



Snaith Primary School

SUPPORTING CHILDREN WITH MEDICAL NEEDS AND ADMINISTRATION OF PRESCRIBED MEDICINES POLICY

Policy written Jan 2020
Approved

The purpose of this policy is to put into place effective management systems and arrangements to support children and young people with medical needs in the school and to provide clear guidance for staff and parents/guardians on the administration of medicines. This document, where appropriate, must be considered in conjunction with all other relevant policies, for example, health and safety.

All staff in schools and early year's settings have a duty to maintain professional standards of care and to ensure that children and young people are safe. It is expected good practice that schools and settings will review cases individually and administer medicines in order to meet the all-round needs of the child. However, there is no legal duty requiring staff to administer medication or to supervise a child when taking medicines. This is a voluntary role.

ROLES AND RESPONSIBILITIES

Under the Disability Discrimination Act (DDA) 1995, schools and settings should be making reasonable adjustments for disabled children, including those with medical needs, and are under a duty to plan strategically to increase access over time. Schools and settings should consider what reasonable adjustments they need to make to enable children with medical needs to participate fully in all areas of school life, including educational visits and sporting activities.

The Headteacher, in consultation with the Governing body, staff, parents/guardians, health professionals and the Local Authority, is responsible for deciding whether the school or setting can assist a child with medical needs. The Headteacher is responsible for:

- implementing the policy on a daily basis.
- ensuring that the procedures are understood and implemented.
- ensuring appropriate training is provided.
- making sure there is effective communication with parents/guardians, children and young people, school staff and all relevant health professionals concerning the pupil's health needs.

It is good practice that staff, including supply staff should always be informed of a child's medical needs where this is relevant and of any changes to their needs as and when they might arise. All staff will be informed of the designated person with responsibility for medical care. A list of medical needs is clearly known and accessible in order to support the child's day to day care.

PARENTS/GUARDIANS

It is the responsibility of parents/guardians to:

- a) inform the school of their child's medical needs.
- b) provide any medication to the school office in a container clearly labelled with the following:
 - THE CHILD'S NAME
 - NAME OF MEDICINE
 - DOSE AND FREQUENCY OF MEDICATION
 - SPECIAL STORAGE ARRANGEMENTS
- c) collect and dispose of any medicines held in school at the end of each term.
- d) ensure that medicines have not passed the expiry date.

PUPIL INFORMATION

Parents/guardians should be required to give the following information about their child's long term medical needs and to update it at the start of each school year or update school when changes arise:

- Details of pupil's medical needs.
- Medication, including any side effects.
- Allergies.
- Name of GP/consultants.
- Special requirements eg dietary needs, pre-activity precautions. Parents/guardians may be required to provide evidence in this case.
- What to do and who to contact in an emergency.
- Cultural and religious views regarding medical care.

ADMINISTERING MEDICATION

Staff are not legally required to administer medicines or to supervise a child when taking medicine. Any employee may volunteer to undertake this task but it is not a contractual requirement and appropriate training should be given before an individual takes on a role which may require administering first aid or medication.

All schools should ensure that they have sufficient members of support staff who are appropriately trained to manage medicines as part of their duties. Within their Health and Safety Policy it should incorporate managing the administration of medicines and supporting children with complex health

needs. For staff following documented procedures, they should be fully covered by their local authority's insurance cover should a parent/guardian complain. Staff should also be aware when a child may need extra attention due to changes to their medical requirements as agreed with parents/guardians and their care plan altered as necessary. In the likelihood of an emergency arising, all staff should be aware of what action to take and back up cover should be arranged if the staff member normally responsible for the child's care is absent.

- **It is expected that parents/guardians will normally administer medication to their children at home.**
- **No medication will be administered without prior written permission from the parents/guardians.**
- **A 'Parental agreement for school to administer prescribed medicine' form must be completed.**

These staff are: Mrs D Ford, Mrs J Wharam and Mrs V Chesworth in the office. Staff administering specific medication are named on the child's Health Care Plan.

Over the counter/un-prescribed medication will **only be administered by school staff in exceptional circumstances**. This may be discussed with a senior member of staff who may need clarification from your family GP.

The Headteacher will decide whether any medication will be administered in school/early years setting and following consultation with staff, who will be responsible. All medicine will normally be administered during breaks and lunchtime. If, for medical reasons, medicine has to be taken at other times during the day, arrangements will be made for the medicine to be administered at other prescribed times. Where appropriate, pupils will be told where their medication is kept.

Any member of staff, on each occasion, giving medicine to a pupil should check:

- a) Name of pupil.
- b) Written instructions provided by the parents/guardians or doctor.
- c) Prescribed dose.
- d) Expiry date.

