



## **Administration of Medicine Policy**

### **Introductory Statement**

The Administration of Medication Policy (the “Policy”) of Leixlip Educate Together National School (the “school”) should be read in conjunction with other relevant school policies, e.g. the school’s Health and Safety Policy and with the school information booklet.

Copies of this Policy will be given to each member of staff, to those responsible for after-school activities and sibling after-care and to the members of the Board of Management (“BoM”).

Copies will be available on request to parents/guardians and will in the future be made accessible on the school website. This policy is printed in Verdana Font to facilitate access by people with learning disabilities or visual problems.

### **Rationale & Background**

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

The BoM has a duty to safeguard the health and safety of children while engaged in school activities. However, the primary responsibility for the management of medication to children belongs to the parent(s)/guardian(s).

Staff, including teachers and special needs assistants (SNAs), have a professional duty to safeguard the health and safety of pupils when they are authorised to be on school premises and when they are engaged in authorised school activities elsewhere.

It is school policy that children who are ill should not attend school until the illness has resolved. Requests from parents/guardians to keep their children in at lunch break are not encouraged. A child too sick to play with their peers should not be in school. When the child is well enough to return to school, a written note from the child’s parent(s)/guardian(s) should be given to the class teacher explaining the reason for absence.

In the event of a child becoming ill during the course of the school day, the parent(s)/guardian(s) or emergency contacts will be notified to bring the child home to recuperate. In emergency situations, qualified medical help will be obtained or the child will be brought to the local paediatric emergency department at the earliest opportunity.

In line with the school’s ethos, children with chronic medical conditions, such as asthma, epilepsy, diabetes and anaphylaxis, are encouraged to engage fully in school activities. Parents have a duty to inform the school of such

conditions and provide the necessary medical equipment to respond to emergencies. Where possible, the family doctor should be asked to prescribe treatments that can be taken outside school hours. Administration of medication at the school should be kept to a minimum however, when administration of medication is required to facilitate a fully inclusive environment, every effort will be made to accommodate children's needs in line with the provisions below.

## **Aims**

The aims of this Policy are:

- To ensure that the needs of children who require administration of essential medications during the school day are met, in line with best practice.
- Clarify areas of responsibility
- To ensure compliance with relevant legislation.
- To protect staff by ensuring that any involvement in medication administration complies with best practice guidelines.
- Provide a framework within which medicines may be administered in cases of emergency or in instances where regularised administration has been agreed with parent(s)/guardian(s).

## **Non-Prescription Medication**

Non-prescription medication will not be stored or administered in the school. Pupils are not permitted to carry non prescription medication in the school. If found, such medications will be confiscated and the child's parent(s)/guardian(s) will be contacted.

## **Prescription Medication Prescription**

Medication can only be stored/administered in the school following a written request by the child's parent(s)/guardian(s) to the BoM.

This letter should request the BoM to authorise staff to administer the medication. In doing so, the BoM will determine if the medication is such that a non-medical person may administer/supervise administration.

The BoM reserves the right, after due consideration, to refuse the request to administer medication, where for example, it would not be appropriate for a non-medical person to administer/supervise the administration of the medication.

No teacher is obliged to administer medicine or drugs to a pupil.

## **WHAT HAPPENS SHOULD NO TEACHER WISH TO ADMINISTER MEDICATION?**

### **Administration of Medication**

If the school agrees to administer the medication, the parent(s)/guardia(s) must make a written request using the "Request for Administration of Medication-Information and Consent" Form (the "Request Form") which is attached in Appendix 1.

This is to ensure that the school has the essential information necessary to allow training of staff in the safe administration of the medication. The Request Form requires information to be provided including:

- the child's name
- date of birth
- weight
- name of medication (**generic and/or brand?**)
- dosage
- circumstances under which medication should be administered

- condition for which medication is required
- any other medication being taken
- ability of child to self-administer the medication
- emergency contact information (**does this include family doctor?**)

Verbal consent & clarification by the parent(s)/guardian(s) of how and when to administer the medication is also required.

The Parent(s)/guardian(s) will also be asked to provide a signed Indemnity Form, which is attached in Appendix 2.

The BoM reserves the right to request written confirmation of medical advice from the child's doctor, including confirmation of the medication dose and circumstances when it should be given. The Parent(s)/guardian(s) will provide the school with a Healthcare Plan and Emergency Plan for their child both of which will have been prepared in conjunction with the child's doctor/treating physician and will be kept updated.

Prescribed medication will only be administered to the child for whom it has been prescribed, in line with current legislation.

