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**Administration of Medication**

**Appendix 1 – Agreement for Administration of Medication**

**Appendix 2 - School Response Form**

**Appendix 3 – Health Care Plan**

**Appendix 4 – Administration of Medication Record**

**Appendix 5 – Storage of Medication**

**Appendix 6 – Procedures for Staff**

**Appendix 7 - Administration of Non-prescription Medication**

**Reviewed January 2016**

**Introduction**

Many pupils will need to take medication in school at times. In most cases the administration of medication will be short-term. Other pupils have medical conditions such as asthma or diabetes that if not properly managed could limit their access to education and the administration of medication in these circumstances is likely to be long term. Some children have conditions that also require emergency treatment and plans e.g. severe allergic conditions (anaphylaxis) or epilepsy. Pupils with such conditions are regarded as having health care needs and may require some support or reasonable adjustments to be fully included in the life of the school.

It is important for the school to have sufficient information about the medical needs of any pupil who requires support in school. Early warning of needs will allow necessary plans, procedures and monitoring processes to be put in place. The school therefore needs to know about any health needs before a child starts nursery or school, or when a pupil develops a condition requiring the administration of medication during the day.

**Working in Partnership**

Parents and carers have prime responsibility for their child’s health and must provide information about their child’s health needs when first enrolling in Nursery or School. Parents and carers should make contact with the school, at the earliest opportunity, where medical conditions are discovered during the pupils’ schooling. This will allow appropriate plans to be developed and agreed.

It is helpful if, where possible, medication can be prescribed in dose frequencies, which enable it to be taken outside school hours. Parents should be encouraged to ask the prescribing doctor or dentist about this.

**Non-prescription Medicine**

If a pupil suffers regularly from acute pain, such as migraine, the parents should authorise and supply appropriate painkillers in the original container, labelled with their child’s name and with written instructions about when their child should take the medication. A member of staff should supervise the pupil taking the medication and notify the parents, in writing (Appendix 7), on the day painkillers are taken.

**Record Keeping**

When the school is asked to support the administration of medication, parents and carers are asked to complete an **Agreement for Administration of Medication Form** (Appendix 1). Upon receipt of completed forms, we will ensure that there is clarity around who will support the administration of medication and that the instructions contained within the form are effectively communicated with relevant staff. Parents will be issued with a **School Response Form** (Appendix 2) to confirm that medication will be administered in line with parental request.

When a child has longer term needs parents will, in collaboration with the pupils, health professionals and the Headteacher, reach an understanding on the school’s role in helping support the health care needs. This understanding should form the basis of a **Health Care Plan** (Appendix 3). The Headteacher should seek parents’ and pupils’ agreement before passing on information to other school staff. Sharing information is important if staff and parents are to ensure the best care for a pupil. Parents’ and pupils’ cultural and religious views will always be respected.

The **Health Care Plan** will be completed as soon as reasonably possible and prior to admission where possible.

**Headteacher / School Responsibility**

Many pupils will need to take medication (or be given it) at school at some time in their school life. Pupil Support Assistants support the administration of medication in Aberdeen City schools. Mostly this will be for a short period only, e.g. to finish a course of antibiotics. To allow pupils to do this will minimise the time they need to be off school. Medication should only be taken to school when absolutely essential and with the agreement of the Headteacher.

**Staff responsibility**

Systems are in place for the appropriate recording of the administration of medication (Appendix 4). Allstaff who provide support for pupils with health care needs, or administer medication, receive support from the Headteacher, health service professionals and parents, have access to information and training, and reassurance about their legal liability.

Staff who may need to deal with an emergency will need to know about a pupil’s health care needs. Visiting teachers are also fully informed of individual’s health care needs where appropriate.

**School Trips**

Sometimes the school may need to take additional safety measures for outside visits. The administration and recording of medicines administrated on school trips should be in accordance with this policy.

**Emergency Procedures**

All staff should know how to call the emergency services. All staff should also know who is responsible for carrying out emergency procedures in the event of need. Staff noticing an apparent deterioration in a pupil’s health should inform the Headteacher.

