

Bedales Schools’ Medication Policy and Procedures

INCLUDING EYFS

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Author	Health Centre
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Tick relevant box(es) how this Policy should appear:

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For Pupils/Students		

INTRODUCTION

The purpose of this policy is to ensure the following:

- pupils at Bedales Schools are supported appropriately with their medication
- arrangements are put in place to support any pupil with a medical condition
- the health and welfare of all pupils at Bedales Schools

To ensure safe practice in managing medicines, the following guidance should be adhered to:

- Nursing and Midwifery Council "*Standards in Medicines Management*"
- Royal Pharmaceutical Society "*The Handling of Medicines in Social Care*"
- Medicines Act 1968
- Health and Social Care Act
- Children's and Families Act 2014
- National Minimum Standards for Boarding Schools
- Department for Education "*Supporting pupils with Medical Conditions*"
- Department of Health "*Guidance on the use of Salbutamol Inhalers in Schools*"

The role of the Bedales Schools' Health Centre is central to the implementation of this policy and to the safe and effective management of medicines. All actions by staff involving medication at Bedales, must only be undertaken with the full knowledge and authorisation of the school nurses at the Health Centre.

PRINCIPLES OF GOOD PRACTICE

Parents will be requested to provide up to date medical information to enable staff to provide the appropriate support. When the pupil joins the School, parents will be requested to complete a questionnaire outlining any past medical history, current medical issues and treatment, including any known allergies and past immunisations. In addition, parental consents will be requested for specific things including administration of over-the-counter medications and vaccinations

The medicines policy will be reviewed annually by the Health Centre Coordinator to ensure that it reflects current working practice within Bedales School and staff will be made aware of any changes made.

Prescribed medicines are the property of the person to whom they have been prescribed and dispensed.

Medication must be administered only to the person whose name appears on the label and according to the prescriber's instructions. These instructions are indicated on the pharmacy label and must be presented in English. At each administration, medication must be recorded and signed for.

The administration of medicines should be "protected time" and pupils and staff must be instructed not to disturb the person administering medicines, to reduce the risk of medication errors.

Administration of medication will be delivered in a way that respects dignity, privacy, cultural and religious beliefs of the pupil.

Confidentiality must be observed regarding the pupil's medical history and medication.

Medication should never routinely be pre-dispensed. In exceptional circumstances this may be done and checked out in the presence of the person who is going to administer.

If there is any query or concern regarding a pupil's medication, then that medication should not be given, and the school nurse must be consulted immediately.

Medication may only be administered by designated and appropriately trained staff.

All pupils taking medication should be monitored for changes in their condition, allergies etc. which may be medication related, and the school nurse kept informed.

All staff are required to read the Medication Policy and sign to acknowledge their agreement to abide by it, a template is provided in Appendix I.

MEDICINES BROUGHT INTO SCHOOL

Medicines brought into school must be in the original pharmacy labelled container bearing the instructions from the prescriber in English.

All medicines brought into school must be handed in immediately and checked into stock by either the matrons/house assistants or the school nurses.

A letter / completed form from the parent must accompany any prescription medication, or OTC medication that has been requested to be administered by the parent/guardian giving full instructions in English. Staff must check with the pupil when the last dose was given.

Medication received into school must be recorded on arrival.

If there is any doubt over the medication received or it is not in the original packaging, this must be referred immediately to the school nurse.

ORDERING MEDICINES

The school doctors visit Bedales School twice a week and Dunhurst once a week as required. If medicines are prescribed at these visits, the GP will issue the prescriptions and send them to the supplying Pharmacy.

Any prescribed and dispensed medicines will either be collected directly from the pharmacy by a nominated member of school staff if urgent or delivered by the pharmacy delivery personnel.

Any medicines prescribed will be added to the individual pupil's computer record by the GP and on the prescription audit by the school nurse at Bedales or matron in Dunhurst. Stock will be entered on the ISAMS stock manager.

The medication will initially be received into the Health Centre/matrons office in Dunhurst, recorded on the computer system and then distributed to the appropriate Boarding House.

To avoid running out of medicines, house assistants/matrons must ensure the school nurses at Bedales are informed well in time of any medicine running low for senior pupils. For Dunhurst pupils the matrons are responsible for stock management of all medications. The turnaround time for issue of a repeat prescription at the Swan Surgery should be considered at approximately one to two weeks.

