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**1. Introduction**

- 1.1 The procedure applies to all pupils at Windlesham House School (“the School”) including those within EYFS and those participating in after school activities. It is designed to provide guidance to staff and information to the parents, carers or guardians (referred to in this policy as "parents")
- 1.2 Many pupils will need to take medication at some time during their school life.
- 1.3 It is the responsibility of parents:

- To ensure their child is well enough to attend school
- To provide full details of any medical condition affecting their child and any regular medication required by the child
- To keep the school informed of any changes to their child's health or medication

## **2. Information on pupils**

- 2.1 Parents are asked to provide written consent for the administration of prescription and over the counter medications by school staff to their child, before their admission to the School. No child will be given medicines without their parent's written consent.
- 2.2 The school takes pupil privacy and confidentiality very seriously. The Head Nurse will be responsible for sharing medical information to other staff on a need-to-know basis.
- 2.3 All staff will be made aware of which pupils have access to asthma inhalers, Adrenaline Auto Injectors (AAI), injections, or similar medical equipment and for whom individual healthcare plans have been created. This is important in order that all staff are prepared to deal with medical emergencies relating to these conditions no matter where in school the child is.

## **3. Medical Provision in School**

- 3.1 The School has an onsite Medical Centre which has a direct dial (01903 874723) and email [medicent@windlesham.com](mailto:medicent@windlesham.com) . The Medical centre is staffed by a qualified nurse during the following hours in term time:  
Monday to Friday 7.30am to 7pm  
Saturday 7.30am to 4.30pm  
Sunday 8am to 11am and 4pm to 7pm
- 3.2 Outside of these times, pupils' medical needs are addressed by staff trained in first aid and the administration of medication.
- 3.3 The medical centre has six beds in three rooms so boys and girls can be accommodated in separate rooms. The medical centre has separate shower and toilet facilities. Including toilet and washing. Parents will be notified if a pupil is admitted to the medical centre.
- 3.4 Overnight the boarders are cared for in sick bays – one in the boys boarding house and one in the girls boarding house. The sick bays have separate toilet and washing facilities and appropriate cleaning regimes to mitigate the spread of infections.

## **4. Medical Registration for Boarding Pupils**

- 4.1 All boarding pupils will be registered as NHS patients with Steyning Health Centre, Tanya Road Lane, Steyning, West Sussex, BN44 3RJ. Parents of boarding pupils are asked to complete the Family Doctor Services Registration Form on behalf of their child/children, to enable the school to complete the registration process.
- 4.2 Dr Alan Bennett, a partner in the Steyning Health Centre practice holds a surgery at the school on Thursdays (8:30am - 10:30am). At other times, children needing an urgent

appointment will be taken to Steyning Health Centre. When a child has seen the doctor, the nurse will contact the parents as soon as possible, by telephone or email.

- 4.3 Private referrals are made only with parents' consent and insurance details.

## **5. Medical Provision for Day Pupils**

- 5.1 As far as possible, medication should be taken at home and should only be taken in school when absolutely essential. However, some pupils may require regular medication on a long-term basis to treat medical conditions which, if not managed correctly, could limit their access to education.
- 5.2 If a pupil falls ill while in a school lesson, they should immediately tell the member of staff in charge, who will assess the situation and decide the best course of action and whether the pupil should go to the Medical Centre. Outside medical centre opening hours, pupils who feel ill may be required to go to the boarding sick bay.
- 5.3 The nurse will administer the appropriate first aid and parents will be called to pick up their child if they are too unwell to complete the rest of the day. If a parent is unable to get to the school to pick up the child, the child will remain in the Medical Centre until they are able to get there at the end of the school day or arrange for another family member or carer to collect them.

## **6. Controlled Drugs**

The School will keep controlled drugs in a locked non-portable container inside a locked room (School Nurse Medical Room) and only named staff will have access. A record book is held for the administration of controlled drugs. The balance of remaining drugs is checked at each administration and monthly.

