

Bohermore N.S.

Policy on the Administration of Medication

Bohermore N.S. is committed to promoting the good health and well-being of the school community. The Board of Management of Bohermore N.S. acknowledges its duty to safeguard the health and safety of all pupils when they are engaged in authorised school activities, with due regard to its duty of care to all staff. There is no legal duty on School staff to administer medicines. This is purely a voluntary role. The procedures outlined in this document are compliant with the INTO/CPSMA guidelines.

The following points of policy apply with regard to pupils with specific ongoing medical conditions and to the administration of medicines within the school.

1. The Board requests Parents/Guardians to ensure that Staff members be made aware, in writing, of any medical condition suffered by any children in their class at the beginning of each new school year.
2. Whenever possible Parents/Guardians should arrange for the administration of medicines outside of school hours. Short term medications, such as antibiotics, will not be administered by school staff. When necessary Parents/Guardians can seek permission from Teacher/Principal to withdraw a child for the purpose of the administration of medicine.
3. Self- Medication: The Board of Management does not accept responsibility for pupils who self-administer medication in school. The Board of Management requires written consent each year from Parents/Guardians whose child needs to self-administer medication and the Board, in permitting such self-medication, at the request of parents, accepts no responsibility whatsoever in respect of same.
4. As a general rule Teachers will not be involved in the administration of medication to pupils. In exceptional circumstances, where a Teacher agrees on a voluntary basis to become involved in the administration of medication, the following procedures must be adhered to:
 - a. The Parents/Guardians of the pupil concerned should write to the Board of Management requesting that the Board authorise willing staff members to administer the medication. The Medical Treatment Request Form must be completed in full detailing the following information:
 - The name of the child
 - Name and dose of the medication including expiry date
 - Whether or not the child is responsible for his/her own medication
 - The circumstances in which medication is to be given by a staff member and consent for it to be given
 - When the parent is to be contacted and where s/he can be contacted. (Any change to the contact details should be notified to school as soon as possible.)
 - Clear and precise instructions on the procedures to be followed in administering the medication to be provided by the consultant/doctor in charge of the child's medical welfare.

- Medicines should always be provided in the original container as dispensed by the Pharmacist, and include name of child and prescriber instructions for dosage and administration. School will not accept medicines that have been taken out of original container.
- b. The request will contain clear and precise written instructions of the procedure to be followed in administering the medication.
 - c. The Board of Management, having considered the matter, may authorise staff members to administer medication to a pupil. Authorised staff should receive relevant training in the administration of such medication.
 - d. Staff members should not administer medication without the authorisation of the board.
 - e. In administering medication to pupils, staff members should exercise the standard of care of a reasonable and prudent parent.
 - f. A written record of the date and time of administration will be kept for each student.
 - g. The Board will inform the school's insurers accordingly.
 - h. The Board of Management will seek an indemnity from the Parents/Guardians in respect of any liability that may arise regarding the administration of medication.
 - i. Such medication will be stored appropriately in central storage facilities.
 - j. It is the Parents/Guardians responsibility to ensure that the medicine provided is appropriate and in date. Parents /Guardians should record all information relating to the medication provided to the school. Parents/Guardians must ensure that all emergency contact details provided to the school are kept up to date.
5. Where a pupil has a specific medical condition all staff are made aware of the likely symptoms of an attack/illness of that pupil. Appropriate training in how to deal with emergencies involving common medical conditions such as diabetes, asthma, epilepsy, and anaphylaxia will be provided on a regular basis by appropriate professionals. A record of such training will be maintained by the Deputy Principal. Regular staff meeting updates will take place in relation to such pupils.
 6. In the case of emergencies Teachers should do no more than is obviously necessary and appropriate to relieve extreme stress or to prevent further harm. Qualified medical treatment should be secured in emergencies at the earliest opportunity. c/f Critical Incident Policy.

Ratified by Board of Management on: 3rd December 2020

Signed by Chairperson of the Board of Management: Rev. James Walker

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Administration of Medicine in School Request Form		
Child's Name		
Address		
Date of Birth		
Teacher/Class		
Emergency Contacts		
Name/Phone		
Name/Phone		
Name/Phone		
Child's family doctor/Phone		
Child's Medical Consultant/Phone		
Diagnosed condition		
Description of medical condition		
Description of medicines (including potential side effects)		
Specific instructions re. administration of medicine, dosage, and instructions in emergency situation		
Who will administer the medicine?		
Child		
Child under teacher supervision		
Teacher		
Other (please specify)		

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I/We request that the Board of Management authorise the administration of the following medication (name of medication & dosage) to (name of child) in emergency situation only. I/We understand that I/we will supply the necessary medication to the school and will be responsible for ensuring that it is replaced as required. I/we have read the school policy on the emergency administration of medicines, and accept the responsibility that it places on us, the parents/guardians, to regularly update the school on our child's condition, medication, and list of emergency contacts. I/We understand that no school personnel have any medical training, are acting in good faith on the directions of the parents and we indemnify the Board and staff member(s) for any liability that may arise from the administration and/or non-administration of the medication.

Signed _____ Parent/Guardian

_____ Parent/Guardian

Parent/Guardian Date _____

Signed by Parents/Guardians in the presence of _____ Principal/
Deputy Principal