The school nurses are responsible for ordering repeat prescriptions from the Swan Surgery.

House assistants/matrons should not order medication direct from the GP but use the process indicated above. If medication is coming via parents from private prescribers, parents should be contacted when supplies are getting low.

STORAGE

Medicines should be stored safely in lockable cupboards. In the boarding houses, house assistants/matrons will hold the key. In the Health Centre, school nurses will hold the keys. For pupils who have been deemed competent to self-administer, they can only do so if they have a lockable cabinet by their bed as specified in the self-administration assessment.

Pupils should know where their medicines are at all times and be able to access them immediately where appropriate. They should be aware of who holds the key to the storage facility.

Emergency medicines and devices e.g. asthma inhalers, blood glucose testing meters and adrenaline pens can be held by the pupil. Spares should always be readily available to pupils but stored safely and accessibly.

Items requiring fridge storage should be kept safely in a designated fridge. The temperature of the fridge should be within the range 2-8 degrees Centigrade. A log of maximum and minimum temperatures should be recorded daily and any temperature that is out of range must be reported to the school nurse who will provide advice on the action to take. The fridge should be defrosted and cleaned termly.

It is recognised that during the school holidays, fridge temperatures will not be monitored. Nurses should inspect the integrity of medication at the beginning of term to confirm that appropriate storage has been maintained. Fridge medications should not be stored over the long breaks. Any fridge medication in stock at the end of the summer term should be returned to parents or to pharmacy for disposal. Any items in the fridge at the time of defrosting should be stored temporarily during the defrosting in a suitable location (e.g. another fridge or cool bag).

Room temperature for medication storage should be below 25 degrees Centigrade with a room thermometer present for monitoring and the school nurse should be informed if the room temperature exceeds 25 degrees Centigrade.

Controlled Drugs should be stored in a locked non-portable container and only named staff should have access. Controlled Drugs should be easily accessible in an emergency where appropriate.

A lockable cupboard or drawer for safe storage of medicines must be available for each pupil who wishes to self-medicate.

Medication should be date-checked on a regular basis and stored and used in date order. Expired medication should be returned for disposal via the pharmacy.

Medication storage areas including cupboards and fridges must be cleaned regularly and checked on a monthly basis.

CONSENT

Non-prescription medications that are not part of the Homely Remedy list can only be given if the parents/guardians have completed the Parental Consent to Administer form. Parents can consent to over-the-counter medications that are on the Homely Remedy list on the Admission Health Questionnaire.

For prescription medications it is ideal practice to inform parents/guardians that they have been prescribed and every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality. Fraser competence guidelines, which set out good practice for the treatment of under-16s without parental consent, should be followed.

Each year, parents will be requested to update their parental consent on the medical update form to be returned at the beginning of the autumn term, detailing any treatment or changes that have occurred in the school holidays.

If a pupil refuses to take their medicine or carry out a necessary procedure, staff should not force them to do so but inform the school nurse. The school nurses will try to resolve the issues and liaise with the parents as necessary.

DAY PUPILS

For day pupils, prescription medicines should only be administered at school when it would be detrimental to a pupil's health or school attendance, not to do so.

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

The basic principles of this policy apply to day pupils as well as boarders. Consent to give over-the-counter medication is requested on the pupil health questionnaire.

INDIVIDUAL HEALTHCARE PLANS

For pupils with long term or complex medical conditions, an Individual Healthcare Plan (IHCP) should be drawn up with input from parents, pupil and healthcare professionals where necessary. This will be stored on the Documents section of their ISAMS electronic file.

If a pupil has a medical condition, in addition to the details in the IHCP, the procedures in the guidance “*Supporting pupils at school with medical conditions*” DfE 2015 must be followed.

The following information should be recorded in the IHCP:

- Medical condition, its triggers, signs, symptoms and treatments
- The pupil’s resulting needs including medication (dose, side effects and storage), other treatments, testing, access to food and drink, dietary requirements, environmental issues etc.
- Specific support for pupil’s educational, social and emotional needs
- Level of support needed to manage the condition (including in emergencies)
- Who will provide the support (including training)
- Who in the school needs to be aware of the pupil’s condition and the support required
- Arrangements for written permission from parents for medication to be administered by staff or self-administered by the pupil
- Separate arrangements for school trips, outings, activities
- Confidentiality issues
- What to do in an emergency
- If parents have consulted to emergency use of specific medication.
- Actions to be taken if pupil refuses to take their medication
- A suggested template for the IHCP is provided in Appendix 2.

HOMELY REMEDIES AND NON-PRESCRIBED MEDICATION

Homely remedies are over-the-counter (OTC) medicines which are provided for pupils at the school, for the treatment of minor ailments. They can be used for up to two days under the homely remedy policy.

Non-prescribed medicines are defined as over-the-counter medicines which are either provided by parents or can be purchased by pupils themselves. Pupils must inform the house assistants/matron/school nurse of any medicines they bring into school and a parent authorisation form must be signed for each medication and a self-administration assessment considered where appropriate.

The school homely remedy policy is integrated into the School Medical Policy and signed off by the school doctors. It comprises of a list of homely remedies that may be administered by house assistants/matrons and an extended list which may be administered by nurses.

Parents will be provided with the list of homely remedies, and they will be requested to state if there are any medications they do not want their child to receive.

A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.

As with all medications, medication for pain relief should never be administered without first checking when the previous dose was taken.

All medication purchases for the homely remedy policy will be made by the Health Centre staff.

House assistants/ matrons must be aware of the content of the homely remedy policy, the limited list that they are able to administer and the contra-indications before administering a non-prescribed homely remedy to a pupil. They **must not** administer homely remedies from the nurses extended list.

For non-prescribed medications (including herbal or homeopathic remedies) sent into school by parents, these must have a signed parental consent form including confirmation that the medication has been taken before without any ill-effect (Appendix 3). They should be presented in the original

packaging with clear information in English on reason for use. The house assistants/ matrons should inform the school nurses before administration, in case of any interaction with other medicines.

A record detailing, the receipt, administration and return of non-prescribed medicines including herbal and homeopathic remedies sent in by parents that are not listed under the school homely remedy list, must be kept in the boarding house.

Records must be kept of all homely remedies and non-prescribed medication given to a pupil including the name, form and strength of the medicine, dose, date and time given and reason. The record must be signed by the person administering. A balance of stock should be kept for all homely remedies.

Homely remedies and non-prescribed medicines must be stored in the same way as prescribed medicines.

ADMINISTRATION

Medication must be administered in accordance with the prescriber's instructions, as printed on the pharmacy label. Non-prescribed medicines will not have a pharmacy label so should be administered with the ICHP or homely remedy policy and any specific instructions for administration in the information sheet contained within the packaging.

Potential allergies must be checked before administration. It is the parent's responsibility to inform School of any known allergies. The school nurse will be responsible for ensuring that this information is shared appropriately with staff in school.

The label on the container provided by the pharmacist must not be altered under any circumstances. If the label becomes detached from the container, is illegible, or written in any language other than English, the medication must not be given and the school nurse should be contacted for advice.

Medication must not be transferred from one container to another.

A diary or a prompt sheet should be used to ensure all pupils who require medication, receive it at the correct time.

Before commencing administration of medication, hands must be washed with liquid soap to prevent contamination.

The six Rights of Administration must be applied.

- Right pupil
- Right medicine
- Right dose
- Right time
- Right route
- Right to refuse

Medication that has been prescribed with directions to administer "as required" (PRN) must be given in accordance with the prescriber's instructions. Details of when the drug can be given should be recorded on the stock sheet when received onto the boarding house

Staff should record on ISAMS that medication has been administered to a child **immediately** after that medication has been given. It is essential that the staff member witnesses that the child has taken the medication.

For medication with a limited expiry, containers of medication should be marked with date of opening e.g. eye drops, creams, liquids.

For application of creams and ointments, disposable gloves must be worn or non-touch technique be used such as by using a tongue depressor to give the cream to the pupil.

Medication should not be given if:

- The pharmacy label is difficult to read
- The pharmacy label is not written in English
- A significant change in the pupil's physical or emotional condition is observed
- The six Rights of Administration cannot be verified
- There are any doubts or concerns

In these situations, the medication should not be given until advice has been sought from the school nurse.

Medication must never be crushed, broken or mixed with food and drink unless it is designed for the purpose, or it has been specifically authorised in writing by a healthcare professional such as the consultant or the pharmacist.

All liquids must be shaken prior to administration. Liquid dose measurements must be undertaken with accuracy. For doses of 5 or 10ml, the 5ml plastic measuring spoon should be used. For doses over 10ml, an appropriately graduated plastic measuring pot can be used. This must be held at eye level for accurate dose measurement. For doses of less than 5ml, an oral syringe must be provided for measurement of the dose.

If a pupil refuses to take medicine, they should not be forced to do so. The school nurse should be informed who will in turn inform the pupil's parents and GP so that alternative options can be considered.

PROCEDURE FOR ADMINISTRATION

Administration of medication to a pupil

Check the identity of the pupil to whom the medication is to be administered. Check any documentation e.g. IHCP

Check that the medication has not already been given and/or when the last dose was given.

Check that all details on the medication label e.g. the name, form, strength and dose of the drug, how and when it is to be given, any additional instructions e.g. after food and the pupil's name agree with the medication details supplied. Check the expiry date of the medication. If there is any discrepancy, contact the school nurse or the pharmacy immediately.

Administer the medication. Witness the pupil takes the medication.

Record the administration of medication **immediately** by completing the individual record of medicines administered on the electronic system. This must include the name, form and strength of medicine and dose given, date, time and details of the person who administered. If the medication has not been administered, an explanation/code should be included to explain why e.g. if the pupil refuses.

Record any additional relevant information on the record of medicines administered and inform the school nurse if appropriate e.g. refusal.

CONTROLLED DRUGS

Controlled Drugs (CDs) prescribed for pupils require secure handling and robust record keeping.

When Controlled Drugs (e.g. ADHD medications or some anti-depressants/antipsychotic medications) are received from the pharmacy, they will be delivered to the Health Centre where they must be checked and transferred to the appropriate boarding house. At the boarding house, they must be signed in to the boarding house register (CD book) by two members of staff, ideally the house assistant/matron and a school nurse. If the CDs are brought in by a parent directly to the boarding house the second signatory can be another house assistant/ matron or member of house staff.

Administration of Controlled Drugs should be undertaken by a suitably trained member of staff and ideally witnessed by a second appropriately trained member of staff. This task will usually be undertaken by house assistants/ matrons or Houseparents. In the absence of a second member of staff, CDs may be administered by one person in order to ensure that medication is administered when needed. This member of staff should be vigilant and double-check each aspect of the medicine administration.

A record of administration on the electronic system must be made immediately after giving the medication.

Administration of Controlled Drugs must be recorded, and transfer of medications recorded and witnessed in the Controlled Drugs register. The name of the pupil, time, date, medication (name, form and strength) and dosage must be recorded each time. In addition, the balance of stock remaining must be counted and recorded. Any discrepancies must be reported to the school nurse immediately. Administration of Controlled Drugs should be protected time in matrons surgery to avoid drug errors with a one pupil only policy. Other pupils must be asked to wait outside.

The member of staff who administers the Controlled Drug must make the entry and sign in the Controlled Drug register and the witness (if available) must countersign.

Any complex dosage calculations should be double checked by a second member of staff.

If a pupil is being issued with more than one dose, for example for the weekend, or holidays, this must be signed out by two members of staff, or one staff member plus a parent if they are handing it to them.

If a pupil is carrying their own medication home for the holiday/weekend, the house assistant/matron will email the parent to confirm the quantity of tablets that have been sent home in order for the parent to verify safe arrival of the medication at home.

Controlled Drugs for destruction should be returned to the parent/Health Centre for disposal via pharmacy. The register must be signed by two people including the person removing the drugs to pharmacy.

Controlled drugs should be audited weekly in-house by the house assistants/matrons.

A pupil 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.

For storage of Controlled Drugs- see section on Storage.

RECORD KEEPING

Records must be kept of all medicines administered to pupils.

The record should include what, how and how much was administered, when and by whom. Any side effects of the medication should be noted.

The record should be made immediately after the medication has been administered and the staff member has witnessed it has been taken.

A record should also be made for non-administration e.g. refusal.

For medications that are administered regularly but infrequently e.g. monthly or every 3 months, a system must be in place to record when these medications are due e.g. noting in the diary.

