

# Administration of Medication in School Policy

Bennett is a Church of England school where the principal aim is to provide a Christian framework for learning and development. In this context all students are treated with respect, and the safety and the well-being of each individual student in the school's care are of prime importance. This policy sets out the school's procedures for managing medicines safely and appropriately in school.

## 1. Introduction & Key Points

Many students will need to take medication at some time during their school life.

Medication safety is an important issue that has been carefully evaluated and included in this policy and its procedures.

This policy and its procedures should be read in conjunction with the following documents:

- Department for Education's guidance *"Supporting pupils at school with medical conditions"* (September 2014).
- Bennett's other Health Policies (available on the school website).
- Nursing & Midwifery Council (NMC) Code of Conduct (2015)
- Department of Health *"Consent guides for healthcare professionals"* (2003).

As far as possible, medication should be taken at home and should only be taken in school when absolutely essential and when it cannot be given before/after school.

Bennett must have consent from the parent/guardian to administer any medication in school.

The first dose of all new medications must be given at home to ensure that no adverse reactions are encountered while in school.

Medications required on a regular basis should be documented on a healthcare plan and in the student's school files.

When regular doses of medication are required in school these should be given at breaktime or lunchtimes, to avoid disruption to the student's learning.

## 2. Aims of Policy

This policy aims to provide guidance and information on the following:

- Roles & responsibilities when handling & administering medication
- Types of medication consent
- Medication safety procedures & storage
- School procedures when administering a student's own prescribed medication & over the counter medications
- Documentation & record keeping
- Management of medication in the School Nurse's absence
- Staff training
- Medication guidance for school trips & excursions

The following appendices are included:

**Appendix 1:** Parent Agreement for School to Administer Student's own Medication

**Appendix 2:** Emergency Adrenaline Auto Injector Consent Form

**Appendix 3:** Emergency Salbutamol Inhaler Consent Form

**Appendix 4:** Parent Agreement for the Trip Leader to Manage & Administer Students' Medication for the Duration of the Trip

**Appendix 5:** Gillick Competency Guidance & Assessment Questions

**Appendix 6:** Individual Health Care Plan (HCP)

**Appendix 7:** Medication Guidance for Parents

### **3. Roles & Responsibilities**

#### **Parents / Guardians are responsible for:**

- Ensuring their child is well enough to attend school.
- Providing the school with full details of any medical condition affecting their child and any regular medication their child requires.
- Providing in-date medication in a labelled container.
- Replacing their child's medication upon request, if expired or to replenish stock.
- Completion of any documentation associated with consent and their child's medical needs.
- Keeping the school informed of any changes to their child's health or medication.
- Assessing their child's competency to manage their own medication. Parents are encouraged to refer to the "*Gillick Competency Guidance & Assessment Questions*" document (appendix 5).
- It is the parents' responsibility to confirm if their child is competent to safely carry a single dose of their medication. If they deem them responsible, they must ensure their child is managing and administering their medication safely and correctly.
- Vulnerable students may require a more bespoke approach with the management of medication in school. This bespoke approach may include the parent completing a healthcare plan, the support of the School Nurse, Learning Support or parental involvement.

### **4. School Nurse**

Bennett employs a School Nurse. As a Registered Nurse and in accordance with the Nursing and Midwifery Council (NMC) Code of Conduct (2015), the School Nurse may administer medication in school on a regular or occasional basis with the consent of parents.

In the absence of the School Nurse, her trained deputy(s) can administer prescribed medication to students in accordance with the documentation, this policy and its procedures.

### **5. The School's Responsibility**

- All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a student taking medication unless they have been specifically contracted or trained to do so.
- Any staff member involved in administering medications either as part of their employment contract or voluntarily is responsible for ensuring they follow the school's policies and procedures when administering medication to students.
- The School Nurse's Deputy(s) must be specifically trained to administer medications to students.
- Medication training is provided by the School Nurse and through OPUS pharmacy services.
- If there is ever a query around administering medication to a student, the trained member of staff will contact the parent before taking further action.
- Any member of staff assisting in an emergency in good faith and acting reasonably and responsibly may administer emergency medication, if confident to do so.

### **6. Student's Responsibility**

- Students who are competent, defined as "Gillick competent", may choose to manage their own medication.

- Gillick competency is referred to when assessing a child's ability to be responsible to manage their own health and carry a single dose of medication.
- Students and their parents/guardians are encouraged to refer to the "*Gillick Competency Guidance & Assessment Questions*" (appendix 5) to assess their child's maturity and understanding around medication management prior to the student independently managing their medication.
- Following discussion with parents, students who are "Gillick competent" can carry a single dose of their own medication to self-administer.
- Bennett aims to provide the necessary professional support to students and their families to help them safely and independently become managers of their own health.
- Most commonly, competent students may choose to carry a single dose of paracetamol to help them independently and rapidly treat any ill health symptoms.
- Students that choose to store their medication with the School Nurse, are responsible to know where their medication is stored and how and when to access their medication.

#### 7. **Consent:**

Bennett must have consent from the parent/guardian to administer medication in school.

##### Prescription Medications:

- Prescription medication consent involves the parent completing a "*Parent Agreement for School to Administer Student's Own Medication*" document (appendix 1).
- Any prescription medications handed in to be stored in the School Nurse's Office must be accompanied by a completed Parent Agreement.
- Completion of the parent agreement form obviates the necessity of contacting the parent before administering each dose. This document clearly outlines how and when the medication should be administered to the student.
- The School Nurse will administer prescription medication in line with this document.
- In the School Nurse's absence, her deputy(s) will refer to the parent agreement and complete all necessary checks prior to administering the prescribed medication.
- More information on prescription medication procedures can be found in section 11 of this policy.

##### Over the Counter Medications (OTCM):

- The School Nurse can administer over the counter medications (OTCM), such as paracetamol, if essential, but only if the parent has provided consent.
- Other than the qualified School Nurse, no other member of staff is authorised to determine when an over the counter medication (OTCM) is to be given.
- In the School Nurse's absence, her deputy will contact the student's parent with information on symptoms and gain verbal consent for a one off dose of an OTCM.

##### Emergency Medication Consent:

- Bennett must have additional consent from a parent/guardian to administer the Emergency Salbutamol Inhaler and the Adrenaline Auto Injector (AAI, EpiPen). Parents are able to complete the emergency medications' consent forms when their child enrolls at Bennett and as part of their child's healthcare plan (HCP). (Emergency Medication Consent Forms appendix 2 & 3).

#### 8. **Safe storage**

- All medicines should be stored safely. Students should know where and when to access their medicines.

- Large volumes of medicines should not be brought into school.
- Any medication brought into school to store should be handed in to the School Nurse as soon as the student arrives in school, to prevent full packets/bottles of medication being carried by the student.
- Medicines and devices such as blood glucose testing meters and adrenaline auto injectors (AAI/Epipen) should be readily available to the student and not locked away.
- The School Nurse can store spare medication for the student if they require access to this medication during the school day.
- Non-emergency medication will be stored in a locked cabinet in the Nurse's Office, with the key stored in an accessible but restricted place, known only to the designated members of staff.
- Over the counter medication such as pain relief, will be stored in a locked cabinet in the Nurse's Office.
- Once a medication is removed from the locked cabinet, the medication must be administered immediately and not left unattended. The medication must be taken immediately by the student and not taken away.
- Medicines (including analgesics such as Paracetamol) must not be kept in First Aid bags or boxes, or anywhere accessible to students.

## **9. Self-Management**

- Where appropriate, students should be allowed to be in charge of their own medication, either keeping it securely on their person or in lockable facilities. It is advisable for a risk assessment and the *"Gillick Competency Guidance & Assessment Questions"* (appendix 5) be considered, in order to minimise the potential for harm to occur.
- Bennett aims to provide the necessary professional support to students and their parents/guardian to help them safely and independently become managers of their own health.
- Some students may feel confident to carry a single dose of their medication. Commonly, a single dose of paracetamol or antihistamine is carried by the student so that they can independently and rapidly treat their acute symptoms, which might include rapid onset of pain or allergy symptoms.
- The parent and child are encouraged to refer to the *"Gillick Competency Guidance & Assessment Questions"* (appendix 5).
- Vulnerable students may require a more bespoke approach with the management of medication in school. This bespoke approach may include a healthcare plan, the support of the School Nurse, Learning Support or parental involvement

## **10. Documentation**

- All medication administered is documented in the student's planner on the medical log page. Parents should sign each entry to confirm they have seen what medication has been administered and when.
- Medication administered is also documented on the today sheet in the Nurse's office and in the students' school files (CPOMS).
- As stated in the consent section of this policy, a *"Parent Agreement"* form (appendix 1) must be completed and handed in with any prescribed medication that requires storage in the School Nurse's office. This form clearly outlines how and when the medication should be administered to the student.
- Medications required on a regular basis should be documented on a health care plan and in the student's school files.

