

## **Medication Management Policy**

### **Policy and legislation**

Legislation has been brought in to support the growing number of children with diagnoses of such illnesses as diabetes, asthma and epilepsy.

- Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010.
- Where this is the case, governing bodies must comply with their duties under the act.
- Some children may also have special educational needs (SEN) and may have a statement or Education Health and Care (EHC) plan which brings together health and social care needs.

### **Roles and responsibilities**

SENCO – Miss Amy Griffiths

SEN Governor – Mr Gareth Snook

Line manager of SEN teaching assistants – Mrs Joanne Heap

Designated Senior Lead with specific safeguarding responsibility – Mrs Joanne Heap

Member of staff responsible for managing Pupil Premium Grant – Mrs Elizabeth Mooney

Designated teacher for Looked After Children – Miss Amy Griffiths

Member of staff responsible for managing the schools responsibility for meeting the medical needs of pupils – Miss Amy Griffiths

Most teaching staff are not contractually obliged to give or supervise medication. Some staff may however as part of their contract, have specific duties to do so. Prime responsibility for a child's health rests with parents and they are welcome to come into school to administer medicines. Please also see orange Policy for the Administration of Medicine in School.

### **Storage of medication**

Medication is stored in the school office, in a locked cupboard, out of direct sunlight and out of the reach of children. A separate fridge is also located in the staffroom if medicines need to be refrigerated.

Asthma inhalers, Epipens, and other health needs equipment are kept in classrooms, in individual labelled bags (asthma inhalers in yellow bags, Epipens in red bags, other health equipment e.g. diabetic food box in green bags). These bags are labelled with the children's names and the expiry date of the equipment. They are kept out of reach of children but are accessible in an emergency.

### **Administration of medication**

Any member of staff should check:

- Name
- Written consent/instructions of parents
- Prescribed dose
- Dose frequency
- Expiry date
- Cautionary labels
- Do not give non-prescribed medication (e.g. paracetamol, ibuprofen, anti-histamines, travel sickness tablets)
- Do not give aspirin to anyone under 12 unless prescribed

All information should be recorded as follows:

- Name of child
- Name of medication and expiry date
- Dose
- Route of administration
- Time given
- Any side effects
- Signature of member of staff administering the medication

Children with ongoing health needs will have a care plan in place. This will be written with parents and the school health team, where possible and deemed necessary. The purpose of this is to identify the level of support needed and ensure that all involved are providing consistent care for the child.

The care plan will include:

- Details of the pupil's condition
- How the condition affects the child
- Special requirements e.g. dietary needs, issues with dehydration etc.
- Medication and side effects
- Specific times for medicine to be administered

- If medications need to be taken with food
- Time between doses
- Pre medication checks e.g. check blood sugars prior to insulin
- The role of school staff
- Signs to be aware of if the child is feeling unwell
- What to do if the child feels unwell
- Who to contact in an emergency

Policy written by A. Griffiths

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