

Administering Medicine Policy	رقم السياسة	001 - RP
	النسخة	0.1
	التاريخ	12/7/21 م

# **1. Policy Objectives**

This policy sets out the circumstances in which we may administer medicines within school, and the procedures that we will follow.

# 2. Policy Scope

This policy applies to children, families, staff, and administration at GSIS.

## 3. Policy Actors

- GSIS School Leaders
- GSIS Teachers
- Administrative Staff
- GSIS Doctor/ Nurse.

## 4. Related Policies and Procedures

- Attendance and Truancy Policy.
- Sick Child Policy.
- School Trip Policy.

### 5. Related Forms

• Parents' handbook

## 6. Terminologies

<u>School leader</u>: Any person who is in the position of Subject team leader and above according to GSIS governance.

<u>School Superintendent:</u> A General Director of a whole school who reports directly to the CEO.

**School Doctor/ Nurse:** A health specialist who provides health care to children during the school day.

# 7. Administrating Medicine Policy:

#### 1. Introduction





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Most students will at some time have a medical condition that may affect their participation in school activities and for many this will be short-term. Other students have medical conditions that, if not properly managed, could limit their access to education. Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. GSIS is committed to ensuring that children with medical needs have the same right of access as other children.

There is no legal duty that requires GSIS and staff to administer medication; this is a voluntary role. The 'duty of care' extends to administering medication in exceptional circumstances, and therefore it is for schools to decide their local policy for the administration of medication.

### 2. The Role of Parents/Guardians:

Parents/guardians should, wherever possible, administer or supervise the self-administration of medication to their children. This may be by spacing the doses so that they are not required within school hours, or by the parent/guardian coming to school at break time to administer the medication. However, this might not be practicable and in such a case parents/guardian may make a request for medication to be administered to the child at school.

If medicine needs to be administered during school time, then a parent or guardian must bring it to the school office and fill in the Administration of Medication Permission and Record form. Medication must not be given to the class teacher, or brought into school by the child themselves. If medication is for a short-term condition, any remaining medication must be collected from the office by a parent or guardian at the end of the school day.

#### 3. Prescription Medication:

Prescription medicines should be administered at home wherever possible; for example, medicines that need to be taken 3 times a day can usually be taken before school, after school and at bed-time. Parents are encouraged to ask their GP whether this is possible. Prescription medicines will only be administered by the school when it would be detrimental to a child's health if it were not done.

Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. The exception to this is insulin which must still be in date, but will generally be available to school inside an insulin pen or a pump, rather than in its original container. Schools should never accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.

#### In all cases it is necessary to check:

- Name of child
- Name of medicine





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- Dosage
- Written instructions provided by prescriber
- Expiry date

An Administration of Medicine Permission & Record form must be completed and signed by the parent / guardian. No medication will be administered without the parent's written consent.

Prescribed medication, other than emergency medication, will be kept in the Medical Room, either in the cupboard or the refrigerator as appropriate. All emergency medicines (asthma inhalers, epi-pens etc.) should be kept in the child's classroom and be readily available. A second Epi-pen for each child who requires one will be kept in the Medical Room, in a box clearly labelled with the child's name and photograph.

### 4. Long Term Medical Needs:

It is important for the school to have sufficient information regarding the medical condition of any student with long term medical needs. The school will draw up a health care plan for such a student, involving the parents and the relevant health professionals.

### 5. Controlled Drugs:

It is imperative that controlled drugs are strictly managed between the school and parents. Ideally controlled drugs are only brought in on a daily basis by parents, but certainly no more than a week's supply and the amount of medication handed over to the school should always be recorded.

Controlled drugs should be stored in a locked non portable container, such as a safe, and only the GSIS principal and/or doctor/nurse allowed access to it. Each time the drug is administered it must be recorded, including if the child refused to take it. If students refuse to take medication, school doctor/nurse should not force them to do so. The school should inform the child's parents as a matter of urgency. If necessary, the school should call the emergency services. The person administering the controlled drug should monitor that the drug has been taken. Passing a controlled drug to another child is strictly prohibited. As with all medicines any unused medication should be recorded as being returned to the parent when no longer required. If this is not possible, it should be stored in the medical room till it is picked up by parents. It should not be thrown away.

