

MEDICATION ADMINISTRATION POLICY FOR HOUSE STAFF

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MEDICATION ADMINISTRATION FOR HOUSE

STAFF

1. OBJECTIVES

This policy is written to ensure a standard process is followed in relation to medication held and used on site at Wymondham College. It provides a clear set of requirements for safe ordering, storage, and use of both over the counter and prescription medications. The policy is designed to enable safe working practice for staff, which ultimately keeps students requiring medications safe whilst under the care of Wymondham College and Wymondham College Prep School.

2. RATIONALE

There are several medications held in stock which can be used by nursing and house staff within Wymondham College and Wymondham College Prep School. Boarding students also may require prescription medications whilst at Wymondham College. Day students (within the Senior School) may also have medication requirements for emergency situations whilst they are at Wymondham College. Therefore, this policy provides a clear and standardised set of guidelines for all staff involved in the use of medications to follow. This policy covers the safe ordering, storage, administration, and disposal of medications.

3. PROCEDURES TO FOLLOW

3.1. Medication used

The Medical Centre staff and the GP annually review a Medication Schedule for the Houses, detailing which medications to administer, when, and how. This schedule, accessible on the shared Medical Centre OneDrive and as a paper copy in each boarding house, forms the basis for medication administration regulations. Only medications listed in the Schedule should be used, and because the medication is provided by Wymondham Medical Partnership, it is intended for boarding students only.

3.2. Medication not used at Wymondham College

Aspirin should only be taken by people over 18 years of age. Therefore, the College does not stock it.

Sudafed has been linked with various potential side effects. We have decided it is in the best interests of the students not to use it in the College.

3.3. Medication Storage

In the Houses, medication is kept locked in a cupboard in the Matron's flat. The flat is locked when unoccupied. A small stock of medication for use during the school day is also kept in a locked cupboard in the House Office. This room is also kept locked when unoccupied.

Keys for the cupboards must only be held by the appropriately trained member of staff on duty and a spare set with the Head of House. Keys must not be given to anyone other than those authorised by the Head of House.

Every half-term the medication cupboard should be checked by house staff. This should include,

- check expiry dates,
- stock levels,
- medication to go home.

3.4. Ordering medication

Requests for new stock medication are made by the Matrons by emailing the Medical Centre on medcentre@wymcol.org.

For stock medication, 24 hours' notice is usually sufficient.

For prescription medication ordering the online WMP repeat prescription form should be completed using the following link:

<https://forms.office.com/e/NdJbxuWR9W>.

The email address inputted medcentre@wymcol.org to ensure all emails regarding medication go to the Medical Centre. This also ensures the Medical Centre is aware of what medication is required and when it has been ordered. A week's notice should be allowed when making these requests.

Sixth form students may order their own repeat medications.

3.5. Collection of Medication

WCMC has medication deliveries/collections on Wednesdays and Fridays (except for urgent items).

When Matron or the student collects medication, the MC nurse will record the date and staff member collecting the medication spread/student record to acknowledge that the medication has been collected.

(There are specific arrangements for Controlled Drugs and Self-Medication, see further down document).

3.6. Receipt of Medication

Upon receipt of bulk medication in House, the details are logged onto a General Medication Sheet, recording:

- date medication was received.
- the name and strength of the drug, e.g. paracetamol 500mg.
- the amount of medication received, e.g. 32 tablets.
- the expiry dates.
- signature (initials).

3.7. Prescription Medication

Prescribed medication coming into the Boarding Houses should be entered onto medical tracker under the relevant medical condition. For medication already logged under a medical condition but where tablets/medication has been returned from holidays, record the amount returned on medical tracker, with the notes section used to record amount of medication brought into house. If the drug is given to the student, e.g. inhaler/adrenaline auto-injector or for holidays, this should be logged. NB Medication given to take home should be in whole boxes/bottles (not split up/partly used). If multiple boxes/bottles are dispensed, they should be entered individually to allow expiry dates to be recorded.

If the prescription medication is dispensed by House staff, the medical tracker should be used to record this. The expiry date should be checked and recorded.

Special note should be made of the expiry dates of medication held by the students e.g. adrenaline pens. The Medical Centre should be informed prior to the expiry date so a new one can be ordered. (This is a double-check as the Medical Centre also keeps a record).

Medications should be stored appropriately. Refrigerated items should be kept in the clear lock top tub for fridge medications in a designated fridge (away from students) in house. Controlled drugs should be stored following the below guide.

3.8. Controlled Drugs (CD's)

Some prescription medicines are controlled under the Misuse of Drugs legislation (and subsequent amendments). These medicines are called controlled medicines or controlled drugs. Occasionally we may have students who have been prescribed such medication, e.g. Methylphenidate.

Each of the Houses has a black book which the member of staff will need to bring with them when coming to the Medical Centre to collect this type of medication. The member of House staff and a Medical Centre Nurse will both check and enter the medication out of the Med Centre log and into House transfer book. Data checked and entered in both books will include:

- IN or OUT
- Date
- Name of student
- Name of medication and dose – that the label and contents match
- Number of tablets – counted unless in sealed container.
- Batch number - that the label and contents match
- Expiry date - that the label and contents match.
- Signatures and printed name of both members of staff
- Upon return to House the medication needs to be checked and countersigned by a second member of House staff

Controlled drugs will be kept in a locked and secure metal box inside the medication cupboard in matrons flat. The black record book will be kept inside the secure metal box.

If Controlled drug medication is sent home with the student, the above procedure should be duplicated with the parent/guardian. Medical tracker medication use can also be used to record that the medication has been sent over, with the number of tablets sent home recorded in the notes section.

3.9. Medication brought in from home

The Medical Centre must be informed of any medication brought in from home. Medication brought in from home must have the drug name, strength and dose printed on a chemist label, or in the case of vitamins printed instructions, and be in the original container. Parents/guardians who wish their children to have medication brought in from home are required to complete a parental request for treatment form (appendix 2). The completed form should be held in House. All medications brought in from home should not be self-medicated until a Medical Centre nurse has determined if this is appropriate- therefore Matron should dispense the medication initially. If a nurse determines the medication can be self-medicated, the medication can be returned to the student. The parental request form should be kept in matrons flat (ideally in a folder in the medication cupboard) a note should be made on the form to say self-medicated.

All medications brought into the House should be entered onto Medical Tracker under the relevant medical condition. If this medication is already logged but it is being recorded as brought back from a school holiday, this should be logged on medical tracker using medication use tab, with the number of tablets/capsules/medications recorded in the notes section (only required for controlled drugs and anti-depressant medication).

3.10. Medication from overseas

All medications from overseas should be taken to the Medical Centre. The nurses will record the medication. An appointment will be made with the GP to prescribe the English equivalent. Once this is available, the medication from overseas should be returned to the student to be taken home at the earliest possible opportunity.

3.11. Expiry dates

When opening bottles of liquid medication/eye drops/tubes of medication, the date of opening should be entered onto the container. The date of expiry will then be taken from the date of opening.

- six months or expiry date set by manufacturer for liquid medications.
- four weeks for eye drops
- six months for tubes of ointment/cream
- One month for opened pots used by staff – manufacturer's expiry if used by students.

When dispensing from a tube or pot, a glove or spatula should be used to prevent cross-infection.

Any out-of-date medication, or prescribed medication that is not being used, should be returned to the Medical Centre (who will return it to the pharmacy for disposal).

3.12. Medication Administration

Consent for the giving of medication is obtained from the parent/carer on the Health Admission form.

Prescribed

For each prescription medication dispensed by House staff, a medical condition will be listed on medical tracker with the relevant medication added (there may be more than one medication listed under a condition). Full instructions for using each medication is completed when adding the medication.

Medical tracker medication records contain the student's name and DOB, the name and dosage of the medication, and when it is to be given.

- Ask the student to confirm their DOB (even if you know the student)
- Check when the medication is due to be given.
- Check that the label on the box matches all the information on medical tracker
- Check that the information on the blister pack matches e.g. medication and dosage
- Check the expiry date.
- If all of the above matches give the student the medication. They must take it in your presence.
- Record your name in the drop down dispensed by member of staff box
- Save the record.

Non-prescribed

All staff when issuing medication must adhere to the following procedures:

- The reason for giving the medication must be established and explained to the student.
- Check whether the student is allergic to any medication (medical tracker should detail any known student allergies).
- Check on the student's medical tracker record and ask the student whether or not they have taken any medication recently and, if so, what (e.g. paracetamol must not be taken more frequently than every four hours and the maximum dose in 24 hours for that age group, printed on the pack, must not be exceeded).
- Check whether the student has taken that medication before and, if so, whether there were any problems.
- Check that the information on the blister pack matches the label. e.g. Medication and dosage
- Check the expiry or "use by" date on the medication package or container.
- The student should take the medication under the supervision of the person issuing it

- Record the details on medical tracker- if this is a brought in from home medication linked to a medical condition record using this tab, or if giving an over-the-counter medication record under medication dispensed.

At Wymondham College and Wymondham Prep, a web hosted, electronic recording system called medical tracker is used by all House staff who have received medication training and MC staff to log the administration of all occasional medication such as paracetamol. As well as the verbal checks with the student, medical tracker should also be checked prior to administering any medication to avoid errors in dosage or contra-indications.

3.13. Refusing Medication

If a student refuses to take medication, staff will not force them to take it but will record it and inform the Medical Centre. The Medical Centre will inform the parents unless consent to do so is withheld by a Gillick competent student. If refusal compromises the student's safety emergency services will be called.

3.14. Self-Medication

To help young people to learn to become independent and responsible for their own care, it may be possible for them to self-medicate.

All students who are deemed to be Gillick competent* may be allowed to self-medicate after assessment.

This assessment is done by the Nurses with the student, and a self-Medication consent form is completed and signed by the student and nurse (Appendix 3).

**Gillick v West Norfolk and Wisbech Area Health Authority (1985) 3 All ER 402. A child under the age of 18 is lawfully able to give or withhold consent to medical treatment provided they can understand what is involved.*

A risk assessment for self-medication is also completed and records are made on medical tracker. Each medication is recorded under a medical condition for regular medications, and the medication record will indicate if the medication can be self-administered or not.

House Matrons have access to all medication records for their students on medical tracker. When a medication is changed or amended, an email will be sent to matrons to alert them. This email does not need printing, although houses may choose to keep a list for their information about self- medicating students in a central place.

Self-medication is a privilege and if it is found that it is being abused, for instance by medication not being stored safely or "losing" medication, the privilege may be withdrawn, and the signed agreement will be null and void. This arrangement should be reviewed by the nurses in liaison with the House Matrons and House Managers/Deputies.

All students who have/carry any medication such as inhalers, insulin or adrenaline pens need to complete a self-medication form and have the medication recorded on medical tracker.

Some medications are deemed not suitable for self-medication. Examples of these are “Controlled Drugs” and anti-depressants.

If you find a student who has medication that you are unaware of, please inform the MC.

Medications available on the medication schedule for ‘one off dispensing’ by house staff should not be self-medications due to the potential risk for overdose, i.e. paracetamol, ibuprofen and cetirizine.

3.15. Medication for use at Home

Medication must be kept in the original container and never divided up. This means that for most prescription medications dispensed by matron extra supplies should be provided for use at home, (exceptions to this are specific courses of medication e.g. antibiotics or steroids). It is the responsibility of parents/guardians to ensure they have enough medication to cover holiday periods.

If a parent/guardian requires a repeat prescription during the holidays, they can order this using Wymondham Medical Partnerships online ordering service.

<https://forms.office.com/e/NdJbxuWR9W>.

A letter from the Medical Centre will be sent to all parents/guardians of boarding students at the end of each term reminding them of how to order repeat medications. When a student who has been prescribed an **antidepressant** goes home, the medication needs to be passed to the parent/guardian. Some students may go home using their own transport or public transport, making it impossible to sign medication to parents/guardians. If this is not possible, parents/guardians must be aware that the medication will be signed out to the student. If they agree to this, they will be emailed informing parents/guardians about the name, dosage, and amount of medication dispensed.

There may be rare occasions when a student does not wish their parents to be informed. This decision can only be made by CAMHS/GP.

3.16. Monitoring of House Medication and Medication Records

Medical tracker medication records will be reviewed by a Medical Centre Nurse termly during medication record review / audit. The Nurse will check that medications have been given at the prescribed times and dose and an accurate record has been kept. When required, appointments will be made with the GP for medication reviews.

The designated nurse for each House will do a House Medication Review (Appendix 4) each term.

These reviews will be passed to the Medical Centre Lead nurse who will on a termly basis go through these and pass any relevant outcome information to house staff. (Urgent information such as near-miss prescribing errors will be passed on immediately to maintain student safety).

3.17. Medication Errors or Near-Misses

The aim of all medication-related guidance is to minimise the risk of an administration error occurring. An error in medication administration is defined as **any deviation from the prescribed dose**.

Errors fall into three different categories (plus the temporary category of unresolved at the time):

Major Error - is an incident which results in major harm or death, admission to hospital for 24 hours or more or in the student being rendered unconscious.

- Major errors must be reported immediately to the member of the SLT on duty.
- The Health & Safety Manager should report the incident to the HSE in accordance with RIDDOR if it results in a fatality or the pupil/service user going straight to hospital for treatment from the scene of the incident.
- The Head of House/Dept should obtain any witness statements immediately or as soon as possible after the event.
- A written report detailing the facts must be completed by the Head of House/Dept within 24 hours and sent to Health and Safety together with this form. A copy must also be sent to the Medical Centre.
- The Health and Safety Manager will then compile a detailed accident investigation report.

Unresolved Error: An incident with an unknown outcome for the student at the time of occurrence.

Minor Error: An incident resulting in no significant harm to the student.

Near-Miss Incident: A medication administration incident that could have resulted in an error, but was caught and corrected before it affected the student, resulting in no consequences.

In all circumstances where there has been a failure to comply with written instructions, whether resulting in an over or under administration:

- Advice as to what action should be taken, should immediately be sought from the Nurse on duty in the Medical Centre. If this person is not available, advice from another medical practitioner or pharmacist; or NHS 111 should be sought.

- Where none of these are available, the local hospital's Accident and Emergency Department should be contacted.
- A full record of the incident and action taken is to be recorded.

The near-miss/incident form (Appendix 5) should be copied to the Lead Nurse and to HR. The student's parents/carers must be informed by the Head of House or member of staff involved.

Finally:

- The incident should be discussed with the staff team to ensure that any lessons are learned and any changes to practice/procedure introduced to ensure there is no recurrence.

3.18. Day Students

Day students are only given medication with a completed parental request form. The completed form should be kept with the medication supplied by the parents. This can be kept in house (if a regular medication) or at the Medical Centre (if something used very occasionally). This will be a prior arrangement with the Medical Centre/House and parents/carers who will be contacted to inform them if medication is given. Follow the SET policy for managing medication in school.

3.19. Training

It is the responsibility of the Head of House to notify the Medical Centre team when a new member of staff joins the team and requires training. This will be delivered by the Medical Centre School Nurses.

A hard copy of the training log/staff signature sheet should be retained with the medicines and checked by the Nurse assigned to that boarding house on a half-termly basis. This should be updated if any changes to the policy are made and when staff leave/start. Head of house to inform lead nurse when staff leave so access to medical tracker can be removed.

Staff should also complete the iHasco medication awareness for schools Module – Certificate in Administering Medication

[Medication Awareness for Schools \(Course Overview\)](#)

Staff must not administer medication to a student unless they have received training from the Medical Centre Nurse, completed appendix 6 training, and completed the iHasco online course.

All staff must complete the online course before the expiry of their certificate. Refresher training will be delivered by a Medical Centre Nurse every 2 years.

4. MANAGEMENT OF COMMON CONDITIONS

Asthma:

Students with reliever inhalers (Salbutamol/Ventolin) or MART inhalers (Fostair) are always encouraged to carry it with them along with their personal asthma action plan (especially to sports and school trips). These should be labelled with their name and date of birth. They do not need to carry any other kind of inhaler with them.

Following campaigning from asthma charities, the Department of Health finally issued guidance, and schools are now allowed, and indeed advised, to hold spare emergency reliever inhalers. The College has drawn up an asthma management procedure: the use of emergency asthma inhalers is detailed within the SET and Medical Centre standard operating policies.

Diabetes:

The nursing staff actively work with students that suffer from diabetes along with their families to achieve independence and self-management. A healthcare plan will be established, working closely with the student, their family and sometimes other health professionals, e.g. diabetes nurse-specialists. This procedure is detailed within the Medical Centre standard operating policy.

Students with diabetes are encouraged to carry emergency supplies with them, for blood testing, insulin, and sugar substitutes. Some students have an insulin pump. Spare supplies of all required items can be kept in the Medical Centre for both Day and Boarding students.

Self-medication forms need to be completed for all required items (Appendix 4&5).

Anaphylaxis:

Nursing staff actively work with students who have severe allergies and anaphylaxis. The nurses will liaise with the student and their families to ensure they have an up-to-date care plan to follow outlining potential problems and appropriate action to take.

The student is encouraged to carry their 2 Adrenaline Auto Injectors (AAI), and a small amount of oral antihistamine, with them at all times. The student must keep their prescribed medication on them at all times and should be stored inside an insulated pouch specific for storing AAI's which should be supplied by parents/carers. The Anaphylaxis Society suggests that a second dose of adrenaline is less likely to be needed if it is given early enough. It is, therefore, of great importance that a student who has previously experienced an anaphylactic reaction can have access to their AAI at all times.

Teachers and pastoral staff have been trained in the administration of an AAI, should the student not be able to do so themselves.

Anaphylaxis updates for teaching and support staff take place annually.

Self-medication forms need to be completed for all AAI's or antihistamines held by the students (Appendix 4&5).

Students who have an AAI can be asked by any staff member to present their injector. This will serve as a reminder to the student of the need to be self-reliant and ensure that the AAI is available if needed.

If the AAI is used over the weekend, call SLT and the nurse will be informed.

Follow the SET policy for allergy and anaphylaxis.

Appendix 1

Liquid Cetirizine dosages for young people **Less than 12 years old**

Strength of suspension – 5mg in each 5 ml

Age	Dose
6-12 years old	5ml twice daily

Cetirizine Tablet dosages for young people **More than 12 years old**

10mg tablets

Age	Dose
12 years and older	One tablet, once daily

Liquid Paracetamol dosages for young people **Less than 12 years old**

Strength of suspension – 250mg in each 5 ml

Age	Dose (every 4 to 6 hours, maximum 4 doses in 24 hours)
6-8 years old	5ml up to 4 times in 24 hours
8-10 years old	7.5ml up to 4 times in 24 hours
10-12 year old	10ml up to 4 times in 24 hours

Liquid Ibuprofen dosages for young people **Less than 12 years old**

Strength of suspension – 100mg in each 5ml

Age	Dose (every 6 to 8 hours, maximum 3 doses in 24 hours)
4-7 years old	7.5ml up to 3 times in 24 hours
7-12 years old	10ml up to 3 times in 24 hours

<u>Paracetamol tablet dosages for young people over 12 years old</u>	
Age	Dosage
11 - 16 years	500mg (1 x tablet) 4 - 6 hourly, max x 4 in 24 hours
Over 16 years	500mg - 1g (1-2 x tablets) 4 - 6 hourly, max x 4 in 24 hours

<u>Ibuprofen tablet dosages for young people over 12 years old</u>	
Age	Dosage
Under 12 years	200mg (1 x tablet) max x 3 in 24 hours
12 to 18 years	400mg (2 x tablets) max x 3 in 24 hours

Please complete the online training and speak to the Medical Centre team if you have any questions:

[Medication Awareness for Schools \(Course Overview\)](#)

Appendix 2

CONSENT TO TREATMENT - If more than one medicine is to be given, a separate form should be completed for each one.

PARENTAL REQUEST FOR ADMINISTRATION OF MEDICATION BROUGHT IN FROM HOME

The College can only give your child medication if you complete and sign this form.

Child's Name: _____

Date of Birth: _____

House: _____

Name and dose of medicine: _____

Expiry Date: _____

How much to give (ie. Dose): _____

When to be given: _____

Any other instructions: _____

Number of tablets: _____

Note: Medicines must be in the original container

_____ Daytime
phone no. of parent or carer: _____

Agreed review date to be initiated by: _____

(Name of member of staff): _____

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent for the administration of the stated medicine to my child in accordance with school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medication is stopped.

Parent's/Carer's signature: _____

Date: _____

Print Name: _____

Appendix 3

SELF-MEDICATION CONSENT FORM

Name:

D.O.B.:

House:

Has agreed to the following:

1. Students must not, under any circumstances, share, swap, or trade their medication with others.
2. Students must keep their medication safe and secure.
3. All medication must be in its original container, labelled with the student's name, the dose and frequency of the medication is taken.
4. If medication is prescribed, it must be taken and stored as instructed.
5. All non-prescribed medication must be taken according to the manufacturer's instructions, (a Parental Request for Treatment form must be completed for all non-prescribed medication).
6. Students are aware of the process to follow if they accidentally take too much of their medication.
7. Boarding students taking prescribed medication will request repeat prescriptions in person or via email in good time – at least a week's notice.
8. If you are taking any other medication or herbal remedies, ensure you have informed the Medical Centre **before** taking the medication.

IMPORTANT: You are trusted to be responsible for your own medication and to take it as prescribed. If you cannot do this, you will not be permitted to self-medicate.

Wymondham College does not accept any responsibility in the administration or control of the above medication. For safety, pupils are not allowed medication containing analgesics eg paracetamol unless authorised by a Healthcare Practitioner or School Doctor as these are available from boarding staff or the Medical Centre.

Signed (Student):

Date:

I agree the above named student is competent to administer their own medication.

Name and Signed (Medical Centre Nurse):

Date:

NB Medication misused or found without permission will be confiscated and pupils will be subject to disciplinary action.

**Gillick v West Norfolk and Wisbech Area Health Authority (1985) 3 All ER 402. A child under the age of 18 is lawfully able to give or withhold consent to medical treatment provided they are capable of understanding what is involved.*