

C/18 ADMINISTRATION OF MEDICINES AND MEDICAL PROCEDURES

NB - This policy should be read in conjunction with Section 5 of the Haringey Schools Health Handbook, which contains guidance on wider aspects of child health.

18.1 PRESCRIPTION MEDICINES

Medicines and medical procedures which are prescribed/directed by a registered medical practitioner. This would include General Practitioners (GP's), hospitals/clinics, Registered Homeopathic Practitioners, Dentists.

Staff responsibility

Staff who take responsibility for administering medicines and performing medical procedures, usually First Aid or Welfare Officers, should be "volunteers", and be provided with appropriate instruction/training and protective clothing , eg gloves. A payment for administration of medicines is available.

Storage and supplies

Medicines and supplies/equipment should be labelled with the child's name and dosage , and stored appropriately, eg fridge (separate from food items) or sealed container, to which access is strictly limited. Staff should ensure that the parent provides an adequate supply, usually on a weekly basis, and have a suitable system for ensuring replenishment.

Consent

A written signed parental consent should be in place detailing the child, dosage, parental contact and emergency action; see Annexe 1 Section 5 Haringey Schools Health Handbook.

18.2 NON - PRESCRIPTION (OVER THE COUNTER / "ALTERNATIVE") MEDICINES

The Working Party on Medicine Administration did **not** recommend the administration of non-prescription medicines in educational establishments due to the problem of unknown side effects and possible counter effects of combining with other medicines or foods.

Parental administration only would be acceptable.

Council policy currently prohibits the administration of painkilling items such as aspirin, and products containing this.

The application of sun cream for Under Five/Primary age children, if indicated in a Risk Assessment for the sun should be supported by written parental consent.

18.3 SELF ADMINISTRATION

This may be appropriate for children in upper primary and secondary schools, and should be supported by written parental consent detailing action to be taken in the event of an emergency for the purposes of paramedic staff.

18.4 **CHILD HEALTH CARE PLANS**

It is important that a Child Health Care Plan is drawn up where a child requires administration of medicine or medical procedures on a long term regular basis. This may include items such as asthma pumps/inhalers, antibiotics, The plan should be drawn up by the Head Teacher/Centre Manager in conjunction with the parent, child if of an appropriate age, and named Welfare/First Aid Officer, with advice from the School Nurse/GP. Details of symptom/ procedure/dosage, GP, Family contacts (2), and emergency action should be included, and photographic ID is good practice.

An example is given in Annexe 5 Section 5 Haringey Schools Health Handbook.

18.5 **CHILD REFUSAL**

There may be important health implications for non-administration of medicines or medical procedures which may be the result of child refusal. It is therefore essential that schools/centres follow the following procedure which has been devised by the Medicine Working Party -

- the family should be advised by phone immediately, due to the possibility of post school/centre activities and later home arrival
- the phone call to be confirmed in writing at the end of the day's session
- a signed/dated entry should be made in the school/centre records
- a meeting to be arranged with the family if refusal continues for a period of one week, and documented.

18.6 **RECORD KEEPING**

All records of Medicine administration/Medical procedures/Child refusal should be kept for 25 years, by legal advice.

They should consist : A record of administration for each child

A list of all items of medicine etc for the school/centre

Written parental consent.

All records should be signed/dated and timed. They should be available for parents to inspect/sign if this is requested. Photographic ID is good practice.

Example documents are available in the Haringey School Health Handbook, Section 5 Annexes 1-4.

18.7 **EDUCATIONAL VISITS**

The medical needs of pupils/students must form part of the planning process for all Educational Visits (Local/day/residential) from the school/centre. It is important to identify the medication details (from the Child Health Care Plan), emergency action and the adult taking responsibility, and ensure that parental consent covers visits away from the school/centre building. A record of food allergies will also be required if packed lunches are not taken.

When residential visits are planned medicine etc should be packed in hand luggage for ease of accessibility during the journey.

18.8 REFERENCES/ FURTHER INFORMATION :

Education Service Health and Safety Guidance Memo dated 2.2.04
Haringey Schools Health Handbook
School Nursing Service Burgoyne Road Clinic, Finsbury Park N4 1AE , tel : 0208
340 5215
"Supporting Pupils with Medical Needs" - Dept for Education and Skills/ Dept of
Health.

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