



DAWN HOUSE SCHOOL – STAFF HANDBOOK	
Policy Title: Medical & First Aid	
Section:1	Policy No: 1.13
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Name of Originator: JMc	Designation: Principal

This policy has been created following the Royal Pharmaceutical Society guidance ‘The Handling of Medicines in Social Care’, following the eight principles of safe and appropriate handling of medicines:

1. People who use social care services have freedom of choice in relation to their provider of pharmaceutical care and services including dispensed medicines, i.e. care staff will support pupils in developing the skills to look after and self-administer their medication, only give medicines with the pupil’s consent, accommodating personal and cultural preferences.
2. Care staff know which medicines each person has and the social care service keeps a complete account of medicines.
3. Care staff who help people with their medication are competent.
4. Medicines are given safely and correctly, and care staff preserve the dignity and privacy of the individual when they give medicines to them.
5. Medicines are available when the individual needs them and the care provider makes sure that unwanted medicines are disposed of safely.
6. Medicines are stored safely.
7. Social care has access to advice from a pharmacist.
8. Medicines are used to cure or prevent disease or to relieve symptoms, and not to punish or control behaviour.

The main aim of the school medical team is to provide each pupil with the optimum health care.

The School Medical Team currently consists of:

- **A Nursing Auxiliary, who is a Fully Qualified First Aider both for Adults and Children, reflecting the Department for Education statutory guidance ‘Supporting Pupils at School with Medical Conditions’ (effective from 1 September 2014). Hours of work: 5 days per week.**
- **40 other staff members who have First Aid qualifications.**
- **28 staff members who have received training to administer medication (regular prescribed medication and homely remedies) and emergency medication.**
- **Staff members who have trained in meeting the needs of pupils with Epilepsy.**
- **Staff members who have trained in Diabetes Awareness.**
- **Staff members who have received training to countersign for medication.**
- **Staff members who have received training to administer an Epi-Pen.**

Lists of these are available throughout the school.

The Team will ensure:

- Pupils at school with medical conditions should be appropriately supported so that they have full access to education, including school trips and physical education.
- Staff training reflects the needs of pupils within school, and includes regular updated and refresher training.
- All staff working alongside a student with a medical condition are aware of their medical condition.
- Cover arrangements in case of staff absence.
- Information is available, via the core team, for supply staff.
- Medical Risk Assessments are implemented and reviewed at least annually.
- Individual healthcare plans are implemented and reviewed at least annually.
- Procedures are in place to inform school when a child has been diagnosed with a medical condition.
- All relevant information is in school, and all care plans implemented before new students start at school.
- When new diagnoses are made during the school term, all care plans will be updated and implemented within 2 weeks.
- Students that are competent are enabled to manage their own medication.
- There is a high standard of communication between all professionals.
- There is a high standard of communication between school and parents.
- Up-to-date information is provided.
- There is a nursing/first aid cover.
- There is a sick bay.
- Pupils’ wishes and feelings are sought and taken into account in their health care, according to their understanding, and staff act as advocates on their behalf.
- Pupils have regular, appropriate health checks.
- Pupils are escorted to GP appointments, when appropriate.
- Medication is appropriately received into school, stored and administered.

- Staff receive support with health education programmes.
- Health & Safety guidelines are followed.
- Training is organised for all staff in relation to the health and medical needs of our pupils.
- Regular monitoring of pupils' height and weight are carried out, as necessary.
- Health/Medical Care Plans are maintained for all pupils with specific health needs, chronic conditions and disabilities requiring intervention. These will be agreed by parents/carers, and include: record of developmental checks; health monitoring required by staff; intimate care or bodily functions requiring staff help; the involvement of a child's parents/carers or significant others in health and welfare issues.

Medical Procedures

A trained first aider will have successfully completed a three-day first aid at work course and a 2 day paediatric first aid course within the last 3 years.

In the absence of a suitably qualified person, the pupil will be seen by a staff member who has passed the 'one-day' schools first aid course.

Medication will only be administered by suitably trained staff, listed in the medical suite (RH, GS, MC, KH, AD, ZS, CS, KD, RB, SS, DW, AT, CBO, AS, DM, JO, CL, YAK, HB, CG, SB, JJ, MK, SU, LR, LG, EH, DP, RF, NKi).

Include details of safe administration of meds training recently undertaken

Where dealing with specific medical conditions that require further training, staff must be appropriately trained before dealing with any incidents. Currently staff are trained to administer Epi-Pen adrenaline injections and have received further training from Young Epilepsy. Staff have also engaged in Buccal Training and Diabetes Awareness Training to administer insulin and monitor blood glucose levels.

Induction

All new staff will be given a copy of the Medical & First Aid Policy to ensure that they have information on:

- Their individual responsibilities.
- Roles and responsibilities of members of the medical team.
- Location of the first aid boxes.
- Procedures to follow in the event of an accident to a pupil.
- Procedures to follow in the event of an accident to a member of staff.
- Role of staff in dealing with and recording accidents.
- Medication – storage and administration, where appropriate.

Continuing Training

Appropriate and relevant initial, update and refresher training will be undertaken by staff members on a regular basis.

Automated External Defibrillators (AED)

The school has two AED's on site in case of emergencies. One of the AED's comes equipped with paediatric pads for use on younger students or visitors.

One AED is stored in the Medical Suite and the other in the main school office. Signs are up around the school to ensure the locations are known.

No formal training is required to use to AED's but all staff completed an E-Learning module to ensure staff were prepared in case of an emergency.

First Aid

During school hours, including residential care hours, there will be a qualified First Aider on site at all times, and named staff who are able to administer regular medication, homely remedies and emergency medication.

If the Nursing Auxiliary is not in school, cover arrangements will be made to cover medication using one of the trained members of staff. In the event that a child requires first aid assistance but does not require medication, any First Aider can attend to the incident.

First aid kits are situated:

- In each classroom in school, including kitchens, swimming pool and gym.
- There are enhanced, subject and risk specific first aid kits located in the science room, the DT room and the food tech room.
- In the staffroom.
- There is another large kit kept in the main file room for break times, which remains on site.
- In each of the school vehicles.

The kits are checked at least annually by the Nursing Auxiliary. Accident books are located in the school Reception and in the Care Team's Office.

Accidents

- In an emergency, dial 0 and ask for the Nursing Auxiliary and/or a First Aider to be called, or telephone the Medical Room on **Ext 402**.
- Accident forms must be completed as soon as possible, and when complete, passed onto the Principal for signing.
- Accident forms will then be passed onto the Nursing Auxiliary, who will make a copy, record the information on the Accident Log and file. Originals are sent to the insurers each month and copies are filed. Student accident forms are filed in their individual Red Medical File. Staff accident forms are kept in a folder in the medical room.

Educational Visits/Offsite Activities

- A risk assessment is to be carried out prior to the activity.
- A list of pupils taking part should be completed and forwarded to the Nursing Auxiliary in advance, to complete any medical information. The Nursing Auxiliary will then return this completed form to the trip organiser who will pass to the Head of School, making sure the Office have a copy and a copy is on the staffroom board.
- A first aid kit is to be taken on each outing.
- All student medical care plans **MUST** be taken offsite, in case of an emergency. These can be collected from the medical suite.
- Emergency medication for individual pupils must be taken with them, with instructions on how to use. Any other prescribed medication must be discussed/arranged beforehand with the Nursing Auxiliary i.e. antibiotics etc.
- Controlled drugs required by students participating in off-site activities will be the responsibility of a named member of staff, and will be stored in a lockable/moveable safe at all times.
- Any accidents are reported and recorded on the appropriate accident form, and any parents/carers are informed. (Accident forms for staff and pupils are kept at reception).

