



## **B PROTOCOL FOR ADMINISTRATION OF MEDICATION**

### **1 Background**

(Insert child's name) may suffer (insert medical condition).

List any known triggers if appropriate

If this occurs, he/she is likely to need medical attention and, in an extreme situation, his/her condition might be life threatening. However, it is recommended by his/her consultant that his/her education should carry on 'as normal'.

- \* Only include if child has other medical condition.
- \* 1.2 (insert child's name here) also suffers from (insert other medical condition if appropriate) and may, therefore, need occasional access to (insert name of medication).
- 1.3 The arrangements set out below are intended to assist (insert child's name), his/her parents and the school in achieving the least possible disruption to his/her education but also to make appropriate provision for his/her medical requirements.

### **2 Details**

- 2.1 The Headteacher will arrange for the relevant staff (e.g. class teacher, general assistant, midday supervisory assistants) in the school to be briefed about (insert child's name) condition and about other arrangements contained in this document.
- \*\* Only include if child is at risk of anaphylaxis and the allergen is a food substance.
- \*\* 2.2 The school staff will take all reasonable steps to ensure that (insert child's name) does not eat any food items unless they have been prepared/approved by his/her parents.
- \*\* 2.3 (insert child's name) parents will remind him/her regularly of the need to refuse any food items which might be offered to him/her by other pupils.
- \*\* 2.4 In particular, (insert child's name) parents will provide for him/her
  - a suitable mid morning snack;
  - a suitable packed lunch;

- suitable sweets to be considered as ‘treats’ and to be kept by the teacher.

- \*\* 2.5 Whenever the planned curriculum involves cookery or experiments that may involve (insert name or allergen) prior discussions will be held between the school and parents to agree measures and suitable alternatives.
- 2.6 If there are any proposals which mean that (insert child’s name) may leave the school site, prior discussions will be held between the school and (insert child’s name) parents in order to agree appropriate provision and safe handling of his/her medication.
- 2.7 The school will hold, under secure conditions, appropriate medication, clearly marked for use by designated school staff or qualified personnel and showing an expiry date.

(Insert list of medication that will be kept by school) are/is to be held in (insert location).

The parents/carer accepts responsibility for maintaining appropriate supplies of medication.

### 3 Ill Health

(Insert medical condition, e.g. epileptic seizure, hypoglycaemia episode, etc)

- 3.1.1 In the event of (insert child’s name) showing any physical symptoms for which there is no obvious alternative explanation, his/her condition will be immediately reported to (insert name of person nominated to take control of the situation. This person could be the class teacher, first-aider or headteacher).

On receipt of such a report, this person, if agreeing that his/her condition is a cause for concern will instruct a member of staff to contact (in direct order of priority):

- AMBULANCE – Emergency Services 999  
Message to be given – (name of child) (insert medical condition)
- Parents/ carer  
Name – number (insert)

- 3.1 Whilst awaiting medical assistance, (insert name of nominated person) will assess (insert child’s name) condition and **administer the appropriate medication** in line with perceived symptoms and following closely the instructions given during the staff training session and detailed on the consent form.
- 3.2 The administration of this medication is safer for (insert child’s name). Even if it is given through a misdiagnosis it will do him/her no harm.

- 3.3 On the arrival of a qualified medical staff, the nominated person will tell them of the medication given to (insert child's name). All used medication will be handed to the medical staff.
- 3.4 After the incident, a debriefing session will take place with all members of staff involved.
- 3.5 Parents will replace any used medication.

## **4 Training**

- 4.1 Volunteers from the school staff have undertaken to administer the medication in the unlikely event of (insert child's name) having (insert medical condition).
- 4.2 A training session was held by (school nurse) which was attended by (insert names of staff/trained in procedure). (insert name) was nominated as the key person to take control of a situation and (insert name) was nominated to perform this role in the event of their absence. The (insert title) explained in detail, (insert name of child) condition, the symptoms of (insert medical condition) and the stages and procedures for the administration of medication.
- 4.3 Further advice is available to the school staff at any point in the future if they feel the need for further assistance. In any case, the medical training will be repeated every six months.

## **5 Staff Indemnity**

In order to give staff reassurance about the protection their employment provides, Brighton & Hove City Council (hereinafter called the Council) agrees to fully indemnify its staff at the school against claims of negligence from (insert child's name) parents providing the staff are acting within the terms of this protocol. In practice, the indemnity means the Council and not the employee will meet the cost of damages should a claim for alleged negligence be successful. It is very rare for school staff to be sued for negligence and the action will usually be between the parent and the employer (the Council).

## **6 Agreement & Conclusion**

- 6.1 A copy of these notes will be held by the school and the parents.
- 6.2 A copy of these notes will be sent to (insert child's GP/doctor's name and address) and (insert school nurse's name and address) for information.
- 6.3 Any necessary revisions will be the subject of further discussions between the school and the parents.

6.4 On a termly basis, any changes in routine will be noted and circulated.

Agreed & Signed on behalf of the school:

Head teacher:

Date:

Parents/Carer:

Date: