THE CHURCH OF ENGLAND

The Methodist Church

John Fletcher of Madeley

Primary School

Administration of Medicine Policy



Reviewed and Updated: October 2026

Next Review due: October 2028

Administration of medicine at John Fletcher of Madeley Primary School (including over the counter (OTC) medicines, salbutamol and adrenaline auto injectors)

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so

- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours, (Breakfast, After School, Bedtime)

- John Fletcher of Madeley Primary School will only accept medicines if they are in-date, labelled, provided in the original container (for prescribed medicines a pharmacy dispensing label) and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.

- All medicines will be stored safely. Children should know where their medicines are and where relevant they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away, including when outside of school premises, e.g. on school trips.

- When no longer required, medicines will be returned to the parent to arrange safe disposal. At the end of the school year, parents are reminded that they must collect any remaining medicines. If they are not collected, a member of the John Fletcher of Madeley Primary School team will take them to a local pharmacy to be disposed of correctly. No medicines will be kept on John Fletcher of Madeley Primary School site over the summer holidays. Sharps boxes should always be used for the disposal of needles and other sharps, or they are returned to a local doctors surgery for safe disposal.

Prescription medicine definition

A **prescription medicine**, also known as prescription-only-medicines (POM) is a pharmaceutical drug that legally requires a medical prescription to be dispensed and supplied to a patient.

Non-prescription medicine definition

Also known as an over-the-counter (OTC) medicine, are medications that can be obtained without a prescription and can be purchased either under the supervision of a pharmacist (P medicines) or on general sale through retailers such as garages and supermarkets (GSL medications). Medications are classified as OTC (P or GSL), based on their safety profiles and to enable access to those medicines without recourse to a GP.

Non-prescription medicines can come in various forms including tablets, capsules, liquids, eye drops, creams, ointments and nasal sprays.

Non-prescription (over the counter) medicines do not need to have been prescribed or authorised by a GP or other prescriber to be administered by school.

When agreeing to administer a non-prescription medicine John Fletcher of Madeley Primary School is not making the clinical decision that the medication is appropriate for the child's health condition. This responsibility remains with the parent and/or carer following their written consent. No child will be given non-prescription medicines without their parent's and/or carers written consent.

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Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

Ideally once or twice daily medications should be purchased or prescribed for children to avoid the need for dosages to be given during school hours. A table in appendix A gives a list of non-prescription medicines that could be given as alternatives to non-prescription medications that we as a school are commonly asked to administer.

Antibiotics should not routinely be given in school. Three times a day antibiotics such as amoxicillin can be given in the morning before school/setting, after school and at bedtime.

What consent is required for a school to administer a prescription only or non-prescription medicines to a child?

No child should be given prescription or non-prescription medicines without their parents/carers written consent.

John Fletcher of Primary School staff will obtain written parental/carer consent for each medicine that is to be administered in school. A separate form is required for each medication.

Accepting <u>prescription only medicines</u>

Prescription medicines (POMs) must not be administered to a child unless they have been prescribed by 'Appropriate Practitioner', which includes a doctor, dentist, nurse or pharmacist.

Before administering a prescription medicine, John Fletcher of Madeley Primary School will ensure that parents have completed the parenteral/carer consent form and check that the instructions on the medicine are in line with what is being requested on the consent form.