Inhalers and Emergency Medication

- Each pupil should be able to use their inhaler effectively.
- Inhalers and emergency medication, such as Epi-Pens, are carried in a personalised, black drawstring bag by the child's classroom LSA or Keyworker in the residential setting, or in 1:1 situations by a Therapist or Therapy Assistant.
- Emergency medication is to be collected and signed out using the RED file from the medical safe in the file room each morning. At the end of each day, medication will then go back into the medical safe and signed back in using the RED file.
- Wherever possible, children should be allowed to carry their own relevant devices.
- Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision.
- Where the child is not deemed competent to carry their own device, they should be able to access their medicines for self-medication quickly and easily. Staff supporting the child will carry emergency devices with them for use in an emergency.
- If it is not appropriate for a child to self-manage, then relevant staff should help to administer medicines and manage procedures for them.
- In case of emergency medication not being on the school site (e.g. left at home, damaged) a dynamic risk assessment will be undertaken by the Nursing Auxiliary and the senior management team to determine the student's safety during the school day.

- This will take into account:
 - How often the emergency medication has been used in the past
 - If we have more of the emergency medication on site
 - Parental consent for the student to be onsite without emergency medication

The Pupil

- When a pupil has been sick or had an accident, he or she can be very frightened. Reassure the pupil that it is not their fault and that you are not angry.
- Move the student to the medical suite or, if a residential student, to their own bedroom if they wish as soon as they are able to reduce the risk of spreading illness.
- Wherever possible, when students are unwell, they should use the facilities in the medical suite to reduce the risk of spreading illness and infections.
- Clean the pupil, wearing gloves and an apron, and dispose of any non-flushable, disposable products (such as paper towels) in a bag which should be placed in the yellow clinical waster bin.
- Inform the child's Teacher and Keyworker, and also the Nursing Auxiliary or Team Leader if out-of-school hours. All episodes of illness are to be recorded in the pupil's RED medical file by the Nursing Auxiliary or by the person dealing with the incident under supervision of the Nursing Auxiliary, all of which are kept in the medical suite filing cabinets.

Important Factors to Consider

- Proper handling of body fluids, i.e. always wear gloves and aprons.
- If resuscitation is required, always use a mouth guard (kept in the medical room and all first aid kits).

Follow-up Action

- All accidents are to be recorded on an accident form, which should be given to the Principal or Head of School for signature. These are then given to the Nursing Auxiliary, who will forward a copy to the Premises Manager and the original documents to ICAN's Insurance Company.
- If a pupil needs to be taken to hospital, the Principal, Head of School or Head of Care should be consulted. They will advise who should inform the parent, carer or next of kin, when this should be done and agree a form of communication with school by staff accompanying the pupil.

Illness

- If a pupil or member of staff is ill, the Nursing Auxiliary, the Team Leader (if during residential hours) or a qualified First Aider will assess the situation and advise a member of the Senior Leadership Group on the appropriate course of action.
- If a member of staff is concerned about the health of a pupil, the pupil must be seen by the Nursing Auxiliary, Team Leader or, in their absence, a qualified First Aider.
- Move the student to the medical suite as soon as they are able, to reduce the risk of spreading illness.
- Wherever possible, when students are unwell, they should use the facilities in the medical suite to reduce the risk of spreading illness and infections.
- Medical advice may be sought from the GP or NHS Direct if needed.
- Parents/carers will be informed of any pupil's illness.
- Discussions will take place with the Principal, Head of School or Head of Care, if it is deemed necessary for the patient to return home.
- Out-of-school hours, the care of the pupils is the responsibility of the Care Staff who may seek advice from the GP or NHS Direct if necessary. They will then contact the Senior Manager on call, who will advise who should inform the parent, carer or next of kin.
- All episodes of illness are to be recorded in the pupil's RED medical file, all of which are kept in the medical suite filing cabinets.
- When a child is ill, the school will follow advice given by the Public Health Service when advising parents how long a child will need to remain absent from school. This advice will be given to parents in their welcome letters.

Medical Emergencies

All medical emergencies will be dealt with by the Nursing Auxiliary, Team Leader (if during residential hours) and/or appropriately trained First Aider, following the medical procedures in this policy.

- When a student has a condition that may require emergency medication, for example: Epi-Pen injections or Buccal Midazolam, this medication must be kept close to the student at all times for use in an emergency situation. Staff should carry this from room-to-room with them throughout the day.

Epidemics

- If a large number of pupils are ill, the local GP must be informed for advice on further action.
- The GP used by school is:

Rainworth Health Centre, Tel: 01623 794293.

Medical Arrangements

- Consent forms are kept in pupil's individual medical and residential care plan files. These will include consent for emergency treatment in the event of any accident, injury or illness, and consent for the administration of prescribed medication and 'Homely Remedies'.
- Parents will be asked to sign a consent form to say they have sought advice from the child's own GP regarding the use of homely remedies, to ensure the child is not taking any medication that may interact with an item on the school's homely remedies list.
- The list of 'Homely Remedies', which may be administered to pupils, will be updated annually and approved by a GP based at Rainworth Health Centre.
- When necessary, pupils are escorted by the Nursing Auxiliary to appointments and any relevant information passed on following the appointment.
- Staff must share information from medical appointments with parents.
- Students may attend appointments alone if they express a wish to do so and are deemed to be capable of understanding and following any advice or instructions given to them by the Medical Practitioner.
- If a student prefers to be unaccompanied, staff may offer to speak to the Medical Practitioner, either before or after the appointment, to ensure that all necessary information has been shared and understood.
- Staff may attend appointments with parents, to offer support if required.
- Staff may also provide written information, to provide support, at medical appointments for parents.

Dealing with Body Fluids

These procedures are guidelines for cleaning up spilt body fluids. The term body fluids encompasses blood, urine, faeces and vomit.

Spilt body fluid needs to be cleaned up with care, as there is a risk of contracting disease, e.g. Hepatitis and HIV, from blood. If these procedures are followed, the risk is minimal.

When dealing with body fluids:

- keep any open cuts or abrasions covered with a waterproof plaster;
- wear a plastic, disposable apron;
- wear plastic or rubber disposable gloves;
- wash hands well afterwards.

Procedure for Spillages on the Floor and Hard Surfaces

For body fluid spillages on the floor and hard surfaces, a RESPONSE kit is provided. Follow the instructions in the kit. This contains disinfectant, absorbent granules and a clean-up pack with gloves and a scraper. These kits can be found in the medical room and the residences.

The waste (yellow bag included in the kit) can be disposed of via the Nursing Auxiliary. This is then collected regularly and taken to be incinerated.

Procedures for Spillages on Clothing

When dealing with contaminated clothing, it is important to prevent other people coming into contact with it, e.g. in the laundry. Sluice off soiled clothing in the toilet or bath. Remove to the laundry as soon as possible, where it should be washed at as hot a temperature as the material allows.

Medical Care Plans

- Medical care plans are written by the Nursing Auxiliary in consultation with parents and countersigned by the Head of Residential Care and parents. Care plans will be implemented when parents inform the Nursing Auxiliary of any medical conditions or medications the child takes. Care plans will be reviewed at least annually or earlier if their condition changes.
- Students with a medical condition will have a medical care plan in place, detailing an agreed approach of dealing with any incidents linked to the condition.
- Any student taking medication will also have a medical care plan in place, to provide clarity around medication routines and medical conditions linked to the medication.
- Signed copies of the care plans are kept in the RED medical file and in the residential care provision plan files.
- There is also a copy of every care plan kept in a BLACK medical folder in the medical suite, and in reception.
- The FE study centre has a red medical folder with all FE students' care plans.
- The primary department has a RED medical folder with all primary students' care plans.
- Chimes department has a RED medical folder with all chimes' students' care plans.
- There is also a copy of all boarders' medical care plans kept in the Rufford staff office.

Medication – General Information

- The majority of medication is provided by parents – except when the pupil is registered at the school's local GP, in which instance it will be provided by the local pharmacy.
- Parents will be encouraged, wherever possible, to ask prescribing physicians to prescribe medication in dose frequencies that allow medication to be given outside of the school day.
- All medication that can be and has been prescribed to be administered outside of school hours is parent's responsibility to administer.
- Dawn House School will NOT administer medication to a child for ease or convenience.

- Medication must NOT be sent into school with students.
- When a member of staff is handed any medication, they must record it on the corresponding child's medication register (found in the medication file in the medical room).
- All medication must be counted in and recorded.
- Appropriate training will be given to all members of staff who deal with medication, including emergency medication for pupils with Epilepsy and Type 1 Diabetes.
- Written parental consent must be received before medication can be administered to a pupil.
- 'Homely remedies' may be administered if parents/carers have provided written consent.
- Minimal handling of medication is desirable. This reduces the risk of infection or contamination. Tablets should be given to the pupil in a medicine pot.
- All prescribed medication to be checked and administered by two people.
- 'Homely remedies' and multivitamins may be checked and administered by one person.
- All medication must be signed for after administration.
- A signature will denote that the pupil has actually been seen to take the medication.
- The countersigner will also sign to show that the pupil has taken medication.
- In the case of creams and lotions, the Medication Register Sheet will state if they are to be self-administered by the pupil.
- If a pupil refuses medication, a note must be made on the MAR and Register Sheet, and the Nursing Auxiliary or Team Leader informed.
- If mistakes are made on the MAR Sheet, DO NOT use Tippex. Identify the error with an asterisk (or two asterisks if it is not the first error etc.) Then on the next line or at the bottom of the page, print a reciprocal asterisk and 'ENTERED IN ERROR, SHOULD READ...' insert the correct entry and sign.
- Use black ink only.
- Dosage changes – if medication dosage changes, start a new MAR Sheet.
- If a GP prescribes an initial dose of medication, start dose – this should be recorded on a separate sheet e.g. antibiotics may be prescribed as two tablets for the first dose, followed by one tablet for subsequent doses.
- If a GP prescribes painkillers, such as paracetamol, over the phone, record his/her instructions on the MAR Sheet.
- When administering liquid medication, hold the bottle with the label uppermost. This will prevent liquid spilling onto the label.
- If a mistake is made when giving medication i.e. an individual being given the wrong medication or a dose of medication not being administered, inform the Nursing Auxiliary or Team Leader who will seek advice from a Pharmacist or GP and inform parents.
- Medications are given in the medical suite with the door shut. This room is used to avoid the use of sleep-in rooms and to promote confidentiality and dignity.
- Prescribed medications require two members of staff to be present when administering medication (an administer and a countersigner). Medication that can be purchased over the counter may be administered by one member of staff.

- All medication is to be recorded on the child's MAR Sheet.
- ALL prescribed medication is to be counted before and after administering to ensure the stock amount is always recorded.

Self-medicating

- When students express their wish to self-medicate, they will begin work on the Self-medicating Capability Tool.
- The self-medicating tool will be used with all students in FE and if students do not wish to self-medicate or do not have parental consent, they will still work with the capability tool as part of their independent life skills but will not self-medicate.
- A Self-medicating Risk Assessment will be completed by the Nursing Auxiliary and passed onto the Principal/Head of Care for countersigning.
- Consent will be sought from parents.
- Students that meet all objectives on the capability tool will be in possession of their own medication. As per the new statutory guidance, the student will have a whole box of medication at a time to remove the use of secondary prescribing within the setting.
- Medications will be stored in a locked, unmoveable box in student's bedrooms, and students will be responsible for ensuring the key is stored safely.
- Students will have reminders in their bedrooms to take their medication, and will be reminded and supported by staff for at least the first month.
- Students will be expected to inform the Nursing Auxiliary or a member of the residential staff that they have taken their medication each morning, so this can be recorded on the student's MAR. Students will also sign to say they have taken their medication to increase their awareness around the safe management of medication and health and safety measures in the workplace.

Protocol for Receiving Medication

- In the majority of cases, medication is provided by parents. The only exception is for pupils that are registered at the school's GP, or if a pupil is seen by a GP at the practice as a temporary resident, in which case the medication will be provided by the local pharmacy.
- A member of the Medical Team or a Senior Manager will sign the child's medical register for receipt of the medication and ensure that it is safely stored in the medical room.
- MAR Sheets will be completed as soon as possible. Corresponding forms will be completed and placed into pupil's medical record files.

Protocol for Receiving Medication from Parents/Carers

- Parents/carers will be advised that any medications should be sent into school in the care of a responsible adult, and should be taken to the main office, or given to a member of staff for safe-keeping. All medicines must be clearly labelled with a pharmacy label to show the pupil's name, times and dosage.
- A member of the Medical Team or a Senior Manager will sign the child's medical register for receipt of the medication and ensure that it is safely stored in the medical room.
- Parents/carers will also be asked to notify staff as soon as possible if there are to be any changes in the times or dosage of medications which their child is taking.
- If these are prescribed medications, they should be clearly and correctly named, and the dosage and times should be clearly stated on the pharmacy label.
- If these are 'homely remedies' i.e. medicines which can be bought without prescription, they should be clearly labelled with guidelines for their use.
- All medication **MUST** be accompanied by a Medical Instruction Parental Authorisation Form which has been signed and dated.

Protocol for Recording Medication Requirements

- The parental authorisation form must be checked by the Nursing Auxiliary or a Senior Member of Staff (Care or Education) and be countersigned by a Senior Manager.
- A MAR Sheet should then be completed/updated and signed by a Senior Manager.
- The Nursing Auxiliary should complete the Daily Information Handover Diary for residential pupils, detailing any information about medication. This is to be given to the Care Manager responsible for the evening shift.
- The medication should be recorded in the medication stock file and then placed in the pupil's medication tray in the medical suite. The amended medication sheet should be placed in the pupil's medical file.
- The Keyworker or Tutor must be made aware of any new medication or changes to existing medication.

Refrigerated Storage

- Some medicines must be stored in a refrigerator because, at room temperature, they break down or 'go off'. The patient information leaflet supplied with medication will state whether the medication needs to be stored in a fridge.
- Such medicines are stored in a separate, secure fridge only used for medication that requires cold storage.
- Temperature normal range should be between 2 and 8 degrees; this is recorded daily.

- In the event of the fridge breaking down, as a temporary measure the fridge located in the file room will be immediately emptied and used as temporary storage until the designated fridge is repaired/replaced.

Protocol for Receiving and Recording Controlled Drugs

- Parents/carers will be advised that any controlled drugs should be sent into school in the care of a responsible adult. It should be in a secure package with a signed letter stating the amount of medication enclosed. It should be taken to the main office, or the Nursing Auxiliary.
- A member of the Medical Team or a Senior Manager will sign the child's medical register for receipt of the medication and ensure that it is securely stored in the medical room.
- Parents/carers will also be asked to notify staff as soon as possible if there are to be any changes in the times or dosage of medications which their child is taking.
- All medication **MUST** be accompanied by a Medical Instruction Parental Authorisation Form which has been signed and dated.
- The prescribed controlled drug should be in its original container with a pharmacy label showing the pupil's name, times and dosage. Instructions for administration must be clear.
- The amount of medication should be checked by the person receiving it, with a witness, and the amount entered in the Controlled Drugs book.
- The medication must then be securely stored in the safe in the medical suite.
- The Nursing Auxiliary should complete the Daily Information Handover Diary for residential pupils, detailing any information about medication. This is to be given to the Team Leader responsible for the evening shift.
- Any necessary amendments to the medication sheet should be signed by a Senior Manager and placed in the pupil's medical file.
- The Keyworker or Tutor must be made aware of any new medication or changes to existing medication.
- If medication is returned home, or to the pharmacy, it **MUST** be signed out of the CD book by two people and returned in secure packaging with details of the amount of medication enclosed.
- All records of controlled drugs **MUST** be made in the CD book.
- **Students will NOT self-medicate controlled drugs.**

IMPORTANT NOTICE

- **Medication MUST NOT be administered unless clear, signed and dated instructions, and consent are received from the pupil's parent/carer/prescribing Physician.**
- **If such instructions and consent are not received, a member of the Senior Leadership Group CAN authorise such consent to be forwarded from a parent/carer to school staff by fax or email. It is essential that staff receive authorisation for consent in this way.**
- **Medication WILL NOT be administered without parental consent.**
- **In the absence of written consent, or if a pupil has insufficient supplies of medication with them at school, parents/carers will be asked to bring the written consent or medication to the school. If they are unable to do this, school will make arrangements for the school's Family Support Worker to collect medication.**

Protocol for Administration of Medication

Any concerns or lack of clarity about instructions which parents have provided MUST be checked with parents BEFORE a medication chart is completed AND BEFORE any medication is given to the pupil.

Procedure for the Administration and Countersigning of Medication

The procedure should be followed for single or two person signature.

If a countersignature is required, medication must only be administered when two members of staff are present.

First person to administer medication.

Second person to observe and to countersign the medication record to agree that the procedure has been followed and the medication taken.

In the residential setting, if a RCCO is to countersign, consent must be obtained from the person responsible for the shift.

The person responsible for administering medication MUST:

- Deal with ONE pupil at a time.
- NOT leave medication unattended.
- Turn the phone to BUSY or take it off the hook, to avoid distraction.
- Place DO NOT DISTURB sign on the door.

Procedure

1. Place DO NOT DISTURB sign on the door.
2. Turn the phone to BUSY or take it off the hook, to avoid distraction.
3. Open the Medical Record Book and check the pupil's name and time of the next dose (say aloud to the countersigner).
4. Check the medication label for the pupil's name, date of birth, name of drug and dosage time (say aloud to the countersigner).
5. Call the pupil to the area where the medication is to be given.
6. Ask the pupil if they want the medication – if they refuse, wait awhile and ask them to return. NEVER force medicine (hiding meds in food or drink is unacceptable practice in any setting).
7. If pupils are in agreement, check with the countersigner that they agree this is the pupil (use photograph if possible).
8. Put the tablet into the medication pot.
9. Check with the countersigner that they agree that all is correct so far.
10. If the countersigner agrees that all is correct, give the medication to the pupil.
11. If both parties agree that the medication has been taken, both should sign the MAR.
12. Put the medication container back into the Medical Cabinet.

N.B. It is absolutely essential to complete this procedure without interruption. If anything occurs to prevent staff following and completing the procedure, e.g. incident involving pupils, telephone calls etc. then it is essential to STOP at once, and return all medication to the cabinet until it is possible to complete without interruption.

If at any time, the wrong medication is accidentally given to a child, the child will be closely monitored, advice requested from his/her GP or from NHS Direct. A member of the SLG must also immediately be alerted, who will decide who should contact parents to inform them.

Concerns/queries about prescribed medication (e.g. can I safely crush the tablets this pupil cannot swallow?) can be made by contacting the Pharmacy on Warsop Lane, Rainworth, Mansfield, Nottinghamshire NG21 0AD. Tel: 01623 794293.

Protocol for Dispensing and Administration of Controlled Drugs

- All controlled drugs to be stored in a lockable safe in a locked room. Keys available only to authorised staff
- Controlled drugs to be counted, signed and witnessed in and out of the premises in the relevant controlled medication record book.
- The person administering drugs to pupils are to sign in the Controlled Drugs Record Book using their full signature.
- Each individual pupil will have their own records, where the amount, the dispensing and the administration of the drug is signed for.
- Controlled drugs required by students attending offsite activities **MUST** be stored in a lockable, moveable safe and kept with a named member of staff at all times.

- The drug remains the property of the pupil. Permission to dispose of excess stock must be agreed by the parent/carer, who will collect the drug or agree for it to be taken to the pharmacy for correct disposal.
- The school has considered the school's practice and completed the Controlled Drugs Self-Assessment Questionnaire and Declaration, and returned to the controlled drugs support officer for the North Midlands.
- Contact details for queries regarding controlled drugs are listed below.

Protocol for Disposing of Drugs and Medicines

- Out of date, damaged or part-used medicines that are no longer required, should be disposed of safely so that they are not accidentally taken by other people or stolen. The Nursing Auxiliary will record:
 - Date of disposal/return to pharmacy.
 - Name and strength of medicine.
 - Person for whom the meds were prescribed for.
 - Signature of the member of staff who arranged the disposal.
 - The Pharmacist signature upon disposal.

Further information/guidance

<http://www.rpharms.com/support-pdfs/handling-medicines-socialcare-guidance.pdf>

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/416188/20150319_nms_rss_standards.pdf

Margaret Farrow, Johnson Controlled Drugs Support Officer (Derbyshire & Nottinghamshire). Tel: 0113 824 9774 (Margaret.farrow-johnson@nhs.net)

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