# Management & Administration of Medication Policy

#### **Equality Statement**

Centre Academy East Anglia is committed to a policy of equality and aims to ensure that no employee, job applicant, pupil or other member of the school community is treated less favourably on grounds of sex, race, colour, ethnic or national origin, marital status, age, sexual orientation, disability or religious belief. We provide a safe, supportive and welcoming environment

To be reviewed annually Next review date: May 2019

Signed: Date: 01/04/18

Principal and CEO Dr Rollo

Signed: Date: 01/04/18

Head of School Mrs Salthouse

Signed: Date: 01/04/18

**Head of Medication Mrs Beadman** 

Centre Academy East Anglia is committed to safeguarding and promoting the welfare of children and young people and expects all staff to share this commitment.

#### **INTRODUCTION**

This Document is a statement of the responsibilities and duties of all Staff within the remit of Centre Academy East Anglia and the Boarding Programme.

The Requirements of the following Acts and Standards are taken fully into consideration in the compilation of this policy, and in the working practices adopted by members of staff carrying out tasks and procedures, identified as part of the normal working day:

Health and Safety Act 1974; SEN and Disability Act 2001; The Management of Health & Safety at Work Regulations 1999; COSHH Regulations 2002; Misuse of Drugs Act 1971 & associated Regs.; Medicines Act 1968; The Education (School Premises) Regulations 1999; The Education(Independent Schools Standards, England)Regs. 2003; National Standards for under 8's day care and Child minding –Premises; Special Educational Needs- Education Act 1996; Care Standards Act 2000.

This policy reflects the guidance in The Handling of Medicines in Social Care published by The Royal Pharmaceutical Society

This policy forms an integral part of staff induction and on-going training, and should be read in conjunction with Centre Academy East Anglia, Health & Safety Policy.

#### **PURPOSE OF THE POLICY**

We use the eight core principles designated by the Royal Pharmaceutical Society relating to the safe and appropriate handling of medicines. These are:-

- 1) Pupils/ parents can choose the provider of pharmaceutical care and services, including dispensed medications
- 2) Appropriate staff know which medicines each young person has, and a complete account of medicines is documented and kept in the Medical Room
- 3) Staff who help people with their medicines are competent and assessed at least annually
- 4) Medicines are given safely and correctly, and staff preserve the dignity and privacy of the individual when they give medicines to them
- 5) Medicines are available when the individual needs them and staff make sure that unwanted medicines are disposed of safely
- 6) Medicines are stored safely in a locked room and a locked cabinet
- 7) The school service has access to advice from a pharmacist
- 8) Medicines are used to cure or prevent disease, or to relieve symptoms, and not to punish or control behaviour

The purpose of this Policy is to ensure that all staff, both directly and indirectly involved with the administering of Medicines to pupils, are aware of all pertinent rules and procedures.

This Medications Policy is to be read by all Staff and Management with responsibilities for the Safety and Welfare of staff and pupils. Failure to comply with directives given in this document can lead to disciplinary action. The policy is developed in the light of the School's statutory responsibilities, and its own assessment of pupils' needs and resources available.

#### **POLICY STATEMENT**

Centre Academy East Anglia recognises that there is no legal or contractual duty on staff to Administer Medications or to supervise the taking of them. Care staff may have specific duties set out as part of their Contract of Employment. All members of staff will respond appropriately in an emergency situation. The relevant legislation and regulations (as set out above) shall be adhered to, not only as a statutory duty, but also as a Minimum Standard of Care.

#### **STAFF TRAINING**

The Head of School and Principal/CEO will ensure that the appropriate initial and on-going training will be provided, and that good communications are maintained with parents of children requiring

either Prescribed or Non-prescribed Medication. The School Doctors are also contacted when necessary and relevant appointments made for consultation.

We conduct regular staff training. In this particular area no staff member is allowed to administer medication without appropriate specific training to administer medication. Once this is completed the Head of Medication will carry out the 'Induction Process'. This consists of: developing familiarity with the medical room, its procedures and systems. The documentation for administering medication is explained and covered. Documentation includes the different types of medication that may have to be dispensed, for example, prescription or non-prescription remedies. Staff that administer medication are assessed for competency by the Head of Medication annually.

#### **CONTROLLED DRUGS**

Medications that are listed as controlled drugs are stored separately in a locked cabinet and a record of their administration is in a separate book and is witnessed and countersigned by a second member of staff. There is a separate page for each person.

#### **DISPOSAL OF MEDICATION**

All medication that is surplus, unwanted or expired is returned to parents and documented on the medication form of each student. We do not return medication at weekends or school holidays unless asked to do so by parents. All medication is returned to parents at the end of each academic year.

#### **ALL MEDICATION**

Must be handed in to the Office, Head of Medication or Head of Care with the correct parental form completed in its original container with instructions on administering. The school cannot accept any medication that does not follow these instructions.

#### **MEDICINE ADMINISTRATION**

**Booking-in system** 

Each pupil at the school, both day and boarder, who has medication has a file in the medication record cabinet containing their medication records; when medication is handed in it is booked in and highlighted in green. The medication is then put in a box labelled with the pupil's name and the list of medication contained in it. Medication is handed in to either the Head of Medication or Head of Care. They will check the label and count tablets prior to booking them in. Parents will be asked to complete a change of medication form if it is a new or different prescription.

Safe administration of medicines means that medicines are given in such a way as to maximise benefit and to avoid causing harm.

In order to give a medicine safely, you need to be able to:

- Identify the medicine correctly. To do so, the medicine pack must have a label attached by the pharmacist or dispensing GP
- Identify the person correctly
- Know what the medicine is intended to do, for example, to help the person breathe more easily
- Know whether there are any special precautions, for example, give the medicine with food

You should only give medicines that you have been trained to give. Appropriate staff can give or assist people in:

- Taking tablets, capsules, oral mixtures
- Staff assist pupils in self-administration of cream/ointment
- Inserting drops to ear, nose or eye
- Staff assist administering inhaled medication

It is important to know how to react when an adult or child refuses to take medicine that the doctor has prescribed and this must be clearly stated in the written procedure. Generally, it is worthwhile waiting for a short time before going back to the adult or child and again offering the medicine. Appropriate staff must never force an adult or child to take medicine, but it may be necessary to contact the Head of School and also inform parents. A decision will then be taken as to whether the GP needs to be consulted; this will depend on what the medication is for and the possible effects of not taking it.

What if there is a mistake or incident?

Errors can occur in the prescribing, dispensing or administration of medicines. Most medication errors do not harm the individual although a few errors can have serious consequences. It is important that errors are recorded and the cause investigated so that we can learn from the incident and prevent a similar error happening in the future.

Examples of administration errors are:

- Wrong dose is given, too much, too little
- Medication is not given
- Medication is given to the wrong child or adult.

Appropriate staff should not ignore errors but encourage a culture that allows their staff to report incidents without the fear of an unjustifiable level of recrimination. To achieve this they must:

- Have a clear incident reporting system
- Investigate reports and decide whether they need to offer training to an individual or review existing procedures
- Record any action taken
- Report serious incidents to the regulatory body
- You must immediately report any error or incident in the administration of medicines. This would be to Head of Medication or Head of Care who will inform the Head of School

Medication errors will be picked up by the Head of Medication and Head of Care during the weekly audits, three or more errors will result in a repeated test for competency by the Head of Medication.

#### **MINOR AILMENTS**

At Centre Academy East Anglia we keep a range of homely (over-the-counter) remedies to treat minor ailments and these are administered as required, and as directed on the label. Consent for staff to administer homely remedies is signed by parents.

If a young person is taking medication for a minor ailment we will raise this as an issue with parents and arrange medical intervention if it continues for more than 72 hours.

#### **RECORD KEEPING**

At Centre Academy East Anglia we record what we do when we do it. Accordingly, we do not rely on memory. Realising that a student may decide to decline a medication, we do not record it as having been given until the student has accepted and taken it.

