



Student Health and Medication Administration Policy

*This school is committed to safeguarding and promoting the welfare of children and young people
and expects all staff and volunteers to share this commitment*

Governors' Committee Responsibility:	Curriculum Community & Student Welfare
Date Approved:	Spring 2024
Review Period:	Annual
Next Review Date:	Spring 2025

The Limpsfield Grange Values:

At Limpsfield Grange we believe in working together to make a difference.

We are a tolerant community; we accept value and understand others.

We care for all members of our community without judgement.

We are responsible for our own learning, behaviour and actions.

We accept that sometimes things go wrong. We work together to take responsibility for our mistakes and for putting things right.

We are a respectful community and we treat others as we would like to be treated, even if they have different views and opinions to our own.

We understand that good behaviour helps us to prepare for life beyond Limpsfield Grange.

We are positive and resilient. We celebrate difference in everything that we do.

We are all proud to be part of the Limpsfield Grange community.

July 2023

Limpsfield Grange School

Student Health & Medication Administration Policy

Background and rationale

Limpsfield Grange School is committed to ensuring that the administration of student medication is in accordance with national and local guidance, including:

- DfE supporting pupils at school with medical conditions (December 2015) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf
- Royal Pharmaceutical Society and the Royal College of Nursing Professional guidance on the safe and secure handling of medicines / professional guidance on the administration of medicines in healthcare settings <https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of-medicines>
- Guidance provided by Surrey County Council “Supporting children and young people with medical conditions V4” (2023) shares further information on the management of medication in schools and effective systems for supporting students with medical needs. A copy of this document is kept in the Health Hub.

Scope

This policy applies to student medication administered at Limpsfield Grange School, including visits. This policy also addresses how families should engage with the school around student health and the administration of student medication.

This policy applies to all Limpsfield Grange staff, students, Governors, parents and carers. The medication lead is Miranda Bolton, the overall responsibility for health and medication resides with Natasha White, the Head of the Residential Provision.

Storage of medication

- All medications are stored in locked cupboards in the Health Hub in the Residential Provision, with the exception of emergency medication and non-prescription medication for visits which are stored in the labelled cupboard in the reception office. The locked cupboards are never left unattended by staff when open.
- Each student with routine medication has their own labelled box for their medication(s), with the exception of some liquids, which need to be stored separately and are clearly named.
- Keys for medication cupboards and the Health Hub door are either kept in a number coded key safe, located in a Residential staff office, or on a lanyard worn by a medication trained member of the Residential team.
- There is a wall mounted controlled drug cupboard in the Health Hub, located within the locked cupboard. The key to the controlled drug cupboard is stored in a number coded key safe. The cupboard is never left unattended by staff when open.
- Medication that requires refrigeration is stored in a labelled locked box in the medication fridge, located in the Health Hub. When used for medication, the Medication Lead or a nominated Residential staff member, checks the fridge temperature daily, and the temperature is recorded on the record sheet located next to the fridge. The temperature range of the fridge should be within 2 – 8 degrees centigrade. If the fridge temperature is out of range, medication will be moved to another suitable fridge. Staff must report a fall in fridge temperature to the Senior Residential staff member on shift immediately.
- Medicines should be stored between 15 – 25 degrees centigrade in the Health Hub.

- Boxes for liquids, drops and creams are dated on opening. The MARs or non-prescription medication sheet (as appropriate) must have the date of opening written on and length of course for short term medication, as per the prescription label.

Expiry dates after opening are as follows:

- Eye drops – 28 days after opening
- Liquids – 6 months after opening
- Creams – 6 months after opening
- Tablets in bottles – 1 year from the date on the label

Auditing and Monitoring

- Prescription medication is stock checked fortnightly by the Medication Lead to ensure it is within its expiry date and stock totals are correct. Any discrepancies are reported to the Head of Residential Provision or another member of SLT immediately.
- Controlled drugs are stock checked weekly by the Medication Lead to ensure they are in date and totals are correct. Any discrepancies are reported to the Head of Residential Provision or another member of SLT immediately.
- The named member of the Residential Team checks the stocks of non-prescription medication fortnightly. Any discrepancies are reported to Medication Lead and Head of Residential Provision or another member of SLT immediately.
- Weekly monitoring of student's self-medication records are carried out by the Medication Lead including counting stock, checking the number recorded, and whether these match the number of doses the student has recorded on the MAR sheet.
- The Medication Lead completes 6 monthly medication audits.
- Individual Health Care Plans are reviewed annually by the Medication Lead in conjunction with parents/carers.
- Parents are informed of our intention to send home medication, with details of the name and amounts being sent home.
- Out of date and discontinued medication will be disposed by returning it to parents or a pharmacy, with details of the name and amounts. Dropped/damaged medication will be recorded on an individual MAR and returned to a pharmacy with the name of the store, name of medication and quantity recorded.
- Parents will receive an email from staff when medication stock is running low, this will include the date by which they will need to replenish stock.

Procedure for Administration of Medicines

Staff who have undertaken Opus Medicines Awareness for Schools, and subsequent training and competency observations, undertake routine surgeries.

The Medication Lead will consult with the Pharmacist at Paydens Pharmacy, Oxted, 01883 712081 or NHS direct on 111 for any additional advice or guidance.

Medication Administration Record (MAR)/self-medication MAR are completed for all ongoing, routine prescribed medication. MAR sheets are prepared each month by the Medication Lead. At the beginning of each month the MAR sheet and stock of medication are checked and signed in/transferred across by the Medication Lead and a senior member of the Residential staff on duty.

The Controlled Drugs Book contains the records of the administration and stock balance of controlled drugs. All controlled drugs received/returned home are entered on the student's individual page. This is duplicated on the student's MAR.

We do not administer missed doses of medication. If a student is meant to take a routine or short course of medication at home in the morning and this is missed, we cannot administer it.

We archive Medication Administration Records and they are retained for a minimum of 15 years.

Administration of Routine Prescribed Medication (including liquid, drops and creams):

- Students enter the Health Hub individually.
- Staff check student's identity.
- Staff check the student's MAR, name and dosage instructions including route and time, noting any changes in medication or dose and ensuring that the dose has not already been administered.
- Monitoring of MARS is routinely undertaken by staff when administering medication.
- Staff identify the appropriate medicine container(s) checking the label(s) and medication profile match. If there is a discrepancy, staff will clarify with senior Residential staff on duty or parents/carers/prescriber.
- Staff prepare the relevant dose(s) and administer. All medication should be taken with water at the time stated on the prescription label.
- Liquids should always be shaken when administering and poured away from the side where the label is. A medicine spoon should be used if the dose is 5ml or 2.5ml, a syringe if the dose is under 2.5ml and a measuring cup if the dose is 10ml or more, placing the cup on level surface at eye level when measuring the dose.
- The MAR should be completed and signed immediately after the medicine has been taken by the student and the total amended accordingly before the next student is seen.
- If a student misses or refuses a dose, this is recorded on MAR, parents or carers are informed, senior Residential staff and On Call staff are informed and advice maybe sought from NHS 111 regarding the impact of a missed dose.
- Where appropriate, students will be encouraged to administer their own dose of topical medication such as drops and creams, whilst being overseen by staff.

Administration of 'As Required' Drugs:

- Staff check letter from prescriber or medical professional detailing under what circumstances and when medication should be administered.
- Staff check the last time 'as required' medication was administered, to ensure adherence to medical guidance.
- Staff complete the MAR for 'as required' medication immediately after the medication has been given.
- Parents to be informed of time and dose taken.

Administration of Controlled Drugs:

- Administration requires **two** members of staff, one person to administer the medication and the other to witness.
- The staff members are both required to sign the Controlled Drugs Register and the staff member who administered signs the MAR.
- Where appropriate, students may provide the second signature for the recording of the administration of their own prescribed Controlled Drugs (the witness), as recorded in the Controlled Drugs record book.

Administration of Inhalers:

- Staff supervise students to use inhalers according to their Individual Health Care Plan. If a student uses two types of inhaler at the same time, the blue inhaler should be given first.
- Students to be encouraged to use their 'spacer' if provided.
- Staff offer a drink of water after inhalers are used.

- Students, who have parental consent, may carry their own salbutamol (blue) inhaler for use as and when needed. Students will inform staff they have used their inhaler, which will be recorded on their MAR, by residential staff.

Receipt of Medication into School

- All medications are handed to meet and greet staff on arrival at school. It is given to residential staff who record the date that the medication was received, the medication strength, form and amount received, updating and signing the MAR.

Administration of Non-Prescription Medication

- Non-prescription medication is used to treat minor ailments. It is purchased over the counter and does not require a prescription.
- An agreed list of non-prescription medication has been drawn up and agreed by Oxted Medical Centre.
- Non-prescription medication should not be taken for more than 48 hours consecutively unless advice is sought and recorded from a medical professional.
- Each student has a non-prescription medication consent form completed and signed by their parents/carers on admission. Consent is sought for paracetamol, ibuprofen, Calpol liquid paracetamol, Strepsils throat lozenges, Actified cough linctus, Karvol capsules, HypaClens Saline eye wash sterile solution and antihistamine. These medications do not need to be brought into school as the school holds a stock of these. A copy of the consent form is kept in the students' medical file.
- Staff must also record the reason why the non-prescription medication is given and the duration of the course, time, dose and quantity received.
- For non-prescription medication, the dosage instructions on the original packaging is followed in accordance with the age of the student, unless otherwise directed by a medical professional.
- If a non-prescription medication is being administered before 12pm parents are phoned to ensure they have not already taken this at home. After 12pm parents are contacted to inform them that their daughter has been given a non-prescription medication
- Staff are aware of the risk of contra-indications when using non-prescription medication with prescribed medicines and check for parental consent for all non-prescription medication.
- Administration is recorded both on the non-prescription medication administration sheet for the student and on the non-prescription medication audit record sheets.
- We do not accept homeopathic remedies in school or in Residential provision and do not administer over the counter medication that could be administered at home.

Administration of Short Course Prescription Medication

- Staff must record the reason why the short course prescription medication is given and the duration of the course, time and dose.
- Administration is recorded on the individual student non-prescription medication / short course prescription MAR.
- Staff will follow the processes used for Administration of Routine Prescribed Medication (including liquid, drops and creams)

Administration of Vitamins and Supplements

- Before sending into school, parents must supply school with the vitamin/supplements name, strength, dose, suitability for age and long term use visible on the packet and reason for taking the vitamin and supplement before they are sent to school.
- Regular vitamins and supplements are recorded on a MAR.

Procedure for student self-medication

- Self-medication is an important step towards independence and should be encouraged; provided student's capabilities have been assessed and found to be adequate and robust. Resources may be used as necessary to support students to self-medicate.
- Students who have been risk assessed by the Head of Residential Provision/Medication Lead/Senior Residential staff members as suitable for self-administration using the school's "Initial self-medicating assessment form" and "Risk assessment for the self-administration of medication" and can undertake self-management of their medication if their parents have completed and signed the school's "Self-medication consent form."
- Prior to commencing self-medication students and parents will receive and sign the "Self-medication guidelines"
- Half-termly monitoring of student's capacity will be undertaken by a member of the Residential Team using the "Half-Termly Termly self-medicating assessment form", alongside the outcome of monitoring of their MAR sheets and stock totals.
- Medication will be stored in a locked box (number coded) inside a drawer in the Health Hub. The student knows their own code to the locked box containing the medication and Residential staff have a list of each code.
- If medication is changed, or difficulties arise, then the student must be reassessed to ascertain capacity to self-medicate.
- Students will not continue to self-medicate if they display poor compliance, a deterioration in their medical or mental health needs that affects their ability to self-medicate, or if the student wishes to discontinue.
- Records for students who self-medicate will be separate from the records of the students who do not self-medicate. The MAR sheet will clearly display that they are undertaking self-medicating and will be signed by the student each time they self-medicate.
- The Head of Residential Provision or Medication Lead will decide which medication is appropriate to self-administer on an individual basis.
- The student should administer medication without supervision and responsibility for self-medication lies with the student unless a different level of help has been agreed from the outset and is noted on the "Risk assessment for self-administration of medication" form.
- If anyone becomes concerned about a student self-medicating, they must report it to the senior member of staff on duty and if required due to the type of medication, to the On-Call member of the SLT immediately.

Procedure for medication to be given whilst on visits (day or residential)

- Visit leader must consult the 'Whole school medical information' document on 'Everyone' for relevant medical information and use to complete the visit risk assessment.
- The visit lead must consult with Head of Residential Provision/Medication Lead to discuss students' medication needs.
- Any Individual Health Care Plans will be in with the emergency medication packs.
- Staff take a locked 'Offsite Trips Pack' with them containing non-prescription medication and follow protocol on the pack if they are required to administer medication.
- Some students take responsibility for carrying their own inhalers as agreed by parents/carers and the Medication Lead/Head of Residential Provision. Visit leaders will need to ensure the students have their inhalers with them prior to departure.
- When a student who is taken offsite has a prescribed emergency inhaler, an emergency inhaler pack should be collected from the Reception Office by the visit leader.
- If a student is prescribed EpiPens, staff should take their prescribed EpiPen and an additional school EpiPen off site with them.

- Staff should take the individual student's emergency medication pack which is always kept in school.
- Staff given the responsibility for the administration of medication on the visit must collect the required medication from the assigned Residential staff prior to departure and to ensure the process of storage and recording of medication is followed.
- Recording for medication given on day visits will be on a temporary MAR as appropriate and transferred to surgery MAR on return.
- Medication given during a residential visit will be recorded on sheets prepared by staff for the duration of the visit. These records are then returned to the Senior member of Residential staff on shift on arrival back at school and transferred to MARs where relevant.
- Controlled drugs required on day or residential visits must be kept in a locked bag at all times on the person designated to administer medication. A recording sheet will be prepared by the Medication Lead in advance and this must be completed by two members of staff, with the same staff signatures written in the Controlled Drugs book on return from the visit.
- Controlled drugs are signed in and out by a Senior Residential staff member and the person designated to administer medication on the visit. Medication strips will remain whole, which may mean more medication is taken than is required on the visit.

Procedures for medication errors

Medication errors may be due to administering:

- the wrong medication
- medication to the wrong student
- medication at the wrong time
- medication via the wrong route
- wrong dose of medication
- out of date medication

Errors must be reported immediately to the most senior member of residential staff on shift and the on-call member of SLT. The on-call member of SLT will decide whether further advice is required from NHS 111 or the nominated Pharmacist and the advised action taken. Parents/carers will be informed. Errors must be recorded on the MAR.

Protocol for the use of Emergency Medication

Some students may require emergency medication for the management of their medical conditions. It is a parent's responsibility to inform the Medication Lead of any allergies or medical conditions that require the use of emergency medication.

Students with parental consent may carry emergency medication, such as inhalers and adrenaline auto-injectors. We check these half-termly to ensure the student is carrying their emergency medication and it is in date.

Each student has a photo ID pack that includes their medication and their Individual Health Care Plan. A copy of their Individual Health Care Plan is also stored in their surgery file. Each emergency medication has a specific recording sheet, where any administration is recorded.

Emergency medication to be shared between home and school will be collected by staff on taxi duty from the labelled cupboard located inside the school reception office and handed to students as they leave school.

The Medication Lead will oversee the supply, storage and disposal of the emergency medication.

Emergency Salbutamol Inhalers

Limpsfield Grange School has a supply of three Ventolin Evohaler 100microgram Salbutamol sulphate inhalers and six Aero Chamber Plus spacers for use in emergencies. These were obtained from Boots the

Chemist in Oxted, accompanied by a letter from the Headteacher. The emergency salbutamol inhaler should only be used by students who have been diagnosed with asthma, and/or prescribed a reliever inhaler. Parental consent will be sought for the use of the emergency inhaler.

Written consent is stored in the student's medical file and a register of those with written consent is kept in the School Emergency Inhaler packs. The inhalers can be used if a student's prescribed inhaler is not available, or is no longer working, or if instructed to do so by a medical professional. One emergency inhaler will be taken offsite when there is a student with asthma/ a prescribed inhaler. Students who meet the criteria are listed with photo ID on their Individual Health Care Plans which are stored with the emergency inhalers.

The emergency inhaler packs (3 identical packs) containing an inhaler, two spacers, record of use, Individual Health Care Plans and the manufacturer's details are stored in the Emergency Medication cupboard located in the Reception Office and in the Health Hub, for both ease of access and safe storage. They are checked monthly to ensure they are in working order, have a sufficient number of doses available and are within date. To avoid risk of cross-contamination, the Aero Chamber Plus spacer should only be used by one student. After this it should be disposed of and a new spacer obtained from Boots the Chemist in Oxted. Once expired, the inhalers will be returned to the chemist – the name, date and quantity returned will be recorded. Unused plastic spacers should be replaced annually, twelve months from the date of purchase.

The Medication Lead and Head of Residential Provision will ensure the protocol for Emergency Medication is followed.

Emergency adrenaline auto-injectors

Limpsfield Grange School has at least 2 x 0.3mg EpiPen Auto-Injectors for use in emergencies, under the guidance from the Department of Health, 2017. They were obtained from Boots the Chemist in Oxted, with a letter from the Headteacher.

Written consent is stored in the student medical files and a register of those with written consent is kept in the School Emergency AAI packs. These adrenaline auto-injector (AAI) can be used when a student's own AAI, is broken, has misfired or been wrongly administered, or when directed to do so by a medical professional. The auto-injectors will be stored in a pack of 1 in the Emergency Medication cupboard. When there are more than 2 AAI's in school, an additional pack is stored in the Health Hub.

The emergency auto-injectors will be stored with packs detailing:

- Who has been diagnosed with anaphylaxis and requires their own prescribed injector (type and dose)
- Who have written parental consent for use of the emergency auto-injector
- Or when directed by a medical professional

Once expired, manufacturers' guidelines recommend that AAI are disposed at a pharmacist or in a sharps bin. Residential staff with assigned medication responsibilities oversee the supply, storage and disposal of the emergency AAI. They are checked monthly to ensure they are within date.

Parent and Carer Responsibilities

Students are registered with their home GP and medication is obtained by parents/carers. Medicines should only be administered at school when it would be detrimental to a student's health or school attendance not to do so. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours and parents/carers should make arrangements to administer medicines at home. However, when it is necessary for a student to take medication during the school day or when a

student is resident, parents should follow the procedures detailed in the “Student Health and Medication Administration Policy – Parent/Carer Guidance”. (Appendix 1)

Managing students who have medical conditions

- On admission to the school, information is obtained from parents or carers regarding individual health care needs and medication, together with all necessary consents for non-prescription medication, regular medication and emergency medical treatment. We also ask for information on allergies and intolerances. Where appropriate an Individual Health Care Plan will be put in place together with if required, a risk assessment.
- Existing medical conditions of students are summarised on the whole school medical information sheets – stored in “Everyone” under Whole School Medical Information. The Medication Lead is responsible for updating this document as and when we receive information that students needs have changed.
- All students have individual medical files, which include what medication is prescribed, and consent forms from parents for staff to administer medication in school.

