



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

**Title: Storage and Administering of Medicines
Method Statement & Policy 2018-19**

DOCUMENT MANAGEMENT

This document was **adopted** at the PAW Committee Meeting on 24th January 2018
This document is subject to review in September 2019

Document Control

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FRANCHE COMMUNITY PRIMARY SCHOOL & TOTS@FRANCHE Policies & Procedures

For clarity throughout this policy the words 'Franche Community Primary School', 'school' and/or 'setting' refer to all childcare services provided on the Franche Community Primary School site. Including: TOTS@Franche, Holiday Club and Breakfast/After School Club. SLT refers to all member of the school senior leadership team and the manager of TOTS@Franche.

Introduction

Franche Community Primary School has set out a clear **medicines policy** that is understood and accepted by staff, parents and pupils and provides a sound basis for ensuring the proper and safe administration of both prescribed and 'Over the Counter' (OTC) medications.

Over the counter medications (non-prescribed)

- The administration of over the counter medication is at the discretion of SLT /the TOTS manager.
- These are kept securely in a cupboard, in a secure storage room.
- They are issued to pupils in accordance with the instructions and agreement (?) of the person with parental responsibility.
- Form 2 must be completed by someone with parental responsibility and kept with the medicine before the medicine can be administered.
- Where parental responsibility may be challenging to obtain, consent may be given by using form 5.
- With the exception of the Universal Inhaler (see separate policy) and emergency liquid paracetamol (see below) stocks of over the counter medications must not be held.
- In the event of an emergency the school/setting keeps paracetamol infant suspension 2 months + that can be administered to children. Please see the section on administration in the event of an emergency. The school only holds 2 months + paracetamol infant suspension on site in order to avoid any confusion as to which strength should be administered.

Comment [SB1]: Does this mean Parental Responsibility or Parental Approval?

Prescribed medications

- These are only to be administered to the pupil for whom they have been prescribed;
- They must stay in their original childproof container and box (where relevant);
- The original dispensing label must be in place and must not be altered;



FRANCHE COMMUNITY PRIMARY SCHOOL & TOTS@FRANCHE Policies & Procedures

- In most instances, where medication is only required to be administered three times a day, this can be done around the normal school day. It should, therefore, **not** be administered by school staff except in exceptional circumstances, or where the child is attending the setting for an extended day.
- Medication for use in urgent situations, for example antibiotics, must be prescribed individually for each pupil as and when required;
- With the exception of the Universal Inhaler (see separate policy) stocks of prescription medicines must not be held.
- The relevant forms must be completed by someone with parental responsibility and kept with the medicine before the medicine can be administered.
 - Long term conditions/care plan (inhalers/epi-pens etc) – **Form 1**
 - Short term conditions (anti-biotics/eye drops etc) – **Form 2**
 - In all cases, if the medicine has never been taken before, the first dose must be given at home 24 hours prior to administration, to monitor for any allergic reaction.
- In ALL cases, **form 3** must be completed by a member of SLT to ensure permission to administer the medicine has been granted.
- In all cases where medication has been administered, **Form 4** must be completed and signed by the person administering; a witness and the parent, at the end of each day where medication has been given.

Self-administration of medication

- There is an agreement that the pupils do not self-medicate at Franche Community Primary School unless it is in the form of an inhaler and staff are made aware that they are taking it.

Administration of prescribed and non-prescribed medication by unqualified staff

- School staff will only administer non-prescribed medication where failure to do so would have a detrimental impact on the well-being of the child and where the child is not presenting as unwell.
- There are designated, appropriately trained first aiders for the administration and management of medicines in school;
- There is a written protocol for the administration of prescribed medication which outlines the following: -
 1. Checking the identity of the pupil;
 2. Checking that the administration sheet matches the label on the drug;



FRANCHE COMMUNITY PRIMARY SCHOOL & TOTS@FRANCHE Policies & Procedures

3. Immediate initialling of the administration sheet;
 4. Recording a pupil's refusal to take medication.
 5. Recording all the required information of Form 4 as a record of the administration of the medicine.
- Training is required (where relevant) for staff who administer medication, highlighting issues such as indications, contra-indications, side-effects, dosage, precautions regarding administration, clear reasons for not giving the drug and duration of treatment before nursing or medical advice is sought;
 - The protocols are agreed, understood and accepted by staff, and known to pupils and parents/carers.

Administration to save a life

- In extreme emergencies e.g. an anaphylactic reaction, the administration of adrenaline by Epi-pen will be necessary. This will be administered by an appropriately trained member of staff.

Administration of medication in the event of an emergency

Franche Community Primary School keeps oral paracetamol suspension onsite that can be used in an emergency. There are clear protocols in place that have been agreed by Governors and then understood and accepted by staff and parents/carers.

