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## Administration of Medicines Policy

There is no legal duty that requires staff to administer medication, this is a voluntary role. However, Bridge School Malvern is committed to ensuring that children with medical needs have the same right of access as other children.

### The Role of Parents/Carers

Parents/carers should, wherever possible, administer or supervise the self-administration of medication to their children. This may be by spacing the doses so that they are not required within school hours, or by the parent/carer coming into school at lunch time to administer the medication. However, this might not be practicable and in such a case parents/carers may make a request for medication to be administered to the child at school. If medicine needs to be administered during school time, then a parent or carer must bring it to the school's office and fill in the Administration of Medication Permission form (Appendix 2). For long-term medication needs, parents/carers are to complete the Medical Care Plan (Appendix 5).

Medication should not be brought into school by the child themselves and must be collected from the office by a parent or carer at the end of the school day, as required. See 'Non Prescription Medication', pages 2/3. There are exceptions to this at the BBC, whereby medication may be transported by students with prior parental consent.

### Prescription Medication

Prescription medicines should be administered at home wherever possible, for example medicines that need to be taken three times a day can usually be taken before school, after school and at bedtime. Parents are encouraged to ask their GP whether this is possible. Prescription medicines will only be administered by the school where it would be detrimental to a child's health if it were not done.

Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. See record sheet (Appendix 1) The exception to this is insulin which must still be in date, but will generally be available to store inside an insulin pen or a pump, rather than in its original container. The Bridge will not accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.

In all cases it is necessary for the parent/carer to complete an Administration of Medicine Permission form (Appendix 2). No medication will be given without the parent's written consent.

Staff will complete the Administration of Medication Record form (Appendix 1).

Prescribed medication, other than emergency medication, will be kept in the main office, in a blue lockable cash box. All emergency medicines (asthma inhalers, epi-pens etc.) are to be kept easily accessible in a box clearly labelled with the child's name.

### **Long Term Medical Needs**

It is important that the Bridge has sufficient information regarding the medical condition of any pupil with long term medical needs, parent/carers are to complete a Medical Care Plan (Appendix 5) and go through this with the lead first aider in the office. Appropriate training will be required for the administration of any specialist medication (eg adrenaline via an epi-pen, Buccal midazolam, insulin etc.) Staff are not to administer such medicines until they have been trained to do so. For pupils that have allergies parents/carers will provide a copy of the Allergy Action Plan or the Allergy Action Plan + Epi-pen. This information will be stored on file and easily accessible in the office alongside the Medical Alert List.

### **Controlled Drugs**

Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act. Therefore it is imperative that controlled drugs are strictly managed between the Bridge and parents. Parents/ carers will complete a Medical Care Plan ( Appendix 5) before the child commences. The Bridge will check the government's guidance on the most commonly encountered drugs controlled under the misuse of drugs legislation, at:

<https://www.gov.uk/government/publications/controlled-drugs-list--2/list-of-most-commonly-encountered-drugs-currently-controlled-under-the-misuse-of-drugs-legislation>

Controlled drugs will be stored in a lockable cash box (this is a red box at Hanley and a blue box at the BBC which is labelled clearly in red) and only specific named staff allowed access to it (Hanley: Jo Bruce; BBC: Vicky Gundersen). Each time the drug is administered it must be recorded, including if the child refused to take it.

Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

As with all medicines any unused medication will be recorded as being returned back to the parent when no longer required. If this is not possible it will be returned to the dispensing pharmacist, or the nearest pharmacy. It should not be thrown away.

### **Non Prescription Medication**

Where possible, the school will avoid administering non-prescription medicine. However, we may do so, if requested by the parent, if it will facilitate the child attending school and continuing their learning. This will usually be for a short period only, perhaps to apply a lotion or the administration of paracetamol for toothache or other pain. However, such medicines will only be administered in school where it would be detrimental to a child's health if it were not administered during the day.

A child under 16 will not be given aspirin-containing medicine, unless prescribed by a doctor.

