



Rossall

INSPIRING EXCELLENCE

ADMINISTRATION OF MEDICINE POLICY

SLT Lead: Head of Health and Wellbeing	Date Reviewed: Lent 2024
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1. Policy Statement

This policy is designed to provide a sound basis for safe administration of prescribed and non-prescribed medication that is understood and accepted by staff, parents and pupils. A copy of the policy and associated protocols is maintained on the school intranet.

2. Procedures for dealing with Administration of Medications

2.1 Non-prescription medications

- Non-prescription medications are stored securely in a locked cupboard, preferably in a locked room.
- All pupils have a parental consent form for which non-prescription medications can/cannot be given. All consents are checked prior to the administration of any non-prescription medication.
- Staff must always check if the pupil has any allergies prior to administering non-prescription medications, information of all allergies is held on medical iSAMS on the pupil record.
- Non-prescription medications stocked within the Medical Centre are listed in appendix 1.
- When the Medical Centre is closed it is acceptable for non-prescription medicines supplied by the School Nurse to be administered for particular ailments. Non-prescription medications stocked within boarding houses are marked with an * within appendix 1
- Non prescription medications must be issued to pupils following the administration instructions on the box/packet.
- Prior to administration, all staff must check the medication record to ensure the pupil has not obtained medication from another member of staff. Any medications administered are recorded within the relevant records, such as; Medical iSAMS if administered in the medical centre, medication file within boarding houses and trip medication record. Any medications administered in the medical centre are shared with Houseparents via the daily report and any medications given by Houseparents are shared with the medical centre in order to avoid duplicate medications being given.
- **Checks prior to administration**
 - Right pupil
 - Right time
 - Right drug
 - Right dose
 - right route
 - Expiry date
 - Allergies

2.2 Prescribed medications

- These must be kept securely in a locked cupboard, preferably in a locked room.
- These must only be issued to the pupil for whom they have been prescribed.
- These must stay in their original container with the original dispensing label, this must not be altered, and an expiry date must be present.
- Written instructions of safe administration are shared with either the Houseparent or Pupil (if Risk Assessment completed)
- Occasionally medicines may be required to be kept under refrigerated conditions, if there is no suitable storage within the boarding house, these can be kept in the Medical Centre fridge.

- **Checks prior to administration**
 - Right pupil
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 - Right drug
 - Right dose
 - right route
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- Staff administering medications must issue the medication to the pupil and ensure that it is taken as directed.
- If the pupil refuses to take the medication, inform the Medical Centre (for boarding pupils) or the pupil's parent / legal guardian (for day pupils). The refusal to take medication should also be recorded on the pupil's medication record.
- CBD (Cannabidiol) supplements – Currently there is insufficient medical evidence to support the use of CBD as medication within School. The Pastoral and Healthcare teams appreciate that CBD products are sometimes recommended as an alternative medical therapy. However, CBD products are not permitted in School unless it has been formally prescribed by a medical doctor, evidence of prescription must be shared with the Medical Centre

2.3 Medication brought into school by pupils

- Boarding pupils who bring any medication into school should visit the Medical Centre for assessment, bringing all such medication and any relevant information and documentation relating to the medication, this includes all medications from overseas. In such cases an alternative prescription may be provided.
- Any medications from overseas found with the students will be confiscated and stored by the Medical Centre. Pupils may take these home or to guardians at the end of term.

2.3.1 Continuation of medication

- Parents of pupils who are on medication to be continued over a holiday period will be advised on medication by the Medical Centre.
- Parents of pupils who are on prescribed medication to be continued during term time will advise both the Medical Centre and the Houseparents.

2.4 Administration of medication to day pupils

- Medications to day pupils are to be administered as described in sections 2.1 and 2.2 above. Parents / guardians will also be notified of any non prescription medications given.
- If a pupil brings prescription medication into school, a Medication Permission and Consent Form (appendix 2) should be completed by parent / guardian to confirm details of the medication including dosage and time it should be given. These details should be recorded on the pupil's electronic record on iSAMS.
- There may be instances, due to confidentiality reasons, when it is not possible for the school to contact parents / guardians to seek information from parents regarding medication.

2.5 Self-administration of medication

- Students will be encouraged with appropriate support from their parents, the School Nurses and Houseparents to manage their medical conditions in school.
- Subject to completion of a satisfactory risk assessment, and when deemed Gillick competent, pupils may self-medicate.
- A pupil's ability to self-medicate will be assessed by the School Nurse using the Self-Medication Risk Assessment Form (appendix 3). Completed risk assessments for boarders are shared with Houseparents and a copy kept in the boarding house medication folder. The Medical Centre is responsible for uploading completed risk assessments onto the pupil's electronic record on iSAMS.
- There may be occasions where the pupil's doctor prescribes medicines under confidential circumstances therefore it will not be possible to share completed risk assessments with Houseparents. On these occasions, the risk assessment will be uploaded onto the pupil's electronic record on iSAMS only.
- There will be certain medicines that will not be appropriate for self-medication regardless of the pupil's age such as anti-depressants and controlled drugs.
- All medications must be kept secure, preferably in a locked cupboard.

2.6 Emergency medications

- Pupils with a diagnosed medical condition who are Gillick competent carry their own emergency medication and equipment with them at all times.
- Younger pupils who are not able to carry their medication are supported by school staff to ensure they have their medication with them at all times.
- Spare Auto injector pens are located in various locations on the campus (Appendix 4).
- There are 23 emergency asthma boxes on the school site (Appendix 5)

2.7 Recording and monitoring of records

- Records should be documented within Medical iSAMS in a timely manner.
- The Medical Centre holds an up to date reference of all current prescribed medication.
- Repeat medication is requested by the School Nurses directly to the School Doctor's practice via computer link to the practice website or via the Medicines Order Line.

- A record should be kept of medicines sent home or on residential trips with the pupil and if a pupil is admitted to hospital.
- The parents/guardians (for day pupils) or Medical Centre Staff (for boarding pupils) should be informed if a pupil refuses to take medication.

2.8 Disposal of medicines

- Any out of date or unused medicines are returned to the School's Medical Centre to enable them to be returned to the pharmacy for safe disposal.

2.9 Controlled drugs

- The storage of controlled drugs should comply with the Misuse of Drugs (Safe Custody) Regulation (1973) as amended.
- A secure, lockable cupboard is used which contains nothing else.
- Only those with authorised access should hold the keys to the cupboard.
- In addition to recording the administration of controlled drugs as per prescription medications on iSAMS, separate records for the administration of controlled drugs must be kept in an appropriate, bound record book with numbered pages.
- Administration of controlled drugs is covered in the protocol for administration of prescribed drugs.
- On arrival at school, controlled drugs should be 'counted in' by two adults (either Houseparent and parent, or two members of staff).
- The balance remaining should be checked at each administration. Note that controlled drugs are specific to the pupil for whom they have been prescribed. If more than one pupil has been prescribed the same controlled medication, quantities administered and balances remaining must be monitored and recorded separately.

2.10 Disposal of controlled drugs

- Unused controlled drugs must be signed out of the house with the school nurse for return to the pharmacy for disposal.
- This record should include the date, the quantity of drugs being returned and the name of the pupil they were prescribed for.
- This needs to be double signed by the Houseparent and school nurse.

2.11 Drug errors

- In the event of incorrect administration of medication (including possible overdose) contact the Medical Centre for advice giving accurate details of what medication has been given and any relevant information.
- Monitor pupil closely
- Complete incident form
- Parents to be informed

2.12 School trips

- If a pupil requires medication for a school trip, full details can be obtained from the Medical Centre.
- When a trip has been arranged, the member of staff responsible should enquire about relevant medical history from the Medical Centre at least two weeks before departure. If it is found that a pupil will need to take medications with them on the trip, a member of the nursing staff will then contact the relevant staff regarding trip medications and give training/advice where required.

- If the pupil has been assessed to self-medicate, and this has been agreed by the Medical Centre, the pupil may keep hold of their own medication.
- If the pupil is not able to self-medicate, the medication should be handed in to a member of staff. For all pupils who require a member of staff to administer medication to them, the Medical Centre will provide a 'School Trip Drug Administration Record', this will include instructions of how and when to administer the medication. This record will need returning to the Medical Centre so it can be attached to the pupil's electronic record on iSAMS.

Policy Links

This policy should be read in conjunction with other policies/protocols as appropriate:

- Medical Provision (including specific Medical Conditions Protocols eg Asthma and Anaphylaxis)
- Automated External Defibrillators
- Infection Control
- Head Injury and Concussion
- Pupil Mental Health and Wellbeing

Appendix 1

Non Prescription Medicines

Non-prescribed medication agreed for safe administration by Rossall School Medical Officer. For the safe administration of the following non-prescription medications, staff must understand and accept the following uses, contra-indications, side effects and dosage. Members of staff administering these medicines, must check the pupil's identity, age, any known allergies, medical conditions and if any medication, in the previous 4 hours, has been taken.