Managing students who are unwell at school

- Students who complain of feeling unwell will be assessed and have their temperature taken and recorded by a member of staff.
- If it is appropriate to administer a non-prescription medication, Residential staff will ascertain whether medication has already been taken at home/will inform parents that a non-prescription medication has been given by calling parents or carers.
- The parent or carer will be informed if there is a need for the student to go home or if there is a need for the student to be seen by a medical practitioner.
- If the student is deemed ill enough to no longer attend school, then the parent or carer will be asked to collect them as soon as possible until which time the student will be kept in a quiet place away from others

Administration of first aid

- First aid supplies are kept in classrooms and other locations.
- Protective gloves must be worn as appropriate when administering first aid e.g. for all open wounds – follow good hygiene practice at all times.
- Soiled wipes, dressings etc. should be put into yellow hazard waste bags and disposed of in the bin.
- A record of the first aid administered as a result of an accident should be recorded on the online accident reporting form, two copies printed, signed and returned to Emma Phillips, Deputy Head. <https://surreycc.oshens.com/login/default.aspx?ClassicSession=clear&CountrySet=true>
- Parents or carers are informed or asked to collect the student depending upon the severity of the injury and how it was received – if staff are unsure they should consult with Emma Phillips to ascertain if this is necessary.
- For injuries that need medical attention parents will be contacted and requested to take their child to the doctors/minor injury clinic/hospital.
- If a student needs to go to hospital, a member of staff may accompany and arrangements made to meet a parent or carer at the hospital.
- Students’ individual medical files are be taken when accompanying a student to see a medical practitioner as they will need to be aware of the medical history.

In all situations where there has been a contact with a student’s head, however minor it may have been perceived, the Deputy Headteacher and parents are always informed of what made contact with the head and the level of force with which the contact was sustained to enable parents to make an informed decision about any medical advice they may need to seek for their daughter.

If the parent decides the child can remain in school, then an email is sent by a member of the residential team, to all staff, reminding them of the following:

If any of the following are observed or reported over the course of the day, please contact the residential team immediately:

- difficulty staying awake, or feeling sleepy
- clear fluid leaking from the nose or ears
- bleeding from one or both ears and/or bruising behind one or both ears
- difficulty speaking, such as slurred speech and/or difficulty understanding what people say
- balance problems or difficulty walking
- loss of power or sensation in part of the body, such as weakness or loss of feeling in an arm or leg
- vision problems, such as significantly blurred or double vision
- having a seizure or fit
- memory loss, such as not being able to remember what happened before or after the injury
- vomiting
- headache
- irritability or unusual behaviour

Fire Alarm

In the event of a fire alarm, a school emergency salbutamol inhaler and adrenaline auto-injector will be taken to the Assembly Point by the person responsible, as detailed below -

- Between 9am and 3.30pm Monday to Thursday and 9am - 2.30pm on Friday – School Receptionist
- Between 3.30pm and 9am – the Senior Residential staff member on shift

Staff training

Residential staff and Teaching Assistants are required to complete Opus Medicines Awareness for Schools training, as part of their induction. This must be completed before they are able to undertake competency training to administer medication, which takes place with either the Head, Assistant Head of Residential Provision, Medication Lead or senior Residential staff with medication responsibilities. Other school staff may also undertake Opus Medicines Awareness for Schools training, which enables them to administer medication on trips and to counter sign medication administered. Trained staff attend a refresher course biannually. Residential staff are observed administering medication annually to ensure that they adhere to school protocols and practices.

Staff who have undertaken annual Allergy and Anaphylaxis, Epilepsy and Asthma training can administer emergency medication as and when required. New staff in relevant roles will complete this training as part of their induction. Untrained staff may administer this medication under the direction of the emergency services/medical professional.

Monitoring

Monitoring will take place through annual observations of all residential staff that undertake surgery duties. Additionally, the Head of Residential Provision or the Medication Lead will carry out a 6 monthly medication audit.

Related policies and documents

- Behaviour policy
- Child Protection & Safeguarding policy
- Children with Health Needs Who Cannot Attend School policy
- Complaints Procedure
- Drugs policy
- Equality & Diversity policy
- Guidance on the use of Adrenaline Auto-injectors in Schools
- Guidance on the use of Salbutamol Inhaler in Schools
- Health and Safety policy
- National Minimum Standards for Residential Special Schools
- SEN policy
- Staff Behaviour policy

Review

The Governing Body of Limpsfield Grange School adopted this policy on:

It will be reviewed on:

Signed

Dated

Confirmation of compliance 2024/2025

I hereby confirm that I have read, understood and agree to comply with the Limpsfield Grange School Student Health Medication Administration Policy.

Name	
Signed	
Post Held	
Date	

Once completed, signed and dated, please return this form to Medication Lead, Miranda Bolton

Appendix 1

Student Health and Medication Administration Policy – Parent/Carer Guidance	
<p>Prescription Medication <i>- e.g. medication prescribed to your child for routine use</i> <i>- medication for use over a short period of time e.g an antibiotic</i></p>	<p>Parents must inform Miranda Bolton of their intention to send in medication by email including:</p> <ul style="list-style-type: none"> - The purpose and dosage instructions - Start and end date of course (if short course) - Details of any doses administered at home - Confirmation your daughter has had the medication before i.e. the first dose of the course is not at school • Emails should be addressed to Miranda Bolton mrs.bolton@limpsfield-grange.surrey.sch.uk and copied to deputy@limpsfield-grange.surrey.sch.uk • All medication must be in its original packaging, with the prescription label attached to the packet/bottle, the name and dose clearly visible. • Any medication that states ‘as required’ requires a written letter from prescriber or medical professional detailing under what circumstances and when medication should be administered. • No containers with handwritten amendments on prescription labels will be accepted unless accompanied by written confirmation from the prescriber. • Written authorisation by the prescriber is required for any dose change different to that on the prescription label to be administered in school. • It is the Parents responsibility to ensure their daughter’s prescribed medication is in school.
<p>Non Prescribed Medication <i>-e.g. over the counter tablets, capsules, antihistamines, creams, vitamins</i></p>	<p>Parents must inform Miranda Bolton of their intention to send in medication by email including:</p> <ul style="list-style-type: none"> - The purpose and dosage instructions - Start and end date of course (if short course) - Details of any doses administered at home - Confirmation your daughter has had the medication before i.e. the first dose of the course is not at school - Confirmation that there are no contraindications with other prescribed medication - Any relevant documents from medical professionals • Emails should be addressed to Miranda Bolton mrs.bolton@limpsfield-grange.surrey.sch.uk and copied to deputy@limpsfield-grange.surrey.sch.uk • All medication must be in its original packaging with the dose clearly visible.
<p>Emergency Medication e.g Asthma inhalers and Auto Injectors/Epi Pens</p>	<ul style="list-style-type: none"> • Parents are required to provide the school with emergency medication such as inhalers and Epi pens as required by their daughter’s medical needs. • Parents’ consent is required so students can carry their own salbutamol (blue) inhaler and / or AAI for use as and when needed. • Parents are responsible for completing the Individual Health Care Plan for Asthma, Anaphylaxis or Epilepsy, supplied by the school and engaging with the school in an annual review or sooner if anything changes. • Parents are responsible for ensuring that the medication they supply stays within date.
<p>Additional Information and Guidance</p>	<ul style="list-style-type: none"> • We do not give missed doses. E.g. if your child is meant to take a routine or short course medication at home in the morning and this is missed, we cannot administer it.

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| | <ul style="list-style-type: none">• All students have a right to decline their medication, and although we can educate we cannot force it to be taken. We will inform you should this happen.• All medication is administered by trained staff, in accordance with our Student Health and Medication Administration Policy.• We will keep medication that you send unless you have requested that it is returned home.• Parents must ensure that there is an adequate supply of medication available at all times so that prescribed doses can be administered.• If a student does not have their prescribed medication at school, Parents will be asked to bring medication to school immediately or to collect their daughter until medication is available.• Parents must inform the Medication Lead, Miranda Bolton, of any changes to consent to administer non-prescription medication.• It is parent's responsibility to inform the Medication Lead, Miranda Bolton, of any medication changes, changes to allergies or any other medical and health needs. |
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