Arrangements for administration of medication to each pupil will be reviewed, at least annually.

### **Administration of Medication by Staff**

Where possible medication should be self-administered by the pupil under adult supervision. Where specific authorisation has been given by the BoM for the administration of medicine, it is the responsibility of the parent(s)/guardian(s) to ensure the school has a sufficient supply/dose of required medicines necessary for the school day. It is also the responsibility of the parent(s)/guardian(s) to ensure that any medication kept within the school does not exceed its use by date.

A written record of the date, time and dosage given of any medicines must be kept by the person administering it.

Regular training will be provided to all staff who either supervise the administration and/or administer medication.

Where a child may require medication, ideally a minimum of three staff members will be identified to ensure cover during sick leave, course days, etc.

The parent(s)/guardian(s) will be informed of the names of staff members who have been trained to administer medication. In the event that trained staff members are unavailable, the Principal will discuss alternative options with the child's parent(s)/guardian(s) which may include the child being taken home by the parent(s)/guardian(s).

In the event that none of the trained staff members are in attendance at the school on a particular day, all parents/guardians of students in receipt of medication in school will be informed as soon as possible. In such circumstances, the school will not be able to administer medication to these students and their parent(s)/guardian(s) may choose for them not to attend the school on such days, if necessary.

### **Older Children**

Under certain circumstances, it may be appropriate for an older child to retain medication in their own possession, and take responsibility for self-administration (e.g. an older child who would normally carry and use their own inhaler).

### **AT WHAT AGE DOES A CHILD BECOME AN OLDER CHILD?**

A written request to the BoM together with documentation outlined in paragraphs above is required. Under these circumstances, the School will not maintain a record of medication used. As there is no record of the administration of such medication and because it is in the possession of the child, no liability shall attach to the School if medication is lost or misused.

## **Long Term Health Problems**

Where there are children with long-term health problems in school, a detailed Care Plan must be given to the school and BoM by parent(s)/guardian(s) outlining proper and clearly understood written arrangements for the administration of medicines.

## **Life Threatening Condition**

Where children are suffering from life threatening condition(s), parent(s)/guardian(s) must clearly outline in writing a detailed Care Plan, stating what should be done in a particular emergency, with reference to what may be a risk to the child. If emergency medication is necessary, arrangements must be made with the BoM. The parent(s)/guardian(s) in respect to any liability that may arise regarding the administration of medication must sign a letter of indemnity.

## **Emergency Situations**

In emergency situations, staff should do no more than is necessary and appropriate to relieve extreme distress or prevent further injury/irreparable harm. Qualified medical assistance should be obtained at the earliest opportunity.

Where staff have to administer medication in the event of an emergency, this medication should be given in accordance with the emergency care plan.

Emergency medication must have clearly written details of how it is to be administered. A written record of all medication administered by staff to treat an emergency (allergic reaction, asthma attack, seizure, hypoglycaemia, etc.), will be kept by staff and the parent(s)/guardian(s) will be notified by telephone.

The Principal will make contact with the local chemist [name] and will make them aware that they are listed on Leixlip ETNS emergency Contacts.

Parent(s)/guardian(s) are further required to indemnify the BoM and members of the staff in respect to any liability that may arise from the administration of prescribed medicines in school. All correspondence related to the above are kept in school.

## **Storage of Medication**

If the BoM agrees that the medication can be stored and administered in the School, it is the responsibility of the parents/guardians to ensure that an adequate supply of medication is in stock, and that the medication has not passed its expiry date.

In the event that medication passes its expiry date without being used, the child's parents/guardians will take responsibility for its safe disposal (usually by returning to the pharmacy).

Medication will usually be stored in a locked cupboard in the School office. However, where this should pose a hazard (e.g. inhalers or adrenaline auto injector which may be required urgently) medication will be stored in a sealed, transparent, unbreakable container labelled with the child's name.

Items requiring refrigeration will be kept in a clearly labelled container in a food refrigerator.

Non-prescribed medicines will neither be stored nor administered to pupils during the school day.

Teachers / SNAs in the school will only administer prescribed medication when arrangements have been clearly agreed and put in place as outlined above.

Arrangements for the storage of certain emergency medicines, which must be readily accessible at all times, must be made with the principal.

## **Change in Medication and/or Dosage**

The Principal must be informed immediately of any change in medication and/or dosage in writing.

A change in dosage of the same medication does not require notification of the BoM.

However, a change in medication will require a new notification of the BoM

In either case the Request Form will need to be updated.

It is the responsibility of the parents/guardians to ensure that the dosage noted on the container in which their child's medication is stored is also amended.