Each young person has a record sheet for each prescribed and non/prescribed medication; this includes strength and dosage, and specifies when the medication should be taken and if any special requirements e.g. with or after food.

#### STORAGE OF MEDICATIONS

At Centre Academy East Anglia medications are stored in individual pupil boxes in a locked cupboard in the medical room which is also locked. Controlled drugs are stored separately. Only staff who are trained in administering medicines and have passed their competency test access these medications. We have a fridge in the medical room which is only used to store medication that needs to be refrigerated.

#### **SELF-ADMINISTRATION OF MEDICINES**

At Centre Academy East Anglia, a student may self-administer – but only if careful guidelines are followed. After liaising with an individual student's parents or carers, a formal risk assessment is prepared. The risk assessment should explore whether the student wants to take responsibility for the medication; knows the medication they are taking and what it is for; how and when to take the medication; and the consequences of not taking the medication. In addition, the student must fully

understand that he/she cannot leave the medication where someone else may unintentionally or deliberately take the medication and be harmed by it.

#### RESIDENTIAL SPECIAL SCHOOLS

It is essential that appropriate staff have a written medication policy. The school should consider the following:

- Obtaining and storing medicines that young people need on a regular basis or when they have episodes of illness
- When appropriate, working with local NHS providers for services such as immunisation
- Support for young people to take their own medicines
- The way that the care worker keeps records
- The treatment of minor ailments
- Taking special care with medicines that are CDs (controlled drugs)
- Dealing with foreign medicines that young people bring to the school.

#### **IMPLEMENTATION**

It is the responsibility of the Head of School, the Head of Medication and Head of Care to ensure that the procedures and statements outlined in this policy are adhered to.

Prescription Medicine which needs to be taken during the School day will be kept in a locked cupboard and dispensed by a qualified member of the Medication Team on duty.

Prescription medicines which need to be taken during a school trip/outing will be the responsibility of the member of qualified Staff on Duty.

It is the responsibility of the member of staff administering medicines to ensure that all written records of dosage are fully maintained, and the Head of Medications ensures that all staff are aware of the need to keep accurate, relevant and legible records to which only designated staff have access. These staff are: Head of Medications, Head of Care, care staff, first aiders, including those with a certificate to provide medication, Head of School and the Principal/CEO.

Parents sign a consent form for the School to administer medicine when necessary; if boarders are required to see a Doctor, they are taken to the local health centre at Bildeston where a temporary resident form is completed. Medical Care Plans are provided by parents for students with complex needs.

It is the responsibility of all staff to monitor any pupil who appears unwell, and when necessary to seek a second opinion from the Head of School/Head of Medication or the Head of Care. As above, careful written records should always be maintained.

The School will make every effort to assist pupils with long-term, or complex medical needs in conjunction with parents and the local GP.

If students bring in their own non-prescribed/homely remedies, these are documented on a pink sheet. This is separate from school provided medicines which are held in the Medical Room in individual student files. It is also documented whenever the non-prescribed remedies are administered/ taken by students.

Records are maintained of all medicines administered by staff. All medications are stored in a locked cabinet in the medical room which is located in the Main House.

Audits are carried out every week with both the Head of Care and Medication Officer. This is monitored by Head of School half termly.

#### **DELEGATED RESPONSIBILITIES**

Those appointed as competent to advice on Health & Safety shall assist in the monitoring and reviewing of procedures as required. They will be responsible for ensuring that all staff and pupils

are kept fully up-to-date with any changes in legislation, as this affects them with reviews, working practices and other matters in relation to the administration of medicines at School.

All members of staff with responsibility for the administrating of medicines will ensure that, where applicable, all statutory notices are displayed, and relevant registers are kept current, available for inspection.

Basic information for asthma, epilepsy, diabetes and anaphylaxis are detailed in a separate document, which is filed together with this Policy, and should be available to staff at all times. A copy of this Policy is also located in the Medical Room.

