



Managing Medicines Policy

Date of Review: June 2018
Approved by: Trust Board
Next Review Date: June 2020

1 Introduction

1.1 This document is the Managing Medicines Policy for the Rodillian Multi Academy Trust (RMAT) it has been produced using the DfE guidance for 'Supporting pupils at academy with medical Conditions' December 2015 to ensure that pupils with medical needs receive appropriate care and support. The main body of the document is concerned with policies, processes and procedures. Alongside this policy each setting has a Named Lead that will ensure a personalised implementation structure is in place in their academy. The policy is in place to ensure that the RMAT complies with its responsibilities for Safeguarding in relation to the Education Act 2002, Equality Act 2010 and other statutory guidance, e.g. SEN Code of Practice 2015, Keeping Children Safe in Education and Working Together to Safeguarding Children.

2 Intentions

2.1 At the Rodillian MAT, we recognise the need to provide an inclusive, supportive and positive learning environment. We recognise that most children will at some time have short-term medical needs i.e. finishing a course of medicine but that medicines should only be taken to academy or settings when essential. It is our belief that children with medical needs have the same rights of admission to a academy or setting as other children and that our pupils should not be denied access to a broad and balanced curriculum simply because they are on medication or need medical support, nor should they be denied access to academy trips or extra-curricular activities. Our Trust emphasises ethical academy practice thereby sustaining a welcoming, effective and inclusive academy culture.

3 Aims and Objectives of Managing Medicines Policy

3.1 This policy document has been produced in line with the statutory guidance as defined in section 100 of the Children and Families Act 2014 and in compliance with the Equality Act 2010. It relates to the statutory duty to make arrangements to support pupils at academy with medical conditions. It aims to ensure that all pupils with medical conditions are properly supported so that they have full access to education, including academy trips, physical education and any other activities taking place off-site as part of normal educational activities. Where necessary further consultation with health and care professionals, pupils and parents will be made to ensure the needs of children with medical conditions are properly understood and effectively supported. The Trust Board will ensure that the arrangements as set out in this policy will be implemented effectively and that

there is a Named Lead in each academy that has overall responsibility for the policy's implementation.

4 Roles and Responsibilities

4.1 Head of School Responsibilities

The Head of School will ensure that all staff are aware of this policy and that procedures are in place for this to be implemented effectively. The Head of School will consult and take advice from the RMAF Facilities and Health and Safety Manager as necessary. They will ensure that sufficient named members of staff are in place to implement the policy and deliver against all Individual Health Care Plans, including in contingency and emergency situations and that this is managed by a Named Lead. They will monitor that staff are aware of medical needs and that appropriate training is being delivered.

4.2 Named Lead Responsibilities

The Named Lead will consult and take advice from the RMAF Facilities and Health and Safety Manager as necessary.

The academy will ensure that the Named Lead will be responsible for ensuring that all relevant staff have been made aware of the child's medical condition and that sufficient staff are suitably trained to support this. In case of staff absence or staff turnover they will assure that suitable cover arrangements are in place to ensure someone is always available. Where necessary the Named Lead will brief external partners and supply staff of any medical needs.

The Named Lead will monitor that all medical needs records are maintained and produced. This will include parental agreement forms; a medication log; a Medical Needs register; risk assessments for academy visits; Personal Emergency Evacuation Plans (PEEPs); holidays, and other academy activities outside the normal timetable; and individual healthcare plans.

Where long-term or frequent absences due to health problems or appointments connected with a pupil's medical condition the Named Lead will work with pastoral staff to ensure this is effectively managed. If absence has impacted on an individual's educational attainment the Named Lead will liaise with pastoral and teaching staff to establish a clear reintegration plan to support them to fully engage in their learning.

Where a new pupil requires medical support, transitional arrangements should be made to ensure that measures are in place to meet their medical needs in advance of them starting. In cases where a new diagnosis has been made or a pupil starts at short notice the Named Lead should ensure that arrangements are put in place within two weeks.

4.3 SENCO Responsibilities

The SENCO will ensure the Named Lead is aware of all SEND or medical conditions. The SENCO will consult and take advice from the RMAF Facilities and Health and Safety Manager as necessary.

They will link with the Named Lead to ensure a Medical Needs Register is

maintained that sits alongside the SEND Register and to produce an Individual Health Care Plan using medical evidence, parental consultation and support from health care professionals where needed. When necessary, the SENCO will support the Named Lead to ensure that any relevant staff training is delivered.

In addition to educational impacts, some medical conditions may have social and emotional implications Children may become self-conscious about their condition, may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. Where there are SEMH concerns the SENCO will ensure that appropriate assessment, referral and intervention to support this need takes place.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where an individual with a medical need has a SEND or an Education Health Care Plan (EHCP) which brings together their health and social care needs, as well as their special educational provision the SENCO will work alongside the Local Authority and health bodies to ensure that these needs provided for those with SEND under part 3 of the Children and Families Act 2014 and that their needs are fully met in conjunction with the SEND Code of Practice 2014.

4.4 Staff 'duty of care'

All staff have a 'duty of care' to act as a responsible adult for children they work with to keep them safe. In exceptional circumstances the duty of care could extend to administering medicine and/or taking action in emergency. All staff must ensure that procedures set out in this policy are followed and that the Named Lead is notified when information is received that a pupil has a medical condition. Staff will never prevent a child from easily accessing their inhalers or medication and administering it when and where necessary.

4.5 Parental/Carers Responsibilities

All parents/carers have the prime responsibility for their child's health and should provide the academy with full, up-to-date information about their child's medical needs, including details on medicines. Parents are responsible for making sure their child is well enough to attend academy. Where a child is acutely unwell it is advised that the child be kept at home by the parent/carer. Where detailed medical needs exist parents should work with the academy to produce an Individual Health Care Plan.

Parents must provide written consent to the academy for any medication to be administered by a member of staff. The academy will not give medicine unless a parent has been consulted. If there is an urgent need for medication then a parent will be contacted by telephone. For longer term medication needs it is the parent/carer's responsibility to monitor when further supplies of medication are needed in the academy/setting.

4.6 Child's responsibilities

Pupils with medical conditions will, where appropriate, be fully involved in discussions about their medical support needs. They should contribute to the development of their Individual Health Care Plans and comply with them.

Some pupils may be competent to take responsibility for managing their own medicines and procedures. Where this is the case this should be formally agreed with parents/ carers and should be reflected in their Individual Health Care Plans.

If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but parents should be informed so that alternative options can be considered.

5 Individual Health Care Plans

5.1 Where a pupil has a long term medical need, the academy will ensure that they have sufficient information about the medical condition. An Individual Health Care Plan will be produced by the Named Lead with SENCO where necessary using medical evidence, parental consultation and support from health care professionals to clarify for staff, parents and the child the help that can be provided. The Council for Disabled Children's Publication 'Including me' provides advice on managing complex health needs in academies and early years settings. All pupils with long term medical needs or disabilities are protected from discrimination under the Equality Act 2010 and must not be discriminated against in relation to their access to education and associated services. Where an Individual Health Care Plan is in place unless otherwise indicated, all medication to be administered will be kept in a locked medicine cabinet. The Named Lead, and SENCO where appropriate, will ensure that information and guidance on health related issues is readily available for staff and any staff training needs are met. All Individual Health care plans will be reviewed at least annually, or earlier if evidence is presented that the child's needs have changed.

The Individual Health Care Plan should consider:

- The medical condition, it's triggers, signs, symptoms and treatments
- The pupil's resulting needs including medication (dose, side effects and storage)
- Other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons etc.
- Specific support for the pupil's education, wellbeing and SEMH needs e.g. management of any absences, access arrangements, need for rest periods, additional support catching up with missed learning, counselling etc.
- The level of support needed (some children will be able to take responsibility for their own needs whilst others may need targeted support etc) including in emergencies.
- Who will provide any support needed, expectations of their role, any training needs, healthcare professional input required and cover arrangements
- Who needs to be made aware of the child's condition and the support required
- Any confidentiality issues/agreements with the parent/carers and the individual about the medical condition
- Any emergency procedures including whom to contact and contingency arrangements.

6 Academy Implementation Structure

6.1 Each academy will have an implementation structure in place that all academy staff will be made aware of. This document will be maintained by the Named Lead and a copy available for reference. This document will contain details including the Named Lead; the location of medication storage; details of key documents including the Individual Health Care Plans and parental permission; recording procedures; and emergency procedures. A further record will need to be maintained alongside this including details of staff trained to administer medication and first aid staff, students with a Health Care Plan and a medical needs register. (See Appendix A & B)

7 Managing medicines on academy premises

7.1 **Safe Storage and disposal of medicines**

All medicines will be stored safely and kept a clearly labelled locked cabinet or refrigerated when needed. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be readily available to children and not locked away. All medication should be clearly labelled with:

Child's name

Prescribed dose

Expiry date

Written instructions provided by the prescriber on the label or container.

When no longer required, medicines will be returned to the parent to arrange safe disposal. Sharpe boxes must always be used for the disposal of needles and other sharps.

7.2 **Administering Medicines**

Medicines should only be administered at academy when it is detrimental to a child's health or academy attendance. **No child under 16 should be given prescription or non-prescription medicines without parent's written consent except in critical situations where verbal consent should be sought.**

The only exception to this is where the medicine has been prescribed without the parents' knowledge. In such cases, every effort should be made to encourage the child to involve their parents whilst respecting their right to confidentiality.

All staff members giving medicines should check:

Child's name

Prescribed dose

Expiry date

Written instructions provided by the prescriber on the label or container

A written record for each time medicines are given should be logged in the pupil's planner on the Academy Medical Room Record and in the First Aid book. Where stated on the Individual Health Care Plan any medication or treatment may need to be recorded on a separate medication log.

Staff administering medicines should do so in accordance with the prescribers' instructions nor should they make changes to dosages on parental instructions. Medicines that have been taken out of the container as originally dispensed (secondary dispensed) should not be administered. Alteration to the label is not acceptable. Any alteration to dosage must be accompanied by written instructions provided by the prescriber.

Tablets should never be crushed or capsules opened unless specified, as it is an unlicensed use of the medication. If the child is unable to take oral medication in the solid dosage form it should be referred back to the parent to seek an amendment to a suitable liquid/soluble preparation the prescriber/pharmacist.

7.3 Staff administering medication

The administering of medicines is a voluntary role, however academies should ensure they have sufficient members of support staff who are appropriately trained to manage medicines as part of their duties.

7.4 Self Administration of Medication

Individual academies should give serious consideration to whether it is appropriate for an individual to self-administer medication and each case should be considered individually taking into account the age and needs of the child or young person. Individual academies should seek medical advice, written parental consent and undertake risk assessments to ensure the safety of children and young people in their care. The Individual Health Care Plan should detail arrangements for self-administration of medication and the supervision for this.

8 Record Keeping

8.1 Written details from the parent/carer should be provided either in the academy planner or as part of the Individual Health Care Plan contribution. The child's Academy Medical Room Record page in their planner and the academy's First Aid book should be completed as these records offer protection to staff and provide proof that agreed procedures have been followed, as well as ensuring that a child is not given extra doses of medicine by mistake. The following details should be checked:

Child's name

Name of medication

Dose

Method of administration

Time/frequency of administration

Any side effects

Expiry date

9 Risk Assessment and management procedures

9.1 Academies and settings should ensure that risks to the health of others are properly controlled. This may involve undertaking individual risk assessments for pupils with long term medical needs. Academies and settings should be aware of the health and safety issues of dangerous substances and infection.

10 Emergency Procedures

10.1 The Named Lead will ensure that all staff are aware of clearly defined emergency procedures and symptoms for all pupils with an Individual Health Care Plan. In the event of an emergency general risk management processes should be followed. All staff should know how to call the emergency services. The academy's First Aiders are responsible for carrying out emergency procedures in the event of a need. A member of staff should always accompany a child taken to hospital by ambulance and should stay until a parent/carer arrives. Where possible the parent should travel from the academy with the child in the ambulance. Staff should refrain from taking children to hospital in their own vehicle. Where parents are not available health professionals are responsible for any decisions on medical treatment.

11 Educations visits, residential trips and sporting activities

11.1 Arrangements for taking any necessary medicines will need to be taken into consideration when going on educational visits, residential trips and sporting activities. Staff supervising visits must always be aware of any medical needs and relevant emergency procedures in accordance to the 'Learning Outside the Classroom & Offsite Visits Policy & Guidelines'. The Named Lead should be consulted and all staff aware of how an individual's medical condition will impact on their participation. A copy of Individual Health Care Plan should be taken on visits in the event of the information being needed in an emergency. Where necessary reasonable adjustments must be made and a risk assessment produced.

12 Liability and indemnity

12.1 The Head of School will accept responsibility for members of academy staff administering or supervising pupils taking prescribed medication during the academy day. For the purposes of indemnity, the administration of medicines falls within this definition and Head of School will ensure that all staff are provided with liability cover and protection as part of the academy's insurance policies and that the academy is a member of the DfE's Risk Protection Arrangement (RPA).

