# St Katherine's C of E Primary School



## Administering Medications Policy March 2025

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#### 'Love your neighbour as yourself' (Gospel of Mark Chapter 12 verse 31)

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#### Statement of Intent

St Katherine's C of E Primary School wishes to ensure that pupils with medication needs receive appropriate care and support at school.

#### 1. Key roles and responsibilities

- 1.1. The Governing Body has overall responsibility for the implementation of the Administering Medication Policy and procedures of St Katherine's C of E Primary School.
- 1.2. The Governing Body has overall responsibility for ensuring that the Administering Medication Policy, as written, does not discriminate on any grounds, including but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- 1.3. The Governing Body has responsibility for handling complaints regarding this policy as outlined in the school's Complaints Policy.
- 1.4. The Governing Body has responsibility for ensuring the correct level of insurance is in place for the administration of medication.
- 1.5. The Headteacher will be responsible for the day-to-day implementation and management of the Administering Medication Policy and procedures of St Katherine's C of E Primary School.
- 1.6. The Pupil Administrator, is responsible for overseeing insulin injections for diabetic pupils. Other trained staff will cover in the event of absence or in the event of a school trip. Blood levels and insulin dosages (with dates & times) are to be recorded in the relevant book in the Pupil Administrator's office.
- 1.7. Staff, including teachers, support staff and volunteers, will be responsible for following the policy and for ensuring pupils do so also.
- 1.8. Staff, including teachers, support staff and volunteers, will be responsible for implementing the agreed policy fairly and consistently.
- 1.9. Parents and carers will be expected to keep the school informed about any changes to their child/children's health.
- 1.10. Parents and carers will be expected to complete a <u>medication administration form</u> prior to bringing medication into school.
- 1.11. Parents and carers will be expected to discuss medications with their child/children prior to requesting that a staff member administers the medication.
- 1.12. Parents and carers will be expected to make a note of expiration dates and replace medications before they expire.

#### 2. Definitions

- 2.1. St Katherine's C of E Primary School defines "medication" and "medicine" as **prescription** medication only. **No non-prescription medication will be administered in school**. See section 4.32 for limited exceptional circumstances for day trips and residentials only.
- 2.2. St Katherine's C of E Primary School defines "prescription medication" as any drug or device prescribed by a doctor (i.e. a prescription has been written for the medication)
- 2.3. St Katherine's C of E Primary School defines a "staff member" as any member of staff employed at St Katherine's C of E Primary School, including teachers.

#### 3. Training of staff

- 3.1. Office staff will receive a copy of the Administering Medication Policy as part of their new starter induction and when the policy is updated.
- 3.2. All members of office, support and teaching staff have received training in the supervision of administration of insulin using an Adrenaline Auto Injector Device (e.g. EpiPen).
- 3.3. Staff members who have received First Aid Training and qualification type:

Name	Role	First Aid Qualification
Brenda Rowe	Admin Assistant	Emergency first aid at Work & Paediatric full course
Nicola Morley	Learning Support Assistant	Emergency first aid at Work & Paediatric full course
Julia Still	Nursery Class Teacher	Emergency first aid at Work & Paediatric full course
Ruth Barnard	Reception Nursery Nurse	Emergency first aid at Work & Paediatric full course
All other staff	Class Teachers / Learning Support Staff / Office Staff / Middays Assistants & Kitchen Team / Cleaning & Caretaking	Basic paediatric first aid

#### 4. Guidelines

- 4.1. Prior to staff members administering any medication, the parents / carers of the child must fully complete and sign the relevant medication administration form. Upon receipt of a completed medication form and medication, the Pupil Administrator (or other member of staff) will check the details are in line with this policy.
- 4.2. The Pupil Administrator will allocate a staff member to administer the medication (often the Pupil Administrator themselves).
- 4.3. Two staff members should be present when administering medication.
- 4.4. The administering staff member will complete & sign the Medication Record Sheet upon administration of the medication and should obtain a witness signature from another member of staff.
- 4.5. No child will be given medication without **written** parental consent (in the form of a medication administration form),
- 4.6. Aspirin will not be administered, unless prescribed by a doctor.

- 4.7. Medicines MUST be **in date**, have the pharmacist label attached showing the child's name, and provided in the **original container** with dosage instructions. Medicines which do not meet these criteria will not be administered. Only the dose stated on the pharmacy label will be given
- 4.8. A maximum of four weeks supply (or one bottle/box of tablets) of the medication may be provided to the school, with the exception of insulin, which will be stored in the admin corridor kitchen fridge.
- 4.9. For chronic or long-term conditions and disabilities, an Individual Healthcare Plan (IHCP) should be written by a medical professional and provided to the school (in liaison with the pupil, parents/carers, headteacher, SENCO), as required.
- 4.10. Medications will only be administered at school if it would be detrimental to the child not to do so. Where possible, all medication should be administered at home, outside of school times.
- 4.11. Medication will be given just prior to the start of the lunch break (during the period 11:45am 12:00pm). Medication will not be given at any other time during the school day. NB: This timing restriction will not apply to diabetic insulin, asthma inhalers and sudden allergic reaction medication (e.g. Epipen) etc. which will continue to be available as required. It will also not apply to prescription medication named on a child's Care Plan (as written by a medical professional), which will be administered as detailed on the Care Plan. Hay fever medication will not generally be administered in school, unless it is a prescription medication, and should be given at home before a child arrives at school, if required.
- 4.12. Where a parent wishes to administer medication to their child themselves (or have another adult do so), they will need to come to the school office and administer the medication between 11:45am 12:00pm. Medication cannot be administered by parents/carers at any other time during the school day. The only exception to this is for medication required for sudden onset allergic reaction reasons (e.g. swelling of the face/mouth/eyes, hives/rash, shortness of breath/wheezing).
- 4.13. It is the responsibility of the parents/carers of the child to ensure that any doses given outside of school are given at times compatible with the school dose given at the time stated in 4.11 and/or 4.12.
- 4.14. Medication will be stored in the Pupil Administrator's office, with the exception of insulin and antibiotics (and any other medication which the parents/carers advise needs to be stored in the fridge on the form below), which will be stored in the admin corridor fridge. In addition, asthma pumps and other emergency allergic reaction medication will be stored in classroom cupboards so that they are more easily accessible.
- 4.15. Medication for Nursery children will be stored in the Nursery classroom (in the Nursery kitchen fridge if required), however, the medication and consent form must initially be handed in to the school office to be checked against this policy.
- 4.16. Medication kept in the office fridge will be stored in a locked case for which office staff hold the key. Medication kept in the Nursery fridge will be stored in a locked case for which Nursery staff hold the key.

- 4.17. If there is a requirement to administer a controlled drug, a member of staff will require relevant training before this can be administered in school. Wherever possible, the responsibility will be with the parent/carer to administer the medication.
- 4.18. Staff members may refuse to administer medication. If a member of staff refuses to administer medication, the Head teacher will delegate the responsibility to another staff member.
- 4.19. Staff members who have an allergy to any medication they have to administer should ask another member of staff to administer it where possible **or** wear protective gloves to prevent contact with the medication.
- 4.20. Parents/carers must collect any medications left over at the end of the course. Any uncollected medication will be disposed of. These medicines will be handed in to a local pharmacy for safe disposal where necessary.
- 4.21. It is the responsibility of the parent/carer to collect any antibiotic medication at the end of the school day from the school office/Nursery to ensure that the course is completed properly. Parent/carers must sign for the medication each time it is collected.
- 4.22. It is the responsibility of the parent/carer to ensure all medication (including asthma inhalers) is in date and is replaced before the expiration date is reached or they are empty, to ensure a continuous supply of the medication in school.
- 4.23. Classroom staff will check inhalers & medication in class regularly (once per month) and advise the Pupil Administrator if it needs to be replaced (e.g. nearing expiration or empty). Medication required should be checked against the most up-to-date version of the Medical Information Summary document sent out by the Pupil Administrator and displayed in the office & staffroom. The Pupil Administrator will then inform the parents/carers. NB: It remains the responsibility of the parents/carers at all times to ensure that medication is replaced when necessary.
- 4.24. Antibiotics only antibiotics that are prescribed on a '4 times per day' dose will be administered.
- 4.25. Written records will be kept of any medication administered to children. Where the medication has been administered in class (e.g. asthma inhaler) this will be recorded in the classroom. Where the child has been administered medication in the school office, this will be recorded in the office. Where the child has been administered medication in Nursery, this will be recorded in the Nursery.
- 4.26. The school holds spare emergency inhalers and EpiPens. Please refer to the School Spare Auto-Injector & Ventolin Salbutamol Inhaler Policy for details.
- 4.27. Where appropriate, pupils may be encouraged to take their own medication under the supervision of a member of staff.
- 4.28. St Katherine's C of E Primary School cannot be held responsible for side effects that occur when medication is taken / administered correctly.

- 4.29. For residential visits outside of school, parents/carers must supply any prescription medication required for the duration of the trip, along with a completed consent form (see Appendix 2), before children and staff leave the school premises. Medication and forms must be handed to a member of staff to be checked before departure. A separate form is required for each medication supplied. Medication must be supplied in the original packaging, in date for the duration of the residential, with pharmacist label attached showing the child's name. Prescription medication which does not meet these requirements will not be administered. The restriction on antibiotics, detailed in section 4.25, will be lifted for the duration of the residential only. If additional prescription medication is required for any reason, during the residential, it is the responsibility of the parents/carers to get the medication and completed consent form (Appendix 2), where required, to the venue.
- 4.30. For day trips outside of school, medication will be administered in line with this policy. Parents/carers are advised that it is not possible to refrigerate medication whilst on a day trip, so they may wish to supply a small ice pack with the medication for the trip if required.
- 4.31. In limited exceptional circumstances it will be possible for non-prescription medication to be administered on day trips outside of school and residential visits. The permitted non-prescription medications which can be administered on a day trip \* or residential are;
  - pain/anti-inflammatory medication for a specific injury/condition
  - travel sickness medication
  - hay fever/allergy medication
  - cream/ointment for a specific injury/condition
  - \* NB: For day trips outside of school, only **one dose** of a non-prescription medication will be administered. E.g. if the dose given at home lasts 6 hours and this will not cover the entirety of the trip then a dose can be administered during the trip.

Any non-prescription medication must be in date, supplied with the correct form (see **Appendix 3**) completed by the parent/carer and must be in the original container with the medication name, dosage and frequency information clearly visible. The child's name must be written on the container. The medication and form must be handed to a member of staff going on the trip, or the school office, before the class leave school, in sufficient time for it to be checked.

Parents/carers are responsible for ensuring that the dose(s) to be administered during the visit is/are compatible with any doses given at other times. Parents/carers are responsible for collecting the medication at the end of the trip. Parents/carers are responsible for providing sufficient medication for the duration of the visit.

Date: March 2025	
Approved: March 2025	
Review date: March 2026	
Responsible Person: Pupil Administrator in conjunction with the Headteacher & SENDCo	

#### Appendix 1 - Parental agreement for school to administer prescription medicine



### St Katherine's C of E Primary School Short-Term Medication Administration Form



St Katherine's C of E Primary School will not administer the medication to your child unless you complete and sign this form.

your child unless you complete and sign this form.						
Name of Child:						
Date of Birth:		Class:				
Reason for Medication:						
Name of Medicine (as described o	n the container):					
Expiry date of medication:		Does this medicine need to be stored in a fridge?				
Dosage Required	Medicatio	n dose will be given during				
(e.g. 5ml/10ml):		1 11:45am – 12:00 noon ONLY				
	•					
Start Date for medicine to be admi	nistered:	Last date on which medicine is to be administered:				
Are there any side effects/further in	nformation that the	school needs to know about?				
* Antibiotics – only '4 times per day'	antihiotics will ha	administered in school				
* All medication must be in date, in		ner and have pharmacists label stating child's name				
<ul><li>and prescribed date</li><li>* By completing this form and handi</li></ul>	ing medication into	school, parents/carers accept that medication will				
be given on the dates and time state	ed above ONLY. I	It is the responsibility of the parent/carer to ensure mpatible with the dose given at school.				
* If this form is not completed fully a		school reserve the right not to administer the				
medication						
present. All medication must be han	ded in at the scho	n in their school bags or administer it without an adult ol office with this completed form. Medication must				
be collected from the school office (oneeded at home. Medication will not		elevant) by the parent/carer at the end of the day if h a child.				
I give my written consent for any member of school staff to administer the medicine to my child. I						
understand that the staff member does so without accepting any liability or responsibility for any adverse reaction the child may have following the administration of the medication detailed above. I understand						
that this consent remains in full force from the 'start date' to 'last date' stated above unless I provide a						
course is completed correctly. I will	written request for it to be stopped. I will collect antibiotics at the end of each school day to ensure the course is completed correctly. I will collect any unused medication upon completion of treatment. I will					
replace medication when the current uncollected medication will be dispo-		he expiration date, if required. I understand that any				
Parent/Carer Name Date						
Parent/Carer Signature						

MEDICATION RECORD SHEET					
Date	Name of Medication	Amount Given	Time Given	Administered By Signature	Witnessed By Signature

