



# Griffin Primary School

## Medical Needs and Administering Medication Policy



1	Summary	Medical Needs and Administering Medication Policy			
2	Responsible person	Tom Havercroft			
3	Accountable SLT member	Louise Pitts			
4	Applies to	<input checked="" type="checkbox"/> All staff <input type="checkbox"/> Support staff <input type="checkbox"/> Teaching staff			
5	Who has overseen development of this policy	Senior Leadership Team			
6	Who has been consulted and recommended policy for approval	Local Governing Body			
7	Approved by and date	LGB 15.9.25			
8	Version number	5.0			
9	Available on	Every	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Trust website Academy website SharePoint	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
10	Related documents (if applicable)				
11	Disseminated to	<input type="checkbox"/> Trustees/governors <input checked="" type="checkbox"/> All staff <input type="checkbox"/> Support staff <input type="checkbox"/> Teaching staff			
12	Date of implementation (when shared)	Autumn Term 2025			
13	Consulted with recognised trade unions	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N			



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## 1. Introduction

Griffin Primary School aims to ensure via its various policies and ethos that children are able to attend school regularly and be safe and happy within the school environment. It is our intention to support pupils, with the school health service, with any short- or long-term medical needs which may interrupt or have an effect on the his/her education.

This school has adopted the Hull City Council Guidelines for; Supporting Children with Medical Needs – The Administration of Medicines and the Management of Pupils in Schools who suffer from Severe Allergic Reaction (anaphylaxis).

When necessary (see further detail below), the Principal accepts responsibility, in principle, for the school staff giving/or supervising children taking prescribed medication during the school day.

The following staff are willing to give/supervise the taking of prescribed medication, but all requests to have medicines administered in school must be made through the school office:

Mrs A Carter (Welfare and Safeguarding Liaison Officer)  
Mrs H Batty (Senior Administrative Assistant)  
Miss M Allen (Junior Admin and Finance Assistant)



**There is no legal duty which requires school staff to administer medicine: unless specifically stated in the job description, this is a voluntary role.**

**Class teachers are informed of all medical needs of the children in their class.**

Locked medical cabinets for storing medicines are available in the locations outlined below:

Main school office

The relevant members of staff (see above) have a key for these cabinets and a spare is kept in the school office.

There is also a fridge for storing medicines in the main school office.

## **2. Short term medical needs**

Pupils who are unwell should be kept at home. Some pupils will need to take medication (or be given it) at school at some time in their school life. Mostly this will be for a very short period of time only; to finish a course of antibiotics or apply a lotion.

**However, medication will be administered at school, only when absolutely essential.** It is most likely that medication could be prescribed in dose frequencies, which enable it to be taken outside school hours.

**Staff at Griffin Primary School will not give or supervise children taking any non-prescribed medication.** Cough sweets or lozenges are not to be brought to school. If a pupil suffers regularly from acute pain, such as migraine, parents are asked to consult a doctor so that medication becomes prescribed and can be dealt with accordingly.

## **3. Long term medical needs**

For pupils who have long term medical needs the school will do all it can to offer support so that the impact on a pupil's academic attainments and any associated emotional or behavioural difficulties can be minimised. Parents/carers will be asked to support the school in this by providing sufficient information about the medical condition of their child.

To enable the long-term medical needs of the child to be met, the school will draw up an individual health care plan with the parents/carers, and any health professionals who are able to help (Appendix 1). These forms should be updated yearly by the SENCO, in September and are shared with the class teacher.

The SENCO is responsible for coordinating medical needs with support from admin and key staff:

Mrs A Carter (Welfare and Safeguarding Liaison Officer)

Mrs H Batty (Senior Administrative Assistant)

Miss M Allen (Junior Admin and Finance Assistant)



#### **4. Procedures for managing prescription medicines which need to be taken during the school day**

If it becomes necessary to administer medication for a particular child in school the following procedure must be followed:

- 1) Parents/carers must complete the 'Request for School to Administer Medication' form. (Appendix 2)
- 2) Medicines must be brought to school in the original container as dispensed by a pharmacist and must include the prescriber's instructions for administration.
- 3) Medicines must be kept in the medical cabinet in the main school office, so that this can be locked if ever the room is left unattended. At least two people will always have access to this. This does not apply to inhalers for asthma sufferers, these are kept in the child's own classroom where the child can have immediate access. Medicines, which need to be kept in a refrigerator, will be stored in the medical fridge in the main school office.
- 4) Once medication is given, (or the taking of such is supervised) this will be entered onto the record of medication administered in school. This should be kept with the request form and filed in the pupil's file once the need for the medication has ended.
- 5) If pupils refuse to take medication, school staff should not force them to do so. The school should inform the child's parents/carers as a matter of urgency. If necessary, the school should call the emergency services.

#### **5. Data collection**

Data collection sheets are updated annually and parents/carers are given the opportunity to provide details of any medical needs.

These are updated on Arbor by a member of the office staff and given to all teaching staff responsible for a class.

#### **6. Educational visits**

We encourage pupils with medical needs to fully participate in safely managed visits. Reasonable adjustments to this policy will be considered in such cases and may include the necessity for a risk assessment for specific children.

Staff supervising school visits will always be aware of any medical needs, medication and relevant emergency procedures.

Staff taking pupils on a school visit should always ask for an up-to-date class medical list and data collection sheets in preparation for each visit.

Additional staff or a parent/carer may be asked to accompany a particular child.

#### **7. Sporting activities**

Most pupils with medical conditions can participate in extracurricular sport or PE lessons. Any restrictions on the ability of a pupil to participate in PE should be included in their individual health care plan.



Pupils who need to take precautionary measures before or during exercise will be allowed immediate access to their medication.

Children need immediate access to necessary specific medicines such as inhalers. Therefore, these will be moved around the school with the child (see Asthma Policy for further information).

## **8. Prescription inhalers**

Inhalers and accessories should be clearly labelled with the child's name. Parents/Carers should complete the form (Appendix 2) to outline when the inhaler/s should be taken.

In the Early Years Foundation Stage, inhalers will be kept under staff supervision. In Years 1 to 6, inhalers are kept in the classroom, in a place readily accessible to the child.

Except in Early Years Foundation Stage, or in exceptional circumstances, the child will administer their own inhaler.

It is a parent's/carers responsibility to ensure that appropriate inhalers are in school and that these are in date.

## **9. Roles and responsibilities**

### Staff

- No child will be given medicines without their parent's written consent
- Any member of staff giving medicines to a pupil will check the name of the pupil, the prescribed dose, the expiry date and the written instruction provided by the prescriber on the label or container.
- If in doubt about any procedure staff will not administer the medicines but will check with the parents/carers or a health professional before taking further action.
- Staff administering the medicines will complete and sign the appropriate record each time they give medicine to the child (Appendix 2).

### Parents/Carers

- Parents/carers must inform the school in writing about any particular needs before a child is admitted or when a child first develops a medical need. This includes information about allergies (Appendix 4).
- It must be a parent/carer (or someone with parental responsibility) who gives consent for medicines to be administered.
- Parents/carers should make every effort to arrange for medicines to be administered outside of the school day, or to come to school to administer themselves.
- Parents/carers must complete the appropriate form before any medicines can be administered by a member of staff.



## 10. Anaphylaxis (Severe allergic reaction) THIS IS LIFE THREATENING

### Signs and symptoms

Anaphylaxis has a whole range of symptoms. Any of the following symptoms may be present although most pupils with anaphylaxis would not necessarily experience all of them:

- Swelling of the throat which can restrict the air supply
- Tingling or itching in the mouth
- Hives on the body
- Flushing of the skin
- Abdominal cramps, nausea and vomiting.

In the case of Anaphylactic Shock appropriate medication is available for use on the pupil who is known to the school. In the case of an Epipen, this is kept by the staff responsible for the child and must only be used by trained staff. It is held against the skin on the thigh and the trigger pressed to administer the dose. Liquid medication is kept in the relevant medical cabinet. Parents/carers and staff will agree a protocol on the management of the pupil. An ambulance must be called and then the parents/carers must be informed.

This policy will be reviewed every year.

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### Appendix 1 – Healthcare Plan Form

<b>Child's Name</b>	
<b>Date of Birth</b>	



<b>Home Address</b>			Insert pupil photo
<b>Class / Teacher</b>		<b>Person Responsible for Care in School</b>	
<b>GP Name / Telephone</b>			

<b>Emergency Daytime Contact 1</b> (Name, Relationship & Number):
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<b>Emergency Daytime Contact 1</b> (Name, Relationship & Number):
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<b>Medical Condition(s):</b> give a brief description of the medical condition(s), including description of signs, symptoms, triggers, behaviours and anything else of relevance.
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**Allergies / Intolerances:** nuts/seafood/strawberries etc.

Medical Condition	Regular Medication Name	Dose	When	How administered?

If there are more medications to list, please do so on a separate sheet and attach to this form.

**Important Notes Regarding Medication.** Any possible side effects? Any other ongoing treatment outside school? Does this medical treatment affect behaviour/concentration, and if so, how?

**Daily Care Requirements**

**Specific support for the pupil's educational, social and emotional needs.**



**Arrangements for school visits / trips etc.**

**Other information**

**Individual Health Care Plan developed with (insert staff name):**

**Any staff training needed / undertaken (who, what, when)**

I agree that:

- The information in this form is, to the best of my knowledge, accurate and up-to-date at the time of writing.
- I will inform the school immediately, if there are any changes or additions to the medical conditions or medications described in this form, or if any treatment is stopped.
- I will inform the school immediately, if my emergency contact details change.
- My child's medical information can be shared with school staff responsible for their care.

Signed: \_\_\_\_\_ Print name: \_\_\_\_\_ Date: \_\_\_\_\_

**For all short-term illnesses:** once the course of treatment has been completed, the hard copy must be scanned onto the pupil's file and then destroyed securely.



### Appendix 2 – Administering medication

<b>Child's Name</b>	
<b>Date of Birth</b>	
<b>Class / Teacher</b>	
<b>GP Name / Telephone:</b>	

I agree to members of staff administering medicine / providing treatment to my child as directed below or in the case of an emergency, as staff consider necessary. This must be prescribed by a doctor or other medical professional.

Signed:

Date:

<b>Name of Medicine</b>	<b>Dose</b>	<b>Frequency / times</b>	<b>Date of Completion</b>
<b>Special Instructions:</b>		<b>Allergies:</b>	
<b>Other prescribed medicines child takes at home:</b>			

<b>No.</b>	<b>Date</b>	<b>Time</b>	<b>Medicine Given</b>	<b>Dose</b>	<b>Signature</b>






**For all short-term illnesses:** once the course of treatment has been completed, the hard copy must be scanned onto the pupil's file and then destroyed securely.

### Appendix 3 – Asthma Form

<b>Child's Name</b>	
<b>Date of Birth</b>	
<b>Class / Teacher</b>	
<b>GP Name / Telephone:</b>	
<b>Emergency Daytime Contact (Name &amp; Number)</b>	

<b>Inhaler needed in school</b>	<b>Inhaler Type</b>	<b>Dose / No. of puffs</b>	<b>Spacer provided?</b>
Y / N			Y / N
<b>Special Instructions:</b>		<b>Allergies:</b>	
<b>Asthma triggers for school to be mindful of:</b>			

Inhalers will always be within reach during the school day, in classrooms, outside and during PE / other activities.

I agree to:

- Ensure my child has in-date inhalers and a spacer (if prescribed) in school.
- Give consent for the school to administer my child's inhaler in line with emergency treatment detailed overleaf.
- The school can administer the in-school inhaler in an emergency.
- My child's medical information can be shared with school staff responsible for their care.



Signed: \_\_\_\_\_ Print name: \_\_\_\_\_ Date: \_\_\_\_\_

**For all short-term illnesses:** once the course of treatment has been completed, the hard copy must be scanned onto the pupil's file and then destroyed securely.



- 6 puffs of blue inhaler (via a spacer if prescribed)
- Reassess after 5 min

- If still wheezy / breathless
- 4 puffs of blue inhaler (via a spacer if prescribed)

- No relief after 10 puffs (total)
- **SERIOUS ATTACK**
- Call 999
- Call parent
- Give 10 puffs of reliever inhaler every few minutes

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No.	Date	Time	Medicine Given	Dose	Signature



**Appendix 4 – Allergies Form**

<b>Child's Name</b>	Insert pupil photo
<b>Date of Birth</b>	
<b>Class / Teacher</b>	
<b>GP or Hospital Doctor Name / Telephone:</b>	
<b>Emergency Daytime Parent Name / Telephone:</b>	

I agree to members of staff administering medicine / providing treatment to my child as directed below or in the case of an emergency, as staff consider necessary.

Signed:

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

**Allergies (please list here):**



What symptoms should we look out for? (rash / swelling etc.)			
Antihistamine allowed?	Dose as prescribed on box?	Frequency / times	Date of Completion
Y / N	Y / N		
Special Instructions (i.e. different medication or dosage etc.):			
Other prescribed medicines child takes at home:			

**All allergy forms:** must be scanned onto the pupil's file and the hard copy kept up to date.