



# **Riverbrae School Medication Policy**

Updated September 2024

## **Our Values**

### ***Leadership***

Children are supported to lead their own learning and are given a wide range of opportunities to participate fully.

### ***Equity***

Children are given the individual support they need to achieve.

### ***Ambition***

Children's development is encouraged holistically. Children are offered challenge, depth, progression and enjoyment through high quality learning experiences.

### ***Respect***

Children are fully respected and encouraged to develop respect for themselves and those around them.

### ***Nurture***

Children are nurtured through caring relationships and an understanding of them as individual.

(This policy has been informed by information from Renfrewshire Council's Administration of Medication and Medical treatments Policy; Scottish Executive: Administration of medication in schools; Riverbrae staff)

Riverbrae aims to provide a suitably supportive learning environment for pupils with health care needs to enable them to participate fully in educational activities. To this aim, we produced this policy to support parents/carers, staff and pupils.

The Senior Management Team (SMT) will ensure that parents/carers are aware of the school's policy and procedures for dealing with health care needs.

Parents/carers should be aware that **medication should always be administered at home where possible**. Where the timetable of administration does not allow for this, the following policy and protocols should be followed.

**Only** medication that is prescribed to the child or young person and has a clear prescription label on the box and/or bottle will be administered in school.

## **PUPIL INFORMATION:**

- Senior Management Team (SMT) will agree with parents/carers exactly what support the school can provide for a child with health care needs.
- Parents/carers are responsible for supplying medicines that their child needs to take at school and for letting the school know of any changes to the prescription or the support needed.
- Parents/carers are responsible for ensuring the school have the most UpToDate Seizure Plans or Medical Protocols for their child.
- Parents/carers are responsible for sharing necessary information with bus or taxi escorts. Escorts are not permitted to give any medication on school transport to or from school.
- Parents/carers should fill out a full list of meds prescribed for their child at the beginning of each year, to include meds given at home and at school, as part of the data check forms. A new form must be completed at any change of medication or dosage.
- SMT and school staff should treat medical information confidentially. Information on a pupil's health care needs is covered by the Data Protection Act 1998. However:
  - \* Parents/carers and staff dealing with pupil healthcare needs agree to monitor and exchange relevant information relating to the pupil's health.
  - \* Teachers covering NCCT, supply teachers, adults supervising excursions or sporting activities and any new staff working with the pupil will be informed of all necessary information regarding pupils' healthcare needs, as necessary to keep them safe.
  - \* 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 keep the child safe.
  - \* Parents/carers are responsible for informing the school in writing, via home/school diary or Learning Journal, if infrequent medication such as Paracetamol have been given before school. This information is required to avoid overdose.

## **CONSENT:**

- Parents/carers must complete and sign a consent form allowing school staff to administer medication to the pupil (in our ELCC these consent forms differ due to Care Commission requirements). Each medication, including Paracetamol, Midazolam, Movicol, Oxygen etc must be listed, with dose, time to be given, method, parent/carer signature, known adverse reactions.
- Any additional, short-term or medication changes are to be recorded on separate forms in home/school diary or written in Learning Journal. Medication will not be given without written consent, signed & dated. Verbal consent should not be accepted. Nursery will have different consent forms and administration forms as provided by the Care Commission.
- Any changes to dosage must still be in accordance with pharmacist instructions printed on label.

## RECEIPT OF MEDICATION IN CLASS:

- All medication, including medicated creams, must have a prescription label on it. This can be accessed through the pupil's GP surgery or Minor Ailments scheme at any pharmacy.
- Class staff should Sellotape over the top of Prescription label on bottle or box, to protect it and ensure the writing remains legible.
- Class staff should record all medication received on Receipt of Medication form. See appendix 4.
- Class staff should complete a label detailing the pupil name, date of receipt, expiration date, date opened, and date medication should be used until. See appendix 5.
- Helpful hint: record expiration dates or other useful info on a class calendar:

Name:	_____
Received:	_____
Exp date:	_____
Opened:	_____
Use by:	_____
Returned home:	_____



