



**St Joseph**  
Catholic Multi Academy Trust

## Administering Medication Policy

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Pamela Di Scala; Amy Fidler; Amy Richards	Board	05.02.24	1.1	January 2025

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Administering Medication Policy	

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For the purpose of this policy the following representatives need to sign off this document:	
Role & Responsibilities	Name
Head of Estates	Pamela Di Scala
SJCMAT Trust Board	Ann Connor OBE (Trust Board Chair)

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## **This policy must be read in conjunction with linked policy - SJCMAT Supporting Pupils with Medical Conditions**

### **1. Aims**

This policy aims to ensure that:

- Pupils, staff and parents understand how schools within St Joseph Multi Academy Trust will support pupils with medical conditions and the administering of Medication when at school
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities
- The Trust board will implement this policy by being assured that: Sufficient staff are suitably trained Staff are made aware of pupil's condition, where appropriate and how to administer medication if required
- There are cover arrangements to ensure someone is always available to support pupils and the administering of medication
- Supply teachers are provided with appropriate information about the policy and relevant pupils
- Individual healthcare plans are developed and monitored (IHPs) are developed and include administration of medication if required

### **2. Legislation and statutory responsibilities**

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Equality Act 2010
- Children and Families Act 2014
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2017) 'Using emergency adrenaline auto-injectors in schools'
- This policy operates in conjunction with the following school policies:
- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Records Management Policy
- Allergen and Anaphylaxis Policy
- Complaints Procedures Policy

### 3. Roles, responsibilities and Training

#### 3.1 The Trust board

The Trust board has overall responsibility for this policy. Implementation of this policy is delegated to the individual schools in St Joseph Multi Academy Trust under the direction of the headteacher who will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

#### 3.2 The Headteacher

The Headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient (at least two) members of trained staff available to implement this policy
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date. (*Refer to Annex A*)

#### 3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines. Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so. Suitable training includes: [Educare training, iHASCO](#).

#### 3.4 Training for administering Adrenaline Auto Injectors (AAIs)

The school will arrange specialist training for staff on a termly basis where a pupil in the school has been diagnosed as being at risk of anaphylaxis. Designated staff members with suitable training and confidence in their ability to use AAIs will be appointed to administer this medication. As part of their training, all staff members will be made aware of:

- How to recognise the signs and symptoms of severe allergic reactions and anaphylaxis.
- Where to find AAIs in the case of an emergency.
- [If the setting encompasses a wide age range and thus has more than one dosage of AAI] How the dosage correlates with the age of the pupil.
- How to respond appropriately to a request for help from another member of staff.
- How to recognise when emergency action is necessary.
- Who the designated staff members for administering AAIs are.
- How to administer an AAI safely and effectively in the event that there is a delay in response from the designated staff members.
- How to make appropriate records of allergic reactions.

There will be a sufficient number of staff who are trained in and consent to administering AAI's on site at all times.

### 3.5 Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs and any required medication to be administered when at school, through an '*Administering Medication Parental Consent Form*'
- Be responsible for ensuring the school has up-to-date contact details in case of an emergency
- Parents will be advised to keep medication provided to the school in the original packaging, complete with instructions, as far as possible, particularly for liquid medications where transfer from the original bottle would result in the loss of some of the medication on the inside of the bottle. This does not apply to insulin, which can be stored in an insulin pen.

### 3.6 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should know where their medication is kept at school and how to access if required.

### 3.7 School nurses and other healthcare professionals

The school nursing service may notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Healthcare professionals, such as GPs and pediatricians, will liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

## 4. Equal Opportunities

All schools within St Joseph Multi Academy Trust are clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The schools will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents/carers and any relevant healthcare professionals will be consulted.

All risk assessments for trips will be held on the Evolve system

## 5. Being notified that a child has a medical illness requiring medication

When a school is notified that a pupil has a medical condition that requires administration of medication the Trust's policy for supporting children with medical conditions will be referenced if the condition is a common childhood illness, the process outlined below will be followed

<b>Disease/Illness</b>	<b>Minimum Exclusion Period</b>
Antibiotics prescribed	First 2 days at home
Temperature	If sent home, child must be off for 24 hours
Vomiting	Kept at home for 48 hours from last episode of vomiting
Conjunctivitis	Kept at home for 2 days, thereafter until eyes stop weeping
Diarrhoea	Kept at home for 48 hours from last episode of diarrhoea
Chickenpox	7 days from the appearance of the rash
Gastro-enteritis, food poisoning, salmonella and dysentery	Until authorised by the GP
Infective Hepatitis	7 days from the onset of jaundice
Measles	4 days from the appearance of the rash
Meningococcal Infection	Until recovery from the illness
Mumps	Until the swelling has subsided and in no case less than 7 days from the onset of the illness
Whooping Cough	21 days from the onset of cough
Poliomyelitis	Until declared free from the infection by the District Community Physician
German Measles	7 days from the appearance of the rash
Scarlet Fever/Streptococca/Infection of the throat	Child can return 24 hours after commencing appropriate treatment
Tuberculosis	Until declared free from infection by the District Community Physician
Typhoid Fever	Until declared free from infection by the District Community Physician
Impetigo	Until the skin has healed
Lice	Until appropriate treatment has been given