## **7. Prescribed Medicines**

- 7.1 All prescribed medicines brought to school, must be prescribed by a doctor and should be handed to the School Nurse in the Medical Centre (in their original container with the original dispensing label). The School nurse will make a case-by-case assessment before medication can be administered in School.
- 7.2 If long-term medication is prescribed by a pupil, there should be written documentation outlining the indication for the drug and who is responsible for monitoring the medication or condition.
- 7.3 The school is only able to accept prescription medications that have been prescribed by a registered medical practitioner or other suitably qualified healthcare professional. The prescription must have been dispensed by a pharmacy or dispensing GP surgery and must only be issued to the pupil for whom it has been prescribed.
- 7.4 Parents of pupils from abroad are alerted to the fact that some medications prescribed overseas might not be licenced for use in the UK. The school doctor will have to make an individual assessment and may offer UK-licenced medicines to the pupil where appropriate. Further information is available in section 8 of this procedure 'Administration of overseas medication'.

## **8. Non Prescribed Medications**

- 8.1 Over-the-counter medicines are those which can be bought from pharmacies, supermarkets and other retail outlets without the supervision of a pharmacist. Pupils are not permitted to bring over-the-counter medications in school.
- 8.2 Over-the-counter medications which may be required by pupils are kept securely in a locked cupboard in the Medical Centre. Some over-the-counter medications are also stored in locked medical cupboards in the sick bays of boys and girls boarding houses.
- 8.3 A list of non-prescribed medications held by the school is reviewed and approved annually by the school doctor. This is available at Annex 1.

## **9. Vitamins, Supplements and Homeopathic Medication**

- 9.1 We will not administer vitamins, supplements or homeopathic medication unless they are prescribed in the UK by a doctor/ nutritionist/ other reputable medical person to say why they are needed and the packaging is provided in English.

## **10. Administration of Prescribed and Over-the counter Medication**

- 10.1 Medication is given by a School nurse. In the absence of the School Nurse, other members of staff can administer medication to pupils if they have been specifically authorised and trained to do so.
- 10.2 Before administering the medicine, the trained staff member is required to check:
- The child's name
  - The medical consent provided for the child (as indicated on isams)
  - Name of medication and that it is in its original container
  - Prescribed dose and method of administration
  - Time/ frequency of administration
  - Expiry date
  - Written instructions provided by the prescriber on the label or container.
  - Any side effects
- 10.3 If in doubt about any procedure, the member of staff should not administer the medicines but check with the parents or School Nurse before taking any further action.
- 10.4 If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent, if appropriate, or the School Nurse.
- 10.5 Where over-the-counter medication is administered, the school must ensure that the parents are informed as soon as practicable and preferably on the same day.

## **11. Administration of overseas medication**

- 11.1 Please do inform us of all medication that your child has, so that we can work with you in advance to make sure we find the right solution.

- 11.2 The school doctor provides medical care for all full-time boarders and for most medication that your child requires, a UK equivalent medication will be prescribed by the doctor. However, UK medical guidelines and UK licensing laws for medication may be different to your home country.
- 11.3 Medication ideally needs to be prescribed by a consultant (psychiatrist or paediatrician) in the UK under a shared agreement with a GP. The consultant carries overall responsibility for monitoring the health of the child whilst on the medication, they should review the child 6 monthly or at least annually. The consultant in a shared care agreement also asks the school GP to monitor the child's health 6 monthly, before the GP issues the medication on behalf of the consultant. Where this is not possible overseas medication can be administered in the following circumstances:
- The medication is licenced for use in the UK for the purpose it is being used
  - The medicine has to have a pharmacy label written in English with the name of the medicine. The child's name and the dosage details.
  - A consultant letter in English is provided to the school detailing the diagnosis, the medication and the dosage.
  - The school is provided with a consultants letter every 6 months detailing any dose change and demonstrating that they have reviewed the child properly with height/weight/ blood pressure recordings
- 11.4 Short-stay boarders who take medication will need the medication:
- in the original packaging, labelled in English with their name, the name of the medication and the dose,
  - a letter in English from the medical doctor who has prescribed the medication indicating the medical condition, the medication and the dose.
- 11.5 We cannot administer homeopathic medication and supplements prescribed overseas. If there is a genuine need for a supplement and it is not contra indicated, then we can source this from the UK and charge it to parents' bill.