If non-prescription medication is to be administered, then the parent/carer must complete an Occasional Administration of Medication – Permission & Record form, for non-prescription/over the counter medicines (see Appendix 4). This must be handed in to the office, with the medication in its original packaging, when the child arrives at school.

Parents/carers who do not transport their child to school are responsible for making suitable arrangements for the form and medication to be delivered safely. The lead first aiders (Hanley: Jo Bruce [jobruce@bridgeschoolmalvern.org](mailto:jobruce@bridgeschoolmalvern.org) BBC: Vicky Gundersen [vickygundersen@bridgeschoolmalvern.org](mailto:vickygundersen@bridgeschoolmalvern.org)) must be informed by email, before 9am on the morning medication is required to be administered. The pastoral coordinator (Clare Stanton) and the Headteacher (Sue Hornby [suehornby@bridgeschoolmalvern.org](mailto:suehornby@bridgeschoolmalvern.org)) must be copied into this email.

The same procedure will be followed as for prescription medication. The medicine must be provided in its original container, with dosage information on it (in the case of tablets, they must be in their blister pack; the school will not administer 'loose' tablets). The parent's instructions will be checked against the dosage information, and this will not be exceeded. Medication must be within date.

### **Administering Specialist Medicines**

Specialist medicines will only be administered by members of staff who have been trained in the safe administration of medicines such as adrenaline via an epipen, Buccal midazolam and insulin. Staff will not administer such medicines until they have been trained to do so and a Medical Care Plan (Appendix 5) and Allergy Action Plan completed. A list of all staff trained in administration of medicines will be maintained by the school's Administrator, who will also maintain a record of staff trained in specialist medication.

When a member of staff administers medicine, they will check the child's Administration of Medication Permission and Record form against the medication, to ensure that the dose and timing are correct. They will then administer the medicine as required, and record this on the form. For long-term medication, an Administration of Medication Continuation Sheet (Appendix 3) will be used as necessary.

### **Self administration**

It is important that as children get older they are encouraged to take responsibility and manage their own medication. This should be clearly set out in the child's health care plan in agreement with the parents, bearing in mind the safety of other pupils. Self administration will be recorded on the Administration of Medication Permission and Record sheet (Appendix 2) and the administration observed by a member of staff.

Staff must be aware of the need to access inhalers promptly. Children must know where their medicines are stored. Staff will complete a form and send home when an inhaler has been used in school.

### **Refusing medication**

If a child refuses to take medication, staff will not force them to do so but note this in the records and inform parents of the refusal. If the refusal leads to a medical emergency, the Bridge will call the emergency services and inform the parents.

### **Offsite visits**

It is good practice for schools to encourage pupils with medical needs to participate in off site visits. All staff supervising visits must be aware of any medical needs and relevant emergency procedures. Where necessary, individual risk assessments will be completed. A member of staff who is trained to administer any specific medication will accompany the pupil and ensure that the appropriate medication is taken on the visit. Inhalers must be taken for all children who suffer from asthma.

In the case of travel sickness, tablets can be given with written consent from a parent but the child's name, dosage, time of dose and any possible side effects (the child must have had the travel sickness preventative at home before the trip in case of side effects) must all be clearly marked on the container, which must be the original packaging. Parents will need to complete an Administration of Medication Permission and Record form. (Appendix 2)

### **Disposal of medicines**

Medications that are kept in school will be checked termly to ensure that they have not exceeded their expiry date. Parents/carers will be notified of any that need to be replaced. Parents/carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. If parents do not collect all medicines, they will be taken to a local pharmacy for safe disposal.