The school nurse must be informed of any unusual events e.g. medication given out of the usual timeframe, refusal, side effects etc.

Any changes to medication made by the prescriber by phone can only be accepted if it is supported in writing (by fax or email) before the next or first dose is given. The records (and LHCP if appropriate) must be updated as soon as possible (usually within 24 hours).

An audit trail of medication needs to be maintained i.e. a record of all medication received, medication administered and medication returned.

House assistants/matrons will provide a record of all medicines leaving and returning to the school with pupils for the purposes of day trips, residential visits, sporting activities etc. An in/out log should detail date, quantity, medication name, form and strength and pupil's details. Information must be provided to the appropriate school staff responsible for the pupil when the pupil is temporarily away from the school. This includes the medicines taken with the pupil, clear directions, time of the last and next dose and a contact for queries.

Medication administration records must be kept with the individual medical records and retained for the time specified by the regulatory body and thereafter destroyed securely. This is currently advised at 25 years of age or 10 years after leaving the School (7-10 years after leaving).

The Controlled Drugs register must be used whenever Controlled Drugs are received into the school, administered or returned to the parent/ pharmacy. The remaining balance in the register must always reflect the current stock held in the school.

DISPOSAL

Disposal of medication will be necessary when:

Medication is out of date.

A course of treatment is completed, discontinued or no longer required

The pupil user has refused to accept the medication

The medicine has been "spoiled"

In these circumstances, it must be removed from the boarding house cupboard and returned to the Health Centre where it will be placed in a locked cupboard for return to the parent /appropriate disposal by the school nurse. This should be recorded (Appendix 4).

If medicines are returned to the parent for safe disposal, a record should be made in the medication log. Details should include date, quantity, name, form and strength of medication, name of the pupil for whom it was prescribed plus the school nurse's initials or signature. If the parent fails to collect the

medicine at the end of term, it may be taken to the pharmacy for disposal, documented using the pharmacy return form.

No medication may be destroyed in the school. Unwanted medication may not be placed in sharps boxes or down the sink or toilet. The only exception to this is for small doses of liquids which have been measured out for the pupil but which the pupil refuses. In this case, as the volume of liquid is small, it may be poured down the sink and a record of its destruction made on the medication record. The school nurse should be notified.

Syringes and needles must be disposed of by placing in the "sharps" box.

SELF-MANAGEMENT

A risk assessment should be undertaken to determine whether a pupil is able to self-medicate bearing in mind the safety of the individual pupil and others in the school. See Appendix 5.

Where appropriate, pupils should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily.

Pupils who can take their medicines themselves or manage procedures may require an appropriate level of supervision.

A lockable facility should be provided in the pupil's room. Storage for an individual will be determined by risk assessment.

Pupil risk assessments must be reviewed regularly, and reassessment undertaken based on individual circumstances and need. As part of the reassessment, it must be checked whether the pupil has been taking their medication as intended.

A record should be kept of all medicines received into the school and then distributed to pupils for them to self-medicate.

House assistants/matrons are responsible for assessing the need for repeat medication being ordered and then following the steps listed in Ordering Medications.

A template is provided by the Health Centre for the risk assessment.

DAY TRIPS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES

All pupils with significant medical conditions will have an IHCP detailing support and actions required for them to participate safely in school activities. This will require participation from the parents, pupil and relevant healthcare professional. If the staff member completing the general risk assessment for the particular activity has any concern, they should speak to the school nurses.

Consideration must be given to the safe transport and storage of any medicine.

All staff involved in administration of medication on a trip must be trained and signed off to administer medication by the nurses. They must be aware of the pupil's condition and treatment and familiar with their IHCP.

The house assistants/matrons will provide any medication that pupils are taking, and trip staff will be provided with the correct doses and instructions on how to give the medication. If there is any doubt, please contact the Health Centre staff. Trip leaders must contact the house assistants/matrons in advance to advise of the pupils they are taking out so that the medication can be ready for collection.

All individual medications taken out on trips, both day trips and residential, should be signed out of the boarding houses by the trip leader/nominated First Aider and the quantity remaining signed back in on arrival using an in/out log. Stock levels should be updated on ISAMS to correspond to the current level held in the cupboard after returns are received. If the quantity signed back in is not what was expected or there are any other discrepancies the school nurse should be notified. This includes using the CD register for pupils on CDs.

Staff must record all medication administration whilst on a visit/ trip away from the school. The same procedures should be followed for medicines administration whilst away from the school as within the school.

SPECIALIST TASKS

On occasions, staff may be requested to administer medication by a specialised technique. Examples include: administration of buccal medication, adrenalin auto-injector pens, nebulisers etc. This will normally be undertaken by the school nurse but occasionally a task may need to be delegated to a member of staff e.g. house assistant/matron.

Administration of such medication requires specific training via an approved trainer such as the school nurse. Training should be documented. An assessment of competence should also be carried out and documented for any staff member who has been trained in the procedure.

This treatment and responsibilities of all those involved in this care should be included in the Individual HealthCare Plan.

Administration of a medication by a specialised technique may only proceed with the express recorded agreement of the pupil and parent.

Authorisation for a staff member to undertake this responsibility must first be obtained by the school nurse.

EMERGENCY SUPPLY OF SALBUTAMOL

The school nurse and trained staff will be responsible for implementing the Department of Health "Guidance on the use of emergency salbutamol inhalers in schools".

The "guidance" allows for the school to keep a salbutamol inhaler on the premises to be used in a specific emergency for pupils included on the "emergency salbutamol register".

To be included on the register pupils must

- have been diagnosed with asthma, and prescribed a reliever inhaler

OR

- have been prescribed a reliever inhaler.

Written parental consent for use of the emergency inhaler must be given in each of these circumstances and is requested on the Admission Health Questionnaire.

The emergency inhaler can be used if the pupil's prescribed inhaler is not available. Each pupil will have a care plan drawn up, so staff know who to contact in an emergency and procedures to be followed in line with the "guidance".

A photo register will be kept in each emergency bag to show who is permitted to use the emergency inhaler as detailed in their IHCP.

Supplies for the emergency asthma kits will be ordered by the school nurse using the contents list of the kits in the "guidance" and following the recommendations for the supply order in the "guidance".

Emergency kits will be held in the school, one in each of the following locations: each boarding house, PE department, Main Reception, Kitchen, Staff Room, ODW and the Theatre.

All staff in the school will be trained on how to recognise the symptoms of an asthma attack, and ideally, how to distinguish them from other conditions with similar symptoms and when to call an ambulance or initiate the asthma attack procedure.

All staff in the school must be aware of the location of the emergency kits and members of staff they can access for support, if necessary.

The designated members of staff will be responsible for the storage and care of the emergency kit. The Health Centre will be responsible for ensuring the kit is kept up to date and ready to use.

The emergency inhalers should not be locked away. Staff should have access to the inhalers at all times but with them being out of the reach and sight of pupils.

A record will be made each time the inhaler is administered.

The pupil's GP, school nurse and pupil's parents should be informed whenever a pupil has an asthma attack that requires emergency salbutamol use.

The school nurse is responsible for disposing of expired or used inhalers and they should be returned to the supplying pharmacy as per the waste instructions in the "guidance".

IMMUNISATIONS

Notice of routine vaccinations to be offered by the School Age Immunisation Service (SAIS) will be given by the school nurses at Bedales Health Centre and updated based on current recommendations.

Travel vaccinations can be offered by Bedales school nurses.

Although consent for routine scheduled vaccinations is sought on the Admission Health Questionnaire, each vaccination will require current time consent. Once consent has been given any vaccinations will be administered as per the procedures in sections 10 and 11 by the appropriately trained school nurse or SAIS. Additional procedures will be followed for administration according to the individual product information leaflet and procedures for injections and vaccinations.

If any additional travel vaccinations are requested by the pupil/pupil's parents' full details of travel itinerary including dates and duration of travel and regions to be visited must be provided to allow the school nurse to assess which vaccinations are needed. This will be communicated to the parents to give their consent prior to the vaccination being administered.

If any staff become aware of travel plans by pupils, they should be referred to the school nurse to ensure that appropriate vaccinations are considered. Trip leaders for overseas residential trips must notify the Health Centre with at least 6 months' notice in case travel vaccinations are required.