## **12. Recording and Monitoring of Records**

- 12.1 A clear record is kept in the Medical Centre of any medicines brought into the School for each pupil. The Medicine Administration Record (MAR) should include:
- Name of pupil
  - Date of receipt of drug
  - Name, strength and dosage of the drug
  - Quantity of the drug
  - Signature of the member of staff receiving the drug
- 12.2 Details of any prescribed or over-the counter medication administered to a child is recorded on isams and kept for at least 8 years after the pupil has left the school. The record should include:
- Name of the child
  - Form Name
  - Name and strength of medicine
  - Prescribed dose
  - Date and time medicine administered
  - Dose given
  - Name of staff administering

### **13. Drug Administration Errors**

If an error in administering medication is made, the pupil's parents should be notified immediately, and action must be taken to prevent any potential harm to the child. The Head should be informed and relevant documentation completed, e.g. Accident/Incident report sent to the Compliance Officer and Bursar.

### **14. Emergency Medications**

14.1 If a child has a known allergy that requires prescribed emergency medications, an individualised care plan will be made. An emergency pack will be created by the School Nurse and be kept in a school red bag which is accessible from the medical centre at all times to staff and pupils.

14.2 The school holds emergency salbutamol inhalers securely in the medical centre and boys' dorms sick bay which can be used in an emergency by trained staff members. The safe storage and maintenance of emergency asthma inhalers is designated to the lead nurse.

14.3 The school holds emergency auto-adrenaline injectors securely in the medical centre, boys' dorms sick bay and dining hall servery. These are for emergency use in pupils, staff and visitors who are at risk of anaphylaxis, but whose own device is not available or not working. Please see the school allergy and anaphylaxis procedure for further information.

### **15. Educational Visits and Away Sports Fixtures**

15.1 Staff supervising off site visits are required to meet with the School Nurse to review the medical requirements of the children they will be taking off site.

15.2 Medication required for educational visits and off site sports fixtures will be signed in and out of the medical centre by the trip leader who is responsible for securely holding the medication throughout the visit and administering it when appropriate.

15.3 The administration of any medication on a school visit or away sports fixture should be recorded in line with section 12 of this procedure (Recording and Monitoring of Records).

### **16. Travel Immunisations**

These can be arranged by writing to the Lead Nurse. Vaccinations are either administered at school or may require travel to a local clinic (which will incur a taxi charge to parents). There is a charge for some travel vaccines.

### **17. Refusing Medicines**

If a child refuses to take medicine, staff should not force them to do so but should note this in their records. Parents should be informed on the same day.

## **18. Parental Responsibilities**

- 18.1 Parents should inform the school about any conditions or illness that their child suffers from that requires them to take medication whilst at school (including school trips/ educational visits) and provide written consent for the school to administer the medication.
- 18.2 Parents should inform the school of any changes in their child's needs, condition and ensure that any medication required by the child is passed to an appropriate member of staff.

## **19. Staff Medication**

Staff who bring prescribed or over-the-counter medications to school, or on school trips / educational visits, for personal use, must ensure that their medicines are securely stored.

## **20. Disposal of Medicines**

Any unused medications will be safely disposed of by the School Medical Centre who will keep a record of the date of return, the name of the pupil and the name, strength and quantity of the medication.

