

# Heart of the Forest

## Community Special School

### Medical Procedures Policy: Administration of Medication and Prescribed Supplements



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## **Introduction**

Heart of the Forest Community Special School endeavours to ensure that all its pupils achieve success in their academic work, in their relationships and in their day to day experiences at school. Some of our pupils have medical needs which mean that additional measures are required to ensure that they are enabled to have full access to the curriculum, that the impact of their medical difficulties upon their life in school is minimised as far as possible, and that all staff who work with the pupil understand the nature of their difficulties and how best to help them. There will also be occasions when pupils have short term medical needs.

While there is no legal or contractual duty on staff to administer medicines or supervise pupils taking their medicines nevertheless we would wish to support our pupils where we can. Pupils with special medical needs have the same right of admission to school as other children and cannot be excluded from school on medical grounds alone.

This policy will outline the administration of medicines procedure at Heart of the Forest Community Special School as follows:

1. Storage and disposal of medication
2. Administration of medication
3. Emergency medication
4. Recording
5. Transport of medication
6. Managing medications during off-site/residential visits
7. Prescribed enteral feeds and supplements
8. Feeding via a gastrostomy.
9. Roles and responsibilities

## **Storage and disposal of medication**

All pupil medication is locked in class based safes. This includes medication that stays in school and medication that travels to and from school with pupils. Medication must not remain in the pupils bag. All medication MUST be provided in its original packaging with the prescription label present and the medication information leaflet available. The exception to this is insulin, which must still be in date and provided with instruction, but will generally be transported inside an insulin pen or pump rather than in its original prescription box.

Tablet medication will be stored in the safe inside a clear plastic zip wallet with the pupil's name on to ensure all blister packets are kept together inside the prescriptive packaging.

Pre-loaded dose emergency medications such as buccal midazolam must also be individually labelled by the pharmacy. If the syringes are not individually labelled the medication must remain complete in its original packaging with the prescription label present. However it is important to note that best practice is for individual labelling where possible.

Medication that is temperature sensitive will be kept in the lockable fridge that is located in the Medical Room. The temperature of the fridge will be checked to ensure that the temperature range is between 2 and 8 degrees centigrade.

All emergency medications such as adrenaline, inhalers and anticonvulsants should be in the vicinity of the individual pupil at all times. There may however be instances where it is felt that this limits the independence of the individual; in which case this will be discussed with parents/carers and relevant medical professionals to assess the risk and agreement will be sought that a particular pupil may move within the interior of the school without their emergency medication being directly with them. In this case all school staff would be made aware of this to ensure that medication can be accessed and administered promptly and within the required timescale.

Each morning emergency medications are signed out of the classroom safes (Appendix 2) and stored in an individual bum-bag carried by a member of staff working with the pupil who is trained to administer. At the end of the school day the medication remains in the individual bum-bag and is returned to the classroom safe and signed back in (Appendix 2).

School staff should not dispose of medicines. Parents and carers are responsible for ensuring that date expired or unrequired medications are returned to the pharmacy for safe disposal. In exceptional circumstances the designated member of staff may return medication to the pharmacy with the knowledge of the Senior Leadership Team.

Sharps containers should always be used for the safe disposal of needles and other sharps. Where possible these should be provided by parents/carers as part of the equipment required to meet the needs of the child. There is also a spare sharps container held in the Medical Room. When a sharps container has reached its designated fill line, the box should be locked securely and arrangements made for its safe disposal.

### **Administration of medication - prescribed**

Medicines should only be taken at school when essential; that is where it would be detrimental to the pupil's health if the medicine were not administered during the school day. If medication needs to be administered 3 times a day it is likely that all doses can be given at home. We will only administer if the prescribing doctor has stated that the medication must be administered during the school day, or in exceptional circumstances that have been assessed and agreed by the senior leadership team to best meet the needs of the child.

In order to identify medication needs of pupils within school, a medical information and consent form (Appendix 4) is sent out at the start of each academic year.

Parents can request that school staff administer prescribed medication by completing a medication care plan which includes all necessary information (Appendix 1). Medication will be given exactly as directed on the prescription label and we cannot accept any written or verbal change to the medication differing from that of the prescription label from the parent/carer. This must come direct from the prescribing doctor. The Pharmacy should not alter the script on medication. They should always print a new one.

With regard to inhalers school will not accept a prescription label which specifies “use as directed” and will ask parents to request that the pharmacy issues a prescription label which specifies the maximum dose and frequency.

We cannot accept permission to administer medication via a phone call from the parent or carer but we will accept written, signed consent in the home-school diary or via a letter for the first day of administration. We will then request a medication care plan is completed via Parent App.

We are unable to grind or crush any tablets unless stated on the prescription label, and a tablet can only be cut in half if it has a ‘cut’ line. Equally capsules cannot be opened unless pharmacy provides specific instructions to do so on the prescription label. Where a full tablet or medicine measure is not required, as per prescription, excess will be safely stored in an appropriate sealed container for disposal at a later point.

In such case that parents/carers request the return of ½ tablets that have been cut at school; this should be facilitated in a manner that is both safe and appropriately documented. School will not accept ½ tablets into school and cannot give medication that has already been cut.

Medication will always be checked by two members of staff. The second member of staff will then also witness the administration of that medication to the pupil and countersign administration paperwork immediately after administration.

Where possible we would support pupils administering their own medications in consultation with parents/carers and commensurate with their levels of understanding. We would not however allow them to carry their own medication to, from, and during school due to the vulnerability of other pupils.

### **Administration of medication – non-prescribed**

Parents can request that non-prescribed paracetamol be administered to their child by completing a temporary medication care plan (Appendix 1). The paracetamol must be supplied by parents/carers and transported to school appropriately as documented in the transport of medications section of this document. Non-prescribed paracetamol will not be administered for more than 3 consecutive days without seeking GP advice. Paracetamol supplied by parents should be labelled with the child’s details. If parents

wish this paracetamol to remain in school for potential future requirement then it will be locked in the classroom based safes. Prior to administering any pupil paracetamol for minor ailments without prior instruction from parents, staff will contact parents/carers to ensure that the maximum dose in 24 hours has not been exceeded and to ascertain the time of any previous doses to ensure adequate time has passed. Parents will be notified via the home/school diary of the time and dose administered.

Other non-prescription medication that school staff are able to administer following completion of a medication care plan include topical creams for skin complaints. Preventative creams, such as those used during intimate care procedures may be used over long periods of time. If however, with any non-prescription topical cream, staff feel that they are being used to treat an ongoing complaint then they may recommend parents seek medical advice.

Staff are unable to administer any medication containing aspirin or ibuprofen unless it has been prescribed by a doctor.

### **Administration of medication - 5 R's procedure**

1. Right person – check the identity of the pupil against the name on the medication prescription label.
2. Right medication – check the medication name and strength against the care plan completed by parents/carers. Check the expiry date of the medication.
3. Right dose – check the dose of the medication against the prescription label and the care plan completed by parents/carers.
4. Right route – check that you are administering the medication via the right route e.g. oral, gastrostomy, naso-gastric tube. This information is often found on the prescription label, but will also be found on the care plan completed by parents/carers.
5. Right time – check that you are administering the medication at the correct time as per the prescription label and care plan.

### **Emergency Medication**

All pupils with prescribed emergency medication in school will have an individual corresponding protocol that has been completed by the pupil's Consultant, GP and/or the Specialist Nurse. Alongside the protocol generated by their medical professional, there are additional care plans to be completed by parents that provide school staff with additional information surrounding the child's condition and management in an emergency (Appendix 5, 6 and 7). A copy of these protocols and care plans will be kept in the emergency bum-bags to ensure that medication can be administered promptly.

Schools are now able to keep a central salbutamol inhaler for use in an emergency should a pupil with a prescribed inhaler not have theirs available in an emergency. This inhaler is stored in an emergency kit, located in the main office alongside the central first aid kit

and defibrillator. This inhaler should not be locked away (Department of Education guidance on the use of emergency salbutamol inhalers in schools, March 2015).

For those children with emergency medication, an advanced care plan or complex medical needs, they will also have a Medical Emergency Pack (Appendix 9) created by their class team. This will consist of all the relevant medical information for that child, as well as copies of their individual protocols. This pack will be given to the paramedics in an emergency situation and can travel with the pupil to hospital.

### **Recording**

Daily individual pupil records are kept of all medication administered at school (Appendix 3.1). If any entries are made incorrectly on medication registers they must not be crossed out or erased. Instead 'entered in error' must be written, signed, and then the correct entry made. Administration records should be completed immediately after administration and counter-signed by the member of staff who witnessed both the preparation and administration of the medication.

Each pupil will have a medication and prescribed feeds file. This file contains all relevant information associated with the administration of medications and prescribed feeds at school. This file is locked away when not in use to protect confidentiality. Only the most recent and up to date protocols should remain in the pupil file. Old protocols should be archived appropriately. All administration records should be archived at the end of each academic year.

### **Transporting of medication**

Any medication transported to and from school should only be handled by responsible adults and must not be stored in pupil's bags. This includes emergency medications. It is the responsibility of parents and carers to ensure that a responsible adult receives and delivers the medication to school and the school is responsible for handing it back at the end of the day. This includes medication being transported to respite settings and back home again.

Medication sent to and from respite establishments and medication that accompanies the pupil daily on school transport is signed in and out of school (Appendix 8). Only members of staff employed by the school will sign over medication to transport. If a volunteer or student is asked to deliver a pupil to transport with medication the SLT member of staff on bus duty will witness the handover of medication and sign the appropriate form. It is the duty of the class team to inform the volunteer or student of this at the time but it will also be included in any induction.

When new medication arrives it must also be signed into the individual pupils' medical folder (Appendix 10). This is also the case when the medication is empty/no longer required and leaves the premises. At the end of the school year all outstanding medication is returned home along with a covering letter following the usual transport of medication procedure.

## **Managing medications during off-site/residential visits**

If medication is required during an off-site day trip then it must remain complete in its original packaging along with a copy of the administrative paperwork and any relevant protocols. Pupils requiring medication will be identified on their individual off-site personal information cards which are taken on all off-site visits. Medication is signed into and out of school on the class off-site visit forms. All medication required during off-site visits will remain with an appropriate member of staff at all times.

If medication is required during a residential visit parents/carers are asked to send all medication in a week before the visit, along with relevant completed paperwork, so that we can ensure systems are in place for its administration. The medication will be stored in the main safe until the day of the residential and then will be transferred to a locked box. A named member of staff will be responsible for the overseeing of medication administration for all pupils. This member of staff will check and sign that all medication has been administered from a master timetable. Medication will be returned after the visit via the usual transport of medication procedure. Any issues with regard to medical needs will form part of the risk assessments completed for overnight stays.

## **Prescribed enteral feeds/supplements**

Daily individual pupil records are kept of all enteral products administered at school (Appendix 3.2). All enteral products and feeds must be prescribed by a GP/Consultant/Dietician and must be supplied alongside an enteral feeding regime written by the prescribing professional. Administration records should be completed immediately after administration and counter-signed by the member of staff who witnessed both the preparation and administration of the feed. Enteral products should be checked and treated in the same way that medication is, and staff will follow the guidance on the storage of these products as found on the feeding regime.

## **Feeding via a gastrostomy tube**

Some pupils require feeds, water or medication via a gastrostomy tube in their stomach. All staff that administer feeds will be trained and competency checked by the community nurse trainer and will follow the care plan provided by the enteral home feeding team.

Class staff are able to identify the patency of the peg site and will not administer via this route if they are concerned. In this instance they will contact the community nurse and parent/ carers for advice.

On occasions gastrostomy tubes can become loose and fall out. In these instances, if the child has a low profile balloon gastrostomy tube (a 'button' tube), certain staff are trained to insert a stoma stopper device. Most children will have their own stoma stopper. These are specific to the child, provided by the Home enteral feeding team and are a measured length and width. However, there is a small group of children who have not yet been provided with these. To cover the period before these children receive their

own stoppers, the school has access to two spare stoma stoppers (one in each of the widths that may be required). Staff should select and insert the stopper that is the same width as the child's button tube. Staff can confirm the width of the child's button tube by checking the child's feed plan, or the central port/cap of their button tube. This procedure will be carried out by 2 staff, one of which is a first aider. Both staff will be gastrostomy competent.

If the child has a PEG tube, and this tube comes out, a stoma stopper should not be inserted into the gastrostomy stoma. Instead, the stoma should be covered with a dressing, and arrangements should be made to get the child to hospital for insertion of a new PEG tube.

### **Roles and responsibilities**

Only staff who are appropriately trained will administer medication. On the school site this will generally be the designated members of class staff for administering regular medication but this may be any trained member of staff for emergency medication. Class teachers are responsible for ensuring that medication has been administered. In their absence a class teaching assistant will take responsibility. For off-site visits the member of staff who signs the medication out is responsible for the administration and return of the medication. On residential visits and Early Years visits at least one first aider will be present.

A designated member of staff in each classroom will monitor the expiry dates of medication and prescribed feeds and will contact parents/carers if further supplies are needed. This is also the case for monitoring the expiry dates of emergency gastrostomy replacement kits.

Appendix 1

HEART OF THE FOREST COMMUNITY SPECIAL SCHOOL  
MEDICATION CARE PLAN

Heart of the Forest School will not administer medication to your child unless this care plan has been completed and signed.

Name of Child

Date of Birth

Allergies

Medical Condition or Illness (For which this medication is prescribed)

Name and Telephone Number of Prescribing Doctor

**MEDICINE**

Name of medicine  
(As per prescription label)

Note: Medicines must be prescribed and supplied in the original container as dispensed by the Pharmacy with the prescription label visible. Medication will be given as directed on the prescription label so it is parent's responsibility to ensure this information is correct.

Dosage and method of administration  
(E.g. oral, gastrostomy, nasogastric tube)

Time to be given

Special precautions (if any)

Are there any side effects?

Procedures to take in an emergency

Is there anything that we should NOT do?

#### PARENT/CARER CONTACT DETAILS

CONTACT 1 Name

Daytime telephone/contact number

Relationship to child

CONTACT 2 Name

Daytime telephone/contact number

Relationship to child

The information is, to the best of my knowledge, accurate at the time of writing and I give consent to school administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped. I consent to sharing of the information included in this care plan with relevant healthcare professionals if required.

Date ..... Signature(s) .....









Please delete YES/NO for consent to following treatments being administered by qualified school staff.

Plasters and First Aid: YES / NO  
(Please inform class team of any allergies)

Un-prescribed topical creams (e.g. aqueous, sudocrem, E45) YES / NO

Note: Un-prescribed topical creams must be provided by parents/carers with clear instructions. They will not be applied for more than 3 consecutive days without seeking advice from your GP. Preventative creams, such as those used during intimate care procedures may be used for longer periods of time. If however, staff feel that these are being used to treat an ongoing complaint they may recommend medical advice.

I hereby consent that my child be treated as indicated above.

Signed: ..... Parent/Guardian

Medical diagnosis:

Please indicate if your child suffers from

Epilepsy: YES / NO

Allergies YES / NO

Asthma YES / NO

Is your child taking regular YES / NO medication  
in school?

If you answer yes to any of the above questions further forms will be sent to you.

Is your child taking regular medication at home? YES/NO

I consent to any emergency treatment necessary. I therefore, authorise the school staff to sign, on my behalf, any written form of consent required by the hospital authorities should medical treatment ( a surgical operation or injection) be deemed necessary, provided that the delay required to obtain signature might be considered, in the opinion of the Doctor or Surgeon concerned, likely to endanger my child's health or safety.

Signed: ..... Parent/Guardian

Date: .....

Appendix 5

HEART OF THE FOREST COMMUNITY SPECIAL SCHOOL  
ASTHMA CARE PLAN

Only to be completed for pupils who suffer from asthma.

PUPIL NAME:
D.O.B:
Description of asthma attack (What happens?):
Causation - Are there any known 'triggers' that cause an attack to occur?

Frequency/Duration - How often does your child have an attack?

How long does the attack usually last?

Management - What do you do?

How long is the recovery period? What happens?