### 6. Non-Prescription Medication:

Where possible, the school will avoid administering non-prescription medicine. However, we may do so, if requested by the parent, if it will facilitate the child attending school and continuing their learning. This will usually be for a short period only, perhaps to finish a course of antibiotics, to apply a lotion or the administration of paracetamol for toothache or other pain. However, such medicines will only be





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administered in school where it would be detrimental to a child's health if it were not administered during the day.

A child under 16 should never be given aspirin-containing medicine, unless prescribed by a doctor.

If non-prescription medication is to be administered, then the parent/guardian must complete an Administration of Medicine Consent form, and the same procedure will be followed as for prescription medication. The medicine must be provided in its original container, with dosage information on it. The parent's instructions will be checked against the dosage information, and this will not be exceeded.

### 7. Administering Medicines:

Medicines will only be administered by GSIS doctor/nurse who are academically trained in the safe administration of medicines. In their absence another appropriately trained member of staff may carry this out. Appropriate training will be arranged for the administration of any specialist medication (e.g. adrenaline via an epipen, Buccal midazolam, insulin etc.) Staff should not administer such medicines until they have been trained to do so. A list of all staff trained in administration of medicines will be maintained by the GSIS principal.

When a member of staff administers medicine, they will check the child's Administration of Medication Permission and Record form against the medication, to ensure that the dose and timing are correct. They will then administer the medicine as required, and record this on the form.

#### 8. Emergency Inhalers:

GSIS will keep emergency reliever (blue) inhalers for the emergency use of children whose own inhaler is not available for any reason. They will be stored in the Medical Room, along with appropriate spacers. Parents must sign a "Consent form: use of emergency salbutamol inhaler" to consent to their child being allowed to use the emergency inhaler. These will be kept in the Asthma file in the Medical Room.

#### 9. Self Management:

It is important that as children get older they should be encouraged to take responsibility and manage their own medication. This should be clearly set out in the child's health care plan in agreement with the parents, bearing in mind the safety of other students.

The school Doctor/nurse are aware of the need for asthmatics to carry medication with them (or for staff to take appropriate action). Children should know where their medicines are stored.

#### **10.** Refusing medication:

If a child refuses to take medication, the school doctor/nurse should not force them to do so, but note this in the records and inform parents of the refusal. If the refusal leads to a medical emergency, the school will call the emergency services and inform the parents.



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### 11. Offsite visits:

It is good practice for schools to encourage students with medical needs to participate in offsite visits. All staff supervising visits should be aware of any medical needs and relevant emergency procedures. Where necessary, individual risk assessments will be completed. A member of staff who is trained to administer any specific medication will accompany the students and ensure that the appropriate medication is taken on the visit. Inhalers must be taken for all children who suffer from asthma.

Travel Sickness - Tablets can be given with written consent from a parent but the child's name, dosage, time of dose and any possible side effects (the child must have had the travel sickness preventative at home before the trip in case of side effects) should be clearly marked on the container, which must be the original packaging. Parents will need to complete an Administration of Medication Permission and Record form.

Residential visits – All medicines which a child needs to take should be handed to the teacher in charge of the visit. The only exception are asthma inhalers, which should be kept by the child themselves. The parents will sign a consent form for any medicines which they need to take during the visit, plus consent of emergency treatment to be administered.

### **12.** Disposal of Medicines:

The GSIS doctor/nurse will check all medicines kept in school each term to ensure that they have not exceeded their expiry date. Parents/guardians will be notified of any that need to be replaced. Parents/guardians are responsible for ensuring that date-expired medicines are returned to them in a timely manner.

Sharps boxes should always be used for the disposal of needles. There is a sharps box in the Medical Room. If any child requires regular injections (eg. Insulin), they will have their own sharps box which can be taken offsite with them on trips etc. The parents will be notified when the box is almost full so that they can bring in a new box and take the full box for disposal.

## 8. Parties and Authorities

Parties	Authorities	
School Superintendent	Develop Administering Medicines Policy.	
School Leaders	<ul><li>Revise Administering Medicines Policy.</li><li>Supervise Policy implementation.</li></ul>	





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## 9. Resources

- International best school practice benchmark documents
- GSIS Strategy, Vision and Mission

# 10. Reference

For more information, please contact the GSIS Superintendent.

### **11.Changes**

Date	Responsible Person\ Job Title	Changes	Copy no.
07/2021	Ms. Katia Abu-Chacra / Superintendent	Preliminary version	0.1
25/07/2021	Ms. Dana Abou Gourra/ CEdO	To be Modified	0.2
25/07/2021	Mr. Ihab Osman/CEO	To be Approved	1.0

