

# St Vincent's School for Blind and Partially Sighted Children

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St. Vincent's School Mission Statement:

*Inspired by the example of St Vincent, we work together in a safe and caring atmosphere, where a high standard of education and care are provided.*

*We encourage a sense of achievement, self worth, moral responsibility and mutual respect, honouring all faith traditions and beliefs. Each one of us in our community is special and unique. Gifts and talents are valued and nurtured through all our work.*

*We are outward looking in our approach to the wider educational and social community and we encourage all our young people to become independent and to integrate fully into society.*

This policy embraces outcomes and objectives of the Every Child Matters Agenda to **be Healthy and Stay Safe.**

## **Aim**

- ❖ To ensure that the pupil is given the correct medication in the prescribed dose at the right time via the correct route.
- ❖ To provide guidelines for the safe and effective storage of medication
- ❖ To help prevent any errors occurring during the administration and storage of medication
- ❖ To give guidance to authorised staff, for the safe administration of prescribed medication and any homely remedies that may be required by a pupil.
- ❖ To give guidance to staff who are authorised to check and counter sign the administration of medication.

## Receiving medication into school

All medication to be administered in school must be accompanied by an authorised letter, from the prescribing practitioner, detailing the following:

- ❖ Medication
- ❖ Name of pupil for which medication is intended.
- ❖ Quantity, form and strength of medication.
- ❖ Dose and frequency of medication.

All medication brought into school must, on arrival, be handed to an authorised member of staff, a member of staff who has undertaken Care of Medicines training, to be checked and counted as soon as possible. If there is a delay in checking and counting the medication, due to unavoidable circumstances, the medication is to be locked in the medication cupboard until authorised staff is available. Medication will then be checked against the pupil's Medicine Administration Record (MAR) and Prescription sheet for the following:

- ❖ Medication is in its original container bearing a pharmacist label, with the pharmacy name and address.
- ❖ Name of pupil for which medication is intended.
- ❖ Quantity, form and strength of medication.
- ❖ Dose and frequency of medication.
- ❖ Date of supply and expiry date.

All medication is to be counted in and recorded on to the Receiving and Returning Medication Form. Any changes or anomalies should be reported to the Health Care Co-ordinator (HCC.) Any changes in medication or dosage need to be checked with the pupil's GP and recorded straight away in the MAR and the Pupil Medication Profile (PMP).

A new prescription, or a letter from the prescribing doctor, to verify changes, should be obtained as soon as possible. Any anomalies, which may arise, i.e. not enough

medication, wrong medication or medication with incorrect information on the label, need to be brought to the attention of pupil's parents or guardian and rectified as soon as possible by them.

Every effort should be made to obtain the correct medication before the end of the school day or before the medication is due, whichever occurs first. If this proves impossible the pupil will be sent home, until a time they are able to produce the correct medication.

### **Storage of Medication**

- ❖ All medication must be stored in a clean lockable cupboard, which is fixed to a wall and used only for the storage of medicines.
- ❖ Medication should be segregated according to route i.e. oral, topical
- ❖ Access to the keys for the medicine cupboard should be restricted. Only authorised members of staff to have access.
- ❖ When not in use the medicine cupboard must remain locked.
- ❖ Medication must never be left out or unattended.
- ❖ All medication should be clearly labelled with the correct name of the pupil it was prescribed for.
- ❖ Medication must never be given to a pupil it was not prescribed for.
- ❖ Each pupil's medication should be clearly segregated, i.e. in a named box or bag.
- ❖ All medication should be stored in an appropriate environment i.e. away from direct heat or variance in temperature.
- ❖ Medication requiring cold storage should be placed in a lockable fridge.
- ❖ The temperature of this fridge must be recorded daily with a minimum maximum thermometer. The ideal temperature being 2-8°C
- ❖ Medication within the fridge should be segregated in a named box or bag.
- ❖ Pupils should know where their own medication is stored and who holds the key.
- ❖ Emergency response treatment should be readily available and stored safely and appropriately.

## **Controlled Drugs**

- ❖ See Appendix 1

## **Administration of Medication**

- ❖ Only authorised staff to administer medication.
- ❖ Where possible 2 members of staff are required to check and administer medication, one of whom must be authorised.
- ❖ Ensure all equipment required is at hand before commencing the administration of medication procedure, i.e. prescription, MAR, PMP, drug reference book, water and tumblers, gloves, pill cutter and medication dispensing pots.
- ❖ Variation in dosage cannot be made on parental instruction alone and must be corroborated either by pharmacy label or the instruction of the prescriber.
- ❖ Any medication required for trips or activity must be signed out and in, within the Off-site medication book, by an authorised staff.

## **Procedure for Administration of Medication**

1. Wash hands and prepare a clean surface
2. Locate pupil
3. Check MAR sheet for pupil's full name.
4. Check which medication is required at this time
5. Check the medication has not already been given
6. Check the dose which is to be given and the route the medication is to be given
7. Once both members of staff are satisfied with the above checks locate the correct medication from the medicine cupboard or fridge.
8. Identify the correct medication by checking against the MAR sheet
9. Check for any special observations or requirements which may be required before administering a medication on the PMP
10. Check the name on label
11. Check the expiry date

12. Check the dosage required and calculate how much is needed to achieve the prescribed dose, e.g. how many tablets or how much liquid. If tablets need to be cut, see instructions for cutting tablets.
13. Before administering the medication check you are giving it to the correct pupil by verbally stating the pupils name against the MAR sheet
14. If both members of staff are satisfied with all the checks the medication can be administered as prescribed.
15. On no account must medication be left unattended to be taken later
16. Record on MAR sheet to indicate medication has been taken.
17. Repeat steps 3-16 for each medicine due at this time for this pupil.

If medication cannot be administered this must be recorded using the correct procedure.  
(See bottom of MAR sheets for code)

### **Cutting Tablets**

Some tablets need to be cut in half or even quarters in order to obtain the correct dose.

- ❖ Use a pill cutter
- ❖ Use score line on medication
- ❖ Use disposable gloves or tissue

### **Dealing with errors in administration of medication**

Errors in the administration of medicines includes:

- ❖ A medicine given to the wrong pupil
- ❖ The wrong medicine given to a pupil
- ❖ An incorrect dose of medicine
- ❖ Wrong route used for administration
- ❖ A medicine is omitted without due reason or record

Every effort is made to prevent an error occurring during the administration of medication. In the unfortunate event of an error occurring:

- ❖ HCC or a member of the Senior Leadership Group (SLG) should be informed immediately
- ❖ HCC/SLG contact the A&E Department to find out consequence of the error and any action to be taken.
  - **Mild adverse reaction** to be monitored and recorded in the pupil's Health Care Records
  - **Acute adverse reaction** pupil should be taken to hospital A&E.
- ❖ The error should be reported to parent/carer by the HCC/SLG
- ❖ A full report of the error is to be recorded on an incident form.

### **Medicine dropped during administration or counting**

- ❖ Any medication dropped onto unhygienic surface is to be disposed of into the sharps box. The HCC must be informed.
- ❖ The act of medication disposal must be witnessed, recorded and signed for on the back of the MAR sheet. The HCC must be informed.

### **Errors when signing for medication**

- ❖ Any signing errors made must be recorded on the back of the MAR sheet dated and signed. The HCC must be informed.
- ❖ Do not cross out

### **Returning Medication Home**

All medication remains the property of the pupil it has been prescribed for, and is to be sent home with the pupil at the end of each week, unless prior arrangements have been made for it to remain in school.

- ❖ All medication is to be counted out and recorded on the Receiving and Returning Medication Form.
- ❖ Once medication has been counted out, it should be placed in a named zip wallet and stored in the lockable medicine cupboard. Until it is time to place it in the correct pupil's home bag

- ❖ All home bags must have a name label attached to them
- ❖ All bags with medication in will be placed in a supervised or locked room.
- ❖ A member of staff will hand over the pupil's bags to the escort or taxi driver

### **Medication Remaining In School**

All medication remaining in school will be counted out for the week, as above and kept in a locked medication cupboard.

### **Disposing of Medication**

- ❖ Parents/carers are responsible for ensuring that date expired medication is disposed of or return to the pharmacy for safe disposal.
- ❖ When destroying medications it is important to be aware that flushing them down the toilet is not permitted.
- ❖ When medications are destroyed a record of this must be entered on the pupil's MAR Sheet. This entry must state date, pupil name, name of medication, form, amount and signatures of witness.

### **Administration of Homely Remedies for Minor Injuries and Ailments**

School keeps a small supply of homely remedies these include:

- ❖ Paracetamol tablets/suspension     - for pain or fever
- ❖ Simple Linctus                             - for coughs
- ❖ Strepsils                                     - for relief of soar throat
- ❖ Olbas Oil                                     - for decongestion (inhalation)
- ❖ Rinstead Pastilles                         - for mouth ulcers
- ❖ Plasters/Mepore Dressings             - for minor cuts and grazes
- ❖ Antiseptic Cream                         - for minor skin irritation
- ❖ Witch Hazel Gel                            - for bruises
- ❖ E 45 Cream                                 - for dry skin

If a pupil requires one of the above remedies:

- ❖ Check for parental permission before administering it
- ❖ If there is no permission, contact parents before administering
- ❖ All homely remedies given to a pupil after 4pm must be recorded in the Daily Dairy, with the date, time, amount and reason it was given. This will be transferred to the Health Care Record.
- ❖ Homely remedies given during the school day will be recorded in the clinic diary and the Health Care Record.
- ❖ Paracetamol (See Appendix 2)

### Dealing with sick or injured pupils

All significant episodes of a pupil becoming unwell or sustaining an injury while under the care of the school should be dealt with immediately, using the following procedure:

1. The HCC or First Aider, to assess the situation
2. The child should be reassured at all times and made as comfortable as possible
3. Where appropriate, first aid treatment or a homely remedy should be administered in accordance with the school medicine policy

### First Aid

If medical intervention is required the following options apply:

- ❖ **Emergency (life threatening)** – dial 999 for an ambulance (see Appendix 3 Emergency Procedure).
- ❖ **Emergency (non life threatening)** child escorted to hospital
- ❖ **Day pupil – (requiring to be seen by a Doctor within 24 hours)** parent/ carer informed and asked to make arrangements for child to see their own GP
- ❖ **Residential pupil – (requiring to be seen by a Doctor within 24 hours)** may use the services of Green Lane Medical Centre/NHS Walk in Centre
- ❖ **Residential pupil – (requiring to be seen by a Doctor for non urgent reasons)** parents informed and asked to make arrangements for child to see their own GP

### **Sick or injured pupil not requiring medical intervention**

Children who become unwell or sustain an injury which prevents them from continuing with their normal days activity, but do not require medical intervention, will be managed in accordance with Appendix 4 of this policy.

### **Sick pupil arriving at school**

It is requested that parents/carers do not send sick pupil's into school. The HCC will assess all children arriving at school appearing, or complaining of illness. If it is thought necessary, i.e. the pupil will be unable to carry out their normal daily activities, the transport will be asked to wait while arrangements are made for the pupil to be sent home

### **Managing sick or injured pupil's off campus**

The staff in charge of the activity will ensure any pupil who becomes unwell or injured is given appropriate treatment, following the school's procedure for dealing with sick or injured children

School is to be kept informed of any illness or injury occurring off-site, along with parent/carer

Remember all significant episodes of illness or injury, are to be documented in the appropriate files.

- ❖ Accident/Incident Form
- ❖ Medical File
- ❖ Residential Pupil's File

### **Keeping parents/carers informed**

Parents/carers are to be informed of any significant episode of a child becoming unwell or injured while in the care of the school via one of the following

- ❖ Phone call

❖ Clinic Attendance Form

## Appendix 1

### Controlled drugs

- ❖ All controlled drugs shall be stored in the clinic.
- ❖ They will be placed in the lockable medicine cupboard that is situated within a locked cupboard.
- ❖ Access to the key for the medicine cupboard containing the controlled drugs will be restricted to the HCC and the Duty Staff from the SLG. The Keys will be handed over in person at the start and end of each shift.
- ❖ All controlled drugs must be administered in the presence of the HCC or a member of the SLG.
- ❖ All controlled drugs must be counted prior to administration and the amount recorded in the controlled drugs book.

## Appendix 2

### Guidelines for the administration of Paracetamol

#### What is Paracetamol for?

Paracetamol is used to:

- ❖ Treat mild pain
- ❖ Reduce a high temperature
- ❖ Relieve the symptoms of cold, flu and sore throat.

#### Administering Paracetamol

Before administering Paracetamol check the following:

- ❖ Do the symptoms merit administration of Paracetamol?
- ❖ Do we have parental permission to give Paracetamol? Check pupil medical profile or contact parent/carer
- ❖ Has the pupil had Paracetamol in the past 4 hours? If unsure check, with the person who was previously responsible for the pupil, this may involve phoning home.
- ❖ Has the pupil had repeated doses. May need to see a Doctor if the symptoms persist for more than 48 hours.

If you are happy with all the above checks you may administer Paracetamol. Calculate the correct form and dose for the pupil from the table below:

#### Form and Age Range

From 3 months old	Paracetamol 5ml/120 sugar free suspension
6 years plus	Paracetamol 5ml/250mg sugar free suspension
12 years upwards	Paracetamol tablets 500mg

## Dose Range

1-5 Years	Paracetamol Suspension	One or two 5ml spoonfuls (see label)
6-12 Years	Paracetamol Suspension	One or two 5ml spoonfuls (see label)
12 Years +	Paracetamol tablets	One or two tablets (see label)

## Recording the administration of Paracetamol

The staff who has administered the Paracetamol will:

- ❖ Sign pupil MAR sheet stating time and amount given.
- ❖ Record amount and reason for administration on back of MAR sheet.
- ❖ Record administration in Paracetamol Book (one for each group and the clinic) as follows:
  - ❖ Date and time
  - ❖ Pupil name
  - ❖ Dose given
  - ❖ Tally of tablets/suspension

**Important: *Do not give any Paracetamol if pupil taking a cold or flu remedy – as most contain Paracetamol***

***\*Always read the label on all medication\****

## **Appendix 3**

### **Emergency Procedure**

In the event of a pupil requiring emergency treatment:

1. Dial 999 ask for an ambulance
2. State the nature of the problem and the school address
3. Remember to give location within the school
4. Inform school office/SLG
5. If not already in attendance summon the HCC/First Aider and a member of the SMT
6. Member of staff posted at the nearest entrance to escort the emergency services to the scene of the incident
7. The HCC/First Aider will manage the situation, administering First Aid until the emergency service take charge
8. A member of staff will accompany the pupil to hospital and remain with them until a parent or carer arrives or the pupil admitted and settled.

### **Post Emergency Situation**

1. Parent/carers contacted and informed of situation
2. Staff and pupils witnessing the incident should be reassured and given time to recover from shock
3. Inform relevant staff members of situation
4. At the earliest possible opportunity an Accident or Incident form should be completed by a member of staff

## Appendix 4

### Management of a sick or injured pupil not requiring medical intervention

Effects of illness or injury being of a short duration i.e. 2 hours – after appropriate first aid treatment

- ❖ Pupil to be rested and observed in clinic or group until well enough to continue with daily routine

Effects of illness or injury predicted to last longer than 2 hours after appropriate first aid treatment

- ❖ **Day Pupil**, as above plus, parents/carer contacted and arrangements made for them to collect pupil
- ❖ **Residential Pupils, school hours** - as above plus pupils to be rested and observed in their own residential group. A decision as to whether the pupil is to be sent home will then be made by the Health Care Co-ordinator/ Head of Service. Arrangements made with the parents/carer, or through the pupil's Local Authority taxi service, for the pupil to be taken home
- ❖ **Residential Pupils, out of school hours** - as above plus, the parents/carer and Duty Head informed of pupil's condition. A decision as to whether the pupil needs to be sent home will be made at the start of the following school day, by the Health Care Co-ordinator along with the Head of Service. Suitable arrangements will then be made for the pupil to be taken home.