

Health and Safety Guidelines for Heads of Establishments

Arrangements for Medication, Health Care Programmes and Clinical Tests:
Health and Safety Procedures 4
(May 2022)

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1 Introduction

- 1.1 This document, the contents of which should be applied in their entirety, has been produced to help manage medication in schools and to put in place effective management systems to support individual pupils with health needs. It should be read in conjunction with The Handbook of Procedures for the Management of Pupils with Health Care Needs in Educational Establishments Handbook (The Handbook).
- 1.2 Four major factors have been considered in the production of these guidelines:
- a) An emphasis on minimising the impact of health care/additional support needs on a child's life and opportunities to participate as fully as possible in school life.
 - b) Current thinking places considerable importance on pupils being able to control their own medication and care whenever possible.
 - c) The Authority's obligations under The Children (Scotland) Act 1995 with respect to the welfare of children in need.
 - d) The Authority's obligations under The Education (Additional Support for Learning) (Scotland) Act 2004 (as amended by The Education (Additional Support for Learning (Scotland) Act 2009).
- 1.3 A positive response by the school to a pupil's health care needs will not only benefit the pupil directly but can positively influence the attitude and understanding of the whole class and school.
- 1.4 It is important that responsibility for pupils' safety is clearly defined and that each person involved with pupils with health care needs is aware of what is expected of them.
- 1.5 Close collaboration between school, parents/carers, health professionals and other agencies will help provide a suitably supportive environment for pupils with health care needs.

2 The Legal Framework

- 2.1 This guidance is not a definitive interpretation of the law; interpreting the law is a matter for the Courts alone.
- 2.2 There is no legal duty that requires school staff to administer medication; this is a voluntary role. Staff who provide support for pupils with health care needs or who volunteer to administer medication are entitled to support from the education authority, head teacher, health services and parents/carers. This includes access to appropriate information and training, and reassurance about their legal liability.
- 2.3 Parents are a child's main carers. They are responsible for ensuring that their child attends school when well enough to do so. As defined in The Education (Scotland) Act 1980, parent includes carer and any person who is liable to maintain or has parental responsibilities (within the meaning of section 1(3) of the Children (Scotland) Act 1995).
- 2.4 Schools are responsible for the health and safety of pupils in their care. The legal framework for schools dealing with the health and safety of all their pupils derives from health and safety legislation.
- 2.4.1 The Health and Safety at Work etc Act (HSWA) 1974, places duties on employers for the health and safety of their employees and anyone else on their premises. In schools, this covers the head teacher and teachers, non-teaching staff, pupils and visitors.
- 2.4.2 Most schools will, at some time, have pupils on their roll with health care needs. The responsibility of the school is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils.
- 2.4.3 The Management of Health and Safety at Work Regulations 1999, made under the HSWA, require employers to:
- a) Prepare a written assessment of their activities;
 - b) Introduce measures to control or eliminate any risks identified by these assessments;
 - c) Inform their employees about these measures.
- 2.5 Other legislation, such as The Medicines Acts of 1968, 1971 and 1988, are also relevant to schools dealing with pupils' medical needs. The following paragraphs outline the provisions that are relevant to the health and safety of pupils.
- 2.5.1 The Medicines Acts of 1968, 1971 and 1988 place restrictions on dealing with medical products, including their administration. In the case of 'prescription only' medicines, anyone administering such a medicinal product by injection must be a medical practitioner, (eg a doctor), or else act in accordance with the practitioner's directions.

There are exceptions for the administration of certain 'prescription only' medicines by injection in emergencies (in order to save life).

- 2.5.2 Subject to paragraph 2.5.4 below, there is no legal or contractual duty on school staff to administer medicine or supervise a pupil taking it. This is a voluntary role.
- 2.5.3 Some support staff may have specific duties to provide assistance for health needs as part of their contract. However, swift action would need to be taken by all staff in an emergency.
- 2.5.4 Section 5 of The Children (Scotland) Act 1995 provides scope for teachers to do what is reasonable for the purpose of safeguarding or promoting children's welfare.
- 2.5.5 Teachers, and other school staff in charge of pupils, have a common law duty to act as would any reasonably prudent parent to make sure that pupils are healthy and safe on school premises. This might, in exceptional circumstances, extend to administering medicine and/or taking action in an emergency.
- 2.5.6 This duty also extends to staff leading activities taking place off the school site, such as educational visits, school outings or field trips.
- 2.5.7 Where a pupil has a known allergy or asthma the head teacher should ensure that at least one member of staff accompanying such a pupil on activities taking place off school site has attended the course *CF0085 Asthma and Allergy Management* within the last two years. Failure to do so may invalidate the City's Public Liability Policy (as per section 12).
- 2.5.8 Where a pupil is known to have epilepsy, the head teacher should ensure that at least one member of staff accompanying the pupil on activities taking place off school site has attended *CF0253 Epilepsy Management* within the last 2 years. Failure to do so may invalidate the City's Public Liability Policy (as per section 12).

3 Arrangements for the Administration of Medication and/or Clinical Tests

- 3.1 The arrangements described in this document relate only to situations where there is an explicit request by the parent/carer or by the pupil over the age of 16. **School staff should never administer medication on their own initiative**, nor should pupils be permitted to take medication or undertake clinical tests on an ongoing basis without written authorisation from the parent/carer or pupil over the age of 16.
- 3.2 Where there is a request for a pupil to take or to be given medication, implement a care activity or undertake a clinical test during the school day or during an education excursion (at home or abroad), **the following must be observed:**
- 3.2.1 The head teacher should be satisfied that medication, care programmes and/or tests require to be administered during the school day.
- 3.2.2 The head teacher must also be satisfied that a volunteer member of staff is willing to assist and undertake any necessary instruction or training. In the case of emergency medication and/or care, the staff must have attended the relevant Continuing Professional Development (CPD) session within the last two years.
- 3.2.3 In circumstances where no suitable volunteer is available, advice should be sought from the school nurse in accordance with guidance detailed in Paragraph 11 (Channels of Communication) of this document.
- 3.2.4 It is good practice for pupils who are capable, to be encouraged to manage their own medication from a relatively early age. If pupils can manage their own medicine, staff may need only to supervise. Where appropriate, pupils could carry and administer their own medication, provided that the safety of other pupils is taken into consideration.
- 3.2.5 If it is agreed that the pupil should be given medication (or take it), or a clinical test, the parent/carer must provide necessary supplies and must also furnish written instructions regarding the quantity, the frequency, the method of administration and any other relevant information. A pupil over the age of 16 would normally provide information and give consent on their own behalf.
- 3.2.6 All medication must be supplied to the school in the original container dispensed by the chemist, clearly labelled with the name of the medication, the pupil's name, date of birth and the dose to be taken.
- 3.2.7 Consent forms are shown in The Handbook as appendices:
- Appendix 3 Request for school to issue non-prescribed medication in school (Form 1)
 - Appendix 4 Request for school to issue short-term prescribed medication in school (Form 2)
 - Appendix 5 Request for school to issue long-term prescribed medication in school (Form 3)
 - Appendix 6 Request for school to issue long-term-as-required prescribed medication in school (Form 4)

The appropriate form should be signed by the parent/carer or the pupil if over 16 years of age. The school should hold these forms to be referred to as necessary by the member(s) of staff concerned. New consent forms are required whenever there are changes to medication and at the beginning of every academic year. Out of date forms should be clearly marked and filed separately from the current form.

- 3.2.8 Sometimes pupils ask for painkillers (analgesics) at school. School staff should generally not administer non-prescribed medication to pupils because they may not know whether the pupil has taken a previous dose or whether the medication may react with other medication being taken. A child under 12 should never be given aspirin, unless prescribed by a doctor.
- 3.2.9 Non-prescribed medication may be administered on school premises as an exception to the general rule. Such medication may only be administered following the explicit written request of the parent/carer or pupil over 16 years of age, in the format set out in Appendix 3 of The Handbook. This form may be used exclusively for Paracetamol and non-steroid topical creams or emollients. For queries regarding non-prescribed medication out with this list please contact your School Nurse or the ASL Nurse for further advice.
- 3.2.10 If the head teacher has any doubts concerning the administration of prescribed medication and/or a clinical test, he or she should firstly discuss the instruction with the school nurse. If necessary, the parent/carer or pupil over the age of 16, should be asked for clarification. Where they are unable to give clarification, the school nurse should contact the appropriate health professional concerned and, if necessary, assist the parent/carer to submit fresh written instructions to the head teacher.
- 3.2.11 In the exceptional case of a request for the administration of non-prescribed medication, the medication should not be given in school until the parent/carer or pupil over the age of 16 is able to give sufficient clarification
- 3.3 Where a pupil refuses to take medication and/or undergo a clinical test, school staff should not force them to do so. The parent/carer and, if necessary, the general practitioner should be contacted. In urgent cases reference may be made to emergency services.
- 3.4 A written record should be kept of all medication administered to pupils. This record should be kept along with the instructions, checked before every administration and completed by the member of staff administering the medication.

Please refer to the following appendices of The Handbook:

Appendix 11 School Medication Record

Appendix 12 Medication Record for Methylphenidate (Ritalin™ or Equasym™)

Appendix 12 Medication Record for Dexamfetamine

- 3.5 In the event of any medication error, the pupil's parent/carer should be informed immediately and discuss next steps. Staff should seek support from senior management. If the pupil receives medication that deviates from the prescription or parent/carer instructions, then staff must seek medical advice without delay:
If the child is well, staff can call NHS24 on 111 or the pupil's GP. If the pupil shows any signs of adverse reaction; has breathing difficulties; collapse; signs of serious illness or you are concerned about their condition – call 999 immediately.

- 3.6 Some pupils may require emergency medication. Please refer to paragraph 5 of this document (Management of Emergency Medication in School Settings).

4 Self-Administration of Medication

- 4.1 A parent/carer or pupil over the age of 16 is required to provide written information about self-administered medication, **self-administered** health care programmes and self-administered clinical tests which may be required during the school day. Please refer to Appendix 7 in The Handbook – Request to school for medication to be carried and self administered by pupil in school (Form 5).
- 4.2 This does not place a requirement on head teachers to be responsible for holding supplies of such drugs or test materials, or recording every dosage taken or each test undertaken.

5 Management of Emergency Medication in School Settings

- 5.1 Within the planning process, consideration should be given as to how emergency medication would be administered both within and outwith school, eg on playing fields and on excursions, trips and visits. Reference should be made to the Excursions Policy, in particular, appendices 5 a, b and c. These appendices contain the relevant forms for parental consent, medical consent and medication recording. <https://orb.edinburgh.gov.uk/excursions>.
- 5.2 Pupils with some medical conditions may require a School Health Care Plan that may include emergency management.
- 5.3 The most common reasons for this are:
- Severe allergic reactions (Anaphylaxis)
 - Asthma
 - Epilepsy
 - Diabetes
 - Cystic Fibrosis
 - Complex conditions involving several medical needs
- 5.4 Information in this regard should be completed on the designated School Health Care Plan. The relevant health professional and the parent/carer will complete and sign the plan as will the head teacher or designated member of staff. Where necessary, the school nurse will provide support and advice.
- 5.5 Blank examples of these plans are to be found in The Handbook as appendices:
- Appendix 14 Allergies
 - Appendix 16 Asthma
 - Appendix 17 Epilepsy
 - Appendix 18 Diabetes (as appropriate to device being used)
- 5.6 When made aware of a parental request in respect of a pupil requiring administration of emergency medication, the head teacher should alert the school health team and vice versa.
- 5.7 The head teacher should identify staff who have volunteered to administer emergency medication.
- 5.7.1 Continuing professional development (CPD) sessions covering the administration of emergency medication and care for epilepsy, allergic reactions, asthma and diabetes are available throughout the session and are detailed annually in the CPD directory.
- 5.7.2 **Only staff who have been given information, instruction and have attended the appropriate CPD session should administer emergency medication.**
- 5.8 **In the event of an emergency** where no staff are available who have attended the appropriate CPD session and/or no plan is available, immediate emergency **support should be sought from the Emergencies Services by means of a 999 telephone call.**

- 5.9 Responsibilities in relation to a School Health Care Plan are as follows:
- 5.9.1 The parent/carer or pupil over the age of 16 is responsible for ensuring that the school is informed of the health needs of the pupil.
 - 5.9.2 The head teacher is responsible for bringing the health care needs of a pupil to the attention of the school nurse.
 - 5.9.3 The school nurse is responsible for facilitating the completion of School Health Care Plans if they have not been produced by the clinic attended by the pupil.
 - 5.9.4 The head teacher is further responsible for the dissemination of relevant information to staff involved with the pupil.
- 5.10 The parent/carer and, where appropriate, the pupil, should be actively involved in discussion about the preparation and completion of a School Health Care Plan which includes emergency management.
- 5.11 Where no dedicated form exists, a bespoke School Health Care Plan for Emergency Management must be written. This will detail any treatment and/or emergency medication required. The Additional Support for Learning Nurse, in conjunction with the parent/carer and any other relevant health professionals, will facilitate this.
- 5.12 Information on the storage of any emergency medication is detailed in paragraph 7 overleaf. If required, further advice can be sought from the school health team or community pharmacist. Emergency medication must not be locked away and be kept in close proximity to the pupil.

6 Storage of medication and/or test materials

- 6.1 The head teacher is responsible for ensuring that medicines are stored safely as detailed in The Handbook.
- 6.2 Emergency medication, including asthma inhalers, should be stored in close proximity to the pupil. A back-up supply can be stored in an unlocked, easily accessible central area.
- 6.3 All other medication or tests, which are administered by staff, should be stored in a locked cabinet, to be opened only by persons authorised by the head teacher. Some medication needs to be refrigerated
- 6.4 Where pupils are managing medication themselves, they should not normally be expected to give up their medication for storage. In allowing pupils to retain their own medication, an assessment of the risks to others must be made.
- 6.5 Particular care needs to be taken in the recording of the quantity of controlled drugs such as methylphenidate (Ritalin™ or Equasym™) or Dexamfetamine when received and administered. This is to ensure against the potential of allegations of misappropriation. See Section 10 and Appendix 12 in The Handbook.

7 Renewal and disposal of supplies

- 7.1 It is the responsibility of the parent/carer or pupil over the age of 16 to renew supplies of the medication or test materials as required. If necessary, the head teacher should arrange for the appropriate form in The Handbook to be passed to the parent/carer when the supply is becoming low (Appendix 8), or when out of date (Appendix 9), to obtain a fresh supply of the medication or materials.
- 7.2 The parent/carer is responsible for disposal of date-expired medicines. Wherever possible the parent/carer should collect medicines held at school when they have expired. (Appendix 9).
- 7.3 In those cases where pupils are transported to school by the Authority and the school is not located near the family home, an arrangement should be agreed between the school and the parent/carer as to how medicines can be safely delivered to the parent/carer for disposal. If you need further advice regarding the safe disposal of medications, please contact your School Nurse.

8 Prohibition on other medication

- 8.1 No medication should be held by non-residential educational establishments other than those required under the arrangements described in this document.

9 Continuing Professional Development and Training

- 9.1 The head teacher is responsible for ensuring that relevant staff volunteers have attended the relevant CPD sessions and training as detailed in Section 4 of The Handbook.
- 9.2 A record of volunteers who have attended the administration of emergency medication/ care CPD sessions should be kept by the school. This should include all refresher training in the administration of emergency medication. Please refer to appendices 14, 16, 17, 18 and 20 in The Handbook.
- 9.3 Refresher training in the emergency management of asthma, allergies, epilepsy and diabetes should be updated within two years of the initial training session attended and within every two years thereafter.

10 Channels of communication in cases of difficulty

10.1 If difficulties arise over the administration of medication or clinical tests, the head teacher should:

a) Contact the parent/carer and through them, seek a possible revision of the medication or care/test regime from the medical staff involved

or

b) contact the school nurse for advice.

11 Public indemnity

Any member of staff acting in accordance with these guidelines will be covered by the City's Public Liability Policy to indemnify a member of staff against claims by pupils or others.

The City of Edinburgh Council
Communities and Families Department
Waverley Court
4 East Market Street
Edinburgh
EH8 8BG

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