

Administration of Medicines Policy

Policy Code OPC/6	Authorisation Date January 2022	Next Review Date April 2023
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Associated Documents First Aid Policy Health and Safety Policy		

1. PURPOSE

The purpose of this policy is to ensure that OSG UK York Campus (“The Campus”) has safe and effective procedures in place for the administration of medicines, and that staff, students and parents are aware of these procedures.

2. SCOPE

This policy applies to all staff, parents and students who either have, or are responsible for the management of medication at the Campus.

3. DEFINITIONS

For the purposes of this Policy, the following definitions apply.

Term	Definition
Children	For the purpose of this policy, this means all students at the Campus

4. INTRODUCTION/POLICY STATEMENT

4.1 INTRODUCTION

OneSchool Global UK has a statutory duty to make arrangements for students with medical needs under Section 100 of the Children and Families Act 2014. The policy and supporting documents are based on Department of Education statutory guidance (December 2015, updated August 2017) ‘Supporting pupils at school with medical conditions’.

4.2 POLICY PRINCIPLES

4.2.1 The Campus will help to ensure students can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution

- achieve economic well-being
- 4.2.2 The Campus ensures all staff understand their duty of care to children and young people in the event of an emergency.
- 4.2.3 Staff receive on-going training and are regularly updated on the impact medical conditions can have on students. The training agenda is based on a review of current healthcare plans.
- 4.2.4 All staff feel confident in knowing what to do in an emergency.
- 4.2.5 All staff understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- 4.2.6 All staff understand the common medical conditions that affect children at this Campus.
- 4.2.7 Campus Principals should ensure that their school's policy is effectively implemented with partners.
- 4.2.8 Although administering medicines is not part of teachers' professional duties, staff take into account the needs of students with medical conditions that they teach. Students with an Individual Healthcare Plan will have this identified on 'Quick Links' on SIMs to ensure staff awareness.

5. PROCEDURES

The Campus will follow procedures set out in the Health & Safety Policy for supporting students with medical needs and will utilise the associated forms

5.1 ADMINISTRATION OF MEDICATION

- 5.1.1 The Campus understands the importance of taking the medication as prescribed.
- 5.1.2 All staff understand that there is no legal or contractual duty for any member of staff to administer medication or supervise a student taking medication unless they have been specifically contracted to do so. Where specific training is not required, any member of staff may administer prescribed and non-prescribed medicines to students under the age of 16 with parental consent.
- 5.1.3 OneSchool Global UK are responsible to ensure full insurance and indemnity to staff who administer medicines. The insurance policy includes liability cover.
- 5.1.4 Administration of medication which is defined as a controlled drug (even if the student can administer themselves) should be done under the supervision of a member of staff.
- 5.1.5 A student under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken.

5.2 STORAGE OF MEDICATION

- 5.2.1 Safe storage – emergency medication such as Adrenaline Auto-Injector pens (EpiPens)
 - Emergency medication is readily available to students who require it at all times during the Campus day. If the emergency medication is a controlled drug and needs to be locked up, the keys are readily available in the Administration Office. The Administration team have access.
 - All students carry their own Adrenaline Auto-injector pens at all times and a spare kept in the medication cupboard in Administration.

- Students are reminded to carry their emergency medication with them.
- 5.2.2 Safe storage – non-emergency medication
- All non-emergency medication is kept in a lockable cupboard in the First Aid room
 - Students with medical conditions know where their medication is stored and how to access it.
 - Staff ensure that medication is only accessible to those for whom it is prescribed.
 - A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary.
- 5.2.3 Safe storage – general
- Ms Young ensures the correct storage of medication at Campus.
 - Three times a year Ms Young checks the expiry dates for all medication stored at Campus.
 - Ms Young along with the parents of students with medical conditions, ensures that all emergency and non-emergency medication brought into Campus is in the original container (except insulin) and clearly labelled with the student's name, the name and dose of medication and the frequency of dose. This includes all medication that students carry themselves.
 - Some medication may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled. This is in a secure area, inaccessible to unsupervised students.
 - It is the parent's responsibility to ensure new and in date medication comes into Campus on the first day of the new academic year.
- 5.3 IN AN EMERGENCY**
- 5.3.1 Relevant staff understand and are updated in what to do in an emergency for the most common serious medical conditions at this Campus.
- 5.3.2 In an emergency situation Campus staff are required under common law duty of care to act like any reasonably prudent parent/carer. This may include administering medication.
- 5.3.3 This Campus uses Individual Healthcare Plans to inform the appropriate staff (including supply teachers and support staff) of students with complex health needs in their care who may need emergency help. Supply staff are briefed on entry to the Campus; when undertaking their commissioned duties.
- 5.3.4 In the event of a student with an Individual Healthcare Plan needing to be taken to hospital, the Campus will ensure that a copy of the plan is provided for the hospital.
- 5.3.5 Information in Individual Healthcare Plans is also used to support transitional arrangements to another Campus and/or re-integration.
- 5.3.6 If a student needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. This Campus will try to ensure that the staff member will be one the student knows. The staff member concerned should inform a member of the campus's senior leadership team.
- 5.3.7 All students with medical conditions should have easy access to their emergency medication. Items such as inhalers and Adrenaline Auto-injector pens are held by the student who must take the responsibility to have it to hand at all times.

- 5.3.8 Where a student has been prescribed an inhaler or Adrenaline Auto-injector pen, the campus gain consent from parents (see Appendix 3) for the use of the campus owned inhaler or Adrenaline Auto-injector pen if the student cannot locate their own in an emergency
- 5.3.9 Students are encouraged to administer their own emergency medication (e.g. Adrenaline Auto-injector pens) where possible and should carry it with them at all times unless it is a controlled drug as defined in the Misuse of Drugs Act 1971. This also applies to any off-site visits.
- 5.3.10 Students are encouraged to keep spare supplies of emergency medication in the medication cupboard in the Administration room and the First Aid Room (fridge)
- 5.3.11 Schools may administer their “spare” adrenaline auto-injector (AAI), obtained, without prescription, for use in emergencies, if available, but only to a pupil at risk of anaphylaxis, where both medical authorisation and written parental consent for use of the spare AAI has been provided.
- 5.3.12 From 1st October 2014 the Human Medicines (Amendment) (No. 2) Regulations 2014 will allow schools to buy salbutamol inhalers, without a prescription, for use in emergencies.
- 5.3.13 The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.
- 5.3.14 The inhaler can be used if the student’s prescribed inhaler is not available (for example, because it is broken, or empty).
- 5.3.15 For off-site activities, a risk assessment is undertaken to ensure students needing medication still have access and a staff member is named as the responsible lead. The risk assessment also helps to identify any reasonable adjustments that need to be made.

5.4 MONITORING OF INDIVIDUAL HEALTHCARE PLANS

- 5.4.1 Campus Principals have overall responsibility for the development of individual healthcare plans.
- 5.4.2 This Campus uses Individual Healthcare Plans to record important details about individual children’s medical needs at Campus, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Individual Healthcare Plan if required.
- 5.4.3 The procedure for the management of individual healthcare plans is set out in the Health & Safety Policy.
- 5.4.4 If a student has a short-term medical condition that requires medication during Campus hours, a medication form plus explanation is sent to the student’s parents to complete (Appendix 2).
- 5.4.5 The parents, healthcare professional and student with a medical condition, are asked to fill out the student’s Individual Healthcare Plan together. Parents then return these completed forms to the Campus.

- 5.4.6 This Campus ensures that a relevant member of Campus staff is also present, if required to help draw up an Individual Healthcare Plan for students with complex healthcare or educational needs.
- 5.4.7 Individual Healthcare Plans are used by this Campus to:
- Inform the appropriate staff and supply teachers about the individual needs of a student with a medical condition in their care.
 - Remind students with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times.
 - Identify common or important individual triggers for students with medical conditions at Campus that bring on symptoms and can cause emergencies. This Campus uses this information to help reduce the impact of common triggers.
 - Ensure that all medication stored at Campus is within the expiry date.
 - Ensure this Campus's local emergency care services have a timely and accurate summary of a student's current medical management and healthcare in the event of an emergency.
 - Remind parents of students with medical conditions to ensure that any medication kept at Campus for their child is within its expiry dates. This includes spare medication.
 - At review identify changing needs for staff training.
- 5.4.8 Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan.

5.5 UNACCEPTABLE PRACTICE

5.5.1 Our staff recognise that it is not acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged).
- Send children with medical conditions home frequently or prevent them from staying for normal Campus activities, including lunch, unless this is specified in their individual healthcare plans.
- If the child becomes ill, send them to the Campus office or medical room unaccompanied or with someone unsuitable.
- Penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Require parents, or otherwise make them feel obliged, to attend Campus to administer medication or provide medical support to their child, including with toileting issues.
- Prevent children from participating or create unnecessary barriers to children participating in any aspect of Campus life, including Campus trips, e.g. by requiring parents to accompany the child.

5.6 COMPLAINTS

- 5.6.1 Complaints about this policy and/or procedures should be dealt with in accordance with the Campus' published Complaints Policy.

4 GUIDELINES

- [Guidance on the use of adrenaline auto-injectors in Schools](#) – September 2017
- [Supporting pupils at Campus with medical conditions](#) – December 2015, updated August 2017
- [Guidance on the use of emergency salbutamol inhalers in schools March 2015](#)
- [Section 100 of the Children and Families Act 2014.](#)

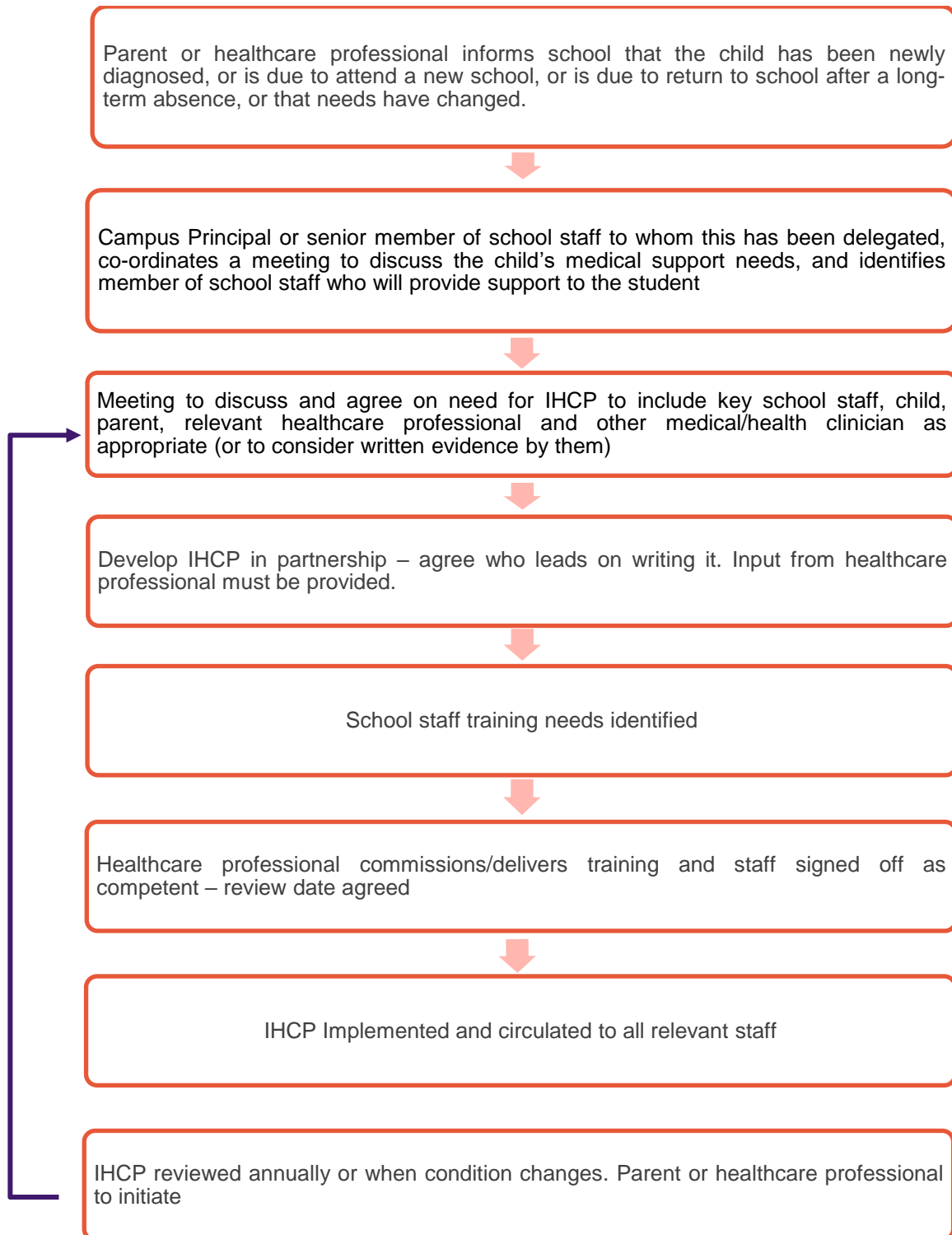
5 ASSOCIATED DOCUMENTS

- First Aid Policy
- Health and Safety Policy

6 ATTACHMENTS

- Appendix 1 Monitoring of an Individual Healthcare Plan
- Appendix 2 Individual Healthcare Plan Form
- Appendix 3 Asthma Consent Form for Emergency
- Appendix 4 Parental Agreement for Campus to administer medicines
- Appendix 5 Record of Medication Administered on Campus
- Appendix 6 Request for a Student to carry their own Medication
- Appendix 7 Staff training record – administration of medical treatment
- Appendix 8a Guidelines for administration of rectal diazepam in epilepsy
- Appendix 8b Record of use of rectal diazepam
- Appendix 9 Contacting Emergency Services
- Appendix 10 Timeline by term

Appendix 1 **Monitoring of an Individual Healthcare Plan**



VERSION CONTROL

Policy Code	Date	Version No.	Nature of Change
OPC/6	March 2019	2	
OPC/6	March 2020	3	Review, minor updates and addition of extra appendix
OPC/6	March 2021	4	Review and update of Appendix 2
OPC/6	January 2022	5	Major review with added guidance and new appendices with forms