



# East Bergholt

## CEVC Primary School

'I have come that they might have life, and have it to the full' John 10:10

### Medical Policy

## Policy for the administration and safe keeping of medication

**2025-26**

Prepared by:	Clare Sampson Headteacher
Approved by:	Resources Committee
Signature of Chair of Governors:	Ian Thoroughgood
Status & review cycle	Non-statutory Yearly Review
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**“This School is committed to Safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share that commitment.”**

At East Bergholt CE VC Primary School we take the well-being and welfare of the children seriously and we work hard to ensure children stay safe and well. Parents and Carers are asked to support the school with this policy, which aims to protect all our children. Please do not send children to school if they are unwell.

This policy defines the role of School staff and Parents when dealing with the administration of medicines on a temporary or long term basis.

### **Administration of non-prescription medication**

School Office staff will endeavour to administer medication provided by the parent on completion of the required form. It is expected that parents will collect any medication provided when it is no longer needed.

### **Administration of prescription medication**

School Office staff will endeavour to administer prescribed medication provided by the parent on completion of the required form. Medication should be collected at the end of each day.

If medicines are prescribed up to 3 times a day, the expectation is that parents or carers will give these medicines outside of school hours.

If medicines are prescribed 4 times a day, the school strongly encourages parents or carers to make arrangements to come into school to administer these medicines themselves. Parents and carers will definitely be required to administer the first 24 hour dose of any new prescription, e.g. antibiotics.

**Please consider whether your child is well enough to be at school if they require medicine 4 times a day.**

If the school agrees to assist parents and carers to administer a medicine to their child, on a temporary basis, the medicine must be provided in its original container and must have been dispensed by a pharmacist and must have a label showing the full name of the child, date of Birth and dosage instructions.

### **Asthma Inhalers and Epipen**

It is the responsibility of parents to ensure that their child has the necessary inhaler/spacer in school when needed and that it is in date. School Office Staff and classroom based staff will support children with asthma inhalers as necessary. Medication will be kept in the classroom in labelled boxes for each year group. These boxes will go outside at playtimes and lunchtimes (amendment to policy made on 7<sup>th</sup> September 2023).

Parents will ensure that if their child needs an Epipen for the treatment of allergic reactions then equipment will be provided to the school in a named bag and be reviewed from time to time to ensure it is in date.

School Staff will receive training in the use of Epipens and the procedure for use will be displayed on the staffroom notice board.

### **Self Management**

Children are encouraged to take responsibility for their own medicine from an early age. A good example of this is children using their own asthma reliever. Parents/carers must still complete a medicine record form, noting that the child will self-administer and sign the form. The school will store the medicine in a labelled box in the school office or in the fridge as necessary.

### **Refusing Medicine**

When a child refuses medicine, the parent or carer will be informed the same day.

### **Record Keeping**

All medicine administered to children during the school day will be overseen by two members of staff where possible who will initial the record.

### Storage and disposal of medicine

The school will store medicine in a cabinet in the office or fridge, as necessary.

### Emergency treatment and administration of medication

The school will call for medical assistance and the parent or named emergency contact will be notified. The Governing Body will support any member of staff who assists with medicine in a reasonable good faith attempt to prevent or manage an emergency situation, regardless of outcome.

Within school all staff will be made aware of the RED CARD procedure by the Headteacher. If assistance is required for any child whether there is a healthcare plan in place or not then another child may be sent to the school office to call for staff to attend the emergency. If the child has a healthcare plan then staff should follow the instructions it contains.

### Communication of medical needs to all staff and supply staff

The school office staff will produce a report for each class teacher and the kitchen staff detailing all children with medical and dietary needs. This information will be kept with the register and be drawn to the attention of supply staff as necessary. This will be based on information provided by the parent when completing the admission form or data sheet where children are already on roll at our school. It is the parents' responsibility to ensure that the schools is told of any changes to the information provided as soon as possible.

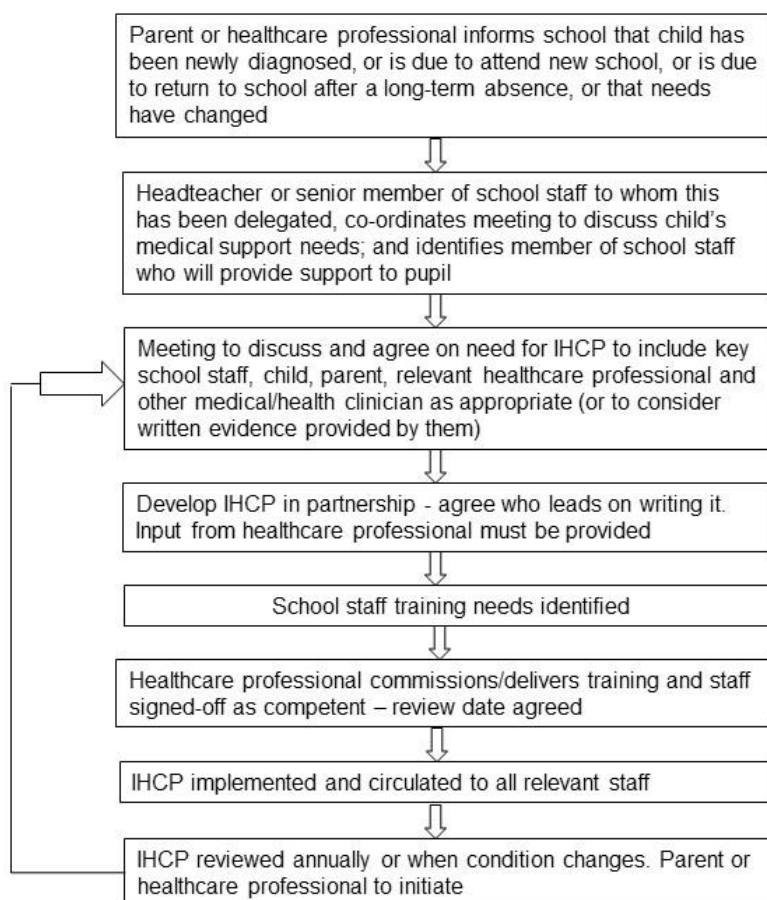
The school will issue to parents annually a copy of the information held for their child (data sheet) and will ask parents to update as necessary.