It is likely that COVID and flu vaccinations will also go onto the routine annual schedule following the recent pandemic. Parental consent will be sought annually and must be given before the vaccine is administered.

Individual medical records must be updated with details of all vaccines given.

AUDITING OF MEDICATION

Medication audits should be undertaken weekly by each boarding house

The audits should include the following topics, which will be carried out at appropriate times:

- Ensuring records are complete and accurate
- Loose medication counts
- Expiry dates and date of opening on eye drops and liquid medications
- Date checks of "PRN" (when required) medication
- Stock control
- Controlled Drugs
- Reordering of supplies
- All forms and paperwork
- Termly audits will be undertaken by the school nurse and will include, in addition to the topics above:
 - Weekly audits being carried out appropriately
 - Staff competency assessments
 - Adherence to emergency salbutamol policy

Audit paperwork is provided by the Health Centre

MEDICATION ERRORS AND SAFEGUARDING

Bedales School recognises that despite the high standards of good practice and care, mistakes may occasionally happen for various reasons. If a mistake occurs, this must IMMEDIATELY be reported to the school nurse so as to prevent any harm to the pupil. There must be no concealment or delay in reporting the incident.

Advice must be sought from the school nurse who will contact the GP / emergency services as appropriate. Any advice given by the healthcare professional must be actioned immediately. The pupil must be observed and monitored for any obvious side effects and emergency action taken if required. The family must be informed immediately.

A medication error form must be completed including details of whether the pupil came to any harm as a result of the error and what action was taken.

A medication error may consist of any one of the following. The list is not exhaustive.

Administering medication to the wrong pupil

Administering the wrong dose of medication

Failing to administer the medication

Administering medication at the wrong time

Failing to record the medication administered

Administering the medication via the wrong route

Incorrect stock balance of Controlled Drugs

All medication errors, incidents and “near misses” must be fully and carefully investigated and documented by the school nurse to determine the root cause and action taken as appropriate. Detailed audits must be carried out on a regular basis and used in school briefing meetings to improve practice.

A safeguarding issue in relation to managing medicines could include:

- Deliberate withholding of a medicine without a valid reason
- Incorrect use of a medicine for reasons other than the benefit of a pupil
- Deliberate attempt to harm through use of a medicine
- Accidental harm caused by incorrect administration or a medication error

Reporting of suspected or confirmed medicines related safeguarding incidents should be made through the usual safeguarding channels.

MEDICATION AWARENESS AND TRAINING

All staff who administer medication must have foundation medication training. Competency of staff must be assessed yearly or more frequently if required. Competency Assessments are carried out by the Health Centre nurses. Staff must be aware of the medications they are administering and the consequences of administration and non-administration. Full consideration must be given to whether the best outcomes are being achieved for pupils.

Advice on medication issues, policies and procedures should be sought from a pharmacist in conjunction with school GP and school nurses.

Medication reviews will be performed by the GP or other healthcare professional and staff must be aware of potential changes to a pupil's medication regime.

Staff are responsible for monitoring the effects of the medicines they administer and taking action if the pupil's condition changes.

PROCEDURE FOR EMERGENCY CONTACTS

Emergency contact details for medication issues are as follows:

1. Health Centre 01730 711 620
2. NHS 111
3. Day Lewis Pharmacy, Petersfield 01730 263064.
4. National Poisons Unit 0344 892 0111
5.
6.
7.
8.
9.

10.



NB: All School Policies are available to staff and can be found here:

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Appendix I: AGREEMENT TO ABIDE BY MEDICATION POLICY
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I confirm that I have read and understood the

.....Medication Policy and agree to abide by it.

NAME
SIGNED
DATE
SCHOOL NURSE/ MATRON
SIGNED
DATE

Appendix 2: INDIVIDUAL HEALTHCARE PLAN

Pupil name:

< space for photo >

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information e.g. action to take if pupil refuses medication

Describe what constitutes an emergency, and the action to take if this occurs (document if parent has consented to emergency salbutamol use if appropriate)

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Signed _____

Date _____

Appendix 3: FORM FROM PARENT - TO ACCOMPANY MEDICATION

Name of pupil

Date of birth

Year group

Medical condition or illness

Medicine

Name/type of medicine
(as described on the container)

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school needs to know about?

Do you consider your child safe to Self-administer this medication – y/n?

