

# Medication Policy



Overley Hall  
School

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## **Introduction**

Overley Hall School supports both Residential Learners who reside in Wellingtonia Children's Home and Day Learner's (Education only) who reside in their family homes locally.

Given the complexity of the needs of our learners, they are unable to take responsibility for their medication. It is therefore the responsibility of our staff to ensure that the supply, storage, recording, and administration of the medication is completed correctly.

All learners with ongoing medical conditions have an Individual Health Plan which is compiled by school and parents/carers working closely together. Within the Individual Health Plan regular medications are documented along with side effects and contra-indications.

Written permission is gained from a person with parental responsibility detailing the prescribed and none prescribed medications they authorise Overley Hall staff to administer. This agreement is retained on file and reviewed annually. School works in partnership with parents and adheres to their views and opinions (where appropriate).

With respect to the prescribing, supply, storage and administration of medicines, Overley Hall School adheres to the Independent School Standards 2019, The Medicines Act 1968, The Misuse of Drugs Act 2001, the DfE (2014 last updated 2017) Supporting pupils in schools with medical conditions Children & Families Act (2014), Equality Act (2010) and The Health & Safety at Work Act 1974.

This policy should be read alongside our Supporting Learners with Medical Conditions Policy.

## **Receiving medication into the Lillibet Surgery**

### **Prescribed medications**

Prescription and non-prescription medicines will only be given in school when it is necessary and essential to the learners' health or school attendance, and we have written consent from someone with parental responsibility to do so.

### **Day Learner's**

Overley Hall School will only accept prescribed medicines (other than insulin) if these are in date, labeled, provided in the original container as dispensed by a pharmacist

and include the instructions for administration, dosage, and storage. The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

Day-only learners medication will be administered from a designated surgery (Lilibet Surgery) within the school which is located opposite the Head Teacher's office.

## **Residential learner's**

The responsibility for the supply and storage of medication is that of the Registered Manager of Wellingtonia, who adheres to and is guided by Wellingtonia's Medication Policy and Procedure POL004 (see attached).

Residential learners will have their medication administered from the surgery located in Wellingtonia's Children's Home situated on the ground floor of the main building by school staff during school hours. It is the overall responsibility of the Registered Manager (Anna Davies) to ensure that a safe environment exists at all times in relation to the acquisition, storage, administration, recording and disposal of medicines for residential learners. The Registered Manager must promote a safety-conscious approach in which all staff involved understand what is expected of them and that the facilities and procedures are effectively maintained.

## **Administration of medication (all learners)**

Medicines prescribed for an individual young person are the property of that person and only for their sole use. Medicines prescribed for a named young person **MUST NOT** be used to treat another young person.

### **Staffing**

Two members of competent and trained staff should always be present during the administration of medication. Medication is only to be handled or dispensed by school staff assessed as competent and who have received medical competency training provided by a designated person. Only after satisfactorily passing their training should they administer or countersign the giving of medication.

### **Procedure**

Medication should be dispensed in the surgery in Wellingtonia or Lilibet surgery in School. The only exceptions to this would be illness, immobility, challenging behaviour or an outing where medication and the MAR sheet can be removed from the surgery and dispensed in a safe place near the young person. Supervision should always be given to ensure that the correct medication is given to the correct person.

When in the surgery (Wellingtonia or Lillibet) wherever possible, the door should be closed to reduce the likelihood of distractions and the potential for making mistakes whilst administering medication. Exceptions may arise, where the door may be left ajar if a learner is dysregulated.

Each young person learner has an individual basket for any medication that is not in a Boots popper system (i.e., liquids). This basket has their name and a photograph for identification. Their individual medical files kept in the surgery also have a photograph on them to determine their identity.

Remember the **seven** rights of administration:

- 1) Right-learner
- 2) Right medicine
- 3) Right dose
- 4) Right time
- 5) Right form (documentation)
- 6) Right route
- 7) Right outcome (what medication is prescribed for)

Safe administration of medication can only be facilitated safely by having only one learner in the surgery with two members of staff (one responsible for administering the medication and one supervising the young person)

When administering medication always remember to follow this procedure:

- a) Wash hands
- b) Check the MAR sheet corresponds to the RIGHT young person:  
Check what medication is required.  
Check time and date: Has it been given? (continue if not given)
- c) Find the correct medication
- d) Check the label on the container corresponds with details on the MAR sheet
- e) Wash your hands / put gloves on
- f) Check medicine, including available amount corresponds to MAR sheet.
- g) Make sure it is in date and there is an 'opening date' (if liquid) or write an opening date and initialise (if medicine has just been opened).
- h) Check RIGHT dose, outcome, and route.
- i) Count or measure the medication to ensure it corresponds to what it says on the MAR sheet
- j) Check the young person is ready for their medication
- k) Give them the medicine
- l) Offer them a drink

m) Record immediately on the MAR sheet what/how many has been given and total left. Administration of medication must be countersigned, and the balance of medication (amount/number) recorded.

n) Return the medication back to the cupboard

Following the use of any measuring devices, they are to be washed in a bowl of water and washing up liquid and dried. At the end of the week, they should be put through the dishwasher and ensured they are dried thoroughly before being placed back in the surgery.

Care should be taken whilst in the surgery that medication is not left unattended.

Only the medication that is needed should be bought out of the cabinet and the door locked again.

When controlled drugs medications are administered, the same procedures are followed but in addition, it must be recorded in the Controlled Drugs Medications Register by two staff and stored in the controlled medication cabinet.

### **Medication Administration Records (MAR charts)**

The MAR sheet should be signed immediately after the medication has been administered and only signed by the two staff that are competent trained to administer the medication.

No staff member has the right to alter a young person's medication or MAR sheet without the consent of a Doctor. In the event of a change to the prescribed dose/drug, the Registered Manager, designated person from Wellingtonia, or designated person from school will communicate changes both verbally and in writing.

#### *Wasted doses*

In the case of a wasted dose, the medication should be correctly disposed of and recorded on the appropriate document.

### **Storage**

Items should be stored as detailed on the pharmacy label or information leaflet supplied alongside. Some medications (see below) need to be readily accessible so should be stored safely within the environment of the learner.

Medications that need to be stored at an ambient temperature (that do not need to be with the learner) should, be stored, in a locked medical cabinet, in a locked cool (below 25°C (temperature recorded daily), dry room, with limited access.

Controlled drugs must be kept in an unmoveable double-locked medical cabinet (one inside another). Any medication remaining must be returned to the cabinet immediately after use and a record of any doses used and the amount held. The cabinet keys are to be kept in a key safe, in a locked room, that is known to designated competent staff. Controlled drugs need to be easily accessible in an emergency.

Items that need to be kept in a refrigerator will be kept in a dedicated fridge in the school medical room. The refrigerator will have an uninterrupted power supply. Food items must NOT be stored in this fridge. The maximum and minimum temperatures of the fridge will be recorded daily.

If the key, for either surgery is lost, it must be reported to a Registered Manager, Head teacher or Senior Leader and locks changed immediately.

Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline are always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips (see below)

Over the counter medications taken from the back stock cabinet will be recorded on the Medication back stock list in the first drawer under the sink, staff to record amount taken and sign.

## **Different types of medication**

### **Over the counter medicines (non-prescription)**

As many of our learners reside at Wellingtonia Children's Home we follow advice from the Care Quality Commission (CQC Homely Remedy Guidance (updated July 2018), NICE Guidance (Managing Medicines in Care Homes, NICE Good Practice Guidance, March 2014), and the National Care Forum (Safety of Medicines in Care Homes: Homely Remedies Guide, 2013). that care homes and care providers should ensure that patients (learners in our case) have access to homely remedies for the management of minor conditions

In March 2018 NHS England published guidance to CCGs regarding conditions for which over the counter (OTC) items should not routinely be prescribed in primary care. In support of this guidance, Overley Hall School does not need an Appropriate Practitioner's prescription, signature, or authorisation for a school, to give them,



provided that there is written permission to administer the medicine from the parent or carer.

Over the counter medicines, e.g., hay-fever treatments, cough/cold remedies should be treated in the same way as prescription medication. Schools should ensure that parents have provided written permission/consent for staff to administer the OTC medicine and check that the:

- ✿ Medication is in date.
- ✿ Manufacturers' instructions on the medicine are in line with what is being requested.
- ✿ Child's name is written on the OTC medicine container (if Day student)

Representatives/parents/legal guardians of Day Student's will need to bring in over-the-counter medicines as young people at Overley Hall School are unable to take responsibility for their own medication. Providing that the medication protocol is followed, and the medicine is checked for interactions with other medications by the Designated Person the OTC medication will be accepted.

The procedure for dispensing this medication is the same as all other medication, in regards to booking it in (if day student), entering on the MAR sheet and with administration. Any medication that has been brought in is for the sole use of that young person and should be labelled as such.

Other remedies, including herbal preparations, will not be accepted for administration in school/setting.

Medicines will not be given on an ongoing basis, unless prescribed by a doctor.

### **Analgesia (painkillers)**

Children under 16 should never be given medicines (including teething gels) containing aspirin or ibuprofen unless prescribed by a doctor.

Before giving analgesia staff should ascertain from either parent or care staff the date and time of the last dose. If the time is more than four hours post this dose further analgesia may be given (up to the maximum number of doses in a 24 hour period). Parents/ care staff must be informed as soon as possible after the dose has been given and a record made of this on the learners' record.

### **Antibiotics**

Parent/carers of learners are encouraged to ask the GP to prescribe an antibiotic which can be given outside of school hours wherever possible.

Most antibiotic medication will not need to be administered during school hours. Twice daily doses should be given in the morning before school and in the evening. Three

times a day doses can normally be given in the morning before school, immediately after (provided this is possible) and at bedtime. It should normally only be necessary to give antibiotics in school if the dose needs to be given four times a day, in which case a dose is needed at lunchtime.

Parent/carers of day students must complete the consent form and confirm that the child is not known to be allergic to the antibiotic. The antibiotic should be brought into school/setting in the morning and taken home again at the end of each day by the parent/carer.

Whenever possible the first dose of the course, and ideally the second dose, should be administered by the parent/carer.

All antibiotics must be clearly labelled with the child's name, the name of the medication, the dose, the date of dispensing and be in their original container.

In the school/setting, the antibiotics should be stored in a secure cupboard or where necessary in a refrigerator. Many of the liquid antibiotics need to be stored in a refrigerator – if so, this will be stated on the label. Some antibiotics must be taken at a specific time in relation to food. Again this will be written on the label, and the instructions on the label must be carefully followed. Tablets or capsules must be given with a glass of water. The dose of a liquid antibiotic must be carefully measured in an appropriate medicine spoon, medicine pot or oral medicines syringe provided by the day pupils parent/carer.

The appropriate records must be made. If the pupil does not receive a dose, for whatever reason, the parent/carer must be informed that day.

## **Emergency medication**

Anyone caring for learners including teachers, other school and day care staff in charge of children have a common law duty of care to act like any reasonably prudent parent. Staff need to make sure that children are healthy and safe. In exceptional circumstances the duty of care could extend to administering medicines and/or taking action in an emergency.

New or temporary staff must be made aware of any pupil with specific medical needs. In general the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency. This type of medication must be readily accessible in a known location, because in an emergency, time is of the essence.

The emergency medication which might be used includes:-

Buccal Midazolam

Rectal Diazepam  
Adrenaline (Epipen/Anapen)  
Glucose (dextrose tablets or Hypostop)  
Inhalers for asthma

Training will be given for emergency situations including the school/setting staff who have volunteered to administer emergency medication by appropriate specialist nurses to all staff.

### **Methylphenidate (e.g. Ritalin, Metadate, Methylin)**

Methylphenidate is sometimes prescribed for children with Attention Deficit Hyperactivity Disorder (ADHD). Its supply, possession and administration are controlled by the Misuse of Drugs Act and its associated regulations. In schools Methylphenidate must be stored in a locked non-portable container/place to which only named staff have access and a record of administration must be kept. It is necessary to make a record when new supplies of Methylphenidate are received.

Unused Methylphenidate must be sent home via an adult/ disposed of at Boots/ a pharmacy and a record kept. These records must allow full reconciliation of supplies received, administered and returned home.

### **Nasogastric Tubes (NG) and Gastrostomy Tubes (PEG)**

If a child is admitted to the school who is unable to take food or fluid by mouth, they may require supplementary feeding and medicines via a gastrostomy or nasogastric tube.

It is necessary to:

Once a learner who has a NG/PEG tube has been accepted onto the school roll staff should contact both the school nurse/health visitor and the Community Children's Nursing Team as soon as possible so that training on the care of the tube can be started.

Staff must receive training and attain competencies on the care of the tube to include the administration of both medicines and feeding via the tube as required.

A care plan must be in place that reflects the specific requirements of each named learner with a tube.

### **Intimate care (please see our intimate care policy)**

## **Offsite activities**

In all instances, medication must be dispensed and administered by the two competent staff.

## **School trips**

Staff have a duty of care to make sure learners are suitably supervised and in a safe environment during school trips. To do this, staff must be able to show that you've done all the necessary preparations before and during a school visit. Risk assessments must have been completed including those for taking medication off site.

This is set out in the [Health and Safety at Work etc Act 1974](#) and the DfE's guidance on [supporting pupils with medical conditions at school](#).

When a learner is going on an outing their medication must be signed out using the signing in and out book and placed in a lockable container or bag. Tablets are to be stored in a clearly, labelled, closed container. Liquid medication is to be stored in the original container. Instructions for each medication must be clear (see above the 7 rights). Upon return, medication must be signed in on the MAR sheet and returned to correct place (see storage).

## **Holidays**

If a young person goes on holiday with school, a risk assessment around medication will be required to be completed and signed off by a senior member of staff who is trained in administering medication. Medication, including the MAR sheet will need to be appropriately stored in a lockable container (each class group would have access to its own lockable box

## **Data protection: travelling with medical information**

The medical information staff need to take with them is sensitive personal data, so it needs to be kept safe.

If staff are taking information digitally, it could be kept safe by:

- Encrypting any information stored on a portable electronic device
- Password protecting any information kept in cloud-based storage

If staff are taking paper information, it needs to be kept in a locked medicine box.

Data should be processed in accordance with your school's privacy notice.

This information is based on advice from the [Information Commissioner's Office](#).

### ***Home stays***

If a young person is going home, any medication required will need to be signed out using the 'signing in and out book' by Wellingtonia staff and a handover receipt be completed by school staff. The medication receipt should then be exchanged with parents and kept in a folder. Medication should be transferred out of Overley in the lockable containers codes of which are distributed to the parents individually.

### **Disposal, expiry dates and starting new supply**

When discarding empty bottles of medication we staff will ensure they are placed in the blue bag or box provided in the surgery for disposal.

On opening a new bottle of medication, it should be dated and initialled by the person opening it. The expiry date should also be checked. All liquid medication should be disposed of after 3 months, unless otherwise stated on the bottle.

Creams should also be dated and initialled on opening. It is important to remember that pots/tubs of cream should be disposed of after one month and tubes of cream after three months of opening. Staff should always apply creams whilst wearing gloves.

### **Incorrect administration**

In the unlikely event of prescribed medication being administered accidentally, or the incorrect dosage given or administered to the wrong person, staff will report immediately to the Head Teacher/Senior Leader Teacher/DSL and Registered Manager or Senior Lead who will take the necessary steps to seek immediate medical advice from either BOOTS Pharmacy 01952 219319, NHS Direct; 111, Shropdoc (ring Drs no), Doctors: 01952 226000 or the Princess Royal Hospital: 01952 641222 to ensure the young person's safety (acting upon advice given).

Every discrepancy will be recorded on a Sensitive information Form and passed to a School DSL or relevant department DSL.

Parents and relevant professionals will then be informed.

All incidents will be investigated, taking full account of the context, circumstances, position and experience of the member of staff involved. In some cases, this may be seen as gross misconduct and disciplinary action may be taken.

## **Refusal of Medication**

If a young person refuses their medication it should be documented on their MAR sheet (using specified code on the bottom of the MAR sheet). If the refusal becomes persistent then medical advice should be sought immediately through the Registered Manager or Designated Person(s) from Wellingtonia.

## **Disposal**

Medication should be regularly checked/audited. The Registered Manager will be responsible for ensuring all medications are returned appropriately.

Controlled drugs must be returned to Wellington Pharmacy where a pharmacist will sign to accept them.

## **As Needed Medication (PRN)**

If the learner shows signs that medication may be required, for example, a headache or cold, the decision will be discussed, checked and authorised by a senior member of staff. Refer to the procedure above for administration.

## **Spoiled medication**

Any medication that is dropped or has perished should be documented and signed by two members of staff on the MAR sheet, adding the quantity left and details in the comments box. They should then be either washed away appropriately (liquids) or placed in a labelled envelope and returned to Boots or chemist (please refer to disposal).

## **Reporting concerns**

If the member of staff administering medication has concerns regarding side effects or appropriateness/effectiveness of the drug, they should report to a senior member of staff who will seek immediate advice from the doctors.

In the event of immediate emergency health concerns, for example anaphylaxis, call 999 immediately and contact parents.

Any advice or queries regarding medication can be obtained by contacting a local pharmacist or Doctor.

## **Emergency procedures**

Staff will follow the school's normal emergency procedures (for example, calling 999). All learners' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

## **Training**

Staff who are responsible for supporting learners with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of (Individual Healthcare Plan's) IHPs. Staff who provide support to learners with medical conditions will be included in meetings where this is discussed (as possible), or informed of outcomes following the meeting.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Head Teacher or Designated individual.

Training will be kept up to date and renewed annually.

Training will:

- ✿ Be sufficient to ensure that staff are competent and have confidence in their ability to support the learners
- ✿ Fulfil the requirements in the IHPs
- ✿ Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals or Schools Designated Person will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

## **Record keeping**

The Support & Scrutiny Board will ensure that written records are kept of all medicine administered to learners for as long as these learners are at the school. Parents will be informed if their child has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

## **Liability and Indemnity**

The Support & Scrutiny Board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

## **Complaints**

Parents with a complaint about their child's medical condition should discuss this directly with the class teacher/tutor or head teacher in the first instance. If the class teacher/ tutor/ head teacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

## **Review**



Any changes to this Policy will be communicated via email to all staff involved with the administration of medication and proof of reading will be obtained.

## **Monitoring arrangements**

This policy will be reviewed and approved by the Support & Scrutiny Board annually.

## **Links to other policies**

This policy links to the following policies:

-  Accessibility plan
-  Complaints



- 🌸 Learner's with health conditions policy
- 🌸 Equality of information and objectives
- 🌸 First aid
- 🌸 Health and safety
- 🌸 Safeguarding
- 🌸 Special educational needs information report and policy

# Administering medicines in school

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## DO

Remember that any member of school staff may be asked to provide support to learners with medical conditions, but they're not obliged to do so

Check the maximum dosage and when the previous dosage was taken before administering medicine

Keep a record of all medicines administered. The record should state the type of medicine, the dosage, how and when it was administered, and the member of staff who administered it

Inform parents if their child has received medicine or been unwell at school

Store medicine safely

Make sure the child knows where their medicine is kept, and can access it immediately

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## DON'T

Give prescription medicines or undertake healthcare procedures without appropriate training

Accept medicines unless they are in-date, labelled, in the original container and accompanied by instructions

Give prescription or non-prescription medicine to a child under 16 without written parental consent, unless in exceptional circumstances

Give medicine containing aspirin to a child under 16 unless it has been prescribed by a doctor

Lock away emergency medicine or devices such as adrenaline pens or asthma inhalers

Force a child to take their medicine. If the child refuses to take it, follow the procedure in their individual healthcare plan and inform their parents