All medication administered, is noted in the relevant documentation, stating dosage, time and signature of administering staff.

Some non-prescription medications stocked by the School.

Drug	Indications for use	Dose and usage	Contra- indications	Possible side effects
Acyclovir cream	Cold sores	Topically, every 4 hours for 5-10 days	Avoid contact with eyes and mucous membranes	Stinging, burning, erythema, itching or drying skin
Anthisan cream	Itching skin, bites, stings, nettle rash	Apply directly to the site 2-3 times daily	Eczema or broken skin	None
Arnica Cream	Bruises	Topically as required	Known Allergy	Skin rash
Burn Gel	For superficial burns, scalds (non-blistered)	Topically as required	Do not use on broken or blistered skin or chemical burns	None unless allergic to ingredients
*Cetirizine Dihydrochloride	Allergic reactions, hay fever, skin rashes, insect bites, urticaria	2-5 years 2.5mg twice daily 6-12 years:5mg twice a day >12 Years 10mg tablets, once a day	Not recommended for people with renal impairment or Epileptics	Drowsiness, Headache, Dizziness, Dry Mouth, Diarrhoea
Chlorphenamine (tablets and syrup)	For allergic reactions, hay fever, insect bites, urticaria and allergic conjunctivitis	2-5 years: 1mg every 4-6 hours, max 6mg per day 6-12 years:2mg , every 4-6 hours >12 years: 4mg, every 4-6 hours. Max 6 tablets daily	Pregnancy, breast feeding. Avoid alcohol. Do not take if using Monoamine oxidase inhibitors (MAOIs)- anti depressants.	May cause drowsiness, advise re operating machinery/driving
Difflam Throat Rinse	For sore throats	>12 years: rinse or gargle 15ml in the mouth for 30 seconds. 2-3 times a day		Allergic reactions, irritation, tingling or numbness of the tongue, shortness of breath, cough, dry mouth, nausea, vomiting
Eye wash (0.9% normal saline)	For eye irrigation, including removal of foreign body	Single pod use of irrigation from 500ml bottle	None	None

Drug	Indications for use	Dose and usage	Contra- indications	Possible side effects
Hydrocortisone 1% Cream	Eczema, Psoriasis, Contact Dermatitis, Prickly Heat Rash, Nappy Rash, Insect Bites and Stings	Apply sparingly up to twice a day.	Do not use on broken skin, eyes or face	None
Heartburn relief (Gaviscon)	For relief of heartburn and indigestion	6-12 years: 1-2 five ml spoonfuls after meals and at bedtime. Avoid other meds 1-2 hours either side of taking this. >12 years:take 2-4 five ml spoonfuls as above	Not recommended for patients taking medications for Epilepsy. Consult bottle label for further contraindications	Constipation, wind, stomach cramps and burping
*Ibuprofen (tablets or suspension)	For analgesia (headaches, dysmenorrhoea, toothaches, muscular injuries etc.) and anti-inflammatory properties	3-11 months:50mg to be taken every 6 hourly (3 x a day) with or after food 1- 3 years:100mg 4-6 years: 150mg 7-11 years: 200mg >12 years 200 to 400 mg	Not recommended for patients with Asthma, unless documented otherwise. Avoid use in pregnancy Known allergies to aspirin, stomach ulcers or stomach disorders Children with Chickenpox	Hypersensitivity reactions Stomach pains, nausea, indigestion Skin rashes and itchiness Blood disorders, kidney/liver disorders Dizziness, headaches, hearing disturbances
Ibuprofen Gel	For localised muscular pain	5% gel, topical application up to 3 times a day, gentle massage to area Avoid sun exposure and occlusive dressings	As above. Not for concurrent use with Ibuprofen tablets/suspension	Skin rashes
Loratadine	Allergic reactions, hay fever, skin rashes, insect bites, urticaria	Under 30 kg:5mg tablets, once a day > 12 years:10mg tablets, once a day	Use in caution with patients with known urinary retention	May cause drowsiness Caution with Epilepsy
Magnesium Sulphate paste	Drawing out foreign bodies, such as splinters	Apply paste to splinter area and cover for 24 hours	Known allergy to Magnesium Sulphate	
Menthol and Eucalyptus Inhalation	For symptomatic relief of coughs, colds and blocked noses	Add 5ml to approx 550ml of hot water and inhale the vapour	Not to be used for Asthmatics	None
Mouth Ulcer Gel	For simple mouth ulcers	Topical application, three times a day. Wash hands before and after use	Avoid eyes	Numbness