School staff will only administer the school's liquid paracetamol in the event of a high temperature that is having a detrimental impact on the well-being of the child; and after agreed measures have been taken but have not provided adequate relief of symptoms. Please see the section entitled High Temperature.

Oral paracetamol suspension will only be administered as per the administration policy and in line with age related guidelines. School medication will only be administered in the presence of a member of SLT/manager

High temperature

As a general rule, a temperature of **38C (100.4F)** or above is a fever.

Urgent medical advice should be sought the child is three to six months old and has a temperature of 39C (102F) or higher.



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Should a child become unwell during the school day and develop a high temperature, the following control measures and steps should be taken:

1. Temperature is identified as higher than normal, using the school's digital thermometer. The temperature should be recorded on the temperature recording sheet (**Form 6**).
2. Remove **layers of clothing** so the child can lose heat more easily through the skin. Where possible, only leave one light layer of clothing. If he or she begins shivering, provide a light blanket until warm again. Remember to keep the child appropriately dressed for their surroundings e.g. if outdoors.
3. Provide the child with **plenty of water** to drink to keep them hydrated.
4. **Open a window** if it is particularly warm indoors.
5. After fifteen minutes re-take the child's temperature and record it on the sheet. If the child's temperature has increased, or not reduced, inform a member of SLT/management and **phone the child's parent** for them to be collected. Ask the parent approximately how long it will take for them or an emergency contact to get to school.
6. **Continue to monitor** the child's temperature at fifteen minute intervals and record the temperature on the sheet **until the parent/carer arrives**.

If the child is unable to be collected within 30 minutes of the call:

7. Check the child's application form for **written consent** to administer oral paracetamol suspension in an emergency. Obtain additional **verbal consent** over the phone from the parent/carer to administer the paracetamol in case the child becomes **significantly unwell** before collection. Check whether the child has been given any **medication prior to arriving at the setting**.
8. **If the parent/carer has not signed the admission form to consent to medication being given in an emergency staff must not give medication to the child.** In this situation the emergency services should be contacted if the temperature continues to rise.
9. Record the time of the call to the parent/carer and their name (Form 6).
10. If the child's temperature continues to **increase** and they become **distressed** the decision can be made by SLT to **administer oral paracetamol suspension** in order to control this and provide relief until the parent/carer arrives.
11. The medication administered should be recorded on a medication form and this should be signed by the parent/carer upon collection.
12. If the child begins to develop other symptoms, such as a **rash, unresponsiveness, lethargy, limpness, sore throat, blue lips or skin, cough, ear or neck pain, trouble breathing, vomiting, and/or diarrhoea**, the SLT/manager should be notified and the emergency services should be contacted using **999**. Parents/carers must be informed.



FRANCHE COMMUNITY PRIMARY SCHOOL & TOTS@FRANCHE Policies & Procedures

13. If the emergency services decide to attend the setting the child's admissions pack and signed temperature record sheet must be available.

Recording and monitoring of records

- Records must be legible and properly completed by the first aider as soon as possible after the administering of the medication. They must provide a complete audit trail for all medications.

ALL medicines brought into school should be recorded for each pupil, including over the counter and complementary medicines. This includes the use of Strepisils and other medicated throat sweets.

The Medicine Administration Record (Form 1 long term or 2 Short term) Chart / Book should include:

1. Name of pupil;
2. Date of receipt;
3. Name, strength and dosage of drug;
4. Quantity of the drug;
5. Signature of the member of staff receiving the drug.
6. Record of the date and time the medicine was administered
7. A signature of a witness who has checked the relevant paperwork
8. Time of the last dose given
9. Parent signature

This document is completed for all drugs administered (including homely remedies) and is retained for 15 years after the last entry.

The administration of over the counter medication is at the discretion of SLT /the TOTS manager and this is reviewed on a case by case basis.

School staff will only administer non-prescribed medication where failure to do so would have a detrimental impact on the well-being of the child and where the child is not presenting as unwell.

Controlled drugs

Franche Community Primary School practice dictates that the storage of controlled drugs should comply with the *Misuse of Drugs (Safe Custody) Regulation (1973)* as amended.

The school will provide:



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

1. A secure cupboard or room should be used which contains nothing else;
2. Any medications needing refrigeration are kept in an air tight container on a low shelf;
3. Separate records for the administration of controlled drugs should be made each time the drug is administered and kept with the child's file in the school office.
4. The balance remaining should be checked at each administration and monthly.

Procedure when Contacting the Emergency Services

See separate policy – 'School Emergency action plan for First Aid emergencies'.