All staff should familiarise themselves with the contents of this Policy, and any associated documentation, and must at all times comply with the requirements of this Policy. Staff must follow all instructions supplied with medicines (Prescribed or Non- Prescribed). Any lack of adherence to the contents of this Policy must be reported to the Head of School/ Head of Care, and could form the basis of disciplinary proceedings.

#### ADDITIONAL INFORMATION

Gallick Competences

This term, originating in England, is used in medication law to decide whether a child (16 years or younger) is able to consent to his or her own medical treatment without the need for parental consent to his or hers own medical treatment without the need for parental permission or knowledge

#### Frazer Guidelines

- It is lawful for doctors to provide contraceptive advice and treatment without parental consent providing certain criteria are met. These criteria, known as the Fraser Guidelines, were laid down by Lord Fraser in the House of Lords' case and require the professional to be satisfied that:
- The young person will understand the professional's advice;
- The young person cannot be persuaded to inform their parents;
- The young person is likely to begin, or to continue having, sexual intercourse with or without contraceptive treatment;
- Unless the young person receives contraceptive treatment, their physical or mental health, or both, are likely to suffer;
- The young person's best interests require them to receive contraceptive advice or treatment with or without parental consent.

Although these criteria specifically refer to contraception, the principles are deemed to apply to other treatments, including abortion. Although the judgement in the House of Lords referred specifically to doctors, it is considered to apply to other health professionals, including nurses. It may also be interpreted as covering youth workers and health promotion workers who may be giving contraceptive advice and condoms to young people under 16, but this has not been tested in court.

## Staff Competency Assessment form for Administering Medication.

The Head of Medication will discuss with the new member of staff whether they have previously received any training to administer medication. It will be made clear that they will receive training from CAEA and then be assessed for competency to administer medication.

It is essential that any member of staff administering medication is competent to do so. Medicines must only be administered by designated and appropriately trained staff who have had their competency assessed. The Head of Medication is responsible for arranging training for staff and assessing competency.

A thorough assessment should be undertaken before staff begin administering medication unsupervised. The assessment should be repeated at intervals of not less than one year or sooner if circumstances indicate, for example, there has been a medication error.

The Head of Medication will accompany the member of staff whilst administering the medication, witnessing the actions the member of staff takes and recording the information on the form. Although the member of staff will be allowed to administer the medication as if they were alone, the Head of Medication will be ready to intervene if it appears that unsafe practice is or maybe about to take place.

The following questions have a "yes/no" response. A "no" response has been selected must be resolved before the member of staff can undertake to administer medication.

Once online training has been completed, the Head of Medication will carry out the competency test. Only once the member of staff is deemed competent will they be allowed to administer medication.

The outcome of the assessment and any action points identified should be documented.

| Name of staff member: | Date: |
|-----------------------|-------|
|                       |       |

### Training and Policy

| Has the member of staff completed training to administer medication?   | Yes / No |
|--|----------|
| Has the member of staff read and understood the medication policy and signed to indicate that they have done so? | Yes / No |
| Does the member of staff know how/where to access the medication policy if they wish to check any information?   | Yes / No |

| Yes / No        |
|-----------------|
| Yes / No        |
|                 |
| Yes / No        |
|                 |
| Yes / No        |
| (If applicable) |
| Yes / No        |
| Yes / No        |
|                 |
| Yes / No        |
|                 |

| Did the staff member complete the written records immediately after the | Yes / No |
|---|----------|
| medication was administered?  |          |
|   |          |

#### **OUTCOME OF ASSESSMENT**

Considering the information from the assessment the member of staff has been assessed as: (Please delete as appropriate.)

- Has demonstrated competence at this assessment to administer medication unsupervised.
- Has demonstrated competence at this assessment to administer medication unsupervised with the exceptions identified below.
- Requires further supervision or training to administer medication unsupervised at this time

| Date of assessment                                  |  |
|---|--|
|   |  |
| Signature of staff member being assessed            |  |
| Job Title;  |  |
| Signature of member of staff making the assessment; |  |
| Name of member of staff making the assessment;      |  |
|   |  |
|   |  |
| Actions/exceptions identified.                      |  |