Drug	Indications for use	Dose and usage	Contra- indications	Possible side effects
Olive Oil	For softening of ear wax without infection	Warm to room temperature Apply 2-3 drops and lie with affected ear uppermost for 5-10 mins Use for up to 7 days	Known infection	
*Paracetamol (tablets and suspension)	Mild to moderate pain Pyrexia	3 to 5 months:60mg 6 to 23 months:120mg 2 to 4 years:180mg 4 to 6 years:240mg 6 to 8 years: 250mg 8 to 10 years:375mg 10 to 12 years:500mg 12 to 16 years:750mg > 16 years:1000mg 4-6 hourly max 4 times in 24 hours	Alcohol dependency Liver and Kidney impairment	Rare- rashes and blood disorders
Petroleum Jelly (Vaseline)	For hydration of lips and skin	Topically, as required		
*Pseudoephedrine (Sudafed- liquid or tablets)	For congestion	<12 years:30 mg 3-4 times daily > 12 years:60mg 3-4 times daily	Diabetes:be aware of sugar content	Nausea, vomiting, headache, restlessness and rash
Savlon Antiseptic Cream	For cuts & grazes, insect bites & stings, minor burns & scalds	With clean hands gently apply cream to the affected area	Do not use on the eyes or ears	
Simple Linctus (including paediatric version)	For dry irritating cough	5-10mls 3-4 times daily	Diabetes:be aware of sugar content	None known
Sodium Cromoglycate eye drops 2%	For Hay fever symptoms	1-2 drops, up to 4 times a day	Not for use with soft contact lens use	Occasional temporary blurred vision after use
Sudocrem	Treat Eczema, sunburn, minor burns, surface wounds	As required	None	Occasionally hypersensitivity reactions
*Throat Lozenges	For sore throat relief	1 Lozenge every 4 hours		

Appendix 2

Medication Permission and Consent Form

Name of Pupil	Year and House
Name of Medication	Date Medication provided by parent/guardian
Dose and method of administration	Time and day to be given
Expiry Date	Any other information

Please ensure all medication is in the correct container and package with the pupil's name and dosage clearly written on the package or bottle

School Nurse Signature	Parent's Signature
Print Name	Print Name and Contact Telephone Number

Date Medication given	Time Medication given	School Nurse Signature

Appendix 3

Risk Assessment for Pupil's Self Administering Medication

It is Rossall School Policy that medications will be administered by a school nurse, or by a suitably trained member of staff.

Where a pupil displays Gillick Competency and wishes to administer their own prescribed medication, the School Nurse must complete the following Risk Assessment.

First Name	Family Name	Date of Birth	House/Year

Name of medication	Dose	Times for administration

	Yes	No
Does the pupil understand why they are taking the medication		
Does the pupil understand when to take the medication?		
Does the pupil understand how to take the medication?		
Does the pupil understand the medication is for them and they must not give it to anyone else?		
Does the pupil understand the need to keep the medication in a secure place?		
Does the pupil have a lockable drawer/cupboard to keep the medication in?		

Permission granted

I, School Nurse, have given the instructions on how/when to take his/her medication and also informed him/her of the need to keep the medication in a locked cupboard/drawer.

I understand how and when to take my medication. I also understand that it needs to be kept secure in a locked cupboard/drawer.

Signature of pupil.....Date

(For boarders) A copy of this document shared with Houseparent by School Nurse on

Appendix 4

Emergency Auto injector pens locations around campus

Sports Hall Reception
Medical Centre (under 6's)
Medical Centre (over 6's)
Rossall Food Studies Kitchen
Spread Eagle Boarding House
Catering Department (under 6's)
Catering Department (over 6's)
Sixth Form Centre
Nursery (under 6's)

Please see the School Maps for location of Epipens (Appendix 6)

Appendix 5

Emergency Inhalers locations around campus

Reception Sports Hall
Pre Preparatory School
Preparatory School
Anchor House
Dragon House
Rose House
Dolphin House
Wren House
Pelican House
Spread Eagle House
Maltese Cross House
Mitre Fleur de Lys House
Nursery
Cricket Pavillion
Dining Hall
Swimming Pool
7 x inhalers are kept in the medical centre

Please see the School Maps for location of Epipens (Appendix 6)

Appendix 6: Location of First Aid Kits and Emergency Medical Equipment

