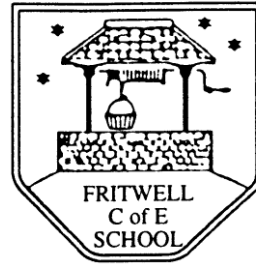


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Fritwell Church of England Primary School

Medicines Policy

“Growing and learning together with God.”

Children at Fritwell Church of England School are confident and inspired. They achieve personal success and show love and respect for all.

Introduction

Parents have the prime responsibility for ensuring a child's health and for deciding whether they are fit to attend school. Parents should also provide all necessary information about their child's medical needs to the school.

The school follows the guidelines as detailed in the **DfE April 2014** document – **Supporting Pupils At School With Medical Conditions**. All proformas detailed in Appendix A are based upon guidelines within the above document.

Key points from the guidelines are:

- Pupils at school with 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 in schools 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- This policy may be superseded by a child's EHC plan or Individual Care Plan, or may be used in conjunction with them.

Staff Duties

School teachers 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 train specific, named staff for the purpose of the administration of medicines. 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 attend.

Process for the Administration of Medicines in School – short term medical needs

Medicines should normally be administered at home and only taken into school when absolutely necessary (where it would be detrimental to the child's health, or would greatly impact on a child's school attendance, if the medicine were not taken during the school day).

The school will only accept:

- Medicines prescribed by a medical practitioner
- 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.

The school will not normally accept or administer:

- Medicines that are non-prescription. If advised to use paracetamol or ibuprofen by a doctor, please complete the appropriate forms.
- Throat sweets, as they could cause a hazard to the child or to another child if found and swallowed.

Under no circumstances should a parent send a child to school with any medicines or throat sweets without informing the school and completing the appropriate forms.

Storage and administration of medicines

On accepting medication, the parent must sign a form disclosing all details and giving permission for the medication to be administered by a named person (the named person should be in agreement that they are willing to administer the medicine).

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

When administering, the named adult must complete a record (Appendix A: Form B) showing the date and time and details/dosage of the medication.

Parents are welcome to come into school to administer medicines themselves.

A record of all medicines administered to children is kept and is made available to parents and medical practitioners upon request or if necessary in an emergency. (Appendix A: Form D)



Process for the Administration of Medicines in School – 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 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 parent's 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 must ensure that named staff are trained to administer or give the level of care required by the details of the care plan.

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.

There will also be regular training for all staff on more generalised needs if required eg asthma awareness and Epipen training, diabetes and epilepsy. The school is supported by the School Nurse who provides staff with advice and any relevant training on request. A list of staff who are trained to administer Epipens is held in the school office and also listed on the staffroom noticeboard when required. A person within the school is nominated to ensure all training for the use of Epipens is up to date. Epipens and inhalers are kept in classroom cupboards.

A record of all medicines administered to individual children with long term medical needs is kept and is made available to parents and medical practitioners upon request or if necessary in an emergency. (Appendix A: Form C)

Process for the Administration of Medicines during residential visits– all medical needs.

For the purpose of residential visits, there will be a 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 they are fully aware of all medical requirements.

In the case of higher levels of care eg intimate care, the named member 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 and if necessary an Individual Healthcare Plan will be put in place.

Approved date: October 2017

Signed:

Review: October 2018