Plantar Warts	No exclusion. Should be treated and covered
Ringworm of scalp	Ringworm of scalp
Ringworm of body	Seldom necessary to exclude provided treatment is being given
Scabies	Need not be excluded, once appropriate treatment has been given

For pupils with chronic or long-term conditions and disabilities, an IHP will be developed in liaison with the pupil, their parent, the headteacher, the SENCO and any relevant medical professionals. When deciding what information should be recorded on an IHP, the following will be considered:

- The medical condition and its triggers, signs, symptoms and treatments
- The pupil's resulting needs, such as medication, including the correct dosage and possible side effects, medical equipment, and dietary requirements
- The specific support needed for the pupil's educational, social and emotional needs
- The level of support needed and whether the pupil will be able to take responsibility for their own health needs
- The type of provision and training that is required, including whether staff can be expected to fulfil the support necessary as part of their role
- Which staff members need to be aware of the pupil's condition
- Arrangements for receiving parental consent to administer medication
- Separate arrangements which may be required for out-of-school trips and external activities
- Which staff member can fulfil the role of being a designated, entrusted individual to whom confidentiality issues are raised
- What to do in an emergency, including whom to contact and contingency arrangements
- What is defined as an emergency, including the signs and symptoms that staff members should look out for

The Headteacher will ensure that IHPs are reviewed at least annually. IHPs will be routinely monitored throughout the year by a designated staff member.

## 6. Storing Medication

The school will ensure that all medications are kept appropriately, according to the product instructions, and are securely stored. Medication that may be required in emergency circumstances, e.g. asthma inhalers and AAI, will be stored in a way that allows it to be readily accessible to pupils who may need it and can self-administer, and staff members who will need to administer them in emergency situations. All other medication will be stored in a place inaccessible to pupils, e.g. a locked cupboard.

The school will ensure that pupils know where their medication is at all times and are able to access them immediately, e.g. by ensuring that the identities of any key holders to the storage facilities are known by these pupils.

Medication stored in the school will be:



- Kept in the original container alongside the instructions for use.
- Clearly labelled with:
  - *The pupil's name.*
  - *The name of the medication.*
  - *The correct dosage.*
  - *The frequency of administration.*
  - *Any likely side effects.*
  - *The expiry date.*
- Stored alongside the accompanying administering medication parental consent form.

Medication that does not meet the above criteria will not be administered.

## **7. Administering medication**

Medication will only be administered at school if it would be detrimental to the pupil not to do so. Only suitably qualified members of staff will administer controlled drugs. Staff will check the expiry date and maximum dosage of the medication being administered to the pupil each time it is administered, as well as when the previous dose was taken.

Medication will be administered in a private, comfortable environment and, as far as possible, in the same room as the medication is stored; this will normally be the school nurse's office. The room will be equipped with the following provisions:

- Arrangements for increased privacy where intimate contact is necessary
- Facilities to enable staff members to wash their hands before and after administering medication, and to clean any equipment before and after use if necessary
- Available PPE for use where necessary

Before administering medication, the responsible member of staff should check:

- The pupil's identity.
- That the school possesses written consent from a parent.
- That the medication name, dosage and instructions for use match the details on the consent form.

- That the name on the medication label is the name of the pupil being given the medication.
- That the medication to be given is within its expiry date.
- That the pupil has not already been given the medication within the accepted frequency of dosage.

If there are any concerns surrounding giving medication to a pupil, the medication will not be administered and the school will consult with the pupil's parent or a healthcare professional, documenting any action taken.

If a pupil cannot receive medication in the method supplied, e.g. a capsule cannot be swallowed, written instructions on how to administer the medication must be provided by the pupil's parent, following advice from a healthcare professional.

Where appropriate, pupils will be encouraged to self-administer under the supervision of a staff member, provided that parental consent for this has been obtained. If a pupil refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their IHPs, and parents will be informed so that alternative options can be considered.

The school will not be held responsible for any side effects that occur when medication is taken correctly.

Written records will be kept of all medication administered to pupils, including the date and time that medication was administered and the name of the staff member responsible; additional verification and a countersignature must be recorded. Records will be stored in accordance with the Records Management Policy.

## **8. Monitoring - Across the Trust Estate**

This policy will be reviewed annually.

At every review, the policy will be approved by the Trust Board.

## **9. Links with other policies and documents**

This administering medication policy links to the following policies and documents:

- SJCMAT First Aid Policy
- SJCMAT Intimate Care Policy
- SJCMAT Supporting Pupils with Medical Conditions

## **10. Annex A**

- Managing Medical Needs and First Aid on Arbor

## 11. Sign off

<b>Presented &amp; Approved by Trust Board</b>	05.02.24
<b>Signed by Chair of Trust Board</b>	<i>A Connor</i>
<b>Name of Chair of Trust Board</b>	Ann Connor, OBE
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