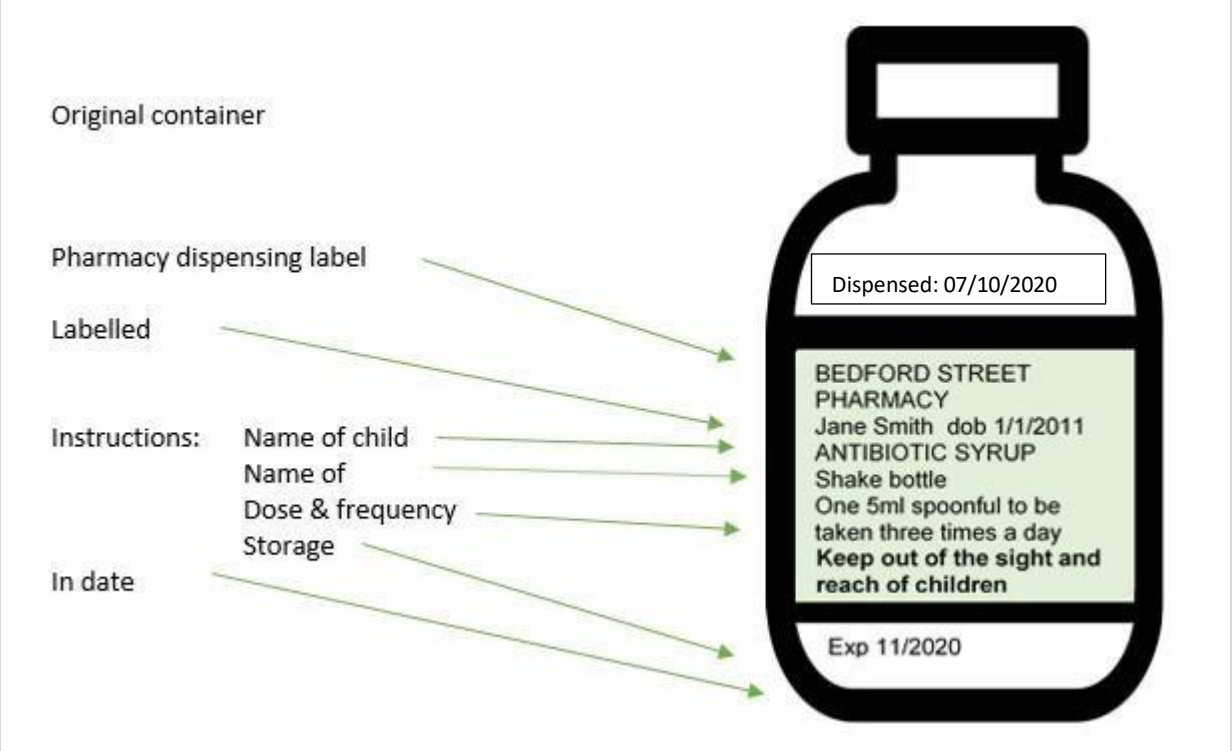
All prescribed medicines (except for insulin) must be in the original container as dispensed by the pharmacy. It must include the:

- Childs name
- Name of the medicine
- Dose and the frequency of administration,
- Expiry date
- Date of dispensing included on the pharmacy label.

Expiry dates will be checked before administering or applying medicines.

If in doubt about any procedure, staff will not accept the medicine or agree to administer the medication.

Example:



No medicines will be administered if instructions on the consent form are different to the instruction on the medicine. This would include:

- where the dose or frequency of the medication requested on the consent form is different to the guidance on the box or bottle.
- the timings of medication administration on the consent form are different to the timings on the bottle.

If in any doubt about any procedure, staff will not administer the medicine and will check with the parents or contact a healthcare professional before taking further action.

Administration of <u>non-prescription (OTC) medicines</u>

No medicines will be administered if instructions on the consent form for OTC medicines are different to the instruction on the medicine. This would include:

- where the dose or frequency of the medication requested on the consent form is different to the guidance on the box or bottle.

- the dose requested for the child is higher than the recommended dosage for their age on the box or bottle.

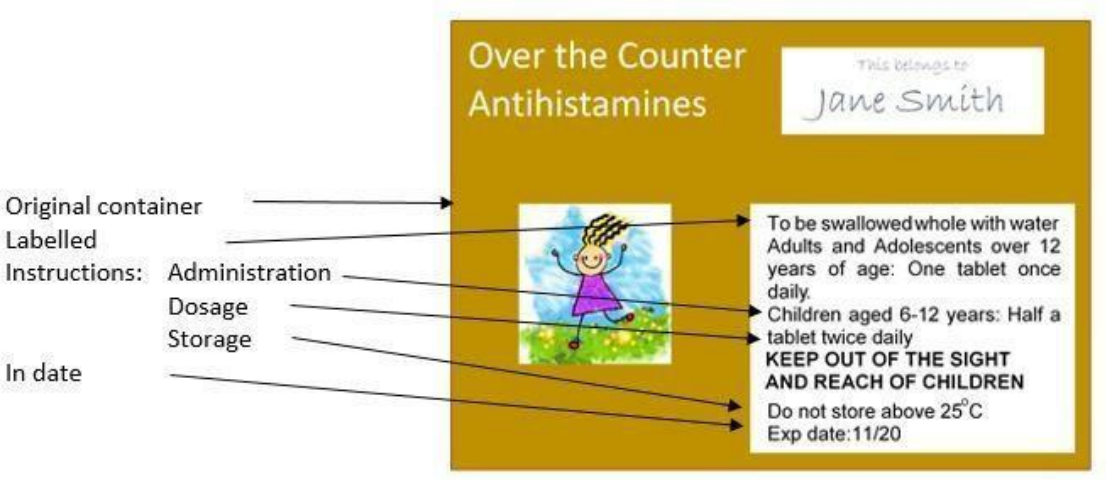
If in doubt about any procedure, staff should not administer the medicine but check with the parents or healthcare professional before taking further action.

Before administering a non-prescription/OTC medicine, John Fletcher of Madeley Primary School will ensure that parents have completed the parental/carer consent form and check that the instructions on the medicine are in line with what is being requested (e.g. dose and frequency on the consent matches the guidance on the box for the child's age).

Expiry dates will be checked before administering or applying medicines

All OTC medication must be in the original container and contain the following:

- Dose and frequency information (appropriate to the child's age)
- Expiry date
- Child's name is written on the OTC medicine container



Written records of medications administered

John Fletcher of Madeley Primary must keep a written record each time a medicine is administered to a child stating what, how and how much was administered, when and by whom. Any side effects to the medication administered at school should be documented.

If a child spits out or refuses the dose, the school should record this and contact the parent/carer to advise them as soon as possible.

Records offer protection to John Fletcher of Madeley Primary School staff and children and provide evidence that agreed procedures have been followed

Storage requirements for medicines and devices at John Fletcher of Madeley Primary School

All medicines are stored safely.

Non-emergency medications are stored in a locked cabinet.

Where it has been agreed that a child is competent to manage and carry their own inhalers and relevant devices, they should be kept securely on their person or in a safe facility, no more than 30 seconds from their access and not locked away.

Medications requiring refrigeration are to be stored in the refrigerator in the business managers office - with restricted access.

Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know which adult is responsible for looking after the key.

Emergency medicines and devices, such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be readily available to children and not locked away. It is important that the safe location is known to the child. This is particularly important to consider when outside of school premises, e.g. on school trips.

Controlled-drugs where administered by schools should be stored in a locked non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.

Staff Training and Support

John Fletcher of Madeley Primary School staff providing support to a pupil with medical needs will have received suitable training. Training may be provided by local healthcare professionals, such as school nurses. Records are kept of all training undertaken.

John Fletcher of Madeley Primary School will ensure that all children have access full access to education but they must consider that the administration of medicines in schools or nurseries is entirely voluntary and not a contractual duty unless expressly stipulated within an individual's job description.

The management of prescription and and non-prescription paracetamol and ibuprofen.

In children paracetamol and ibuprofen are usually used for the treatment of mild-to-moderate acute pain and are usually for short term use. Paracetamol is usually given every 6 hours and ibuprofen every 8 hours, so for the majority of children they can be administered before and after school.

When administered at John Fletcher of Madeley Primary School there should be a clear reason why the medication is required and the duration that the medication is likely to be required for documented in the consent form. The consent form will document that the child has been administered the medication without adverse effect in the past. For non-prescription (OTC) medicines the dose on the consent form should not exceed the age appropriate dosing on the product packaging. If in doubt about any procedure, John Fletcher of Madeley Primary School staff should not accept the medicine or agree to administer the medication. Administering either a prescription or non-prescription (OTC) medicines is at the discretion of John Fletcher of Madeley Primary School.

John Fletcher of Madeley Primary School will use their discretion around the duration of treatment and may challenge if they have concerns around the continuing need for pain relief, where there are concerns, Community Health Services Nursing team may be contacted. Administering either a prescription or nonprescription (OTC) medicines is at the discretion of each individual school.

Before administering paracetamol or ibuprofen school will confirm the maximum dosage and when the medication was last administered. For non-prescription (OTC) medicines age appropriate dosing and maximum dosage can be found on the product packaging.

A child under 16 years should **never** be given medicine containing aspirin unless prescribed by a doctor. Codeine is only advised for the relief of acute moderate pain in children older than 12 years old if pain cannot be relieved by other analgesics such as paracetamol or ibuprofen. Schools should only administer codeine tablets or codeine linctus if it has been prescribed by a doctor. Children should not be administered ibuprofen for Chicken Pox.

Suncreen

Teachers cannot be required to apply sunscreen to pupils' and teachers are advised by the National Education Union (NUT) not to apply sunscreen to pupils due to the potential for allegations of abuse and the time it would take to apply sunscreen to a class of pupils prior to break time or lunchtime.

Asthma inhalers (and spacers) in Schools

John Fletcher of Madeley Primary School purchases spare inhalers and spacer devices for use in school in the **event of an emergency**.

The emergency inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. The inhaler can also be used if the pupil's prescribed inhaler is not available (for example, because it is broken or empty).

Salbutamol is still classified as a prescription only medicine; legislation changes only affects the way the medicine can be obtained and not the class of medicine.

Adrenaline auto-injectors (AAIs) in Schools

Children and young people diagnosed with allergy to foods or insect stings are frequently prescribed AAI devices, to use in case of anaphylaxis. AAIs (current brands available in the UK are EpiPen®, Emerade®, Jext®) contain a single fixed dose of adrenaline, which can be administered by non-healthcare professionals such as family members, teachers and first-aid responders.

Children at risk of anaphylaxis should have their prescribed Adrenaline auto-injectors (AAIs) at school for use in an emergency. The MHRA recommends that those prescribed AAIs should carry TWO devices at all times, as some people can require more than one dose of adrenaline and the AAI device can be used wrongly or occasionally misfire.

Depending on their level of understanding and competence, **children and particularly teenagers should carry their AAI(s) on their person at all times or they should be quickly and easily accessible at all times.** If the AAI(s) are not carried by the pupil, then they should be kept in a central place in a box marked clearly with the pupil's name but NOT locked in a cupboard or an office where access is restricted.

While it is not uncommon for schools (often primary schools) to request a pupil's AAI(s) are left in school, where this occurs, the pupil must still have access to an AAI when travelling to and from school. Therefore, even in situations where the AAI is not carried by the pupil at school, it may be advisable that the AAI is left by a parent/carer on arrival at school and collected on leaving to ensure it is available to and from school.

Spare Adrenaline auto-injectors (AAIs) in School

From October 2017 the Human Medicines (Amendment) Regulations 2017 have allowed all schools to buy adrenaline auto-injector (AAI) devices without a prescription, from emergency use in children who are at risk of anaphylaxis but their own device is not available or not working (e.g. because it is broken or out of date).

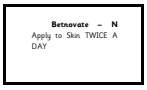
The school's spare AAI should **only** be used on pupils known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for use of the spare AAI has been provided. This includes children at risk of anaphylaxis who have been provided with a medical plan confirming this, but who have not been prescribed AAI. In such cases, specific consent for use of the spare AAI from both a healthcare professional and parent/carer must be obtained.

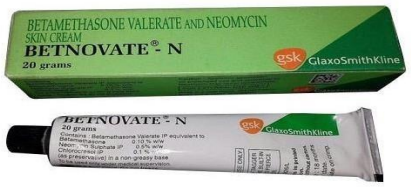
Any spare AAI(s) held by school should be considered a spare / back-up device and not a replacement for a pupil's own AAI(s), if one is prescribed.

Pharmacies are not required to provide AAIs free of charge to schools: school must pay for them as a retail item.

AAIs are still classified as prescription only medicines; legislation changes only affects the way the medicine can be obtained and not the class of medicine.

<u>When school should accept or NOT accept medications</u>

Loose Strips of Medication 		Should not be accepted. Medications should only be provided in the original container, they were prescribed purchased in, with appropriated directions.
Tablets/capsules/ liquids decanted into another bottle by parent/carer 		Should not be accepted, as parent carer has decanted into a different bottle to the one they were dispensed/purchased in. Medications should only be provided in the original container, they were dispensed or purchased in.
Tablets/capsules/ liquids decanted into another bottle by Community Pharamcy 		Can be accepted, as decanted into a different bottle by a community pharmacy and contains a pharmacy label which includes: patients name, name of drug, dose, frequency, date of dispensing and pharmacy details/ Expiry dates should be as per the guidance in patient information leaflet (PIL) or maximum 12 months from date on the dispensing label.
Insulin pens (not in original box) 		Insulin pens must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container. Insulin pens should be stored in the fridge until opened. Most insulin pens will expire within 28 days (See PIL for more information) of opening or if kept as a spare outside of the fridge.
Outer carton labelled, tube, bottle  **not labelled.**		Advise that the actual medication should be labelled, rather than the outer carton.

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