



THE ARCHDIOCESE OF BIRMINGHAM

Sacred Heart Catholic Primary School



'To grow in Wisdom and in Grace'

ADMINISTRATION OF MEDICINE POLICY

Sacred Heart Catholic Primary School

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This policy is in line with the Oxfordshire Code of Practice for the storage, collection and administration of medicines.

- **Parents are responsible for their child's medication.**
- The School will support pupils who need medication for long term or life-threatening medical conditions, eg diabetes, epilepsy or anaphylactic reaction or have been prescribed drugs.
- If required and agreed, the School will provide storage for the above medications. This will normally be in the School office. These medicines must be in the original or duplicate pharmacy container labelled with the pupil's name, correct dosage and date of expiry.
- Collection and administration is the pupil/parent's responsibility. Every attempt will be made to ensure the pupil's medication is given as requested.
- **In exceptional cases – where the school needs to administer medication on the parents' behalf the attached form MUST be completed.**
- Please note that staff **will not be able** to administer paracetamol or other similar medicines unless they have been prescribed and provided by the pupil's Doctor.
- school staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school. (Taken from '*Supporting pupils at school with medical conditions*' Statutory guidance for governing bodies of maintained schools and proprietors of academies in England Pg 21)
- Pupils who have asthma must have an up to date inhaler in the School Office.
- Pupils who have Epi Pens must have an up-to-date pen in the School Office. For use please refer to Epi Pen Policy
- There are separate arrangements for the administration of Ritalin.
- For further information, parents can get in touch with the Headteacher.
- A letter reminding parents of the School's policy regarding the administration of medicines will be sent to parents at least once a year. See Appendix 1

Reviewed by Pupil and Staff Welfare Committee: March 2019

Approved by Pupil and Staff Welfare Committee: March 2019

Next Review Date: March 2022

Signed
Headteacher

Signed
Governor

Dear Parents

REVIEW OF SCHOOL POLICY ON MEDICATION

Paracetamol is probably the most widely used and relatively effective painkiller available to families. However, as with all drugs, there are inherent dangers.

Paracetamol can cause serious side effects to the liver when even relatively moderate dosages are taken too frequently.

Having reviewed our Health and Safety guidelines, and in line with many other schools ***we have reached the decision not to issue unprescribed Paracetamol to pupils under any circumstances.***

ISSUING OF MEDICATION IN SCHOOL WILL NOW BE CARRIED OUT AS FOLLOWS:

1. Medication for several days

If a child needs prescribed medication for several days, eg. If taking a course of antibiotics or needing regular painkillers following an injury, please do the following:

- Put a small supply of the medication in an envelope/bottle ***marked with the child's name, class and name of medication.***
- This should be accompanied by the attached form (also available from the office) giving details of when and for how long the medication should be taken.
- Bring this to and the medicine to the School Office during morning registration, where it will be kept in a safe cupboard or fridge and administered at the appropriate time.

2. Intermittent medication

If a child has a medical condition which requires intermittent medication, eg. migraine, hayfever or recurrent injury, the procedure for bringing medicine into school will be the same as **No. 1** above.

3. Long term daily medication

If a child needs long term daily medication, please contact the headteacher who will set up a meeting where suitable arrangements can be agreed.

PLEASE NOTE THE FOLLOWING

- **Asthma Inhalers** – As described in the school Asthma Policy, the child should keep one inhaler in the School Office. This must be collected and taken by the classteacher / trip organiser on any school trip/visit or sports event.
- ***No medication is allowed to be carried by pupils in school.*** All medication must be kept safe in the School Office as described above.
- No medication will be given to pupils unless it is labelled with the name of the child and the medication clearly marked and in date on the container in which it is brought.
- Any queries regarding medication or school medical policies should be addressed to the Headteacher. Other medical policies include asthma, diabetes, anaphylaxis and epilepsy and can be viewed by an interested parent on request to the Headteacher.

REQUEST FOR SCHOOL TO ADMINISTER MEDICATION

Please note that the school will not administer medicine to your child unless you complete and sign this letter, and the headteacher has agreed that the school staff can administer the medication.

Dear Headteacher

I request the administration of medicine to:

Pupil Details

Surname: First Names:

M/F Class: Date of Birth:

Address:

.....

Condition or Illness

.....

Medication

Name/Type of Medication (See container)

For how long will this medicine be administered?.....

Date dispensed: Expiry date:

The above medication(s) have been/have not been* (*delete as appropriate) prescribed by a doctor. They are clearly labelled indicating contents, dosage and child's name in full.

Contact Details

Name:

Daytime Telephone Number:

Mobile Telephone Number:

Relationship to pupil:

Address:

.....

I understand that the medicine must be delivered personally to the school and that the school will only be able to administer the medicines if it can make the staff time available. I understand that I remain responsible for ensuring that my child receives medication and that I may have to make the necessary arrangements for its administration if the school is unable to.

Signed and agreed: (Parent/Carer) Date:

Signed and agreed
on behalf of the School: (Name) Date: