

Felixstowe International College

Medication Policy



INTRODUCTION

Most pupils will need medication at some stage of their school life. Although this will mainly be for short periods there are a few pupils with chronic conditions who may require regular medication throughout their school life.

In their publication *Guidance on the Administration of Medicines to Pupils*, the Learning Trust identified 3 categories of pupils that may require medication while at school:

1. Those who have suffered an acute medical condition but are regarded as fit to return to school provided prescribed medication is taken
2. Those who suffer certain chronic or life threatening conditions (eg. anaphylaxis, asthma, diabetes) but can satisfactorily attend school provided they are given regular doses of medication, or medication is available in an emergency.
3. Those pupils who suffer occasional discomfort such as tooth ache or period pain who may require analgesics.

In accordance with the guidance laid down in the National Minimum Standards for Boarding Schools all schools are required to have written policies and procedures on the administration and control of medicines within the school and associated activities. It is the purpose of this document to clarify the procedure within FIC.

ROLES AND RESPONSIBILITIES

- **Parents** and those with parental responsibility should ensure that they comply with the medicine guidelines of the Parents' Handbook. This includes ensuring that all medication is given to the House Parent on arrival, with details of what it is for and instructions for dosage written in English. Parents should provide the House Parent with sufficient information of their child's medical needs, including where appropriate, any communication, details of specialist, current medication and follow up plans
- **School Staff**, having undertaken additional training can administer medication as per this protocol once deemed competent to do so. Competency will be shown following attendance at a teaching session given by the Deputy Principal. Only staff who have a record of attendance at this teaching session are competent to administer medication to students
- **The House Parents** administers medication to pupils in the House and monitors House Medication and must ensure that at all times they fulfil the obligations of the NMC Code
- **The House Parents** ensure that the standards set out in this document are followed, through the use of training and audit

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- **The House Parents** ensure that all staff dealing with the administration of medications are adequately trained, supervised and monitored in line with National Guidance
- **The Deputy Principal** assumes overall responsibility for the policy and practice of Administration and Storage of medication in the School

SUPPLY AND ORDERING

Ordering of Medication

- Stock medication should be purchased from a nearby pharmacy by the House Parents or Deputy Principal.
- It is the House Parent's responsibility to ensure that a patient on regular medication has adequate supplies.
- Medication required for school holidays should be ordered well in advance, with a maximum of 3 months supply being prescribed at any one time
- House Parents should be aware that repeat medication can take up to 48hrs from phoning the surgery to collecting the medication

Medications from Home

- ALL medicines brought into house from home should be recorded for each pupil if declared, including "over the counter" and complementary medicines
- Medications from abroad, not licensed in the UK, MUST have written details and authority from parents and physician and translated into English
- House Parents should inform the Deputy Principal who will make an assessment of the preparation which may include a discussion with the Doctors at the local surgery
- The Deputy Principal will complete the Assessment of Students to Self Medicate form. This form will be sent back to house parents and a copy will also be kept in their school file
- All medicines including "over the counter" preparations should be in a suitable container (preferably the original packaging) clearly labelled with the student's name.

Receipt of medications

- ALL medicines brought into house should be recorded for each pupil if declared, including "over the counter" and complementary medicines
- The record should include
 - *Name of pupil*
 - *Date of receipt*
 - *Name strength and dosage of drug*
 - *Quantity brought in*
 - *Signature of staff receiving drug*

- If medication is then given to pupils to self-administer, then these medications should be entered into the record in the usual fashion and under 'administration' a note should be entered indicating that medication has been given to the student to self administer.

Disposal of medications

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- ALL medicines that leave the boarding house (eg taken home or on school trips) should be recorded as above. Drugs should stay in the prescribed container and labels should never be altered.
- Drugs should be disposed of via the House Parent – taken to a nearby pharmacy for disposal
- Medicines should be stored in secure designated areas. These include: The ‘In House’ Medicine Cabinets
- Pupils who self-medicate should have their own locked cupboard or drawer if they keep medicine. The designated person should have another key for emergency use only with consent of the pupil.
- The medicine cupboard should be designated for medicines only and be in a suitable location. Only designated key holders should hold keys.
- Medicines should always be stored in the container in which they are dispensed and labels should not be altered
- Certain drugs eg insulin, need to be kept in a fridge. The maximum and minimum temperature of this should be recorded daily. The usual range recommended is 2-8 degrees. Temperatures outside this range should be reported to the House Parents. It should be regularly cleaned.

ADMINISTRATION OF MEDICINES RECORD

- This should be completed by any member of school staff administering medication
- Include medication administered, date, time, indication
- Records should be kept for 15 years after the last entry
- The Deputy Principal should be informed if a pupil refuses to take medication.

Administration by the House Parents

- Administered medication should be recorded in the Medication Book either in the House or at school. If medication is given in the morning before the students leave for school, the House Parent telephones the school, or sends an email, to say which medication has been given to which student
- Pupils should be aware of routine timings of drug administration.

House Parents should:

- Check the identity of the pupil
- Prescribed medication should never be given to a different pupil.
- Any drug errors or adverse drug reactions should be reported to the Deputy Principal immediately
- House Parents to audit Medicine records termly

Self-administration of medicine

Competent students are actively encouraged to take responsibility for the administration of their own medications. In addition in urgent situations, for emergency medication, such as adrenaline devices and asthma inhalers, it is particularly beneficial for students to administer

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their own medication. Those pupils assessed as competent to self-medicate may store their own individual medicines in their personal lockable storage. It is the responsibility of the House Parent to ensure the security of this medication at all times.

- All students in 6th form are deemed competent to self administer medication which has been prescribed for them unless otherwise explicitly stated by the House Parent or Deputy Principal
- It is the students' and House Parents' responsibility to ensure that the medication is kept in a locked, secure place. Only emergency medication (eg. insulin, inhalers) may be carried on person
- Medication brought in from outside of school needs to be reported to House Parents on the students' return
- Medication prescribed by the GP will be entered onto the student's file in the House
- In some circumstances, due to confidentiality issues, the GP may be unable to provide school with information. At the discretion of the prescribing practitioner, a decision may be made not to inform House Staff about a prescription issued. In these cases the student will have been deemed competent to self medicate and the prescribing clinician assumes full responsibility for providing FIC the medication. In these cases medication will be collected by the student and therefore not entered into the House Medicine File.

As Required Medication

- Students are not permitted to bring in any over the counter medications into school
- At the discretion of House Parents students may be given a maximum of one day's dose of medications, however care must be taken that students have a point of contact should their condition alter

Year 8, 10, 12 and 13 Prescribed Medication

- All younger students in years 8 & 10 are not deemed competent to administer medication which has been prescribed for them unless otherwise explicitly stated by the Deputy Principal
- Students requiring regular prescribed medication for a particular chronic condition (eg asthma, epilepsy) will be assessed by their House Parent, with liaison with the Deputy Principal, on their ability to self medicate.
- The House Parent will document discussion about the decision in the student's medical file
- Students requiring prescribed medication for an acute episode (eg a course of antibiotics) will have their ability to self medicate documented in their file at the time of prescription by the House Parent.
- There may be occasions when a student will begin to self medicate where extra support may be required. In this instance the House Parent and the Deputy Principal, in conjunction with the student, may devise an individual medication plan, for example a student maybe given a days/weeks worth of medication at the outset.

As required Medication (PRN Medication)

- 'PRN' medication can only be administered by the House Parent/Deputy Principal. Students are not permitted to bring in any other over the counter medications into school
- ALL dosages of PRN medications must be administered to the student, under no circumstances should they be given any more than one dose at a time

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Over-the-counter medication – See Separate Sheet for Dsage, Warnings, Contraindications etc.

The following can be kept in stock (see attached guidelines for administration)

- Paracetamol
- Ibuprofen
- Lemsip
- Strepsils
- Diarrhoea Relief
- Gaviscon
- Allergy Relief Tablets)
- Anthisan
- Ibuprofen Gel
- Deep Heat

Homely Remedy Policy

The House Parent should seek advice from the Deputy Principal if any of these are needed for more than 24 hours duration.

EDUCATIONAL VISITS

Introduction

It is good practice for the school to encourage children with medical needs to participate in safely managed visits.

While on any visit outside of school, the student's medication needs to be handed over to the designated First Aider who has completed Medicine Administration Training. This First Aider is then responsible for the safe administration and storage of the medicine(s) in line with this policy.

Children With on-Going Problems

If a child with an ongoing problem is participating with the field trip then it is imperative that the First Aider is aware of this condition and is able to administer the required emergency medicine in a correct manner.

With the example of adrenaline pens, it is essential that the First Aider has attended a teaching session on their use and is able to administer the injection if required.

Any diabetic student participating in an Education Visit should be ordered a 'hypo kit' from the House Parent and the attending First Aider should have a working knowledge of the student's care plan and know how to handle emergency situations.

CONTROLLED DRUGS

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Where adequate provision has been made Controlled Drugs (CDs) may be stored in house for administration by adequately trained staff. At the present time there are no controlled Drugs at FIC.

Standards for provision include:

- Dual locked, appropriate CD storage
- Designated CD Record Book, completed in line with the School's CD Policy
- Monthly audit of stock levels
- Annual CD Self-Assessment
- House staff members to have completed both Medicine Administration and CD Administration training

In all other circumstances CDs should be kept at the Medical Room at the Garrison Lane Site in line with National Medicine protocols

Dealing with discrepancies:

Any discrepancy with the running balance should be reported to the Deputy Principal immediately who will then initiate an investigation in line with the School's CD Policy

RELEVANT PUBLICATIONS

- Department for Education and Employment Guidance on First Aid at Schools
- Department for Education and Employment Supporting Students with Medical Needs (<http://www.education.gov.uk/schools/pupilsupport/pastoralcare/b0013771/managingmedicines/managing-medicines-in-schools>)
- Department of Health (2005) Managing Medicines in Schools and Early Years Settings
- Health and Safety Executive (2002) Control of Substances Hazardous to Health
- Nursing and Midwifery Council (2002) Code of Professional Conduct
- Nursing and Midwifery Council (2002) Guidelines for the Administration of Medicines
- Royal College of Nursing (2004) Employing Nurses in Independent Schools: RCN Guidance for Nurses and Employers
- Royal Pharmaceutical Society of Great Britain (2003) The Administration and Control of Medicines in Car Homes and Children's Services

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THE ADMINISTRATION OF ORAL PARACETAMOL

Name of Medicine	Paracetamol
Legal status (POM/P/GSL)	P
Dose/s	Adults & children over 12 years 1-2 tablets, 6-12 years 1 tablet every 4 hours
Route/Method of Administration	Oral
Frequency of dose	4-6 hours
Referral for Medical Advice	The child's temperature and/or relief of pain should be reassessed after one hour by house staff. Deputy Principal should be notified if no response is noted and no further medication i.e. paracetamol can be given
Additional Information	<p>The need for paracetamol should be assessed by measuring and recording the child's temperature and/or assessing pain.</p> <p>Any current medication the child is taking should be recorded on the card/history sheet</p> <p>The child's age should be obtained</p> <p>The House staff should decide an appropriate dose of paracetamol using the dosage guidelines.</p> <p>The paracetamol should then be transcribed, prepared, checked and administered.</p>
Details of treatment records required	The date, time, dose and route of Paracetamol should be recorded in the card/history sheet and signed by the administering house staff. Document all interventions and any improvement/deterioration of the patient in the child's case record/casualty card

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THE ADMINISTRATION OF ORAL IBUPROFEN

Name of Medicine	Ibuprofen
Legal status (POM/P/GSL)	P
Route/Method of Administration	Oral
Frequency of dose	Age 7-10 years 1x 200 mg tablet three times a day Age 11- adult 2 x 200 mg. tablets three times a day
Referral for Medical Advice	The child's temperature and/or relief of pain should be reassessed after one hour by nursing staff. Medical staff should be notified if no response is noted and no further medication i.e. paracetamol or ibuprofen can be given
Additional Information	The need for ibuprofen should be assessed by measuring and recording the child's temperature and/or assessing pain. Any current medication the child is taking should be recorded on the card/history sheet The child's age should be obtained
Details of treatment records required	The date, time, dose and route of Ibuprofen should be recorded in the card/history sheet and signed by the administering housemistress. Document all interventions and any improvement/deterioration of the patient in the child's case record/casualty card

<u>Medicine/First Aid Relief</u>	<u>Indications for Use</u>	<u>Special Notes/Caution</u>
Calpol – six plus – Paracetamol 250mg/5ml suspension – Sugar Free	Cold/Flu Sore throat Headache, other aches/pains, toothache, earache	Children 6-12 years – 1 x 2.5ml spoonfuls Adults & children over 12 Years 2-5 x 5ml spoonfuls DO NOT GIVE MORE THAN FOUR DOSES IN 24 hours DO NOT USE FOR MORE THAN 3 DAYS WITHOUT CONSULTING GP DO NOT GIVE WITH OTHER PARACETEMOL PRODUCTS
Imodium Caplets	Diarrhoea, wind, bloating	Active ingredient Loperamide hydrochloride Do not use more than stated dose (4 in 24 hours) Not to be stored above 25 degrees C. For oral use only Do not use after expiry date
Deep Heat	Fast relief from muscular aches and pains Can be used before or after exercise	DO NOT USE IF ALLERGIC TO NSAIDS (eg Brufen) DO NOT APPLY TO BROKEN SKIN WASH HANDS IMMEDIATELY AFTER USE

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Olbas Oil	Inhalant Decongestant – Colds and sinuses/Hayfever Nasal congestion Muscular pain – symptomatic relief	NASAL CONGESTION – INHALE 2-3 DROPS FROM A TISSUE MUSCULAR PAIN RUB – Massage into painful area up to 3 times a day USE ON UNBROKEN SKIN ONLY DO NOT PUT DROPS INTO NOSE OR MOUTH IF SWALLOWED, SEEK MEDICAL ADVICE
Anthisan Bite and Sting Cream *Mepyramine Maleate 2% w/w	Relief from pain, itching and inflammation caused by insect bites/stings and stinging nettle rash	Apply directly to site 2-3 times/day. Use asap after bite/sting DO NOT USE ON LARGE AREAS OF SKIN, USE ONLY ON UNBROKEN SKIN. DO NOT USE ON ECZEMATOUS SKIN OR ON SUNBURN. IF RASH DEVELOPS, STOP USING IMMEDIATELY, DO NOT USE FOR MORE THAN 3 DAYS IF SYMPTOMS PERSIST, SEEK MEDICAL ADVICE
Ibuprofen liquid capsules	Rapid relief of pain	Age 8 and over – Swallow 1 or 2 capsules whole with water, preferably with or after food. Then if necessary 1 or 2 capsules every four hours. Do not take more than 6 capsules in 23 hours. DO NOT GIVE TO CHILDREN UNDER 12
Nurofen	Pain relief	Age 12 and over –NOT SUITABLE FOR UNDER 12 YEARS – 1 or 2 capsules with water up to three times a day. Leave at least 4 hours between doses. Do not use for more than 3 days
Piriton	For skin allergies, food or pet allergies, hayfever, house dust mite allergies, insect bites.	Age 12 and above - One tablet every 4-6 hours. No more than 6 tablets in 24 hours. DO NOT GIVE TO CHILDREN UNDER 12
Lemsip	Relief of colds and flu	Age 12 and above - Two capsules to be taken every four to six hours. No more than 8 capsules in 24 hours.
Strepsils	For sore throats	Age 12 and above - 1 lozenge to be dissolved slowly in the mouth every 2-3 hours.
Gaviscon	Heartburn and stomach discomfort	Age 12 and above - Chew thoroughly before swallowing – two to four tablets after meals/ and/or bedtime, up to four times a day. CONSULT DR AFTER 7 DAYS IF SYMPTOMS CONTINUE
Diarrhoea Relief	Stops diarrhoea	Age 12 and above - Two tablets initially, then one tablet after each loose bowel movement DO NOT TAKE MORE THAN 6 TABLETS IN 24 HOURS
Deep Freeze	Cold gel pain relief for muscles, tendons, joints or minor sporting injuries	Age 5 and above - Gently massage deep freeze cold gel into affected area 3-4 times daily. Wash hands immediately after use