

MEDICATION POLICY

This document concerns the administering of medication to children at Thomas's London Day Schools.

1. AIMS

Following Government guidelines the following points should be noted:

- Prescribed medication can only be administered by staff if the parent has filled out and signed a Medication form (see attached), this needs to be done daily and seen by the form teacher and office staff.
- Non-prescribed medication should not be administered by staff. However, under certain circumstances, such as when pupils are away on residential trips, it may be appropriate for the Head to seek written permission from the parents to administer a mild analgesic, such as paracetamol to relieve pain, should this be necessary.
- No creams or lotions should be administered e.g. Arnica cream, Witchhazel. All cuts and bruises should be cleaned with water. [The use of antiseptics is not necessary for the treatment of wounds]. Individually wrapped sterile adhesive dressings are safe to use **provided** that they are **not** used on anyone who may suffer an allergic reaction to certain types of plaster. Before plasters are used, first aiders should establish whether the person requiring treatment has such an allergy. If the person has such an allergy, an alternative dressing ie. A non-allergic plaster or dressing should be used.
- All EpiPens/ventilators etc. must be kept in a safe place accompanied by a letter from the parents stating exactly when and how they are to be administered
- All medicines to be kept in the office in the first aid cupboard and to be administered by the office staff. However, it is the responsibility of the form teacher to ensure that the child "appears" in the office at the correct time for administration of the medication.

**THOMAS'S LONDON DAY SCHOOLS
REQUEST FOR THE ADMINISTRATION OF MEDICINE IN SCHOOL**

To be completed by the parents/guardian of any child to whom drugs may be administered under the supervision of school staff

Please complete in block letters

Child's name: _____	Form: _____
Doctor's Name: _____	Doctor's Tel No: _____

The Doctor has prescribed the following:

Name of Drug/Medicine to be given:	When to be taken, before/after food:	How much: one 5ml/one tablet:	Name of Administering Staff Member	Signature of Administering Staff Member	Date and Time Administered	Name and Signature of Witnessing Staff Member
1.						
2.						
3.						

My child may/may not carry the drug on their person if the school agrees.

(Delete accordingly)

NB: Parents are responsible for keeping medicines up-to-date, for notifying school of any changes and removal of out of date medicines and return to dispensing pharmacy.

Please record below any special/emergency procedures to be followed or side effects known.

I request that the treatment be given in accordance with the above/attached information by a responsible member of the school staff who has/has not received any necessary training. I understand that it may be necessary for this treatment to be carried out during education visits and other out of school activities, as well as on the school premises. I will inform you immediately of any changes in the above.

I undertake to supply the school with the drugs and medicines in properly labelled containers, including a 5ml medicine spoon or oral syringe for liquid medicines.

I accept that whilst my child is in the care of the School, the School staff stand in the position of the parent and that the School staff may, therefore, need to arrange any medical aid considered necessary in an emergency, but I will be told of any such action as soon as possible.

I understand that whilst school staff will use their best endeavours to carry out these arrangements, no legal liability can be accepted by the School staff or Principals in the event of any failure to do so, or of any adverse reaction by my child to the administration of the drug.

Signed: _____ **(Parent/Guardian) Date:** _____

Note for special/emergency circumstances: (please describe precisely the circumstances and the nature and dosage of the prescribed medication or treatment).

ANAPHYLAXIS

Anaphylaxis (nut allergy) is a condition, which appears to be on the increase. It is difficult to diagnose in advance and is often discovered only when a child eats a nut for the first time. For this reason, we ask all parents to observe strictly the following rule:-

NO NUTS OR NUT PRODUCTS OF ANY SORT ARE TO BE BROUGHT INTO THE SCHOOL

Peanut butter is particularly hazardous, as even contact with a person who has eaten peanut butter can provoke a reaction. Please be vigilant about any food coming into school; snacks, lunch, birthday cake, cake sales etc.

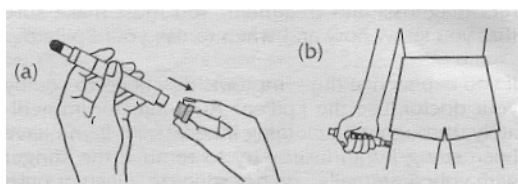
PROCEDURE IN THE EVENT OF AN ANAPHYLACTIC REACTION

1. Ask someone to ask the office staff to:
2. Dial 999 and call an ambulance
3. Give the pupil's name and inform them that he/she is suffering an Anaphylactic Reaction
4. Call the pupil's parents and inform them
5. While awaiting the medical assistance, staff will administer the EpiPen
6. A second dosage will be given after ten minutes if the ambulance has not arrived and his/her condition has not improved

THE EPIPEN TREATMENT - INJECTABLE ADRENALINE

Directions for use are:

1. Pull the end off i.e. the grey cap
2. Hold onto the muscle at the top of the leg i.e. thigh
3. Aim the pen. It must be placed **OUTSIDE THE THIGH AND LEFT**. See description



4. Press down on the top of the pen: this will click which in turn will push the needle into the leg
5. Count slowly to ten: this allows the adrenaline to be absorbed.
6. Withdraw needle i.e. pull the EpiPen away.
7. Look for a positive response. **YOU CAN INJECT A SECOND DOSAGE AFTER TEN MINUTES IF REQUIRED.**
8. Confirm that an ambulance has been called.

This policy will be reviewed annually.			
Reviewed: March 2010	By:	Jill Kelham Vice Principal	No changes
Reviewed: January 2009	By:	Jill Kelham Vice Principal	Changes made
Next Review: December 2010	By:	Jill Kelham Vice Principal	