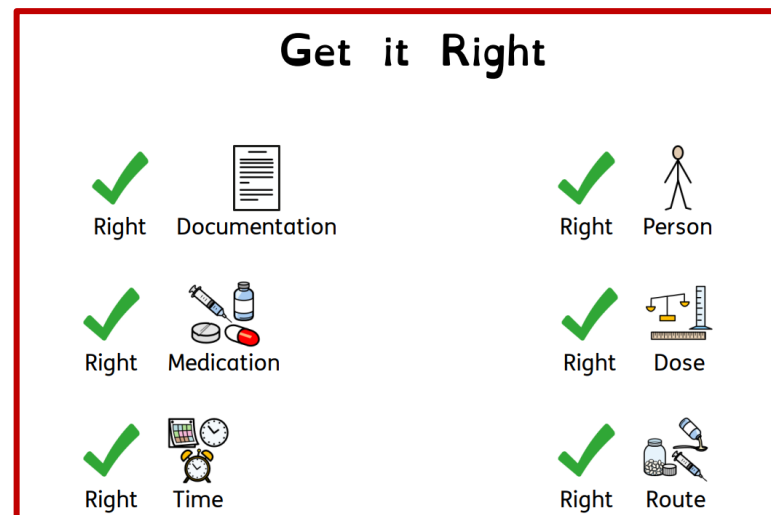
- We will not accept open bottles or boxes of medication, except in circumstances stated below:  
***Parents should administer the first dose of any medication that the pupil has not had before, in case of adverse reaction.***
- Once medication is signed into school, it should only be used in school (or on outings if appropriate/required), and only signed out if/when it is going home. Medication should not be sent from school to respite. An exception to this is when Rescue Medication travels with a pupil at all times.

## **STORAGE OF MEDICATION:**

- Emergency medication should be with the pupil at all times.
- A few medicines, such as asthma inhalers, must be readily available to pupils and must not be locked away. Most schools allow pupils to carry their own inhalers. In allowing children to retain their own medication, an assessment needs to be made of the potential risk to others and agreed with a member of SMT. Parent/carer's written consent is required for this.
- Meds other than Emergency medication and inhalers should be kept either in locked fridge or in locked, labelled medication cupboard in classroom as appropriate.
  - \* Each pupil's medication should be kept in a separate plastic box labelled with their full name.
  - \* Controlled drugs such as morphine should be kept in an additional safe box inside the locked meds cupboard.
- Medication, when out of date, empty or for other reasons require to be disposed of should be signed out on Receipt of Meds form and sent home.
- Replacement medication requests will be written in the home/school diary or Learning Journal, with the understanding that it can take time for parents/carers to acquire new medication.

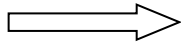
## ADMINISTRATION PROCEDURES:






- Staff will receive training provided by NHS and be specifically signed off as competent to administer medication if required. Currently, training is provided for administration of medication through Percutaneous Endoscopic Gastrostomy tubes (PEGs).
- Staff, if required, will receive training appropriate to the administration of specific medication e.g. EpiPen, oxygen.
- All staff training should be recorded and records kept by the school.
- Any staff member in doubt about procedures, or lacking confidence should stop and seek advice from management or health professional.
- There should always be a member of management available that classes with complex health issues can go to for advice on medication, feed pumps, buttons, bolus feeds, oxygen, epilepsy – for small day to day issues not requiring a nurse.
- SMT will agree with parents/carers as to whether pupils should carry and/or take their medication themselves. Where this is the case, the pupil, with one adult to support, should record administration and advise parent/carer in home/school diary or Learning Journal.



- Two people will work together to administer meds from start to finish.
- The people administering meds must not be interrupted.

- Medication folder should be taken out and opened to appropriate page before medication is drawn up. **Staff must check that medication has not already been administered.** A record of medication administered must also be on the wall in class as a double check. This should include **Time, dosage, route of administration and any other relevant information.** For example



Time	Medication. Tick this column	Initial below
10.00am	 -1ml of Clonidine with a small flush to ensure meds is out of connection tube.	
	 - E. PH Test before feed.	✓ ES
	 -Thickening agent 2 blue scoops to one small bottle of fruit shoot. (or 1level blue scoop to a cup 100mls of juice).	✓ JF
11.00am	 -5mls Gabapentin 3mls of Sialanar (must be empty stomach)	
11.30am	 - (must be winded 15mins before medi) <b>Day</b> - 400mg Gabapentin (one 300mg yellow tablet and one 100mg white tab) Gabapentin capsule both added to 5ml of water and put in syringe.	
	1x0.25 mg (1tablet) of Nabilone capsule mixed with 5ml of water and put in syringe.	

