



Wetherby Kensington  
4 Wetherby Gardens  
London  
SW5 0JN

# Medication Policy

**Policy reviewed by:** Lauren Vallely and Helen Milnes

**Review date:** July 2021

**Submission:** July 2021

**Policy actioned from:** September 2021 – August 2022

**Next review date:** July 2022

**Reviewer's Signature:** *Lauren Vallely*      *Helen Milnes*

**Head Teacher's Signature:** *Helen Milnes*

**Circulation:** This policy is addressed to all members of staff and volunteers, is available to parents on request. It applies wherever staff or volunteers are working with pupils.

Please note: 'School' refers to Wetherby Kensington; 'parents' refers to parents, guardians and carers.



## Wetherby Kensington

### Medication Policy

This document concerns the administering of medication to children at Wetherby Kensington. This policy applies to all children in the school, including those in the EYFS (Reception).

From time to time, parents request that the school should administer medicine to pupils. These requests fall into two categories:

1. Pupils who require emergency medication on a long term basis due to the chronic nature of their illness (such as asthma and epilepsy).
2. Pupils who are suffering from “casual” ailments, such as coughs or colds.

Generally no member of staff will administer medicine to children. If a pupil needs a dose of medicine during the school day, the child must come to the school office to receive his medication.

Prescribed medication can only be administered by the school office if prescribed by a doctor / dentist / nurse / pharmacist and the parent has filled out and signed an Administering Medicine Form (see attached). This form must be seen by the Headmistress or 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 party leader to seek written permission from the parents to administer medication.

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 / latex. 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 i.e. a non-allergic plaster or dressing should be used.

All epi-pens / inhalers etc. will be accompanied by a letter from the parents stating exactly when and how they are to be administered. Parents are required to send to school two epi-pens / inhalers if their son is in Lower School (Reception and Year 1). One will be kept in the first aid room in a locked cabinet. The other will be kept in the class' red bag. Each class takes their red bag on all off-site activities. In Upper School (Year 2 and Year 3) parents are required to send in three epi-pens / inhalers, etc. if possible, otherwise two is sufficient. One will be kept in the school office in a locked cabinet, one in the class' red bag and one will be given to the Head of Sport. We are aware that it is not always possible to obtain three epi-pens / inhalers and will plan accordingly.

All medicines are stored strictly in accordance with the product instructions. This will either be in the first aid room in the locked first aid cabinet or in the fridge. All medicines will 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.

If a dietary or medical requirement has been stated on a pupil's Health Form, the parents are required to complete a Dietary / Medical Form. The school secretary will distribute these to all new parents at the start of term. Once this has been completed and returned, this will be kept in the dietary / medical file in the school offices. The school secretary will also email all parents at

the start of term to ask them if there are any updates / changes to their son's dietary / medical needs. All existing parents of pupils with dietary / medical requirements will complete a new dietary / medical form at the start of each academic year if necessary.

Please refer to the Dietary Policy and Procedure for further information.

### **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.

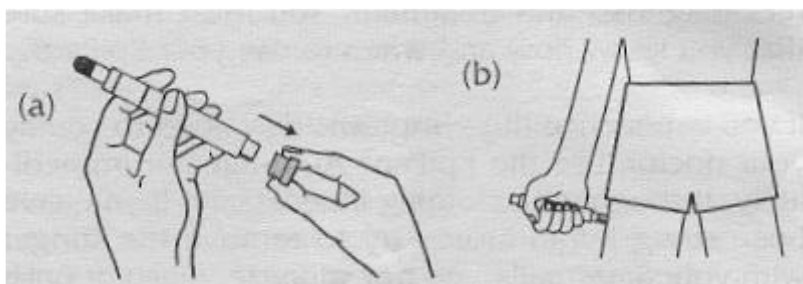
### **PROCEDURE IN THE EVENT OF AN ANAPHYLACTIC REACTION**

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 epi-pen 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**

# WETHERBY KENSINGTON

## ADMINISTERING MEDICINES – PARENTAL REQUEST FORM

In order for a child to receive prescribed medicines or over the counter remedies (e.g. antibiotics or anti-motion sickness remedies), the form below must be completed and signed by the child's parent. **Staff cannot administer prescribed medicines without written permission** and any such medicine or over the counter remedy supplied to the school must have been dispensed by a UK licensed pharmacist. Without obscuring the pharmacist's label showing the child's name, date and the prescribed dosage, so as to make the medicine(s) more readily visible these should additionally be **prominently marked in large capitals** with the child's name. The school will make very effort to comply with a parent's request but cannot accept responsibility should it fail to do so.

### To be completed by parent/guardian:

Full name of  
child  
(in capitals)

Name of parent/  
guardian

Full name of  
prescribed  
medicine/lotion

### First dose due in school/day care

Date:

Time:

Quantity:

### Second dose due (if applicable)

Date:

Time:

Quantity:

Subsequent dates on which medicine  
is to be administered (if applicable)

Date for last dose(s)

I request the school to administer  
the doses of the medicine(s) as shown  
above, supplied, I confirm, by a UK  
licensed pharmacist.

Date

*Signature*

**Note:** A new form must be completed if a course of medicine endures beyond a fortnight.

For office use only

**WETHERBY KENSINGTON**

**ADMINISTERING THE MEDICINE(S)**

**NAME OF PUPIL:** \_\_\_\_\_

**FIRST WEEK**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>Date</b>					
<b>Time</b>					
<b>1<sup>st</sup> dose (staff initials)</b>					
<b>Time</b>					
<b>2<sup>nd</sup> dose (staff initials)</b>					

**SECOND WEEK**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>Date</b>					
<b>Time</b>					
<b>1<sup>st</sup> dose (staff initials)</b>					
<b>Time</b>					
<b>2<sup>nd</sup> dose (staff initials)</b>					

1. Enter time of dose in the box.
2. Initial clearly in either the 1<sup>st</sup> or 2<sup>nd</sup> box as appropriate, each time a dose is administered
3. Obtain counter-initial
4. At end of course, photocopy this page and place photocopy in the Medical Consent folder. File original in pupil's file