### Longer term and more complex needs

Where the school receives notification that a pupil has a medical condition then the Headteacher shall implement the following procedure.

### Information to be considered for inclusion on IHP

- the medical condition, its triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues eg crowded corridors, travel time between lessons;
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;



- the level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, eg risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

## **Roles and Responsibilities**

### **Governing Body**

The Governing Body will make arrangements to ensure that all children with medical conditions in school are supported and that a policy for supporting these pupils is developed and implemented. The Governing body will ensure through the Governors responsible for Health and Safety that the policy is reviewed annually and that procedures set out therein are monitored.

### **Headteacher**

In conjunction with the Governing body the Headteacher will ensure that this policy is developed and implemented effectively with partners. They should ensure that all staff are informed as appropriate and that the required training is given. They should also ensure that staff involved are insured and know that they are insured to support the pupil's needs.

### **School Staff**

Any member of staff may be asked to administer medication or support a child's medical needs but they cannot be required to do so. Teaching staff should take into account the needs of pupils with medical conditions that they teach. All school staff should receive training and achieve the necessary level of competence before taking on responsibility for a child with medical needs and all staff should know what to do and how to respond when they become aware that a pupil with a medical condition needs help.

### **School Nursing Teams**

The school will liaise with Suffolk County Council's services for children with medical and health needs and the Specialist Learning Support Service where appropriate, to ensure pupils receive consistent support. The school nurse will notify the school when a pupil has been identified with a medical need and provide advice on those needs. They are also able to provide a valuable liaison between health professionals.

### **Other Healthcare professionals including GPs etc.**

Will notify school nursing team when a pupil is identified with a medical condition. May provide support and advice on developing Healthcare plans and specialist teams may be able to provide support for children with particular conditions e.g. asthma. diabetes or epilepsy.

### **Pupils**

The pupil should be fully involved with discussions about their medical condition.

## Parents

Parents should provide the school with sufficient and up to date information about their child's needs. Parents should be fully involved in the development of Healthcare plans and the support their child receives at school. They should ensure that they or another nominated adult are contactable by the school at any time.

## Staff training and support

All staff asked to support a pupil with a medical need will receive appropriate training as identified in the pupil's Individual Healthcare Plan. This may be arranged by the school or by lead healthcare professionals with specialist knowledge.

### **Staff must not give prescription medication or undertake healthcare procedures without appropriate training.**

In most cases other than the most complex or severe written instructions from the parent using appendix A as necessary or those on the medication container dispensed by the pharmacist may be considered sufficient although it is for the school to decide having regard to each situation as it arises and having regard to any relevant healthcare plan.

A first aid certificate is not sufficient. Healthcare professionals can provide confirmation of the proficiency of staff in a medical procedure or providing medication.

Whole staff training will be provided as necessary and all staff will be informed by the Headteacher of the contents of this policy and their role in implementing it.

The advice of parents should be sought but family members should not be the only source of training for staff. Managing their own medical needs

The pupil will be encouraged with the knowledge and agreement of the parents to manage their own health needs as far as it is practicable. If possible they will carry medication and equipment with them. If a child refuses to take medication or carry out a necessary procedure then staff should seek assistance from the parents immediately.

## Managing medicines on school premises

The following procedures should be followed

- medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- no child under 16 should be given prescription or non-prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality. Schools should set out the circumstances in which non-prescription medicines may be administered
- a child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, eg for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed
- where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- schools should only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container
- all medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and

adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, eg on school trips

- a child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a nonportable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in school
- school staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted
- when no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps

### **Day trips, Residential visits and sporting activities**

Every effort will be made in consultation with parents and healthcare professionals to allow any pupil with medical needs to participate fully in school trips and sporting activities. A risk assessment will be carried out to take account of any reasonable adjustments that may be needed.

### **Complaints**

Where a pupil's medical condition prevents regular attendance, the school will work with Suffolk County Council to ensure suitable education is provided in line with the LA's policy on education for children with health needs. Reintegration plans will be developed to support pupils returning to school after extended absence.

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

This policy will be reviewed annually by the Headteacher and Governing Body, or sooner if statutory guidance or Suffolk LA procedures change. It will be published on the school website and available to all parents, staff, and visitors.

The school holds emergency asthma inhalers in accordance with the DfE guidance 'Guidance on the use of emergency salbutamol inhalers in schools' (2014).