



Medicines & Medical Conditions Management Policy

This Policy is applicable to all pupils and staff at Stonar School including EYFS and is relevant to Parents and Guardians of pupils at Stonar School.

Policy agreed by the Advisory Board:	May 2023
For review:	May 2024
Policy owner:	Head of Health & Wellbeing Centre

TABLE OF CONTENTS

1.	Roles and Responsibilities.....	3
1.1	Parents	3
1.2	The School as Employer	3
1.3	Head of Health & Wellbeing.....	4
1.4	Nursing Staff, Teaching and Other Staff	4
2.	Medical Centre Records.....	4
2.1	Health Care Records.....	5
2.2	Health Care Plan.....	5
2.3	Receipt of Medicines.....	6
2.4	Medicines Administered to Pupils	6
2.5	Self-administration Assessment.....	6
2.6	Self-administration by Pupils of Medicines	7
2.7	Change of Dose of Prescribed Medication by GP or another Prescriber.....	7
3.	Obtaining Supplies of Medication.....	7
3.1	Homely Remedies or Non-prescribed Medication	7
3.2	Sports Supplements	8
3.3	Prescribed Drugs	8
3.4	Controlled Drugs	9
4.	Storage of Medicines	9
4.1	Prescribed Medicines.....	10
4.2	Controlled drugs.....	10
4.3	Self-Medication	10
4.4	Cold Storage	10
5.	Administration of Medicines.....	11
5.1	Procedure for the Administration of Medicines	11
5.2	Administration of Medicines away from School.....	12
5.3	Self-administration of Prescribed and Non-prescribed Medicines.....	12
5.4	Drug Administration Errors	13
6.	Disposal of Medicines	13
6.1	Disposal of medicine	13
6.2	Record of Disposal	14
7.	The Handling of Non-Prescribed Controlled Drugs.....	14
8.	Emergency Medication	14
9.	Medicines Information and Pharmaceutical Advice	15
9.1	Hazard notification and Drug Alerts.....	15
10.	Adverse Drug Reactions	15
11.	Staff Induction and Training.....	15

In accordance with the guidance laid down in the National Minimum Standards for Boarding Schools and National Care Standards Commission Children's Home regulations, all schools are required to have written policies and procedures on the administration and control of medicines. The Department of Education also give guidance for Supporting Pupils at School with Medical Conditions, that is referred to within this document. Therefore, this policy must be easily accessible to all staff working in the school and should be always complied with.

I. Roles and Responsibilities

I.1 Parents

For definitions and legal terms see 'Managing Medicines in Schools and Early Years' Department of Health document.

It is important that professionals understand who has parental responsibility for a child. Parents should provide the Health & Wellbeing Centre (HWBC), with sufficient information about their child's medical needs. Ideally, a Doctor's letter listing treatment, special needs and current medication should be provided. Any Specialist letters and documentation from external Healthcare providers must be provided to the HWBC by parents as soon as possible, as outlined in Healthcare Arrangements paperwork. They should, jointly, with the HWBC, reach agreement on the School's role in supporting their child's medical needs, in accordance with the School's policy, and sign the appropriate spaces on the New Pupil consent form.

It only requires one Parent to agree to, or request that, medicines be administered. As a matter of practicality, it is likely that this will be the parent with whom the school or setting has day-to-day contact.

The HWBC staff will always seek pupil's and/or parental agreement before passing on information about the pupil's health to other staff. Sharing information is important if staff and parents are to ensure the best care for a child. See also Confidentiality and Information sharing Policy.

I.2 The School as Employer

The school must have in place an acceptable Health and Safety Policy, incorporating the Management of Administration of Medicines.

Appropriate Employers Liability Insurance must be in place, plus insurance providing full cover in respect of actions that could be taken by staff in the course of their employment; Particularly staff who provide specific medical support, such as Nurses and House Parents. It is the Employer's responsibility to make sure that proper procedures are in place, that staff are aware of the procedures and are fully trained to support the medical needs of the pupils.

The Employer should satisfy itself that training has given staff sufficient understanding, confidence and expertise and that arrangement is in place to update training on a regular basis.

The Employer should also ensure there are appropriate systems for sharing information about child's medical needs.

1.3 Head of Health & Wellbeing

The Head of Health & Wellbeing will have overall responsibility for the day-to-day management of the HWBC and all activities connected with the administration of medicines to pupils of the school.

This will include the maintenance of records, communication with relevant staff and parents, and ensuring that working practice complies with the requirements of the school policies to satisfy relevant statutory obligations. The Head of Health and Wellbeing is a dual trained Adult and Children's nurse, (RNC/RN) and lives on site at Stonar School.

1.4 Nursing Staff, Teaching and Other Staff

All staff must be aware of the contents of this document and of their likely/possible role in the administration of medicines to pupils and must comply with its requirements at all times.

- i. Head of Health & Wellbeing - regular involvement and responsibility to work according to these guidelines and within professional code of conduct.
- ii. HWBC Team - Regular involvement and responsibility to work according to these guidelines and always within professional code of conduct.
- iii. House Parents - regular involvement and responsibility to work according to these guidelines.
- iv. Tutors and Sub-Tutors - Occasional involvement and responsibility to work, according to these guidelines.
- v. Teaching staff - occasional involvement and responsibility to work according to these guidelines, for example, in an emergency or when accompanying pupils on a school excursion off the premises.
- vi. Other staff - occasional involvement and responsibility to work according to these guidelines, for example, in an emergency or when accompanying pupils on a school excursion off the premises.

2. Medical Centre Records

The Head of Health & Wellbeing will have overall responsibility of the HWBC. The Head of Health & Wellbeing will be responsible for ensuring the appropriate maintenance of records. The Head of Health & Wellbeing can appoint other members of staff to be the "designated person" to oversee medication procedures on a day-to-day basis. The "designated person" and other staff involved in medication management should be appropriately trained to undertake this role.

All records should be properly completed, legible and current and be always available for inspection. Records should provide a complete audit trail of medication. A list of specimen signatures should be kept by the Head of Health & Wellbeing, of all staff who are deemed competent to be involved in the administration of medicines, and/or First Aid, following relevant training and/or induction. Medicine Records should be kept for at least 15 years from the date of the last entry.

2.1 Health Care Records

There should be an individual Health Care Record for each pupil, containing relevant health and welfare information provided by parents and recording significant health and welfare needs and issues. This will be held as a paper file in the HWBC, with relevant and appropriate details added to the shared electronic School record, which can be accessed by HWBC staff, House Parents and Tutors.

This should include:

- i. Name and date of birth.
- ii. Significant known drug interactions.
- iii. Major allergies.
- iv. Chronic/notable medical conditions – see below.
- v. Full details of all current medicines to include:
- vi. Name, date prescribed and by whom, quantity, dose, form, strength and route and times of administration. This also includes preparations for external use and homely remedies used by that pupil.
- vii. Any information given by a pharmacist on foods which might react with the prescribed medicine.
- viii. Parental permission: for the administration of First Aid and appropriate non-prescription medication to boarders, and to seek medical, dental or optical treatment when required.
- ix. All medicines brought into school are to be recorded - see below.

2.2 Health Care Plan

A Health Care Plan will be kept for each pupil with a chronic/notable condition, whether regular medication is required, and it should be updated on at least an annual basis, or as appropriate if circumstances change as identified on their Individual Health Care Record. This will be held on the shared electronic record, which can be accessed by HWBC staff, House Parents, and the pupil's Tutor.

There is a statutory requirement to record information on all medicines in boarding schools. Records of current medication must be kept for each pupil. The following records relating to all medicines must be kept:

- i. All medicines received by the school.

- ii. All medicines prescribed for pupils.
- iii. All medicines administered by the school.
- iv. All medicines transferred out of the school or returned to the pharmacy for disposal.

2.3 Receipt of Medicines

All medicines brought into school from whatever source should be formally received by a HWBC Nurse or House Parent and the following information recorded on the pupils shared electronic health record. The records should show:

- i. Date of receipt.
- ii. Name and strength of medicine.
- iii. Quantity received.
- iv. Pupil for who prescribed and to whom it is administered.
- v. Signature of staff receiving the medicine.

Use books held in the HWBC, depending where medicine is received, for ongoing administration of the medicine.

2.4 Medicines Administered to Pupils

Medication Administration Record books are working documents signed to record the administration of medication. They will include prescribed medication and non-prescribed medication administered by House Parents or Nursing staff.

All records relating to an individual pupil are held electronically on a shared record system, which can be accessed by HWBC staff, House Parents and the pupil's Tutor.

The record should be consulted at the time of administering the medication.

Make a record in the appropriate medicine record book held in the HWBC, depending where the administration takes place, which should include all medication administered and the reason for it, any medication refused, missed doses, date discontinued and reason.

A medicine record sheet will also be issued to staff in charge for use when out of school on a trip or sports fixture etc.

Details of any medication errors should be recorded, and an Incident Form completed.

2.5 Self-administration Assessment

A risk assessment will be undertaken by a Nurse to ensure that an individual pupil can self-medicate without risk to self or possible risk to other pupils, as long as there is parental consent for this.

2.6 Self-administration by Pupils of Medicines

When a pupil is responsible for self-administering medication (prescribed or non-prescribed), a separate entry must be kept with information on the medication prescribed and the times of administration. House Parents must undertake regular checks that the pupil has taken the medication.

The Nurse will complete a risk assessment and inform the GP where appropriate (e.g., controlled drugs).

Tactful support or timely reminders must be given to the pupil, if necessary, to aid compliance.

Any problems should be reported to the HWBC staff at the time they are found.

2.7 Change of Dose of Prescribed Medication by GP or another Prescriber

No verbal orders will be accepted for a change in dose or frequency of an already prescribed drug unless an accompanying email or written instruction is received before administration takes place.

3. Obtaining Supplies of Medication

The supply of medicines to boarding schools in the UK comes under the remit of the Medicines Act 1968. This legislation identifies medicines into three categories:

- i. **GSL or General Sales List:** may be purchased from any retail outlet
- ii. **P or Pharmacy Only:** may be purchased within a community Pharmacy when a pharmacist supervises the sale.
- iii. **POM or Prescription Only Medicines:** may only be obtained by presentation of a written prescription signed by an authorised prescriber.

3.1 Homely Remedies or Non-prescribed Medication

Medicines in the P or GSL category may be purchased by the Head of Health & Wellbeing, or designated HWBC Nurse of the school, to use as stock for treatment of minor ailments.

An agreed list and quantity have been compiled in conjunction with the School GP. These medicines must not be labelled for an individual if they are to be administered to several pupils.

Receipt and stock balance must be recorded in the appropriate medicine record book. Where non-prescribed drugs are bought by a pupil or parent, they should be recorded as previously outlined.

Pupils are strictly prohibited from purchasing medications online, be this homeopathic, supplemental or pharmaceutical.

Parents/Guardians are also prohibited from mailing such items to pupils. The only medications that a pupil is permitted to hold should be prescribed by a GP/Specialist or be a recognised over-the-counter remedy that can be obtained from a chemist. In ALL cases of a pupil holding medication, the HWBC and House Parent MUST be aware of what the medication is.

3.2 Sports Supplements

The Head of Health & Wellbeing in the HWBC, in partnership with the Director of Sport, does not support the use of dietary supplements (e.g. Protein supplements) and Stonar School Policy states that supplement use in young athletes is prohibited. A balanced, healthy diet is promoted, along with personalised advice, when sought.

This is in line with Medical Officers of Schools Association (MOSA) recommendations. Policy also states that it must be considered that supplements are not classified as drugs as there is no regulation in their manufacture, often resulting in contamination with other chemicals which are banned by the World Anti-Doping Agency (WADA).

3.3 Prescribed Drugs

Written prescriptions, both NHS and private (except Blacklisted items), may be provided for individual pupils for medicines in all categories.

The Medicines Act clearly defines that prescribed medicines must only be administered to the person for whom they have been prescribed, labelled and supplied.

Medicines supplied for individuals are the property of that individual. These medicines may not, therefore, be used as 'stock' by the school.

Staff must not tamper with supplies of prescribed packs of medicines or decant from one container to another for the purpose of storage. This includes remains of the current supply when a new supply is received; the original supply should be finished first. Stock levels of medication should be kept at an appropriate level for each pupil, dependent on need.

Staff should ensure that the doctor prescribing the medicines:

- i. Writes full and precise instructions on the prescription. Instructions such as 'as before' or 'as directed' should be avoided.
- ii. Includes the dose and frequency of administration to enable correct treatment and reduce the risk of administration errors
- iii. Specifies the route of administration when the oral route is not indicated
- iv. Provides criteria for use of an 'as required' medication, including dose, frequency and dosage interval, and the maximum daily dose.

Before it can be administered, a prescribed medicine must have a printed label showing:

- Pupil's name
- Date of dispensing
- Name and strength of the medicine
- Dose and frequency of the medicine.

Multiple containers should be labelled individually. Where items have an inner container (e.g. eye drops, creams etc.) the label should be applied to the item instead of, or as well as, the outer container.

If the label becomes detached, damaged or illegible the advice of the pharmacist should be sought before the product is used.

It is good practice to record that a request for a repeat prescription has been made. If medicine is supplied which is unexpectedly different from that received in the past, the staff must check with the pharmacist and/or the prescriber before formally receiving or administering the medication.

Receipt and stock balance to be recorded in medicine record book on the individual page for that pupil and drug by houseparent if they are keeping it. If the GP changes the dose of a medication then they must provide written authorisation for the HWBC. The container must then be clearly re-labelled by the pharmacist or the GP if necessary. The HWBC staff must not alter any information on medication labels.

3.4 Controlled Drugs

The Misuse of Drugs act 1971 is the legislation governing controlled drugs. Controlled drugs will only be supplied on an NHS or private prescription for individual pupils. The school is not permitted to hold controlled drugs as 'stock items'.

The above information relating to prescribed drugs also applies to this group.

This document will be reviewed on a termly basis with a Nurse and the pupil. As such, this medication must be always locked in their safe.

4. Storage of Medicines

All medicines should be stored in secure designated areas. These include:

- i. The HWBC
- ii. Personal safe, locked drawer or cupboard

Key security is integral to medication security and keys should only be held by authorised designated members of staff.

Duplicate keys for use in an emergency will be available from Head of Health & Wellbeing or designated HWBC Nurse.

Handover procedures should be known and understood by all staff.

Non-prescribed stock medication must be stored separately from prescribed medication, in a locked cupboard that is securely fixed to a wall in the HWBC.

Non-prescribed individual medicines should be stored in personal self-medication lockers/safe or centrally within the HWBC as appropriate.

4.1 Prescribed Medicines

Prescribed medicines should be stored in a locked cupboard that is securely fixed to a wall in the HWBC or the House. There should be sufficient space to store individual pupils' medication.

4.2 Controlled drugs

Controlled drugs should be stored in a controlled drug cupboard securely fixed to a wall/floor, in a secure location in the HWBC. Only Registered Nurses working in the HWBC are authorised to hold the keys to the controlled drugs cupboard.

When kept in House, they should be locked in the House Parent drug cupboard or child's own safe.

4.3 Self-Medication

Those pupils assessed as competent to self-medicate may store their own individual drugs (including controlled drugs) in their safe, locked drawer or cupboard, to which they personally have access. It must not be accessible to other pupils. The school must have a contingency plan for staff to access this, with the permission of the pupil, in case of a problem or emergency arising. It is the responsibility of the House Parent, Tutor to always ensure the security of this medication.

4.4 Cold Storage

Separate, dedicated refrigerators are available to be used exclusively for stock and prescribed medicines requiring cold storage, including vaccinations. They should be kept locked at all times and be regularly cleaned and defrosted.

The temperature should be measured and recorded daily when in use using a maximum minimum thermometer. The normal range is 2-8°C. Staff should document, then contact the Head of Health and Wellbeing if temperatures are recorded outside of the normal range.

Pharmaceutical advice should be taken regarding the stability of the contents of the fridge in such circumstances. Prescribed short-term medicines requiring cold storage should be kept in the House parent's fridge. Prescribed long term medicines should be kept in the HWBC

fridge and sufficient supply or one original pack issued to the House Parent, as appropriate, for the pupil's current use.

5. Administration of Medicines

- i. Administration of medicines is undertaken only by staff designated as competent and who have completed the relevant training.
- ii. Prescribed Medicines should be administered strictly in accordance with the instructions stated by the prescriber.
- iii. They should only be used for the stated purpose and not administered to anyone other than the pupil stated on the label.
- iv. Administration should be made at an appropriate time in order to maximise benefit from the medicine (e.g. may be necessary to take before or after meals or last thing at night).
- v. It is an individual's right to refuse medication. Steps should be taken to explain the benefit of taking the prescribed medication. However, persistent refusal should be recorded and reported to the GP.
- vi. Only a Registered Nurse may administer medication requiring specialised or invasive technique. These may include:
 - a) Subcutaneous injection of insulin
 - b) Medicines administered by the rectal route
 - c) Giving oxygen. In exceptional circumstances, this may be delegated to another member of staff who will receive suitable training. The pupil/parent must have given consent for this delegation.
 - d) Details of support and accountability to be included in the individual Health Care Plan.
 - e) Medicine must not be secondarily dispensed for someone else to administer at a later time.

5.1 Procedure for the Administration of Medicines

- i. Check the identity of the pupil.
- ii. Check the medication chart or record, dosage instructions, noting any recent changes and ensure that the medication has not already been administered.
- iii. Check that the pupil is not allergic to the medicine before giving it.
- iv. Check the expiry date of the medicine.
- v. Administer the medicine following the prescribed instructions.
- vi. Sign the administration record immediately after the medication has been given.
- vii. Where there is a choice of dosage (i.e. one or two tablets) record the number given.
- viii. Where a drug is to be given 'as required', record whether given or not and reason for giving or not.
- ix. Record any refusal of medication and the reason. If persistent refusal is reported to the GP, then a record of this should be made of the time, date and who the problem was reported to and signed by the member of staff. Record also any advice received from the prescriber.

- x. For homely remedies to be given in Houses and the HWBC, the Homely Remedy Guideline should be followed.
- xi. Handover procedures should be known and understood by all staff.
- xii. Homely remedies should not be administered for longer than 48 hours without obtaining medical advice.
- xiii. For controlled drugs, appropriate entry must be made in the pupil's own drugs record. The balance should be checked and maintained by staff after each administration.
- xiv. A record should be made of doses irretrievably lost (dropped or spilled) during administration, in case further supplies are then needed to finish the course.
- xv. Crushing tablets or opening capsules to aid administration should be avoided; advice about alternative formulations should be sought from the GP.

5.2 Administration of Medicines away from School

When away from school the parent of the pupil would receive the balance of the prescribed medication.

For occasional days out, a separate supply may be organised as the secondary dispensing of medication into envelopes for example is not appropriate. Details of medicines taken out should be recorded and the administration supervised by the staff responsible for the pupil whilst away from school.

The administration guidelines above should be followed. An off-site medicines record book/form should be used to maintain a complete medicine audit trail.

If a pupil is self-administering medication at School, they may continue to do so on a School trip. The person in charge should have an awareness of the medication in a pupil's possession but, in this instance, does not have to administer.

A medicine pack containing: authorised homely remedies, a medicines record book/form and where necessary pupils' own medicines, will be provided in the event of excursions off the school premises.

Medicines policy should be followed at all times when off the premises

5.3 Self-administration of Prescribed and Non-prescribed Medicines

Pupils keeping and administering their own medication must be assessed by HWBC staff as being sufficiently responsible to do so.

This is recorded on their personal electronic school record as a consultation when they collect their prescription – this is then emailed to the House Parent so that they are aware.

Individually dispensed supplies of controlled drugs may be kept in the pupil's safe, locked drawer or cupboard but the HWBC staff must decide the appropriateness of each case.

Pupils keeping their own medicine must agree to keep it in their own individual safe, locked drawer or cupboard and not to make the medicine available to anyone else. House Parents should monitor medication and spot check compliance.

5.4 Drug Administration Errors

- i. If an error is realised, clinical advice must be sought immediately, no matter how trivial it may seem.
- ii. Appropriate line manager and HWBC colleague in charge must be informed.
- iii. The Head of Health & Wellbeing must be informed, even if advice is initially sought from a different source, and a record made on the pupil's NHS record.
- iv. The pupil's Parents, House Parent and Tutor should be informed.
- v. An Incident Form should be completed to enable a review to take place into how the error occurred to prevent a similar incident happening again.
- vi. Out of hours contact numbers.

6. Disposal of Medicines

Medicines should be removed and disposed of when appropriate; care should be taken with medicines with a short shelf life.

Prescribed medicines for an individual pupil are the property of that pupil and should be given to the pupil, parent or member of staff as appropriate when leaving the school for any period.

All controlled drugs that are out of date or no longer required should be returned to the local pharmacy for destruction, after obtaining positive consent from the pupil for whom they were prescribed.

A record of receipt, signed by the receiving pharmacist should be obtained and retained by the HWBC. A duplicate book will be kept for this purpose. Any Pupil or House Parent who has controlled drugs that are out of date, or no longer required, should return them to the HWBC for pharmacy return.

All other unwanted drugs are to be returned to the pharmacy for destruction. Consent, verbal or written, is required before the medicine can be returned to the pharmacy for disposal.

This consent should be recorded, by a HWBC colleague, on the relevant page in the pharmacy return duplicate book held in the HWBC.

6.1 Disposal of medicine

Disposal of medicines should occur when:

- i. The expiry date is reached.
- ii. A course of treatment is finished or is discontinued.

- iii. When a dose of medicine has been removed from the original container but then not taken by the pupil, it should be kept by the Head of Health & Wellbeing and returned to the pharmacy for safe disposal.
- iv. Positive consent has been obtained if the medicine is not a stock item but belongs to a pupil.
- v. In the unlikely event a pupil is deceased (keep for seven days, in case needed by Coroner's office or courts).

Controlled drugs obtained on individual NHS prescriptions may be disposed of by returning to the supplying pharmacy.

A signature of receipt should be obtained from the pharmacist. Use the duplicate book to record this information. House Parents should sign the drugs out of their records in House, including that consent obtained and if verbal or written, at the point at which they are returned to the HWBC.

Medicines should not be disposed of by school staff.

Return of medicines for destruction should be authorised by a Registered Nurse working in the HWBC, who should ensure that the record of return is completed. Use the duplicate book to record this information.

6.2 Record of Disposal

The record of disposal should include:

- i. The pupil's name (for prescribed, controlled drugs and individual homely remedies).
- ii. Name, strength and quantity of medicine.
- iii. Date of return.
- iv. Consent of pupil.
- v. Signature of Nurse authorising the return.