STORAGE

Where appropriate all medicine will be safely stored appropriate to the access to the child. All medicine will be logged on the school's medical file. Class teachers will store children's inhalers, which must be labelled with the pupil's name.

RECORDS

Staff will complete and sign a Record of medicine administered to an individual child each time medication is given to a child and these will be kept in the administration office. The sheets will record the following:

- a) Name of pupil.
- b) Date and time of administration.
- c) Who supervised the administration.
- d) Name of medication.
- e) Dosage.
- f) A note of any side effects.

[Form 5: Record of long term prescribed medicine administered to an individual child](#)

[Form 6: Record of short term prescribed medicines administered to all children](#)

REFUSING MEDICATION

If a child refuses to take their medication, staff will not force them to do so. Parents/guardians will be informed as soon as possible. Refusal to take medication will be recorded and dated on the child's record sheet. Reasons for refusal to take medications must also be recorded as well as the action then taken by the teacher.

TRAINING

Training may be required as part of a pupil's individual care plan specific to the pupil's requirements. This will be provided on a range of medical needs, including any resultant learning needs, as and when appropriate. The Headteacher will ensure there are trained and named individuals to undertake first aid responsibilities, ensuring training is regularly monitored and updated. Advice on the treatment of Asthma will be available from either the school nurse or the school first aiders who will also brief all staff with any updates/changes on a yearly basis.

[Form 8: Administration of prescribed medicines staff training record](#)

HEALTH CARE PLAN

Where appropriate, a personal Health Care Plan will be drawn up in consultation with the school, parents/guardians/carers and health professionals. The Health Care Plan will outline the child's needs and the level of support required in school. Health Care Plans will be reviewed annually.

The Headteacher will ensure that all staff are aware of the school's planned emergency procedures in the event of medical needs.

[Form 2: Health Care Plan may be used.](#)

INTIMATE OR INVASIVE TREATMENT

This will only take place at the discretion of the Headteacher and Governors, with written permission from the parents/guardians and only under exceptional circumstances. Two adults, where possible, one of the same gender as the child, must be present for the administration of such treatment. Cases will be agreed and reviewed on an individual basis. Training will be given to members of staff involved where necessary and all such treatment will be recorded. (Ref. Intimate Care Policy)

SCHOOL TRIPS

To ensure as far as possible, all children have access to all activities and areas of school life, a thorough risk assessment will be undertaken to ensure the safety of all children and staff. No decision about a child with medical needs attending/not attending a school trip will be taken without prior consultation with the parents/guardians.

Residential trips and visits off site:

- a) Sufficient essential medicines and appropriate Health Care Plans will be taken and controlled by the member of staff supervising the trip;
- b) If it is felt that additional supervision is required during activities e.g. swimming, school may request the assistance of the parent/guardian/carer.

POLICY STATEMENT

This school is an inclusive community that welcomes and supports pupils with medical conditions. This school provides all pupils with any medical condition the same opportunities as others at school. We will help to ensure they can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic wellbeing once they leave school.

The school makes sure all staff understand their duty of care to children and young people in the event of an emergency.

All staff feel confident in knowing what to do in an emergency.

This school understands that certain medical conditions are debilitating and potentially life threatening, particularly if poorly managed or misunderstood.

This school understands the importance of medication and care being taken as directed by healthcare professionals and parents.

All staff understand the medical conditions that affect pupils at this school. Staff receive training on the impact medical conditions can have on pupils. The named member of school staff responsible for this medical conditions policy and its implementation is:

Helen Calpin - Headteacher

POLICY FRAMEWORK

The policy framework describes the essential criteria for how the school can meet the needs of children and young people with long-term medical conditions.

1. This school is an inclusive community that supports and welcomes pupils with medical conditions.

This school is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.

This school will listen to the views of pupils and parents.

Pupils and parents feel confident in the care they receive from this school and the level of that care meets their needs.

Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability to learn.

All staff understand their duty of care to children and young people and know what to do in the event of an emergency.

The whole school and local health community understand and support the medical conditions policy.

This school understands that all children with the same medical condition will not have the same needs.

The school recognises that duties in the Children and Families Act (England only), the Equality Act (England, Wales and Scotland) and the Disability Discrimination Act (Northern Ireland only) relate to children with disability or medical conditions and are anticipatory.

2. This school's medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

Stakeholders should include pupils, parents, school nurse, school staff, governors, the school employer, relevant local health services and relevant supporter organisations.

3. The medical conditions policy is supported by a clear communication plan for staff, parents* and other key stakeholders to ensure its full implementation.

Pupils, parents, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

4. All children with a medical condition should have an individual healthcare plan (IHP).

An IHP details exactly what care a child needs in school, when they need it and who is going to give it.