If a pupil is taken to hospital by ambulance they will be accompanied by a member of staff who will remain until the pupil’s parent arrives. The member of staff should have details of any health care needs and medication the pupil has. Generally staff should not take pupils to hospital in their own car. However, in an emergency it may be the best course of action. Wherever possible the member of staff would be accompanied by another adult and have public liability vehicle insurance.

**Communicating with others / Confidentiality**

The Headteacher and school staff treat medical information confidentially. Information on a pupil’s health care needs is likely to be sensitive data covered by the Data Protection Act 1998. Care is therefore be taken to ensure that consent is obtained before passing information to another party. By virtue of the Age of Legal Capacity (Scotland) Act 1991, a person under the age of 16 has legal capacity to consent to any surgical, medical or dental procedure if, in the opinion of a health professional, that person is capable of understanding the nature of the treatment. Any exchange of information should be with the consent of the child/young person (if he/she has the necessary capacity to understand why) or otherwise the parent or guardian. Once consent has been obtained sensitive information about a pupil should be shared only with those who need to know. Escorts and others should only be told what is necessary for them to know to keep the child safe.

Completed records of administering medication are kept on file in case the administration of medication is ever questioned.

The Headteacher will need to agree with the parents exactly what support the school can provide for a child with health care needs. Where there is concern about whether the school can meet a pupil’s needs, or where the parents’ expectations appear unreasonable, the Headteacher can seek advice from the school nurse or doctor, or other medical advisers and, if appropriate, Officers from the Authority.

**Storing Medication** (Appendix 5)

Schools should not store large volumes of medication. Parents should supply weekly or monthly supplies of the doses to be taken at school, in their original container with the name of the pupil, the name of the drug, the dosage frequency and expiry date. This may require parents to obtain a separate prescription for the medication to be taken at school.

Where a pupil needs two or more prescribed medicines, each should be in a separate container.

The Headteacher is responsible for making sure that medicines are stored safely. Pupils should know where their own medication is stored and who holds the key. A few medicines, such as asthma inhalers, must be readily available to pupils and must not be locked away. Pupils will have access to their medicine when required.

**Administering Medication** (Appendix 6)

School staff should not give the first dose of a new medicine to a child. Parents should have already given at least one dose to ensure that the child does not have an adverse reaction to the medication.

Staff who provide support for pupils with health care needs, or administer medication, will be given support from the Headteacher, health service professionals and parents, have access to information and training, and reassurance about their legal liability.

If in doubt about any of the procedures the member of staff should check with the parents or a health professional before taking further action. Staff administering medication must be aware of this guidance and where possible be witnessed administering all medication. If this is not possible, parents should be made aware of this on the Health Care Plan.

Staff administering prescribed medication to a pupil will have appropriate training and guidance. He or she should also be made aware by a health professional of possible side effects of the medication, how staff can recognise these side effects and what to do if they occur.

School staff should not administer medication without appropriate training from health professionals. Different levels of training will be required for different medications

If too much medication is given, or if it given to the wrong child, parents should be informed and the emergency services should be contacted immediately.

**Refusal of Medication**

If pupils refuse to take medication, school staff will not force them to do so. The school will inform the child’s parents as a matter of urgency. If necessary, the school should call the emergency services for an ambulance.

**Disposal of Medication**

School staff should not dispose of medicines. Date expired medicines or those no longer required for treatment should either:

* with the parent’s consent be removed by a community pharmacist, or
* returned to the parent/carer for transfer to a community pharmacist for safe disposal.

Medicines which are in use and in date should be collected by the parent/carer at the end of each term/session depending upon the expiry dates.

**General Awareness**

The most common medical conditions in school age children which require support, are asthma, diabetes, epilepsy, eczema, allergic reactions (anaphylaxis if severe) and cystic fibrosis. Irrespective of whether staff in schools support pupils with health care needs and administer medication to these pupils they all may come into contact with such pupils during the course of a school day. A basic understanding of these common conditions will help staff recognise symptoms and seek appropriate support. A programme of general awareness training for staff is provided where possible.