**Administration of Medicines Policy  
SCHOOL USE ONLY**

**CONFIDENTIAL –**

**Appendix 1 – Record of Medication**

Child's Name	Name of Medication	Quantity provided (max six weeks)	Supplied in original container as dispensed by pharmacist	Prescriber's instructions for administration on packaging	Expiry Date	Consent form completed (Date)	Received and checked by	Date and method of disposal

# Administration of Medicines Policy

## Appendix 2

### Administration of Medication Permission and Record

Name of child: \_\_\_\_\_ Date: \_\_\_\_\_

Details of illness: \_\_\_\_\_

Name of medication: \_\_\_\_\_

Times and dosage of medicine: \_\_\_\_\_

Relevant side effects to be observed if any: \_\_\_\_\_

Medicine to be administered from: \_\_\_\_\_ to: \_\_\_\_\_

#### Parent/Carer

I hereby give permission that the above medication, prescribed by the doctor/dentist for my child \_\_\_\_\_ be administered by school staff. I understand that I must supply Bridge School Malvern with the prescribed medicine in the original container as dispensed and labelled by the pharmacist, and that I will provide no more than a six week supply. I understand that this medication will be returned to a local pharmacy for safe disposal if it is not collected by me when this arrangement ends.

Signature: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Telephone 1: \_\_\_\_\_ Telephone 2: \_\_\_\_\_

Date & time administered	Dose given	Dose taken (yes/no)	Administered by	Observed by

### Appendix 3

## Administration of Medication Permission & Record Continuation Sheet

Sheet no. \_\_\_\_\_

Name of child: \_\_\_\_\_ Date: \_\_\_\_\_

Date & time administered	Dose given	Dose taken (yes/no)	Administered by	Observed by

## Appendix 4

### Occasional Administration of Medication – Permission & Record (non-prescription/over the counter medicines)

Name of child: \_\_\_\_\_ Date: \_\_\_\_\_

Details of illness: \_\_\_\_\_

Medicine: \_\_\_\_\_

Times and dosage of medicine: \_\_\_\_\_

Relevant side effects to be observed if any: \_\_\_\_\_

How and when to be administered: \_\_\_\_\_

#### Parent/Carer

I hereby give permission for the above medication to be administered by school staff to my child \_\_\_\_\_. I understand that I must supply Bridge School Malvern with the medicine in the original container and that I will make arrangements to collect it. I understand that over the counter medicines, supplied for occasional use, will be disposed of by the school if not collected on the agreed date.

Signature: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Telephone 1: \_\_\_\_\_ Telephone 2: \_\_\_\_\_

Date	Time given	Dose given	Staff administering	Observed by

Date for medicine to be taken home \_\_\_\_\_

To be collected by (responsible adult) \_\_\_\_\_

Signed by (parent/carers) \_\_\_\_\_ Date \_\_\_\_\_



## Appendix 5

### Medical Care Plan

Child's name	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	

### Family Contact Information

Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

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**G.P.**

Name of GP	
GP Surgery and address	
Phone no.	

**Hospital/Clinic**

Name of professional	
Address	
Phone no.	

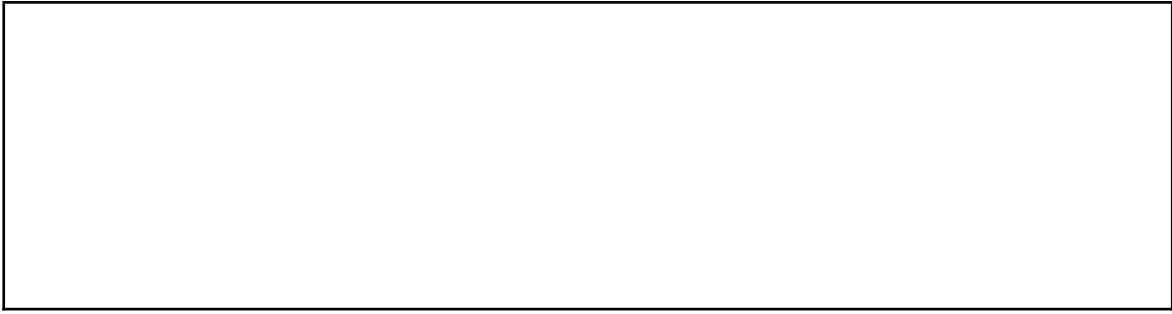
Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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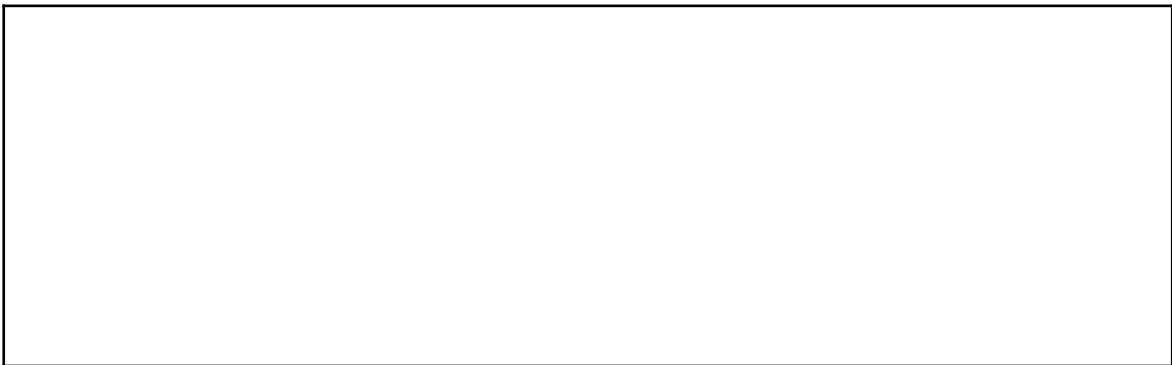
Describe what constitutes an emergency, and the action to take if this occurs

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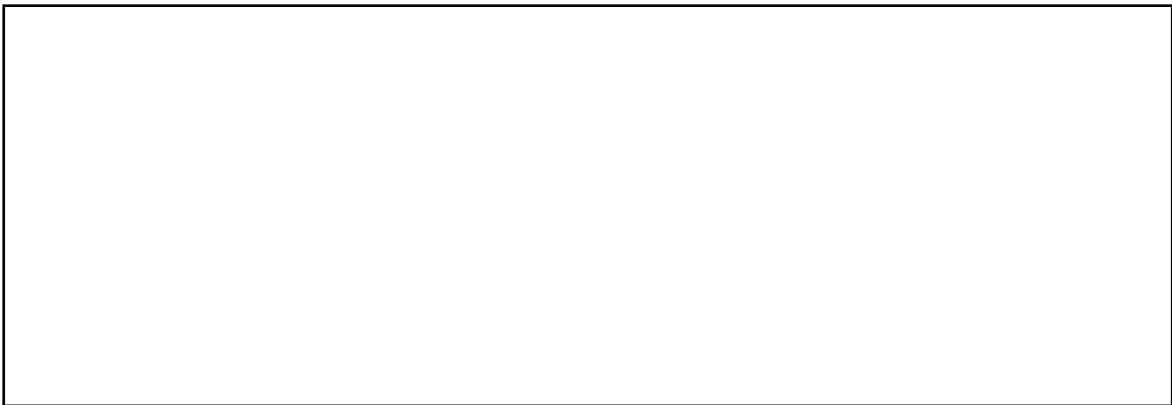
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision



Daily care requirements (*eg before sport, dietary requirements*)



Arrangements for school visits/trips



Other information including incident history due to medical condition (*eg asthma attacks, allergic reactions and epilepsy seizures*)

Who is responsible for implementing this care plan, providing support and in an emergency in school?

Staff training needed/undertaken – who, what, when?

**Parents Agreement:**

- I agree that the medical information contained in this form may be shared with individuals involved with the care and education of \_\_\_\_\_.  
(Child's name)
- I will provide new spare equipment in the original named container as needed to be kept in the school office at all times.
- I will be responsible for providing medication to the office regularly in the original named container.
- I agree to keep the school informed of any medical changes to my child's health and medical condition, significant incidents, any changes to their medication and update this care plan if needed.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Parent/carer

A copy of this care plan will be kept in the pupil's records and in the office for reference and emergencies. This plan will be reviewed annually as part of the EHCP Annual Review.