- Both people must look at and confirm verbally to each other the **Name, Medication, Expiry Date and Dosage** on the prescription label **AND** that this information matches the **Medication Record.**
- Medication should be drawn up immediately before use to eliminate the possibility of contamination or access by a pupil.
- Both people must look at and confirm verbally to each other that the **Dosage** drawn up matches the **Prescription Label** and **Medication Record**, eg:

‘I confirm the dosage of 5mls of Gabapentin to be administered via peg as detailed on the Prescription Label and Medication Record’

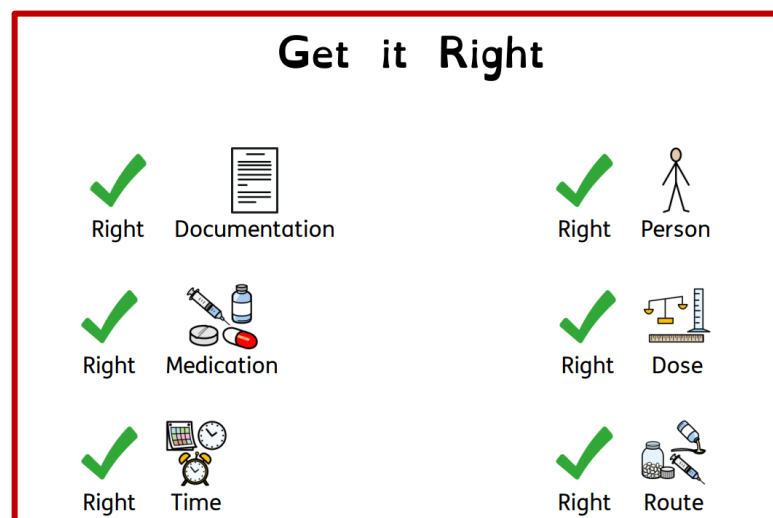
- One person must administer the medication while the other watches this happen. Both must then initial the Medication Record immediately after the medication has been administered.
- If a pupil refuses to take medication, school staff should not force them to do so. The school should inform the child’s parents as a matter of urgency. If necessary, the school should call the emergency services for an ambulance.
- Parents/carers should be phoned prior to infrequent medication (such as paracetamol or morphine) being given to ensure overdose does not occur.



## **EMERGENCY PROCEDURES:**

- Everyone working with pupils who require medication in school should be made aware of appropriate actions in an emergency.
- If any staff member requires protocols or documents in any other format, they must request this from SMT.
- Any specific medical protocols in place for a pupil must be clearly displayed in class either on wall or cupboard, be listed in their Risk Assessment, and highlighted on their All About Me document.
- If a pupil needs to go in an ambulance, SMT should be contacted immediately. A familiar member of staff should accompany them and stay until a parent/carer arrives.
- First Aiders' names should be posted in prominent positions in school e.g. whiteboard outside staffroom and foyer.
- If a class require a first aider to attend, they should send someone to release that first aider from class.
- If any child or young person trips, falls or is involved with any physical incident during the school day, they should be checked out by a first aider and parents or carers should be informed either through Learning Journals or a phone call.
- Parents/carers should keep their children at home if unwell.
- If a child or young person requires a change of clothes due to soiling or vomiting, the soiled clothes will be placed in a soluble laundry bag and sent home. This is essential for infection control.

## MEDICAL PROTOCOLS - SEIZURE MANAGEMENT



- All staff working with pupils who may require rescue medication must be trained in Epilepsy Awareness and Administration of Rescue Medication, and be aware of the pupil's Seizure Management Plan.
- Rescue medication and a copy of the Seizure Management Plan must be kept in a locked, labelled cupboard when in class, and be carried by a designated member of staff when moving around the building or on outings.
- If it looks likely that rescue medication will need to be administered, SMT should be radioed to attend, and medication prepared (For example, if a Seizure Management Plan states that a pupil requires rescue medication after 10 minutes, SMT should be radioed after 8 minutes). If on an outing, a phone call must be made to school to inform SMT that rescue medication is being administered. In this phone call, SMT will give further guidance on next steps.
- Two people must work together to administer the rescue medication, and should not be interrupted.
- Both people must read the Seizure Management Plan and confirm verbally with each other the **Dosage, Medication and Timings** detailed in the plan.