## **11. Medication Procedures for Prescribed Medication**

- Students can store a stock of their prescribed medication with the School Nurse for conditions such as migraines, heavy periods, mild allergies etc.
- All medications stored in the School Nurse's office must be clearly labelled with the child's name, dose and frequency on it.
- Any prescribed medications handed in to store in the School Nurse's Office must be accompanied by a completed "*Parent Agreement*" form (appendix 1).
- If and when the medication is administered, it will be documented in their student planner and in the students' school records.
- If the parent assesses and confirms their child is competent to safely carry and self-administer a single dose of their prescribed medication, students can carry a single dose during the school day.
- In the absence of the School Nurse, her trained Deputy(s) hold the responsibility of administering any prescribed medication to individual students.

## 12. Medication Procedures for Antibiotics

- Antibiotics should only be brought into school where essential, that is where it would be detrimental to the child's health if the antibiotic was not administered during the school day.
- If oral antibiotics are prescribed, they should ideally be administered outside of school hours. Parents are encouraged to speak with their GP regarding their prescription and dosages.
- This will mean that most antibiotic medication will not need to be administered during school hours. e.g, if the prescription states that twice daily doses should be given, these can be administered in the morning before school and in the evening after school, and if the prescription requires three doses a day these can often be given in the morning before school, immediately after school and at bedtime.
- If an antibiotic must be administered during the school day, it should only need to be administered once during the school day.
- All first doses of new antibiotics must be given at home, in case of adverse reactions.
- Antibiotics required to be administered during the school day should be administered at lunchtime (12.40pm).
- If the antibiotic needs to be taken on an empty stomach, we recommend the student have it at 11.40am (in between periods 2-3) as this is 1 hour before lunchtime.
- A liquid suspension of antibiotic medication can be stored in the Nurse's Office, if required. A fridge is available if needed.
- It is recommended that the student avoid bringing the entire course of antibiotic medication into school, as this is not necessary.
- It is recommended that the parent request 2 bottles of the antibiotic from their GP/pharmacist to split between home and school.
- If suitable, the parent can measure out the required amount to be administered during the school day and keep this in its original container to be brought into school e.g Parent to measure out the required amount (5ml each day, 25mls for 5 days) and keep the remaining medicine at home in a separate container.
- Some parents use a pre-fillable syringe to measure out several doses to be brought into school/store at home.  
For oral antibiotics in tablet form, we suggest the parent assess their child's competency to carry one dose, for them to self-administer at lunchtime. Parents are encouraged to refer to the "*Gillick Competency Guidance & Assessment Questions*" (appendix 5).
- Students should not carry a full packet of antibiotics or any medication.
- All antibiotic medications received to store and administer in school must be documented on the child's records as well as the parent agreement to administer document.
- All antibiotic medications administered during the school day should be documented in the student's planner on the medical log page. Parents should sign each entry to confirm they have seen what medication has been administered and when.

### 13. Medication Procedures for Controlled Drugs

- The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act, and its associated regulations.
- Controlled medications must be handed in to store with the School Nurse and must be accompanied by a completed “*Parent Agreement*” form (appendix 1).
- Controlled drugs must be kept in a locked non-portable cupboard with only named staff having access.
- A record should be kept of any doses administered, the time the medication was administered, by whom and the amount of the controlled drug held in school. This should all be documented in the controlled drugs log book in the Nurse’s Office.
- Only a suitably trained member of staff may administer a controlled drug to a student for whom it has been prescribed. The drugs must be administered within the prescribed instructions.
- In the absence of the School Nurse, her trained Deputy(s) hold the responsibility of administering any prescribed medication to individual students.

### 14. Procedures for administering Over the counter Medications

- Over the counter medications (OTCM) such as Paracetamol, should not need to be administered on a regular basis.
- The School Nurse stores a small stock of OTCM, in case they are essential during the school day.
- OTCM stored in school include:
  - Paracetamol tablets
  - Calpol suspension
  - Ibuprofen
  - Cetirizine Hydrochloride (Antihistamine)
  - Piriton (Antihistamine)
  - Throat lozenges
  - Anthisan Cream
  - Savlon
- All parents are advised to familiarise themselves with the medication policy and its procedures.
- Parents are able to provide their consent for the school nurse to administer OTCM via the SIMs parent app > data consent.
- With parent consent, OTCM may be administered for:
  - Headache
  - Toothache
  - Dysmenorrhoea
  - Early symptoms of earache
  - Early symptoms of cold or flu
  - Allergic reactions
  - Burns
  - Wounds
  - Nausea due to a reaction
- No medicines will be given in school that students have never had before. All first doses must be given at home, in case of adverse reactions.
- All medications given to students in school will be recorded on the medical log page in the student planner. Parents should sign all medication entries to confirm they are aware of what medications have been administered during the school day, in particular, over the counter medications, as these are administered following an assessment of the student’s acute symptoms.

- It is advisable not to administer OTCM to a student more than 3 times in a term. If long term medication is required a HCP and an individual supply of medication should be discussed with the student and parents.
- The School Nurse is a qualified health care professional that can assess and determine if/when an over the counter medication is required. The School Nurse is best placed to administer medications in school due to her medical experience and knowledge base, in addition to her knowledge of the student's past medical history.
- The School Nurse's Deputy(s) will not routinely administer OTCM in school. They will only consider this option if all other avenues have been explored, therefore, to start with, the student will first be encouraged to get some fresh air, have a drink, something to eat - paracetamol is only considered if these actions do not work.
- In the School Nurse's absence, her deputy will contact the student's parent with information on symptoms and gain verbal consent for a one off dose of an OTCM.

### **15. Emergency Medications**

The most common types of emergency medication which may be required during the school day include:

- Adrenaline Auto Injector, under the brand names Epipen, Jext, Emerade, used to treat anaphylaxis caused by an allergic reaction
- Inhalers, used to treat asthma (usually the blue salbutamol inhaler).
- Buccolam (midazolam), used to treat epilepsy convulsions
- Glucose or dextrose tablets, which may be branded Hypostop, used to treat hypoglycaemia caused by diabetes.

### **16. Procedures around Emergency Anaphylaxis Medication**

- Students with life threatening allergies prescribed an Adrenaline Auto Injector (AAI) MUST have these available in school and must have a healthcare plan completed, to be kept on file (Appendix 6)
- It is the responsibility of the parents to ensure that their child is trained and competent to self-administer their emergency medication.
- Where school staff agree to administer treatment and medication to a student in an emergency, regular refresher training sessions are arranged.
- Students are encouraged to be independent and keep their own prescribed AAIs with them at all times, this includes breaktimes, during PE lessons, during assemblies and for extracurricular activities. Students often carry their AAI in the front pocket of their school bag, in their blazer pocket or in a pouch/bum bag. Carrying their own AAI reduces any delay in the administration of this life saving drug and simplifies the procedure.
- If the student forgets to bring their AAI into school or it is mis-placed or faulty, they have access to the emergency anaphylaxis kit.
- At Bennett, we hold 2 emergency anaphylaxis kits, 1 in the Mansion Building at the Nurse's Office and 1 in the Rochester Building foyer. This means there is always quick and easy access to an in-date AAI if an anaphylactic emergency occurred.
- Having 2 emergency anaphylaxis kits readily available means students do not need to hand in a spare/2<sup>nd</sup> AAI as a back up.
- We must have consent from a parent to administer the emergency AAI from the anaphylaxis kit (Appendix 2).
- We take an emergency anaphylaxis kit on all school trips.

### **17. Procedures for Salbutamol inhaler Medication**

- Students who require a salbutamol inhaler to manage their asthma MUST have these available in school.

- It is the responsibility of the parents to ensure their child is trained and competent to self-administer their salbutamol.
- Parents are responsible for informing the School Nurse if their child is not competent or confident to independently use their inhaler.
- Bennett encourages students with a prescribed Salbutamol (Ventolin) inhaler to carry their inhaler on them at all times. Students should take their inhaler out to their PE lessons, outside at breaktimes/lunchtimes and taken to any extracurricular activities, to self-administer as needed.
- At Bennett, we hold an emergency Salbutamol Inhaler in the Nurse Office, this universal emergency inhaler means there is always quick and easy access to an in-date inhaler for those with a prescribed inhaler. This means there is no need for students to store a second spare inhaler in school if they do not wish to do so.
- The emergency universal inhaler is used with a disposable spacer, to ensure it is used hygienically and effectively.
- We must have consent from a parent to administer the emergency universal salbutamol inhaler (Appendix 3).
- Only a suitably trained member of staff may administer the universal inhaler, this may be the Nurses Deputy or qualified first aider.
- In the absence of the School Nurse, the trained member of staff will check what consent we hold on file for the student and assess the student's competency to use the inhaler independently using the disposable spacer.
- If the emergency inhaler is administered to a student in school, it will be recorded on the medical log page in the student planner. Parents should sign all medication entries to confirm they are aware of what medications have been administered during the school day.

## **18. Staff Training**

- The School Nurse's deputy(s) should be suitably trained before administering any medications in school.
- Any training should be updated annually and provided by the School Nurse and OPUS pharmacy services.
- By completing training on the handling and administration of medication, the School Nurse's Deputy(s) are more knowledgeable and confident to administer medication in the School Nurse's absence. They should have a good understanding of this policy and its procedures to follow to safely administer medication.

## **19. School Trips & Educational Visits**

- It is good practice for children with medical needs to participate in school trips/excursions. Provided that an individual risk assessment has been carried out as part of the student's healthcare plan, they should be able to participate fully.
- A list of all students going on a school trip should be forwarded to the School Nurse at least 2 weeks prior to the visit. This will enable the students with medical needs and medications to be identified and assessed.
- On the eve of the trip the School Nurse will hand over any medications stored in school for individual students, including a copy of their Health Care Plan and the consent form for school to administer their child's medication, to the teacher in charge of the trip
- parents wanting to send medication with their child on a school trip, who doesn't routinely store medication in school with the School Nurse, must do the following:
  - Hand in the required medications to the trip leader on the morning they depart.
  - Complete and hand in the "*Parent agreement for trip leader to manage & administer student's medication*" (appendix 4) to the trip leader
  - Ensure all medicines are in their original packaging with their child's name, medication name and dose clearly displayed.



- The trip leader is responsible for keeping all students' medications safe and stored appropriately at all times.
  - Students requiring a single dose of medication can carry this if they are competent to self-administer and the parent has referred to the Gillick Competency Guidance & Assessment Questions" (appendix 5).
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- The trip leader should take special consideration when storing and administering any controlled drugs, these should ideally be kept under lock and key during the trip.
  - Staff supervising excursions should meet with the School Nurse to review all the student's medical details at least two weeks prior to the excursion.
  - A copy of any health care plans should be taken on the school trip.
  - Students who have a prescribed AAI and/or inhaler should carry their own AAI/inhaler with them at all times. The trip leader must hold the universal AAI/inhaler for use in an emergency. Appropriate training should be provided.

## APPENDIX 1: PARENT AGREEMENT FOR ADMINISTERING STUDENTS OWN MEDICATION

My child will store medication in the School Nurse's Office ☐ (please complete the information below)

My child is competent to safely carry & administer a single dose of their medication ☐ (no need to complete the information below)

Name of Child	
Date of Birth & Age	
Year Group & Guild	
Medical Condition/Symptoms	
<b>MEDICATION</b>	
Name/Type of Medicine <i>(as described on the container)</i>	
Expiry Date	
Dosage & Method of Administration	
Timings & Frequency (times to be administered, how many times per day & how long for)	
Storage Required (fridge, cupboard, emergency access)	
Special precautions/other instructions	
Are there any side effects school need to know about?	
Child can independently administer?	Yes <input type="checkbox"/> No <input type="checkbox"/>
First dose given at home?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>PARENT CONTACT DETAILS</b>	
Name	
Telephone Number & Email	Number: Email:
Relationship to child	
I have read the school medication policy and guidance	Yes <input type="checkbox"/> No <input type="checkbox"/>

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

## **APPENDIX 2: EMERGENCY ADRENALINE AUTO INJECTOR (AAI) CONSENT FORM**

At Bennett, we use the Emergency Adrenaline Auto Injector for students that have written parental consent and that have medical approval to receive this emergency treatment.

A register of students who suffer symptoms of anaphylaxis and who have provided specific consent for the use of the emergency AAI is kept on file for emergencies.

If a student suffers anaphylaxis symptoms and they are not carrying their own AAI or their own AAI is faulty, we will check our parental consent to administer the emergency AAI.

Student's Name	
Tutor Group	
Parent/Guardian Name	
Parent/Guardian Signature	
Date	

### **Consent for the Emergency AAI:**

- I confirm the above named student has been prescribed an AAI ☐
- I confirm the above named student has a working, in-date AAI, clearly labelled with their name, which they will bring with them to school every day ☐
- I confirm that if the student named above displays symptoms of anaphylaxis, and their AAI's are not available or unusable, they can receive adrenaline from an emergency AAI(s) held by the school for such emergencies ☐
- I understand this emergency AAI(s) may differ in brand from the student's prescribed AAI ☐

### **Consent for Emergency Oral Antihistamine:**

- I confirm that if the above named student requires an oral antihistamine they can receive Piriton (Chlorphenamine Maleate) ☐

### APPENDIX 3: EMERGENCY SALBUTAMOL INHALER CONSENT FORM

At Bennett, we use the Emergency Salbutamol Inhaler for students that have written parental consent and that have medical approval to receive this emergency treatment.

A register of students with specific consent for the use of the emergency Salbutamol inhaler is kept on file for emergencies.

If a student suffers asthma related symptoms and they are not carrying their own inhaler or their own inhaler is empty or broken, we will check our medical files and check we have parental consent to administer the emergency salbutamol inhaler.

Student's Name	
Tutor Group	
Parent/Guardian Name	
Parent/Guardian Signature	
Date	

#### Consent for the Emergency Salbutamol Inhaler:

- I confirm the above named student has been prescribed a Salbutamol Inhaler ☐
- I confirm the above named student has a working, in-date Salbutamol Inhaler, clearly labelled with their name, which they will bring with them to school every day ☐
- In the event of the above named student displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive Salbutamol from an emergency inhaler held by the school for such emergencies ☐

**APPENDIX 4: PARENT AGREEMENT FOR TRIP LEADER TO MANAGE & ADMINISTER STUDENTS' MEDICATION FOR THE DURATION OF THE SCHOOL TRIP**

**My child will store medication with the TRIP LEADER ☐ (please complete the information below)**

**My child is competent to safely carry & administer a single dose of their medication ☐**

Name of Child	
Date of Birth & Age	
Year Group & Guild	
Medical Condition/Symptoms	
<b>Medication</b>	
Name/Type of Medicine <i>(as described on the container)</i>	
Expiry Date	
Dosage & Method of Administration	
Timings & Frequency (times to be administered, how many times per day & how long for)	
Storage required (fridge, cupboard, emergency access)	
Special precautions/other instructions	
Are there any side effects school need to know about?	
Child can independently administer?	Yes <input type="checkbox"/> No <input type="checkbox"/>
First dose given at home?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Parent Contact Details</b>	
Name	
Telephone Number & Email	Phone Number: Email:
Relationship to child	
I have read the school medication policy and guidance	Yes <input type="checkbox"/> No <input type="checkbox"/>

*The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.*

**Record of Medication Administered by TRIP LEADER**

**Trip Leader to complete:**

Student Name:.....

Name of Medication to be administered:.....

Quantity handed in: .....

[illegible]

## APPENDIX 5: GILLICK COMPETENCY GUIDANCE & ASSESSMENT QUESTIONS

Parents are encouraged to refer to these guidelines and assessment questions when assessing their child's competency to self-administer their own medication.

### Assessing Gillick Competence

The Department of Health (2003, [Consent guides for healthcare professionals](#)) states there is no set of defined questions to assess Gillick competency. Professionals need to consider several things when assessing a child's capacity to consent, including:

- the child's age, maturity and mental capacity
- their understanding of the issue and what it involves - including advantages, disadvantages, and potential long-term impact
- their understanding of the risks, implications and consequences that may arise from their decision
- how well they understand any advice or information they have been given
- their understanding of any alternative options, if available
- their ability to explain a rationale around their reasoning and decision making.

If a child is not thought to be Gillick Competent or there are inconsistencies in their understanding, school should seek consent from their parents or carers before proceeding.

Parent are encouraged to refer to the following questions to confirm if their child is competent to safely carry a single dose of their own medication.

1. Does the child understand what the medication is for? YES <input type="checkbox"/> NO <input type="checkbox"/>
2. Does the child understand the requirement to take their medication? YES <input type="checkbox"/> NO <input type="checkbox"/>
3. Does the child understand the correct amount/dose to take and when? YES <input type="checkbox"/> NO <input type="checkbox"/>
4. Does the child understand any special instructions i.e., with/without food? YES <input type="checkbox"/> NO <input type="checkbox"/>
5. Does the child understand how to check the medication expiry dates? YES <input type="checkbox"/> NO <input type="checkbox"/>
6. Does the child understand how to correctly and safely store their medication? YES <input type="checkbox"/> NO <input type="checkbox"/>
7. Does the child understand that they should not hand out medication to any other student and this single dose of medication is for their own personal use only? YES <input type="checkbox"/> NO <input type="checkbox"/>
8. Does the child know the potential side effects? YES <input type="checkbox"/> NO <input type="checkbox"/>
9. Does the child understand what to do in the event of taking too much medication or missing a dose? YES <input type="checkbox"/> NO <input type="checkbox"/>
10. Does the child understand it is their responsibility for letting an appropriate person know if there is a concern with their medication? YES <input type="checkbox"/> NO <input type="checkbox"/>
11. Does the child understand how to seek help during the school day? YES <input type="checkbox"/> NO <input type="checkbox"/>
12. Are you in agreement that no risk factors have been identified i.e self harm, acute mental health episode? YES <input type="checkbox"/> NO <input type="checkbox"/>
13. Does the Parent & child understand the main principles of self administration and carrying one dose safely on their person? YES <input type="checkbox"/> NO <input type="checkbox"/>
14. Does the Parent & child understand that any changes in the child's medical condition may mean it is necessary to review the self-administering arrangement? YES <input type="checkbox"/> NO <input type="checkbox"/>

**If the child is unsure of any of the above points, the child and parent should seek advice from the School Nurse.**

## Appendix 6: Individual Healthcare Plan HCP For Students with a Medical Condition



**Student's Name**

**Year/Guild**

**Date of Birth**

**Student's Primary Address**

**Medical Diagnosis or Condition**

**Known Allergies**

**Date Healthcare Plan Completed**

### **Family Contact Information**

**Name of Emergency Contact 1**

**Contact's Phone Numbers**

**Relationship to student**

**Name of Emergency Contact 2**

**Contact's Phone Numbers**

**Relationship to student**

<b>GP Name &amp; Details</b>	
<b>Other Health professionals involved</b> (names & details)	



**Condition Information** *Details of child's symptoms, triggers, signs, treatments etc*

Name of Condition (1)	
Symptoms associated with this condition	
What triggers exacerbate these symptoms?	
What risks are associated with this condition?	
What support & treatment is needed for this condition?	

Name of Condition (2)	
Symptoms associated with this condition	
What triggers exacerbate these symptoms?	
What risks are associated with this condition?	
What support & treatment is needed for this condition?	

**Medication:**

Routine/Daily Medicine(s) at Home:

<i>Name of Medicine:</i>	<i>Dose:</i>	<i>Time given at home:</i>

**Emergency Medications to be given at School:** *drug name, time to administer, dose & method of administration*

<i>Name of Medicine:</i>	<i>Dose:</i>	<i>Time to be given:</i>	<i>Method:</i>

	Yes / No	Comments:
<b>Child competent to self-administer?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Does the child understand they can carry one dose on them, if they are competent to do so?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Can the child independently manage their symptoms?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Does the child understand when to administer or seek medical support?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>Does the child understand how to seek unscheduled support?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

**Are there any physical restrictions linked with this medical condition(s)?**

--

**Specific support or equipment required in school (*for medical, learning, emotional needs*)**

--

**Activities that may require special precautions, management & risk assessment considerations**

--

**Arrangement for school trips/excursions (*include medicine management*)**

--

**Additional Information**

--

**Staff Members involved with this healthcare plan:**

Name:	Role:

**Parent/Guardian involved with this healthcare plan:**

Name:.....Relationship:.....

*Student Signature:*.....

## APPENDIX 7: MEDICATION GUIDANCE AT BENNETT

Many students will need to take medication at some time during their school life.

Students can store medications with the School Nurse if they are urgently required during the school day.

Medication should only be brought into school where essential, that is where it would be detrimental to the child's health if the medicine were not administered during the school day.

Some students may feel confident to carry a single dose of their medication. Commonly, a single dose of paracetamol or antihistamine is carried by the student so that they can independently and rapidly treat their acute symptoms, which might include rapid onset of pain or allergy symptoms.

Bennett aims to provide the necessary professional support to students and their parents to help them safely and independently become managers of their own health.

### STORING MEDICATION WITH THE SCHOOL NURSE:

If you need to bring any medication into school to be stored in the School Nurse's Office, you **MUST** complete the attached form.

### PAIN RELIEF:

- If your child requires pain relief on a regular basis, parents are encouraged to manage this and administer outside of school hours, as much as possible.
- Your child can carry a single dose to self-administer during the school day, if you feel they are competent to manage this. Please can we ask that only one dose is carried, not a full packet. Alternatively, you can store some medication with Nurse Becki.

### NON-PRESCRIPTION/OVER THE COUNTER MEDICATION (school emergency stock):

- At Bennett, we keep a small supply of over the counter medications in the Nurse's Office for essential use. These are not routinely administered.
- Nurse Becki must have consent from a parent to administer any over the counter medications e.g Paracetamol, Calpol, Ibuprofen or Antihistamines.
- Medication consent can be provided via the SIMs parent app under data consent. If you are unsure, please email Nurse Becki to update your child's records.
- No medicines will be given in school that students have not had before. All first doses must be given at home, in case of adverse reactions.
- Any medications given to students in school will be recorded on the medical page in the student planner, page 23. Parents should sign each entry to confirm they have seen what medication has been administered and when.

### ANTIBIOTICS/COURSE OF TREATMENT:

- If oral antibiotics are prescribed, they should ideally be administered outside of school hours. Parents are encouraged to speak with their GP regarding their prescription and dosages.
- This will mean that most antibiotic medication will not need to be administered during school hours. e.g, if the prescription states that twice daily doses should be given, these can be administered in the morning before school and in the evening after school, and if the prescription requires three doses a day these can often be given in the morning before school, immediately after school and at bedtime
- If an antibiotic must be administered during the school day, it should only need to be administered once during the school day.

- All first doses of new antibiotics must be given at home, in case of adverse reactions.
- Antibiotics required to be administered during the school day should be administered at lunchtime (12.40pm).
- If the antibiotic needs to be taken on an empty stomach, we recommend the student have it at 11.40am (in between periods 2-3) as this is 1 hour before lunchtime.
- A liquid suspension of antibiotic medication can be stored in the Nurse's Office, if required. A fridge is available if needed.
- It is recommended that the student avoid bringing the entire course of antibiotic medication into school, as this is not necessary.

### LIQUID ANTIBIOTICS:

We suggest one of the following:



1) It's helpful to request 2 bottles of the antibiotic from your GP/pharmacist to split between home and school.



2) You could measure out the required amount to be administered during the school day and have your child bring the required medication into school in its original container i.e parent to measure out the required amount e.g 5ml each day, 25mls for 5 days. Parent to keep the remaining medicine at home in a separate container.



3) You can use a pre-fillable syringe to measure out several doses to be brought into school/store at home.

4) If helpful, we can provide you with a second container for storage. Please contact Nurse Becki regarding this.



### ANTIBIOTICS IN TABLET FORM:

For oral antibiotics in tablet form, we suggest the parent assess their child's competency to carry one dose, for them to self-administer at lunchtime. Students should not carry a full packet of antibiotics or any medication.

### INHALERS:

- We encourage students with a prescribed blue Salbutamol (Ventolin) inhaler to carry their inhaler on them at all times.
- Students should take their inhaler out to their PE lessons, out at breaktimes/lunchtimes and taken to any clubs, to self-administer as needed. Please ensure your child feels confident to do this.
- If you feel your child will need to store a spare inhaler in the Nurse's Office, please email [school-nurse@bennett.kent.sch.uk](mailto:school-nurse@bennett.kent.sch.uk).

### EMERGENCY SALBUTAMOL (VENTOLIN) INHALER:

- At Bennett, we hold an emergency Salbutamol Inhaler in the Nurse's Office, this means there is always quick and easy access to an in-date inhaler, therefore, you do not necessarily need to store a second spare inhaler in school for your child.
- The emergency inhaler is used with a disposable spacer. The inhaler itself is also sterilised after each use, to ensure it is used hygienically and effectively.
- We must have consent from a parent to administer the emergency salbutamol inhaler.
- If you would like to give consent please email [schoolnurse@bennett.kent.sch.uk](mailto:schoolnurse@bennett.kent.sch.uk).