gladys Bleakley

02830834200

Thomas Street Health Clinic 02887723101

School Nurse: 02887713027

Local Hospital: Dungannon A & E 02887722821

Armagh Community Paediatrician: Tower Hill

02837522281



Edendork Primary School Record of Medicines Administered to All Children

Date	Child's Name	Time	Name of Medicine	Dose Given	Any reactions	Signature of Staff	Print Name



RISK ASSESSMENT

School:	Edendork Primary School	Activity:	Administering medication		
Assessment carried out by:	Anne Mc Alinden	Date:	February 2022	Date of Review:	Feb. 2023

What are the Hazards	Who might be harmed and how?	Existing Control Measures What are you already doing?	What further action is necessary?	Action by who?	Action by when?	Completed
Wrong medication	Pupils	The school's Health and Safety Policy and	Further guidance and standard	All Staff	Ongoing	Updated
administered Wrong dosage	III health Emergency	Administration of Medication Policy makes reference to/ includes the school's arrangements for managing the administration of medications No medication permitted in the school unless there is written parental consent stating the name of the pupil, the medication, the frequency and dosage to be administered A log is kept of all medication administered Medicines to be provided in the original container/ labelled with the name of the appropriate pupil, dose, frequency of administration and expiry date Medicines stored in a secure place, under lock and key (no medicines stored in first aid kits)	forms are available in the EAs health and safety manual for Principals and Governors "Supporting Pupils with Medication Needs" guidance is available from the special educational needs section of the Department of Education website: www.deni.gov.uk Ensure log is updated and utilised effectively.	Members Make parents aware of updated policy & procedures Staff involved in administraton of medication.	Ongoing	policy and procedures in light of DE Supporting Pupils with Medication Needs



Pupils are not to be given any short term medication e.g. painkillers unless by written parental request No child under 16 to be given aspirin containing medicine unless prescribed Any specific training required by staff on the administration of medication e.g. Diabetes control & EpiPen is arranged with the diabetes and school nurse, or child's GP (the Anaphylaxis Campaign have a video on their website showing how to administer an EpiPen)				
All emergency medicines (asthma inhalers, EpiPens etc.) are readily available and not locked away	Ensure parents remove and dispose of out of date medication.	Principal	Termly	
Any written agreements between the parents and the school must be reviewed periodically to ensure it remains accurate.	Ensure parents receive a copy of agreements.	School Secretary	Ongoing	
As part of the school risk assessment Procedures, pupils' medical needs are catered for on educational visits and school trips.				