NB: Medicines must be in the original container and prescription medication must be as dispensed by the pharmacy with the pharmacy label fully legible

Contact Details

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to

[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff 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.

Signature(s) _____

Date _____

**Appendix 4:
AUDIT TRAIL OF RETURNED MEDICATION FROM HOUSE MATRONS TO HEALTH CENTRE**

HOUSE NAME _____

Audit Trail of returned medication from House Matrons to Health Centre						
Date Received by Health Centre	Student	Medication (Name, form, strength)	Amount	Signature	Reason for return (eg expired, no longer prescribed)	Fate of medication (to be completed once it is known the fate of the medication)
						Returned to parents Signature _____ Date _____ Sent to pharmacy for disposal Signature _____ Date _____
						Returned to parents Signature _____ Date _____ Sent to pharmacy for disposal Signature _____ Date _____
						Returned to parents Signature _____ Date _____ Sent to pharmacy for disposal Signature _____ Date _____
						Returned to parents Signature _____ Date _____ Sent to pharmacy for disposal Signature _____ Date _____
						Returned to parents Signature _____ Date _____ Sent to pharmacy for disposal Signature _____ Date _____
						Returned to parents Signature _____ Date _____ Sent to pharmacy for disposal Signature _____ Date _____

APPENDIX 5: SELF-MEDICATOR'S ASSESSMENT FORM

Name of Pupil _____

Date of Assessment _____

	YES OR NO	ADDITIONAL NOTES
Pupil has been assessed as Fraser competent by the school nurse or doctor.		
The pupil understands that it is important to take all medicines correctly and as prescribed.		
The pupil understands that they should not stop taking any medication without checking with the school nurse/GP first.		
The pupil understands that they should report any side effects from medication to the house matron/school nurse/GP.		
The pupil understands that they must not take <u>any</u> additional medication without checking with the school nurse/GP first.		
The pupil is aware that the term medication refers to anything prescribed, bought over the counter, herbal medicines, homely remedies offered at school.		
The pupil is aware of checking the expiry date of any medication and that medication should be in date.		
The pupil is aware that their medication is for <u>their use only</u> and must not be shared with anyone.		
The pupil has suitable lockable facilities available for storage of medication.		

The pupil is aware of the storage requirements of their medication and, except in the case of medicines needed for emergency use, agree they will store the medication securely at all times.		
The pupil is aware they should liaise with the house matron 2 weeks before the end of their supply to ensure they do not run out of medication.		
The pupil is aware that they should not dispose of any medication themselves, rather it should be returned to the house matron/school nurse.		
The pupil is aware that if they do not comply with any of these requirements the chance to self-medicate may be removed from them.		

Current medications considered as part of this risk assessment:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

For each individual medication listed above a separate copy of the following form must be completed

MEDICATION NUMBER ____ (refers to number on list)

Name of medication	
Strength of medication	
Route of medication	
Dose of medication	
Time medication to be taken	
How long medication should be taken for?	
Any other additional information	

	YES OR NO	ADDITIONAL NOTES
The pupil understands why their medication has been prescribed		
The pupil knows how to take their medication (e.g. tablets, inhalers)		
The pupil understands at what time(s) to take their medication		
The pupil understands what dose of their medication to take		
The pupil understands how long to take the medication for (e.g. every day, when required, short course)		
The pupil understands any additional instructions for their medication (e.g. with or after food, to be applied thinly)		
The pupil has read the Patient Information Leaflet		

All questions on all assessments must be Yes for the pupil to be allowed to self-medicate.

- I confirm that I have read and discussed with the school nurse all general bullet points on medication use and all specific points relating to each individual medication I take.

- I confirm I understand all these points and that I agree to taking, using and storing my medication as per these points.

Pupil signature _____

Date _____

- I confirm that I have discussed all the general bullet points on medication use and all specific points relating to each individual medication with the pupil.

AND

- I confirm that I consider the pupil competent to self-administer all medications listed in this form without any additional support.*
OR
- I confirm that I consider the pupil competent to self-administer all medications listed in this form with the additional support detailed below.*
OR
- I confirm that I consider the pupil competent to self-administer the medications listed below with/without additional support (detail this support).*

*Delete two of these statements

Additional support needed

School nurse signature _____

Date _____