



Blue Sky Learning



Administration of Medicines and Drugs Policy

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Policy Statement

Blue Sky Learning undertakes to ensure compliance with the relevant legislation and guidance in *Practice Guidance for Schools* with regard to procedures for supporting children with medical requirements, including managing medicines. Responsibility for all administration of medicines at Blue Sky Learning is held by the Principal who is the responsible manager.

It is our policy to ensure that all medical information is treated confidentially by the responsible manager and staff. All administration of medicines is arranged and managed in accordance with the *Practice Guidance for Schools* document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

As a general principle, it is our policy to avoid medicines and drugs being brought into the centre unless absolutely necessary. As such, non-prescription medicines such as Calpol, Aspirin, eye drops etc. will not be administered in the centre except under exceptional circumstances as determined by the Principal, and prescription medicines requiring doses less than four times per day will not be administered in the centre unless dosages are time-specific (e.g. insulin). Prescription medicines requiring three or less dosages per day should be carried out at home.

Administration of Medicines Policy

Aims and Objectives

Our administration of medicine requirements will be achieved by:

- Establishing principles for safe practice in the management and administration of:
 - prescribed medicines
 - non-prescribed medicines
 - maintenance drugs
 - emergency medicine
- Providing clear guidance to all staff on the administration of medicines, ensuring that there are sufficient numbers of appropriately trained staff to manage and administer medicines on site during centre hours. Ensuring that there are suitable and sufficient facilities and equipment available to aid the safe management and administration of medicines
- Ensuring the above provisions are clear and shared with all who may require them
- Ensuring the policy is reviewed periodically or following any significant change which may affect the management or administration of medicines

Administration of medicines

The administration of medicines is the overall responsibility of the parents/carers. The Principal is responsible for ensuring children are supported with their medical needs whilst on site, and this may include managing medicines where appropriate and agreed with parents.

Routine Administration

Prescribed medicines

It is our policy:

- To manage prescribed medicines (e.g. antibiotics, inhalers) where appropriate following consultation and agreement with, and written consent from the parents
- To assist with inhalers, cartridges and nebulizers
- To support Blood Glucose monitoring as required by the child's medical practitioner
- To give emergency treatment covered by basic First Aid training including airway management

Non-prescribed medicines

- It is our policy not to administer non-prescribed medicines, (e.g. Calpol, eye drops or cough mixtures provided by the parents) as this responsibility rests with the parents
- Children are never to be administered aspirin or medicines containing Ibuprofen in the centre unless prescribed by a doctor
- Responsibility for decision-making about the administration of all non-prescribed medicines will always be at the discretion of the responsible manager who may decide to administer under certain miscellaneous or exceptional circumstances

Maintenance drugs

It is our policy to manage the administration of maintenance drugs (e.g. Insulin) as appropriate following consultation and agreement with, and written consent from the parents. On such occasions, a health care plan and training must be completed for the child concerned by their Diabetic Nurse. To undertake injections, these may be single dose or multiple dose devices which are preassembled with predetermined amounts of medication to be administered as documented in the individual care plan (pre-loaded devices should be marked when to be administered e.g. for diabetes, where the dose may be different AM or PM). There may be 2 different pens, one with short acting insulin and one with long acting insulin. Preloaded doses with clearly marked timings must be delivered to the school by the parents/carers.

Non-Routine Administration

Emergency medicine. It is our policy (where appropriate) to manage the administration of emergency medicines such as:

- Injections of adrenaline for acute allergic reactions
- Oral administration of Glucose for diabetic hypoglycaemia

In all cases, an appropriate level of professional training and guidance from a competent source will be agreed and obtained by the school before any commitment to such administration is made.

Procedure for Administration

When deciding upon the administration of medicine needs for children we will discuss this with the parents/carers concerned and make reasonable decisions about the level of care required.

Any child required to have medicines will have an 'administration of Medicines' consent form completed by the parent and kept on file. Individual health care plans will be completed for children where required and reviewed periodically in discussion with the parents to ensure their continuing suitability.

- A note is made in the Medicines File of all medicines given to children
- It is our policy that Antibiotics and medications taken 3 times daily will not be administered in school
- If a child refuses to take medication the parents will be informed the earliest available opportunity.

Regulations

A register of controlled drugs is kept, the drugs register shows:

- Medication provided
- Medication administered
- The name of the person to whom they were supplied
- The name and quantity of the drug/medication supplied
- The amount administered each time and the amount left each time
- Type of medication i.e. tablet/liquid and expiry date
- Two signatures for each dose of medicine given
- Two signatures for each time the medications are counted and checked. This is done once a week. The second signature is a witness.

Register entries are made in ink and in chronological order at the time. This register is kept for at least two years from the last entry made or until the child for whom the last dose is **given has reached the age of 22 years**.

Contacting Emergency Services

When a medical condition causes the child to become ill and/or requires emergency administration of medicines (Epi Pen), then an ambulance will be summoned at the earliest opportunity and parents informed to accompany the child to the hospital if at all possible.

Medical Accommodation

The Principal's Office or meditation room will be used for medicine administration and or treatment purposes. Either room will be made available when required.

Safe Training and Assessment for Staff/Carers

Where staff/carers are required to carry out non-routine, more specialized administration of medicines or emergency treatment to children, appropriate professional training and guidance from a competent source will be sought before commitment to such administration is accepted.

When applicable, at least 2 staff members will be trained to ensure cover is always available during the school day.

A 'staff training record' sheet will be completed to document the level of training undertaken. Such training will form part of the overall training plan and refresher training will be scheduled at appropriate intervals.

- The training record included in the Health Care Plan/ Flow Chart will include Signature and name (clearly written) of nursing representative agreeing competence and designation
- Signatures of parents and setting manager identifying carers that have been assessed as competent and now administer the care
- Record of training, with dates, skills and issues included
- Clear evidence of how training was individualized for the named child

It is the responsibility of the centre to enable staff to attend training and develop skills needed to be assessed as competent.

The centre is responsible for ensuring that staff receive training in the following areas:

- First Aid and basic life support (updated as required)
- Moving and handling
- Infection control
- Safeguarding procedures

If at any time staff do not feel that their skills and knowledge are adequate to perform a particular task they are accountable to request further training or update training (Health and Safety at Work Act 1974). Where staff decide to take limited responsibility of medication this should be recorded and Health Care Needs Risk Assessed to ensure the child's needs are safely met.

The Child's medical needs intervention and the ability of carers to meet those needs will be reviewed at least annually or sooner should needs change.

Storage of Medicines

The storage of medicines is the overall responsibility of the Principal who will ensure that arrangements are in place to store medicines safely (a locked cupboard in the office)

The storage of medicines will be undertaken in accordance with product instructions and in the original container in which the medicine was dispensed.

It is the responsibility:

- of all parents/carers and staff to ensure that the received medicine container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration
- of the parents/carers to provide medicine that is in date. This should be agreed with the parents at the time of acceptance of on-site administration responsibilities.
- of the parents/carers to ensure there is adequate provision of supplies/medication in school and that supplies are checked weekly.

Disposal of Medicines

It is not Blue Sky Learning's responsibility to dispose of medicines. It is the responsibility of the parents to ensure that all medicines no longer required including those which have date-expired are returned to a pharmacy for safe disposal.

'Sharps boxes' will always be used for the disposal of needles. Collection and disposal of the boxes must be arranged by parents as appropriate.

Health Care Plans

All children with ongoing medical needs have a care plan. This includes children with diabetes, Epi pens, heart problems, epilepsy and very severe asthma. These are usually compiled by the nurse or the appropriate medical professional, parents/Carers and a designated staff member.

All Health Care Plans are signed by all who share in its development; this includes a designated member of the centre, designated health care professional and the parents/carers. Each Health Care Plan is reviewed annually or when needs change. The primary responsibility of ensuring the Health Care Plan is up to date lies with the centre however, everyone who participates in the development of the Health Care Plan has a responsibility to notify the centre if updating is required.

Health Care Needs Risk Assessments

Health care needs risk assessments will be carried out for all children attending the centre who are identified as having specific health issues.

When resources such as staffing, equipment and training to meet needs of a child in a Health Care Needs Risk Assessment are not immediately available this will be identified and acted upon in partnership between the Principal and an appropriate nursing representative.

Some children and young people who need regular prescribed medication may not need an individual Health Care Plan- following a health care needs risk assessment their care needs will be met under this Administration of drugs and medicines policy.

Insurance and Indemnity

The centre is accountable to ensure training is provided and that trainers providing it meet insurance requirements.

Individual Accountability

Under the Health and Safety at Work Act (1974) staff have a duty to co-operate with procedures put in place by their employer. To support this cooperation a carer must be given training for the individual child's procedures.

Carers/staff should work cooperatively, following the guidance in this document to support the risk assessment and Health care planning process ensuring that the children people are included.

Carers/staff must work within the agreed guidelines of the centre.

Safeguarding Children and Young People

As a learning centre we are aware of the vulnerability of children with a disability of the increased vulnerability to abuse and neglect. Appropriate communication between all professionals is key to the safeguarding all children.

All staff at Blue Sky Learning follow safeguarding procedures to ensure the safety of all its centre members.

The next scheduled review date for this policy is September 2021.