#### MEDICATION

At home is there regular medication to control asthma? Please detail:

At school is there medication which is/can be administered? Please detail:

#### EMERGENCY CONTACT NUMBERS

First Contact Name:

Tel.No:

Second Contact Name:

Tel.No:

Home Telephone No. (If not listed above)	
G.P.	Tel.No:
Is there a specific Doctor/Hospital who are aware of your child's condition?	
Please delete as appropriate	YES/NO
If YES can you please complete the following:	
Name of Doctor:	Tel.No:
Name of Hospital:	Tel.No:

The above information is, to the best of my knowledge, accurate at the time of writing.

Date..... Signature(s).....

Appendix 6

HEART OF THE FOREST COMMUNITY SPECIAL SCHOOL  
EPILEPSY CARE PLAN

Only to be completed for pupils who suffer from epilepsy.

PUPIL NAME:
D.O.B:
Description of seizure (What happens?):

Causation - Are there any known 'triggers' that cause seizures to occur?

Frequency/Duration - How often does your child have a seizure?

How long does the seizure usually last?

Management - What do you do?

How long is the recovery period? What happens?

#### MEDICATION

At home is there regular medication to control epilepsy? Please detail:

At school is there medication which is/can be administered? Please detail:

Is your child prescribed buccal midazolam, rectal paraldehyde or any other medication if the fit is prolonged? Do they have an emergency protocol?	
EMERGENCY CONTACT NUMBERS	
First Contact Name:	Tel.No:
Second Contact Name:	Tel.No:
Home Telephone No. (If not listed above)	
G.P.	Tel.No:
Is there a specific Doctor/Hospital who is aware of your child's condition? Please delete as appropriate	
YES/NO	
If YES can you please complete the following:	
Name of Doctor:	Tel.No:
Name of Hospital	Tel.No:

The above information is, to the best of my knowledge, accurate at the time of writing.

Date..... Signature(s).....

### Appendix 7

## HEART OF THE FOREST COMMUNITY SPECIAL SCHOOL ALLERGIES CARE PLAN

Only to be completed for pupils who suffer from allergies

PUPIL NAME:
D.O.B:

Causation - What is your child allergic to?

Describe allergic reaction:

How long does allergic reaction usually last?

Management - What do you do?

How long is the recovery period? What happens?

**MEDICATION**

At home is there regular medication to control allergies? Please detail:

At school is there medication which is/can be administered? Please detail:	
EMERGENCY CONTACT NUMBERS	
First Contact Name:	Tel.No:
Second Contact Name:	Tel.No:
Home Telephone No. (If not listed above)	
G.P.	Tel.No:
Is there a specific Doctor/Hospital who are aware of your child's condition?	
Please delete as appropriate	YES/NO
If YES can you please complete the following:	
Name of Doctor:	Tel.No:
Name of Hospital:	Tel.No:

The above information is, to the best of my knowledge, accurate at the time of writing.

Date..... Signature(s).....

Appendix 8

HEART OF THE FOREST COMMUNITY SPECIAL SCHOOL TRANSPORT OF MEDICATION

Pupil Name:

Date:

Medication	Quantity	In/Out of school	Signature (1)	Signature (2)


Form to be signed by both individuals involved in the transition of medication between settings (E.g. school staff member and transport operative/respice provider/carer).

If signing medication OUT of school; school to retain copy.

If accepting medication INTO school; transport/carer to retain copy.

Appendix 9

HEART OF THE FOREST COMMUNITY SPECIAL SCHOOL  
MEDICAL EMERGENCY PACK - TO BE GIVEN TO PARAMEDICS

Name of Child

Date of Birth

Allergies

Medical Condition(s)

Weight

PARENT/CARER CONTACT DETAILS

CONTACT 1 Name

Daytime telephone/contact  
number

Relationship to child

CONTACT 2 Name

Daytime telephone/contact  
number

Relationship to child

Open access to PAU

YES / NO

Information accurate on

Current medication

Protocols in pack - please tick      Communication Passport

Epilepsy

Diabetes

Allergies

Respiratory

Feeding regime

End of life care plan

Going out form

Other - please list

Important telephone numbers - please list

Community nursing team      01242 250630

PAU      0300 422 8305

Items to take - please tick      Pads/wipes

Feed/spare button/tubes

Medication

Medical Equipment

Other - please list Appendix 10

HEART OF THE FOREST COMMUNITY SPECIAL SCHOOL  
RECORD OF MEDICATIONS ON SITE