### Appendix 1- Protocol for the Administration of Non Prescription Medication

(\* indicates medication held securely in the boarding houses as well as the medical centre)

Medicine	Indication	Dose	Max dose in 24 hour period	Contra-indications and special precautions	Can be given by	Max duration of treatment before referral to GP
<b>Adrenaline</b>	Suspected anaphylactic reaction	Named Epipen or Emergency school Jext pen	15kg-30kg 6 years old or less 150mcg  30kg or more or older than six years 300mcg		Nurse Opus trained staff	To call 999 once adrenaline has been given.
<b>Bite and Sting Relief Cream Anthisan</b>	Mild pain, itching and swelling caused by insect stings, bites and nettles	Smooth sparingly onto affected area	2-3 times	Skin must be intact Allergy to antihistamines Eczema	Nurse Opus trained staff	2-3 days
<b>Bonjela</b>	Mild oral lesions – ulcers	Apply small amount to affected area	Up to 6 applications	Ensure Pediatric preparation without aspirin	Nurse Opus trained staff	5 days
<b>Cetirizine Hydrochloride</b>	Allergies such as hay fever. Mild allergic reaction	10mg daily	10mg (one tablet)		Nurse Opus trained staff	2-3 days
<b>Cinnarizine</b>	Travel Sickness	15mg 2 hours before travel, then 7.5mg every 8 hours during the journey if needed	37.5 mg	Hypotension	Nurse Opus trained staff	N/A
<b>Chlorphenamine (Piriton)*</b>	Allergies	2-6 years-2.5ml spoonful every 4-6 hours 6-12 years-5ml spoonful every 4-6 hours	2-6 years- 6 spoonfuls (15ml) 6-12 years 6 spoonfuls (30ml)		Nurse Opus trained staff	5 days
<b>Deep Heat Rub</b>	Stiff Muscles	Apply to affected area with gentle massage		Skin must be intact	Nurse	2-3 days



Medicine	Indication	Dose	Max dose in 24 hour period	Contra-indications and special precautions	Can be given by	Max duration of treatment before referral to GP
				Avoid contact with eyes and mucous membranes	Opus trained staff	
<b>Ibuprofen*</b>	Mild to Moderate pain – musculoskeletal, dental, earache	3-7years 100mg (5mls) 6 hourly 8-12 years 200mg (10mls or one tablet) 6 hourly	400mg  80mg	<b>Do not give to asthmatics</b>  May cause gastrointestinal irritation-should be taken after food  Do not combine with paracetamol unless medically advised by school nurse or 111	Nurse Opus trained staff	2-3 days
<b>Magnesium Sulphate Paste</b>	Boils/localized infection/foreign body	Apply to affected area and cover	N/A	N/A	Nurse Opus trained staff	2-3 days
<b>Mebendazole-Ovex</b>	Threadworms	100mg as a single dose. Second dose may be needed after 2 weeks if reinfection	N/A	Pregnancy	Nurse with parental permission	2 weeks
<b>Olbas Oil*</b>	Congestion due to a common cold	2-3 drops on tissue		Avoid contact with eyes and mucous membranes	Nurse Opus trained staff	2-3 days
<b>Olive Oil</b>	To soften ear wax	2-3 drops twice daily up to 5 days			Nurse	5 days
<b>Paracetamol*</b>	Mild to moderate pain. Relief of viral illness symptoms.	5-6 years 240mg 6-9 years 360mg 9-12years	Max of 4 doses in 24 hours	Ensure no other paracetamol containing medicine has been given	Nurse Opus trained staff	2-3 days

