

# **Medical Policy including Administration of Medicines Policy**

## **Introduction:**

An Administration of Medication policy has been in existence in the school since **2006**. The policy was recently redrafted through a collaborative school process and was ratified by the Board of Management (BoM) in April, **2013**.

## **Rationale:**

The policy as outlined was put in place to:

- Clarify areas of responsibility
- give clear guidance about situations where it is not appropriate to administer medicines
- indicate the limitations to any requirements which may be notified to teachers and school staff
- Safeguard school staff that are willing to administer medication
- Protect against possible litigation.

## **Relationship to School Ethos:**

The school promotes positive home-school contacts, not only in relation to the welfare of children but also in relation to all aspects of school life. This policy is in keeping with the school ethos through the provision of a safe, secure and caring school environment and the furthering of positive home-school links.

## **Aims of this Policy:**

The aims and objectives of the policy can be summarised as follows;

- Minimise health risks to children and staff on the school premises
- Fulfil the duty of the BoM in relation to Health and Safety requirements
- Provide a framework within which medicines may be administered in cases of emergency or in instances where regularised administration has been agreed with parents/guardians

Your child's health and safety is of prime concern to us and it is essential that parents and teachers work together for the good of the child in this regard.

## **Medical Information**

It is important that the school is aware of any medical condition that may affect your child during the school day. This may include information on allergies, eyesight etc. Please fill in the relevant space in the Medical Information Form and Permission Slip. If there is no such condition, please write 'NONE'.

In the case of a child becoming ill at school, parents/guardians will be contacted. You will be notified if your child has any fall involving a bang on the head. Please make sure you have filled out and sent an Emergency Contact Information Form to the school.

The Harold School does not allow any child coming to school with a limb in plaster to go to the Yard at break times for their own safety and the safety of other children.

### **Infection in School**

If you discover that your child has an infectious disease please inform the school immediately, especially in the case of an illness which may affect other children. Please keep your child away from school until he/she is clear of infection and check with your GP when your child is fit to return to school. Head-lice infection is a regular problem in the classroom. Parents/guardians are informed by letter when an outbreak is reported to the teacher/school.

### **First Aid**

A First Aid station is set up and manned at both lunch breaks. From time to time minor incidents such as cuts and abrasions etc will occur. The staff at the school will deal with these by washing the cut with water and if necessary applying a plaster. Parents are expected to check under the plaster when the child returns home from school. When children attend First Aid, they are given a slip to inform parents/guardians.

Please complete the Permission Slip for basic First Aid to be administered to your child. If for any reason you do not want us to treat cuts etc please state this clearly on the form. You will then be contacted at home or work if your child needs attention.

### **Administration of Medicines**

Parents/guardians are required to complete the form detailing any medical information that may affect your child while at school. The Board of Management requires that parents inform their child's teacher in writing of any medical condition their child may have. It is the parents'/ guardians' responsibility to notify subsequent teachers. While the Board of Management has a duty to safeguard the health and safety of pupils when they are engaged in authorised school activities this does not imply a duty upon teachers to personally undertake the administration of medicines.

Under normal circumstances\* no oral medicine or tablets will be administered by the staff. This includes medicines, which have been prescribed by your own doctor for your child. If your child is ill enough to require medicine, please keep him/her at home until the treatment is completed.

Children are not permitted to keep medication in their own possession. Parents/guardians may think it appropriate on certain occasions for older children (i.e. 5<sup>th</sup>/6<sup>th</sup> classes) to bring medicines into school (e.g. Paracetamol). The class teacher must be informed in writing if your child is carrying medicine of any sort (including cough sweets, cold-sore creams and other pharmaceuticals). The note should identify the medicine and give the child permission to self-administer it. However the teacher will store the medicine for the duration of the school day. It is the responsibility of the child to remind the teacher when he/she needs the medication. The child should only carry the quantity needed for the school day. Where children carry inhalers, they should be competent to self-administer.

***\*Procedure for parents of children with long term illness requiring administration of medicine within school hours e.g. diabetes, severe allergies.***

In the event of a child requiring taking medicines while in the care of the school, the following procedures will apply:

Parents write to the Board of Management requesting permission for the administration of medicine during the school day, and outlining the procedure involved. Where children are suffering from life threatening conditions, parents should outline clearly, in writing, what can and cannot be done in a particular emergency situation, with particular reference to what may be a risk to the child.

Written details should include the name of the child, name and exact dosage of medication, whether the child should be responsible for his/her medication, the circumstances in which medication is to be given by the teacher/SNA and consent for it to be given, name of doctor to be contacted in emergency, when the parent/guardian is to be notified and where he/she can be contacted, parent/guardians signature.

Two members of staff are needed in order to administer medicine (in case of absence). Staffs are not obliged to undertake these responsibilities and staff should not administer prescribed medication without specific authorisation of the Board. Should staff agree to administer same, the parents/guardians are required to indemnify the Board of Management and authorised members of staff in respect of any liability that may arise regarding the administration of prescribed medicines in the school. The Board will inform the school's insurers accordingly. In as far as possible children should self-administer. A written record of the date and time of administration must be kept.

Where permission has been given by the Board of Management for the administration of medicine, the smallest possible dose should be brought to school, preferably by the parent, with clear written instructions for administration, giving the name of the pupil.

Parents/guardians are responsible for ensuring that adequate supplies of up-to-date medicines are available. The medicines will be kept out of reach of pupils in the school in a secure location.

Changes in prescribed medication (or dosage) should be notified immediately to the school with clear written instructions of the procedure to be followed in storing and administering the new medication.

Request for administration of medication should be renewed at the beginning of each school year.

### **Emergency Procedure**

Where a child has a fall/cut, which is considered serious, an ambulance will be called.

Where a child has a fall/cut, which requires medical attention and where it is safe to move the child, the parents/guardians will be contacted. Failing that, the child will be taken to the hospital as soon as possible by the Principal. Staff in the school will continue to try and make contact with the parents/guardians.

### **Reporting Accidents in the School**

Minor cuts and abrasions will be treated as outlined under 'First Aid'. It is expected that parents check plasters that the child may be wearing on return home from school. General incidents will be reported to the class teacher. Incidents of a more serious nature will be recorded in the incident book. An accident report form will be filed where medical intervention is required. Where a child receives a blow to the head, parents will be notified. Staff should keep a record of how/ when this notification is carried out.

### **First Aid Boxes**

A First Aid kit is kept in the office containing antiseptic wipes, cotton wool, plasters and crepe bandages.

A First Aid kit is taken when children are engaged in out of school activities such as tours, sporting activities, curriculum based activities/visits.

The school maintains an up to date register of contact details of all parents/guardians including emergency numbers. This is updated in September at each new school year.

### **Roles and Responsibilities:**

The BoM has overall responsibility for the implementation and monitoring of the school policy on Administration of Medication. The Principal is the day to day manager of routines contained in the policy with the assistance of all staff members.

### **Success Criteria:**

The effectiveness of the school policy in its present form is measured by the following criteria;

- Compliance with Health and Safety legislation
- Maintaining a safe and caring environment for children
- Positive feedback from parents/teachers
- Ensuring the primary responsibility for administering remains with parents/guardians

### **Ratification and Review:**

An Administration of Medication policy has been in existence in the school since **2006**. The policy was recently redrafted through a collaborative school process and was ratified by the Board of Management (BoM) in April, **2013**.

### **Implementation:**

The policy is reviewed and implemented on a continuous basis.