### **The following guidelines are in place with regard to pupils with a Nut Allergy**

1. Leixlip ETNS reinforces a strict No Nut Policy.
2. Children are not permitted to offer or exchange food, lunches etc.
3. If going off-site, emergency medication must be carried.

### **Medical Awareness Card**

A medical awareness card will be kept in the Substitute Folder so that substitute teachers will be aware of the pupil's medical condition in the class

### **Out of School Activities**

#### **School Trips**

Medication required during a school trip should be carried on the child if this is normal practice. In certain circumstances a parent or nominated carer may be requested to be present. Parents should inform staff in writing if their child requires a travel sickness remedy. This should be carried by the child whenever possible.

A first aid kit is taken when children are engaged in out of school activities such as tours, sports days and nature walks.

### **Clubs / Sports events**

Often a different member of staff is in charge of clubs and sports events to the usual staff member responsible for the supervision or administration of a child's medication.

It is essential that parents inform all staff members of the need for medication and what to do should a medical emergency occur.

### **Records and Notification**

A written record of all medication administered in the School will be maintained in the school except as provided for herein.

When medication is administered by staff to treat an emergency (e.g. allergic reaction, asthma attack, seizure, hypoglycaemia, etc), parents will be notified by telephone.

When administration is routine (e.g. bronchodilator pre-PE in a child with exercise induced asthma) a note will be placed in the child's homework notebook.

It is the parents'/guardians' responsibility to check for such a record.

### **Implementation**

Information for school staff to facilitate the safe and effective implementation of this Policy is included in **Appendix 3**.

Parents/guardians are invited to contact the Principal immediately if they have any concerns about the implementation of this Policy in relation to the administration of medication to their child.

## Success Criteria

The Principal will audit the medication books at least once a term to ensure that the actual administration of medication complies with the information on the Request Form. Identified discrepancies will be assessed by a physician to assess their clinical relevance (if any).

Feedback from parents/guardians will be carefully considered by the BoM.

## Timeframe for Implementation

The timeframe for implementation of this Draft Policy is September 2019. This Policy was formally ratified by the BoM on xxx

This Policy was last reviewed in

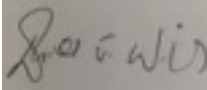
## Compliance

This Policy has been prepared to comply with Best Practice Asthma Management Guidelines for Primary Schools in Ireland, Asthma Society of Ireland [http://www.irishhealth.com/clin/documents/Schools\\_Policy.pdf](http://www.irishhealth.com/clin/documents/Schools_Policy.pdf), Allergy in Schools <https://www.allergylifestyle.com/allergies-anaphylaxis-in-schools/>, The Anaphylaxis Campaign, UK, <https://www.anaphylaxis.org.uk/schools/schools-help/>, Epilepsy Ireland, <https://www.epilepsy.ie/content/epilepsy-and-school>

## Review

This Policy will be reviewed in March 2021 and sooner if deemed necessary by the BoM.

Early review will be undertaken if a clinically significant discrepancy is identified between the medication administered and that authorised on the relevant Request Form or if feedback indicates that any aspect of the Policy is causing a pupil or any other member of the School community undue distress.

Signed:  Date: July 8<sup>th</sup>, 2020  
Chairperson, Board of Management

Signed: Date: July 8<sup>th</sup>, 2020  
Principal

Reviewed on

Signed Date

**APPENDIX 1**

**Request for Administration of Medication –Information & Consent**

Child's name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Weight: \_\_\_\_\_

Name of medication \_\_\_\_\_ Dosage \_\_\_\_\_

Medical condition for which medication required: \_\_\_\_\_

Storage Details: \_\_\_\_\_

My child **CAN /CAN NOT** self-administer this medication (circle one).

Other medication being taken: \_\_\_\_\_

Under what circumstances should medication be given? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Contact Names and numbers**

Parent/Guardian 1, name: \_\_\_\_\_

Parent/Guardian 2, name: \_\_\_\_\_

GP name \_\_\_\_\_

Phone no. \_\_\_\_\_

1st Emergency contact: \_\_\_\_\_

Mobile no. \_\_\_\_\_

2nd Emergency contact: \_\_\_\_\_

Mobile no. \_\_\_\_\_

**Staff Involved in Administering Medication**

Staff trained / untrained and willing to administer medicines if necessary:

1. \_\_\_\_\_ trained ( Yes / No )

2. \_\_\_\_\_ trained ( Yes / No )

3. \_\_\_\_\_ trained ( Yes / No )

### Request for Administration of Medication and Consent Form

I/We consent for staff members in the School to administer/supervise administration of \_\_\_\_\_,  
in dosage of \_\_\_\_\_, to my child under the circumstances outlined on this form.

I/We understand that information about my child's medical condition and treatment will be shared with school staff  
medical personnel. I/We also consent to the disclosure of this information to the school's insurers if required.

I/We request that the Board of Management authorise the taking of Prescription Medicine during the school  
day as it is absolutely necessary for the continued well-being of my/our child.

I/We understand that where the school has no facilities for the safe storage of the prescription medicines  
the prescribed amounts will be brought in daily.

I/We understand that we must inform the school principal of any changes of medicine/dose in writing and that  
I/we must inform the teacher each year of the prescription/medical condition.

I/we understand that none of the school personnel has any medical training and I/we indemnify the  
Board of Management, the said pupil's teacher, ANA and staff members from any liability that may arise  
from the administration of medication.

I/we understand that information about my / our child's medical condition and treatment will be shared with  
school staff, and in the event of an emergency with the GP or other medical personnel.

I /we also consent to the disclosure of this information to the school's insurer if required.

Signed: \_\_\_\_\_ Parent/ Guardian Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Parent / Guardian Date: \_\_\_\_\_



**APPENDIX 2**

**Administration of Medicines in Schools- Indemnity**

This INDEMNITY made the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

BETWEEN \_\_\_\_\_

(lawful parent(s)/guardian(s))

of \_\_\_\_\_ (address) [hereinafter called 'the parents'] of the One Part AND \_\_\_\_\_ for and on behalf of the Manager / Board of Management of Leixlip Educate Together National School situated at Collinstown, Leixlip, Co. Kildare (hereinafter called 'the Board') of the Other Part.

WHERE:

1. The parent(s) are respectively the lawful father and mother or guardian(s) of \_\_\_\_\_ a pupil of Leixlip Educate Together National School.

2. The pupil suffers on an ongoing basis from the condition known as: \_\_\_\_\_

3. The pupil may, while attending the said school, require, including in emergency circumstances, the administration of medication, as outlined in the completed and attached **Request for Administration of Medication –Information & Consent** form.

4. The parents have agreed that the said medication may, be administered by such member of staff of the said school as may be designated from time to time by the Board including in emergency circumstances.

NOW IT IS HEREBY AGREED by and between the parents hereto as follows:

In consideration of the Board entering into the within Agreement, the parents, as the lawful father and mother respectively/guardian(s) of the said pupil, HEREBY AGREE to indemnify and keep indemnified the Board, its servants and agents including, without prejudice to the generality, the said pupil's class teacher and/or the Principal of the said school from and against all claims, both present and future, arising from the administration or failure to administer the said medicines.

Signed: \_\_\_\_\_ Parent/ Guardian 1 Date \_\_\_\_\_

Print Name

Signed: \_\_\_\_\_ Parent/Guardian 2 Date \_\_\_\_\_

Print Name

Witnessed: \_\_\_\_\_ on behalf of the Board of Management of Leixlip ETNS

## APPENDIX 3

### Administration of Medications - Detailed Information for staff

#### General record keeping:

All forms and letters concerning administration of medication will be stored in the principal's office, and in electronic format on each pupil's Aladdin profile.. These records are stored in compliance with relevant data protection legislation.

When a letter regarding a change in dosage or an updated Request Form is received, this will be stapled to the FRONT of the existing form, to ensure that the updated information is not overlooked.

Any handwritten notes made on a Request Form to update it in line with written information provided by parents/guardians will be initialled and dated.

When an updated Request Form is received, the original will be retained, but will have a line drawn through it, to indicate that it is now superseded.

#### Records of Medication Administration:

A duplicate book will be maintained in the office and in any classroom where medication is maintained. When medication is administered an entry will be made (one entry per page). Each entry will include the date and time, name of child, medication and dose administered, reason for administration and the signature of the person administering it.

To facilitate compliance with documentation requirements, the Principal will ensure that each duplicate book is labelled as the medication book, together with a list of information which must be recorded with each entry.

When an entry is made in the medication book, the top copy is to be removed and stapled in the child's homework notebook. If the child is too young to have a homework notebook the teacher should agree in advance with a parent where notification of such routine administration will be stapled.

## Appendix 4

### Record of administration of Medicines

Pupil's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Medical Condition: \_\_\_\_\_

Medication: \_\_\_\_\_

Dosage Administered: \_\_\_\_\_

Administration Details (When, Why, How)

\_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_