<b>Medicine</b>	<b>Indication</b>	<b>Dose</b>	<b>Max dose in 24 hour period</b>	<b>Contra-indications and special precautions</b>	<b>Can be given by</b>	<b>Max duration of treatment before referral to GP</b>
	Common cold Pyrexia	500mg Over 12 years 1 gram every 4-6 hours		Liver or Kidney impairment		
<b>Petroleum jelly (vaseline)</b>	Dry lips	Apply sparingly	As necessary		Nurse Opus trained staff	n/a
<b>0.9% Saline Pods</b>	Superficial wounds Eye bath	Topically			Nurse Opus trained staff	2 days
<b>Sodium Cromoglicate</b>	Itchy eyes- hayfever	1 drop up to 4 times daily	Four times		Nurse	
<b>Pediatric Simple Linctus*</b>	Cough	1-5 years 5ml 6-12 years 10ml	Four times		Nurse Opus trained staff	1 week
<b>Salbutamol</b>	Wheezy episode  Emergency Asthma Attack	As required up to 4 times a day.  4-6 puffs repeated every 10-20 minutes. Will require hospital admission.		Hyperthyroidism, cardiovascular disease, arrhythmias and hypertension. Pregnancy and breast feeding.	Nurse Opus trained staff	If needing more than 3 times in one week.  Immediate referral
<b>Simple throat lozenges</b>	Sore throat	As required		Encourage fluids	Nurse Opus trained staff	3-4 days

## Appendix 2 – Guidance for Boarding Houses

### Contents of sick bay boarding cupboards

**Paracetamol (Calpol)**- For aches, pains and high temperature.

**Ibuprofen (Nurofen)**- For inflammation, sprains, toothache broken bones.

**Chlorphenamine (Piriton)**- For hay fever, insect bites and allergic reactions.

**Simple linctus**- For coughs

**Olbas oil**- For blocked noses

### Instructions for Boarding Staff

- Only staff trained in the administration of medicines (OPUS trained) can give medicines to pupils.
- Before administering, check pupil name against consent list (see sick bay cupboard) and isams for times/frequency of any medications already given that day
- Please use paracetamol as a first option for pain relief or fever.
- Please use ibuprofen for musculoskeletal injury- it is likely the child will have already been seen by the medical team that day who will advise you of how to care for them overnight.
- Do not combine both paracetamol and ibuprofen for pyrexia (high temperature). If the temperature does not come down with paracetamol please obtain further advice from 111, or 999 if it is an emergency and the child is seriously unwell.
- Do not give ibuprofen to-
  - a child who has asthma- can cause wheezing
  - a child who you suspect to have chicken pox- increased risk of skin and soft tissue complications
  - a child who has diarrhoea and vomiting- can cause kidney issues
- Record what you have administered on isams.

**Appendix 3 – Treatment Administration Record (to be completed as record of medication administered. Submit details direct to isams)**

<b>Treatment Administration Record</b> (Before administering, check pupil name against consent list – see isams or boarding sick bay cupboard/medical centre medication cupboard)						
<b>Date</b>	<b>Time: 00.00</b>	<b>Full Name of Pupil</b>	<b>Age</b>	<b>Illness/Injury</b>	<b>Medication Administered and Dose</b>	<b>By (Initials)</b>

**Appendix 4 – MAR Chart – to be completed when administering a Controlled Drug**

**Medication Administration Record (MAR)**

Full Name:

Allergies:

<b>Drug Name Dosage and Route</b>	<b>Date Time</b>																						
<b>Drug Name Dosage and Route</b>	<b>Date Time</b>																						
<b>Drug Name Dosage and Route</b>	<b>Date Time</b>																						
<b>Drug Name Dosage and Route</b>	<b>Date Time</b>																						

Notes/ Comments: R: Refused. O: Out. H: Home. SO: School Outing. V: Vomiting. S: Self-administered

**Appendix 5 – Submission of medication to school by parent**

Submission of medication to school by parent (details to be entered into isams) <b>(MEDICATION MUST BE SUPPLIED IN ORIGINAL PACKAGING WITH LABEL)</b>								
Full Name of Pupil	Date	Time 00:00	Time last dose given	Medication name, strength and quantity	Time(s) dose to be given	Name of parent submitting medication	Name of staff member medication handed to	Parent/Guardian to sign

**Appendix 6 – Handover of medication from school to parent**

Handover of medication from school to parent (details to be entered into isams)								
Full Name of Pupil	Date	Time 00:00	Time last dose given	Medication name, strength and quantity	Time(s) dose to be given	Name of staff member	Name of parent receiving medication	Parent/Guardian to sign