With regards to inhalers, a used inhaler counts as waste for disposal.

7. The Handling of Non-Prescribed Controlled Drugs

A licence is required to possess a schedule I controlled drug. If a circumstance arose, where a member of staff was required to remove a substance from a person, they may only take possession of the substance for the purpose of handing it over to the police for destruction.

8. Emergency Medication

Pertaining to those medications that would usually require a prescription, for example Salbutamol inhaler and Adrenaline Auto-Injector (AAI) device.

Consent to use these is requested in writing from Parents. Explicit consent is requested from Parents of Asthmatics to use an emergency inhaler, as only Asthmatics are able to use this. The use of Adrenaline Auto-Injectors (AAIs) is covered by asking consent to treat Medical Emergencies. The administration of a Salbutamol inhaler and AAI device in an emergency is covered in the First Aid training delivered in the School in an Emergency. A Salbutamol inhaler may be administered if the Pupil's own inhaler is not available (See Asthma Policy), in accordance with the flowchart for the management of an Asthma Attack.

In an emergency, an AAI may be administered, if the Pupil's own AAI is not available or anaphylaxis is apparent without a known diagnosis. All Pupils requiring an AAI or Salbutamol are encouraged to carry this with them **AT ALL TIMES**.

Emergency AAIs can also be found in school dining room and the HWBC. All Asthmatic pupils will be invited for an annual review within the HWBC. All pupils required to carry an AAI will have a personal plan, including photo, detailing allergens and treatment plan.

9. Medicines Information and Pharmaceutical Advice

Staff should have access to appropriate information about medicines. They should contact our local community pharmacist, Gompels (D&M), Melksham, if additional information is required concerning individual medicines. A current copy of the British National Formulary should be available on site.

9.1 Hazard notification and Drug Alerts

In the event of a medicine being recalled, the community pharmacist should notify the school as appropriate. A record should be kept of any action taken. The Head of Health & Wellbeing or designated HWBC Nurse is responsible for dealing with the information at the time.

10. Adverse Drug Reactions

Any Adverse Drug reaction (ADR) or suspected ADR should be discussed with the GP and/or the community pharmacist before any further administration of that drug. If appropriate, the reaction should be reported to the Medicines and Healthcare Regulatory Agency (MHRA) via the yellow card scheme.

Yellow cards are available in the BNF, where information about the types or reaction to report is also given. Any action taken should be recorded. The Head of Health & Wellbeing or designated HWBC Nurse is responsible for dealing with the information at the time.

11. Staff Induction and Training

- i. If the employee is employed as a Nurse, they must have current registration status with the Nursing and Midwifery Council (NMC).

- ii. All Medical Centre Nursing staff should, as part of the HWBC induction, be instructed on procedures for:
 - a) Obtaining medication
 - b) Storing medication
 - c) Administering medication
 - d) Recording activity
- iii. All Staff must receive training/information on any current policies and procedures for the management of medicines within the school.
- iv. Nursing Staff and House Parents should not be responsible for administering prescribed or controlled medication until they have completed the induction and training required.
- v. The Head of Health & Wellbeing is responsible for ensuring that only competent staff are eligible to undertake administration of medicines.
- vi. Training should be documented and records held at the HWBC and HR department.
- vii. All staff should receive training in, or information on, the Medicines Management Policy appropriate to their role, to ensure the school's procedures are followed correctly and the safety of pupils is not compromised.
- viii. Review and evaluation of staff performance in relation to the Medicines Management Policy should occur through the probationary period and periodically thereafter.
- ix. Where training needs are identified, appropriate training should be accessed at the earliest opportunity.
- x. Staff required to administer First Aid should be appropriately trained and regular updates provided.

Head of Health and Wellbeing Centre
CF Walter RNC/RN

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