13 Staff training

13.1 All staff who assist in the administration of medication will receive appropriate training/guidance as identified by the Named Lead in liaison with health care professionals. This training should be provided by the relevant health care professional who is qualified to identify and agree the type and level of training required.

Where needed, whole academy awareness training will be delivered to ensure medical conditions affecting a pupil is fully understood which includes preventative and emergency procedures.

14 Complaints

14.1 If a parent has a complaint about a special educational needs matter, s/he should follow the procedures laid down in the Trust's Complaints Policy.

Appendix A: Academy Implementation Structure

Appendix B: Training, Health Care Plan and Medical Needs Register

Appendix C: RMAT Individual Health Care Plan

Appendix D: DfE 'Templates for Supporting Children with Medical Conditions' May 2014

Appendix A:



**Managing Medicines
Academy Implementation Structure**

Academy	
Named Lead	
SENCO	

Procedures for parental agreement for academy to administer medicine (Short term)

Procedures for parental agreement for academy to administer medicine (Short term)

Medicine Storage details and locations

Procedures for recording medicine administered for an individual child

Procedures for recording medicine administered for all children

Emergency Procedures

Appendix B:



**Managing Medicines
Training, Health Care Plan and Medical Needs Register**

Staff Trained to Administer Medication	
Name	Training Received

Individual Health Care Plans	
Student Name	Staff Responsible

Medical Needs Register	
Student Name	Medical Need

**Information should be maintained centrally by the Managing Medicines Lead and included on SIMS*

Appendix C:



Insert
Photograph

Individual Healthcare Plan

This form should be maintained and reviewed regularly. It should be stored centrally in academy for reference as detailed on the Academy's Managing Medicine Implementation Structure. It should be referred to and taken on a academy trip or offsite activities by the named organiser/trip lead if a student with medical needs is attending.

Date Completed		Review Date	
Child/young person's name			DOB
Home address		Tel No.	
Medical Diagnosis or Condition including known allergies			
Named person in academy responsible for Healthcare Plan & their role (State if different for offsite activities)			
Academy		Tel No.	

Symptoms to watch out for in an Emergency	What to do	Follow Up Care

Contact Details	Name	Address	Telephone
Emergency			
Parent/Carer			
Parent/Carer			
GP			
Health Professional			
Other e.g. outside agencies			

Medication

Name of medication	Dose and when to be taken	Where is it stored?	Who will administer / monitor in the case of self-administration

Medical Procedure

Procedure	When	How	Who (including cover arrangements)

Staff

What is required by whom?	Frequency	Provider

Names of staff who this plan needs to be shared with

Toileting / Personal Care assistance – if applicable (this section may not require the signature of a registered health professional and can be used as a stand-alone form if there are no other needs.)

<p>Description of procedure for staff to follow Including hygiene control measures frequency / times location</p>	
<p>Identify which parts of the care the child/young person will do independently</p>	
<p>Resources required and provider</p>	
<p>Identify any moving and handling needs (complete a moving and handling profile if required)</p>	
<p>Any additional information e.g.</p> <ul style="list-style-type: none"> • communication needs • behaviour 	
<p>Management of wet/soiled clothing</p>	
<p>Names of staff identified to carry out procedures</p>	

Health Care Plan Agreed By:

	Name	Signature
Registered Health Professional (if applicable RMAT)		
Academy representative		
Parent/Carer		
Child / young person		

Parent/Carer Consent: By signing this plan you are agreeing for your child to receive the treatment/care detailed. You are agreeing for copies of this plan to be shared with:

- Local Authority/Academy Insurance and Risk Management
- Staff who have a role/responsibility in managing your child's health care needs
- Transport providers as required

I confirm I will not hold The Rodillian Academy Trust or its staff responsible unless loss, damage or injury is occasioned as a result of their negligence

Parents Name.....

Parent/Carer Signature

Relationship to Child.....Date.....

Data protection:

The information in this plan will be held securely and confidentially and will only be shared with those who have a role or responsibility in managing the health care needs of the child/young person. The information will be kept in accordance with Rodillian Multi Academy Trust policy regarding Data Protection

Plan Reviews:

Date	Comments

Appendix D:

DfE 'Templates for Supporting Children with Medical Conditions' May 2014

Template B: parental agreement for setting to administer medicine

Template C: record of medicine administered to an individual child

Template D: record of medicine administered to all children

Template E: staff training record – administration of medicines

Template F: contacting emergency services

Template G: model letter inviting parents to contribute to individual healthcare plan development