- Both people must then read the **Name, Dosage, Medication** and **expiry date** on the medication box/bottle, and confirm that this matches the information on the plan.
- One person must draw up or prepare the medication while the other watches.
- Both people must look at and confirm the **dosage** verbally with each other before it is administered, e.g.:

' I confirm the dosage of 0.5mls of Midazolam at 5 minutes'

### **Monitoring and Evaluation**

As part of our Quality Assurance procedures, SMT will complete regular spot checks of medication folders and procedures in class.

This policy will be reviewed and updated annually in accordance with the Health and Safety at Work Act 1974 and with current Legislation.

## APPENDICES

1. Medication Administration Record (daily medication)
2. Record of Administrator names and Initials
3. Medication Administration Record (infrequent medication)
4. Record of Receipt of Medication (all medication)
5. Labels for Medication
6. Medication Consent Form
7. Seizure Log


**Medication Administration Record (Daily Meds) Excluding Insulin**

Month: \_\_\_\_\_ Year: \_\_\_\_\_

Name:	DOB:	Allergies
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Medication:	Method/route:																								
Date:																									
	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F
Time																									
Administered (Staff)																									

Medication:	Method/route:																								
Date:																									
	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F
Time																									
Administered (Staff)																									

Ref: Refused	Abs: Absent	 New bottle	Vom: Vomiting	Hol: School holiday		
Colour in box	See separate (attached) sheet for additional important information				App: Appointment out of school	

**One staff drawing up needs to be the same as administered.**

 Write: **Pupil's full name, Date received, Date opened & Use by date** on bottle/box eg if to be used within 28 days.



**Medication Record of Receipt (All Meds)**
**School year:**

<b>Name:</b>	<b>DOB:</b>	<b>Allergies</b>
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Med:	Quantity:	Exp date:	Prescribed? Tick to confirm:
Received date:	Dosage on bottle matches consent form <input type="checkbox"/>	Received by:	
Date returned home:	Quantity:	By:	Reason:

Med:	Quantity:	Exp date:	Prescribed? Tick to confirm:
Received date:	Dosage on bottle matches consent form <input type="checkbox"/>	Received by:	
Date returned home:	Quantity:	By:	Reason:

Med:	Quantity:	Exp date:	Prescribed? Tick to confirm:
Received date:	Dosage on bottle matches consent form <input type="checkbox"/>	Received by:	
Date returned home:	Quantity:	By:	Reason:

Med:	Quantity:	Exp date:	Prescribed? Tick to confirm:
Received date:	Dosage on bottle matches consent form <input type="checkbox"/>	Received by:	
Date returned home:	Quantity:	By:	Reason:

Med:	Quantity:	Exp date:	Prescribed? Tick to confirm:
Received date:	Dosage on bottle matches consent form <input type="checkbox"/>	Received by:	
Date returned home:	Quantity:	By:	Reason:

Please note: All medication must have a prescription label on it.

**Medication – Consent for Prescribed Medication use in School**

Month: \_\_\_\_\_ Year: \_\_\_\_\_

<b>Name:</b>	<b>DOB:</b>	<b>Allergies</b>
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Medication	Dose	How is it given?	Times given			Any known adverse reactions?

I consent to my child’s medication being administered during school hours

- By an authorised member of school staff
- In the event of fever/pain developing, I consent to my child receiving Paracetamol/Ibuprofen which I will provide.

Please write all medication on consent form, including Paracetamol, Ibuprofen, Oxygen, Movicol, Insulin, Ventolin inhaler etc

Signature of parent/Guardian ..... Date ..... Contact phone number .....



## Labels for meds bottle/box.

Stick on bottle or box. For name put pupil name. Do not stick over important information.

Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____	Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____	Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____	Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____
Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____	Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____	Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____	Name: _____ Received: _____ Exp date: _____ Opened: _____ Use by: _____ Returned home: _____
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Name: \_\_\_\_\_

**Seizure Log Fill in either absence OR prolonged**

Date	Time	Absence	Duration of prolonged seizure	Observations	Recovery	Comments	Logged by:

