

Administration of Medicines Policy

SECTION 1 – GENERAL MEDICATION

The following points will be considered in the first section of the policy:

1. The prescribing of medicines.
2. The storage of medicines in school.
3. The administration of medicines in school.
4. The recording procedure.
5. Transport of medicines to and from school.

1. Prescribing

All medicines should have been prescribed for a particular pupil by the General Practitioner or Paediatric Consultant.

All medicines should be in the container in which they were originally dispensed, clearly labelled with the name of the child, name and dose of medicine and the date dispensed.

Non prescribed medicines are not to be given. Paracetamol may be given by the school nurse when written consent has been obtained.

2. Storage

All medicines, including inhalers, should be kept in the school nurses room. Medicines should be kept in the locked metal cabinet which is secured to the wall, or if recommended in the refrigerator (temperature 2°C minimum; -8°C maximum) which should also be locked.

The drug keys are the responsibility of the school nurse and should be accessible to teaching staff in her absence. They can be found in the third base cupboard from the left top drawer in the nurses room.

3. Administration

- i) Medicines should be administered by the school nurse, or in her absence, a teaching assistant or teacher if they agree to do so.
- ii) Giving medication
 - a) Check the pupil's name against the name on the medicine bottle/packet.
 - b) Check the name of medication, date prescribed and expiry date.

- c) Check the dosage.
- d) Check that the medicine is given at the right time.
- e) Medication should be checked by two members of staff before administration who should both sign the drug chart.
- f) Give pupil the medication, observe until it has been swallowed.
- g) Pupils requiring medication will have an individual drug sheet. This should be signed immediately after a drug has been given.
- h) Medication should only be given to the person it is prescribed for.
- i) Any concerns about the medication needing to be administered should be checked with the parent/carer. They should in turn be informed if it is decided the medication is not given.
- j) There should be an awareness of any side effects medicines may cause. Drug information books are available in the school nurses room.
- k) Disposal of medicines is the responsibility of the school nurse.

4. Recording

Pupils requiring medication to be given in school regularly should have an individual drug chart. This applies to long term and short-term medication.

All medication should be signed for as soon as they are given by two members of staff.

5. Transport of Medications

Temporary medications are usually transported with the pupil in their school bag and given to the school nurse by the T.A./Teacher. In the absence of the school nurse, medicines should be placed in the medicine cupboard or refrigerator if appropriate.

Routine medications are stored at school in the medicine cupboard.

SECTION 2 – ADMINISTRATION OF ANTI-CONVULSANTS

Administration of medication for acute epileptic fits must be in accordance with individual pupil protocols.

Medication for each pupil is kept in the drug cupboard in the School Nurse's room. In the School Nurse's absence the keys are kept in the third base cupboard from the left top drawer in the nurses room.

Training

Training for staff administering rectal diazepam and buccal midazolam on a voluntary basis will be carried out by the School Nurse.

Training should include:

- a) Teaching about epilepsy and understanding of the different types of fits.
- b) How to manage a pupil having an epileptic fit and what to observe for.
- c) The procedure of how to administer rectal diazepam including checking of dose and recording of administration.

Recording of Administration

Dose and time of anti-convulsant administration should be recorded on drug sheet. It may be appropriate to contact the parent by telephone depending on the circumstances of the individual pupil.

Calling an Ambulance

If a fit does not respond to treatment then the pupil should be transferred to hospital by ambulance.

New medications will not be given for the first time in school. An ambulance should be called.

Respiratory Arrest

After an epileptic fit, a child may appear to stop breathing which will normally resolve spontaneously. If breathing does not restart then proceed to basic life support.