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

**Form 1 - Health Care Plan
Long Term medical conditions at school (3 pages)**

ONLY TO BE COMPLETED BY SOMEONE WITH PARENTAL RESPONSIBILITY

Name of School / Setting Franche Community Primary School

Child's name -----

Group /Class / Form ----- Date of Birth: -----

Child's Address -----

Medical Diagnosis or Condition -----

Date plan drawn up -----

Review date -----

Name and strength of medicine -----

Expiry date ----- Dose to be given -----

When to be given -----

Any other instructions -----

Number of tablets / quantity to be
given to school / setting -----

Note: Medicine must be in the original container as dispensed by the pharmacy

Daytime phone no of parent or adult contact -----

Name and phone no. of GP -----

The above information is, to the best of my knowledge, accurate at the time of writing and I give my consent to school / setting staff administering medicine in accordance with the school / setting policy. I will inform the school setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent/Carer's signature: ----- **Print name:** -----

If more than one medicine is to be given a separate form should be completed for each one



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

**Form 1 –continued
CONTACT INFORMATION**

Family Contact 1

Family Contact 2

Name		Name	
Phone No: (work)		Phone No: (work)	
(home)		(home)	
(mobile)		(mobile)	

Clinic/Hospital Contact

GP

Name ----- Name -----

Phone No ----- Phone No -----

Describe medical needs and give details of child's symptoms:

Daily care requirements (e.g. before sport /at lunchtime):

Describe what constitutes an emergency for the child, any potential triggers and the action to be taken if this occurs:



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

Form 1 –continued

Follow up care:

Who is responsible in an Emergency: (State if different for off-site activities)

Form copied to: -----



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

Short term Medical Form
Form 2 - Parental agreement for school / setting to administer medicine

ONLY TO BE COMPLETED BY SOMEONE WITH PARENTAL RESPONSIBILITY

Please note all medication must be collected and signed for at the end of each school day. Failure to do so will mean that staff are no longer able to administer this medication to your child.

Name of School / Setting Franche Community Primary School

Date -----

Child's name -----

Group /Class / Form ----- Date of Birth: -----

Medical Diagnosis/reason for medication -----

Start date of medication: ----- End date of medication/course: -----

Name and strength of medicine -----

Expiry date: ----- Dose to be given: -----

When to be given -----

Any other instructions -----

Number of tablets / quantity to be given to school / setting -----

Note: Medicine must be in the original container as dispensed by the pharmacy

Daytime phone no of parent or adult contact -----

Name and phone no. of GP -----

The above information is, to the best of my knowledge, accurate at the time of writing and I give my consent to school / setting staff administering medicine in accordance with the school / setting policy. I will inform the school setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent/Carer's signature: ----- **Print name:** -----



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

If more than one medicine is to be given a separate form should be completed for each one



**FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures**

**Form 3 - Confirmation of a member of SLT's agreement to administer
medicine**

Name of School / Setting: Franche Community Primary School

It is agreed that ----- (name of child) will receive
----- (quantity and name of medicine)
every ----- at ----- (time medicine
to be administered e.g. Lunchtime or afternoon break).

The above named child will to be given / supervised whilst he / she takes their medicine
by ----- (name of member of staff).

This arrangement will continue until ----- (either end date of
course of medicine or until instructed by parents/carers).

Date: -----

Signed: -----

Position: -----



FRANCHE COMMUNITY PRIMARY SCHOOL
& TOTS@FRANCHE
Policies & Procedures

Form 4 - Record of all medicines administered in school / setting

Please note all medication must be collected and signed for at the end of each school day. Failure to do so will mean that staff are no longer able to administer this medication to your child.

<i>Child's name</i>	<i>Date</i>	<i>Name of medicine</i>	<i>Time of last dose</i>	<i>Time required</i>	<i>Time & Dose given</i>	<i>Notes</i>	<i>Staff Print</i>	<i>Staff sign</i>	<i>Witness (Print & Sign)</i>	<i>Parent signature</i>



FORM 5 -Parental Consent for medications to be administered.

This form is to be completed by a person with Parental Responsibility to authorise a person without Parental Responsibility to complete and sign medical consent forms.

Please note all medication must be collected and signed for at the end of each school day. Failure to do so will mean that staff are no longer able to administer this medication to your child.

I (print name) relationship to child give consent for the following people to complete a long/short term agreement for my child to be administered medication should I not be available to do so myself.

Name	Relationship to child	Address	Contact number

If any of the above information change please let school know as soon as possible to enable us to keep our records up to date.



Form 6- Emergency Temperature Monitoring Sheet

Name of child	DOB
Date	Name of SLT with responsibility

Temperature prior to administration of emergency medication (15 minute intervals)

Time	Temperature	Staff recording	SLT

Time parent contacted & name:	By (staff members name) :	ETA:	Agreed action/consent to administer:
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Temperature after administration of emergency medication (15 minute intervals)

Dose given	By
------------	----

Time	Temperature	Staff recording	SLT

Time child in parental or	Outcome
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& TOTS@FRANCHE
Policies & Procedures**

emergency services care			
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