#### Appendix 2 – RESIDENTIAL VISIT – prescription medication:



#### St Katherine's C of E Primary School Residential Prescription Medication Administration Form



St Katherine's C of E Primary School will not administer the medication to your child unless you complete and sign this form.

your child unless you complete and sign this form.						
Name of Child:						
Date of Birth:		Class:				
Reason for Medication:						
Name of Medicine (as descri	ribed on the container):					
Expiry date of medication:		Does this medicine need to be stored in a fridge/kept cool (if yes please provide an ice pack)?				
Dosage Required (e.g. 5ml/10ml):	Times the dose is required? **	Special Instructions?				
1.	1.	7				
2.	2.					
3.	3.					
4.	4.					
Start Date for medicine to be	e administered:	Last date on which medicine is to be administered:				
* All medication must be in da and prescribed date. Non-pr * By completing this form and be given on the dates and tin doses given outside of school * If this form is not completed requirements, the school resc ** In some circumstances, it is then be given at the closest p give it at a time when the pup NB: Children are not permitted adult present. All medication	ate, in the original conta escription cannot be ad d handing medication in ne stated above. It is the old are timed to be compa if fully and accurately, or erve the right not to adm may not be possible to go possible time (e.g. if me oil is taking part in an accept to leave any medication must be handed to a medication	to school, parents/carers accept that medication will be responsibility of the parent/carer to ensure that satisfie with the dose given at school/on the trip. In the medication provided does not meet the above minister the medication. In the medication at the exact time stated but it will dication is stored in a fridge, it may not be possible to stivity).  In their bags/pockets etc. or administer it without an ember of staff along with this completed form in				
	advance of the residential. Medication must be collected from the school by the parent/carer at the end of the trip. Medication will not be sent home with a child.					
I give my written consent for any member of school staff to administer the medicine to my child. I understand that the staff member does so without accepting any liability or responsibility for any adverse reaction the child may have following the administration of the medication detailed above. I understand that this consent remains in full force from the 'start date' to 'last date' stated above unless I provide a written request for it to be stopped. I will collect medication at the end of the residential trip. I will replace medication when the current supply reaches the expiration date, if required. I understand that any uncollected medication will be disposed of.						
Parent/Carer Name		Date				
Parent/Carer Signature						

#### **RESIDENTIAL VISIT – prescription medication:**

MEDICATION RECORD SHEET					
Date	Name of Medication	Amount Given	Time Given	Administered By Signature	Witnessed By Signature

#### Appendix 3 RESIDENTIAL VISIT & DAY TRIP - non-prescription medication:



#### St Katherine's C of E Primary School Residential & Day Trip Non-Prescription Medication Administration Form



St Katherine's C of E Primary School will not administer the medication to your child unless you complete and sign this form as detailed in the Administering Medications Policy

Name of Child:			
Date of Birth:		Class:	
Name of Medication:		Reason for Medication:	
Expiry date of medication:		Does this medicine need to be stored in a fridge/kept cool (if yes please provide an ice pack)?  Special Instructions?	
Dosage Required (e.g.  5ml/10ml):  Times the dose is required? See notes below  1.*  1.*  2.			
3. 4.	3.	_	
Start Date for medicine to I	pe administered:	Last date on which medicine is to be administered:	
All medication must be in information clearly visible By completing this form a be given on the dates and doses given outside of the If this form is not comple requirements, the school In some circumstances, then be given at the clost to give it at a time when a be considered by the control of the residential/tries.	n date, in the original conta e. The child's name must and handing medication in and time stated above. It is nese are timed to be comp ted fully and accurately, o I reserve the right not to a it may not be possible to g est possible time (e.g. if n the pupil is taking part in a ted to leave any medication in must be handed to a med ip. Medication must be con	give the medication at the exact time stated but it will nedication is stored in a fridge, it may not be possible an activity).  In their bags/pockets etc. or administer it without an in the staff along with this completed form, in the school by the parent/carer at the end	
f the trip. Medication will n		IU.	

written request for it to be stopped. I will collect medication at the end of the residential/trip. I will replace

Date \_\_\_\_\_

medication when the current supply reaches the expiration date, if required. I understand that any

uncollected medication will be disposed of.

Parent/Carer Name \_

Parent/Carer Signature

#### **RESIDENTIAL VISIT & DAY TRIP non-prescription medication:**

MEDICATION RECORD SHEET					
Date	Name of Medication	Amount Given	Time Given	Administered By Signature	Witnessed By Signature