It should also include information on the impact any health condition may have on a child's learning, behaviour or classroom performance.

This should be drawn up with input from the child (if appropriate) their parent/carer, relevant school staff and healthcare professionals, ideally a specialist if the child has one.

5. All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.

All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.

All staff receive training in what to do in an emergency and this is refreshed at least once a year.

A child's IHP should, explain what help they need in an emergency. The IHP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.

6. All staff understand and are trained in the school's general emergency procedures.

All staff, including temporary or supply staff, know what action to take in an emergency and receive updates at least yearly.

If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

7. This school has clear guidance on providing care and support and administering medication at school.

This school understands the importance of medication being taken and care received as detailed in the pupil's IHP.

This school will make sure that there is more than one member of staff trained to administer the medication and meet the care needs of an individual child. (This would include escort staff for home to school transport if this was necessary.) This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.

This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the pupil to involve their parent, while respecting their confidentiality.

When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents will be informed. This school will not give a pupil under 16 aspirin unless prescribed by a doctor.

This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.

Parents at this school understand that they should let the school know immediately if their child's needs change.

If a pupil misuses their medication, or anyone else's, their parent is informed as soon as possible and the school's disciplinary procedures are followed.

8. This school has clear guidance on the storage of medication and equipment at school.

This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/ equipment is readily available wherever the child is in the school and on off-site activities, and is not locked away. Pupils may carry their emergency medication with them if this is appropriate.

Pupils may carry their own medication/equipment, or they should know exactly where to access it.

This school will keep controlled drugs stored securely, but accessibly, with only named staff having access. Staff at this school can administer a controlled drug to a pupil once they have had specialist training.

This school will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately.

This school will store medication that is in date and labelled in its original container where possible, in accordance with its instructions. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.

Parents are asked to collect all medications/ equipment at the end of the school term, and to provide new and in-date medication at the start of each term.

This school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

9. This school has clear guidance about record keeping.

Parents at this school are asked if their child has any medical conditions on the enrolment form. This school uses an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent, school staff, specialist nurse (where appropriate) and relevant healthcare services.

This school has a centralised register of IHPs, and an identified member of staff has the responsibility for this register.

IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.

The pupil (where appropriate) parents, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care.

This school makes sure that the pupil's confidentiality is protected.

This school seeks permission from parents before sharing any medical information with any other party.

This school meets with the pupil (where appropriate), parent, specialist nurse (where appropriate) and relevant healthcare services prior to any overnight or extended day visit to discuss and make a plan for any extra care requirements that may be needed. This is recorded in the pupil's IHP which accompanies them on the visit.

This school keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.

This school makes sure that all staff providing support to a pupil and other relevant teams have received suitable training and ongoing support, to make sure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse/school nurse/ other suitably qualified healthcare professional and/ or the parent. The specialist nurse/school nurse/ other suitably qualified healthcare professional will confirm their competence, and this school keeps an up-to-date record of all training undertaken and by whom.

10. This school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.

This school makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.

All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.

This school understands the importance of all pupils taking part in physical activity and that all relevant staff make appropriate adjustments to physical activity sessions to make sure they are accessible to all pupils. This includes out-of-school clubs and team sports.

This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/ take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

This school makes sure that pupils have the appropriate medication/equipment/food with them during physical activity.

This school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.

All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition. This school will not penalise pupils for their attendance if their absences relate to their medical condition.

This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCO/ALNCO/Special Educational Needs Advisor who will liaise with the pupil (where appropriate), parent and the pupil's healthcare professional.

Pupils at this school learn what to do in an emergency.

This school makes sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

11. This school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks.

This school is committed to identifying and reducing triggers both at school and on out-of-school visits.

School staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers. It has a list of the triggers for pupils with medical conditions at this school, which staff take account of to avoid wherever possible.

The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with medical needs.

This school reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.

12. Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), this school will work with the local authority and education provider to ensure that the child receives the support they need to reintegrate effectively.

This school works in partnership with all relevant parties including the pupil (where appropriate), parent, school's governing body, all school staff, catering staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

13. Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

This school works in partnership with all relevant parties including the pupil (where appropriate), parent, school's governing body, all school staff, catering staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

This school is committed to keeping in touch with a child when they are unable to attend school because of their condition.

14. The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.

In evaluating the policy, this school seeks feedback from key stakeholders including pupils, parents, school healthcare professionals, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services, governors and the school employer. The views of pupils with medical conditions are central to the evaluation process.

- * The term 'parent' implies any person or body with parental responsibility such as a foster parent, carer, guardian or local authority.

Nb. Forms identified refer the documents school complete with parents – in association with the guidelines in the latest version of Medical Conditions at School Management Resource Pack