Naunton Park Primary School

Supporting Pupils with Medical Conditions and Administering Medicines Policy

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A. Supporting pupils with medical conditions

This policy is written in regard to Section 100 of the Children and Families Act 2014 which places a duty on governing boards to make arrangements for supporting pupils with medical conditions.

Aims

- To ensure pupils with physical and mental health conditions are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.

- To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

Procedure

The Headteacher is responsible for ensuring all procedures are followed but it is the Medical Lead (Inclusion Lead), who ensures that

the school is notified that a pupil has a medical condition:

- Sufficient staff are suitably trained.
- Medical care plans are completed and signed.
- Staff and the office have copies.
- All relevant staff are made aware of a child's condition.
- Cover arrangements in case of staff absence/turnover is always available.
- Supply teachers are briefed.
- Risk assessments for visits and activities out of the normal timetable are carried out.
- Individual care plans are monitored (at least annually).
- Transitional arrangements between schools are carried out.
- If a child's needs change, the above measures are adjusted accordingly.

Where children are joining Naunton Park Primary School at the start of a new academic year, these arrangements should be in place for the start of term. Where a child joins midterm or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring medication or support in school should have an individual care plan which details the support that the child needs. If the parents, healthcare professional and school agree that a care plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record on SIMS. If the care plan is deemed inappropriate or disproportionate, a meeting would be held to discuss this and amendments to the care plan should be made.

Medical Care plans

The following information should be considered when writing an individual healthcare plan:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues.
- Specific support for the pupil's educational, social and emotional needs.
- The level of support needed including in emergencies.
- Who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements.
- Who in school needs to be aware of the child's condition and the support required.
- Arrangements for written permission from parents and the Headteacher/ Inclusion Lead for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision).
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate.

- Confidentiality.
- What to do if a child refuses to take medicine or carry out a necessary procedure.
- What to do in an emergency, who to contact and contingency arrangements.

Intimate Care plans

- Intimate care plans should be created when there are concerns around a child's toileting within school
- This should be discussed and written with the parents and staff
- All staff on the care plan should sign to agree to conditions
- When changing a child there should always be two members of staff
- Staff should then sign and date the intimate care plan records
- The intimate care plan should be reviewed every long term with parents

Roles and responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

The Governing Board:

- Must ensure this policy is kept up to date and implemented.
- Must ensure sufficient staff receive suitable training and are competent to support children with medical conditions.
- Must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk.

The Headteacher/Medical Lead:

- Should ensure all staff are aware of this policy and understand their role in its implementation.
- Should ensure all staff who need to know are informed of a child's condition.
- Should ensure sufficient numbers of staff are trained to implement the policy and deliver care plans, including in emergency and contingency situations, and they are appropriately insured.
- Should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse.

School staff:

- Any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.
- Should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions.
- Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- All staff members should use this policy in conjunction with the school's Child Protection and Safeguarding Policy and adhere to safeguarding and welfare procedures when supporting children.

School nurses:

- Are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school.

- May support staff on implementing a child's care plan and provide advice and liaison.

Other healthcare professionals:

- Should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- May provide advice on developing healthcare plans.
- Specialist local teams may be able to provide support for particular conditions (e.g. asthma, diabetes).

Children:

- Should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their care plan.

Parents:

- Must provide the school with sufficient and up-to-date information about their child's medical needs.
- Are the key partners and should be involved in the development and review of their child's care plan
- Should carry out any action they have agreed to as part of the care plan implementation.

Notes

The following practice is considered unacceptable:

- Preventing children from easily accessing their medication and administering it when and where necessary.
- Assuming children with the same condition require the same treatment.
- Ignoring the views of the child, their parents; ignoring medical advice or opinion.
- Sending children with medical conditions home frequently or preventing them from staying for normal school activities (unless specified in care plan).
- Penalising children for their attendance record if their absences are related to their medical condition that is recognised under this policy.
- Preventing children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively.
- To require parents to attend school to administer medication or provide medical support to their child, including toileting issues (no parent should have to give up working because the school is failing to support their child's medical needs).
- Preventing children from participating, or creating unnecessary barriers to children participating in any aspect of school life, including school trips (such as requiring parents to accompany the child).
- Any activity that does not follow our child protection procedures or that cause a concern to staff, pupils or parents in line with the school's Child Protection and Safeguarding Policy.

B. Administering medicines

- We acknowledge that under the standard terms and conditions for the employment of teachers there is no legal duty for them to administer or to supervise a child taking medication.
- Administration of medicines by any member of the school personnel is undertaken purely on a voluntary basis and individual decisions will be respected. However, appropriate training will be provided to every member of the school personnel who

has volunteered for and accepted this role. This training will take place before they start this role and will ensure that they are familiar with all administration of medication procedures.

- Medicines will be administered that have been prescribed by a doctor or some other authorised person where it would be detrimental to a child's health if the medicine were not administered during the school day.
- It is extremely helpful, where possible, if medication can be prescribed in dose frequencies which enable it to be taken outside of school hours. Parents are requested to ask the prescribing doctor, pharmacist etc if such an arrangement is possible.
- Non-prescription medicines such as anti-histamines and paracetamol (Calpol) can be administered by school staff if parents have agreed. School will phone parents to make them aware their child is feeling unwell and will ask for verbal agreement. Staff will email parents with confirmation of what medicine was given, the dosage and at what time.
- Pupils may under certain circumstances self-administer medicines. Those circumstances are, under the direct supervision of an appropriately trained member of staff. In practice, this means, instances such as taking their own inhaler, whilst watched by staff. As a school we follow the government recommendation, that children who are able take responsibility for managing their own medicine do so, within safe parameters.

Aims:

To outline the procedures for administering medicines to pupils.

Parents/carers

Parents have the prime responsibility for their child's health and should provide the school with information about their child's medical condition. Parents should obtain details from their child's GP if needed.

Parents/carers must provide:

- Written permission by completing the Request for School to Manage and Administer Medication Form or Care plan for a Child with Medical Needs
- Sufficient medical information on their child's medical condition.
- The medication in its original container.
- Sufficient medicine for the dosage to be given in school.

Administration of medicines

Members of the school personnel who have agreed to administer or supervise the taking of medication will:

- Be aware of Individual Care Plans and of symptoms which may require emergency action.
- Read and check the Medical Consent Forms before administering or supervising the taking of medicines.
- Check that the medication belongs to the named pupil.
- Check that the medication is within the expiry date.
- Inform the parent if the medication has reached its expiry date.
- Confirm the dosage/frequency on each occasion and consult the medicine record form to prevent double dosage.
- Record on the medication record all relevant details of when medication was given.
- Return medications to the secure area for storage.

- Always take appropriate hygiene precautions.
- Record when a child refuses to take medication.
- Immediately inform the parent of this refusal.

Medication record

The following information must be supplied by the parent:

- Name and date of birth of the child.
- Name and contact details of the parent/carer.
- Name and contact details of GP.
- Name of medicines.
- Details of prescribed dosage.
- Date and time of last dosage given.
- Consent given by parent/carer for staff to administer medication.
- Expiry date of medication.
- Storage details.

Storage and security

- The school is not able to store large quantities of medication and in most cases, particularly in the case of short–term medical needs, medication should be brought in each morning and taken home at the end of the school day. All medication should be kept in the main office.
- As a general rule medication should be taken to the school office, where it will be safely stored and administered at the appropriate time. Medication that needs to be kept cool will be stored in the fridge and controlled medication must be stored securely in the school office.
- Some pupils with Individual Care Plans will need to keep their medication closer to hand. This will usually be in the class medical box in the child's classroom and may also be in the school office.
- Any medication brought to school must be clearly labelled with:
  - The name of the pupil.
  - The name of the medication.
  - The dosage and frequency of administration.

Confidentiality

The staff will treat medical information confidentially.

Disposal of medicines

It is the responsibility of parents to dispose of unwanted/ out of date medicines. Medicines that are not collected, however, will be taken to a local pharmacy for disposal.

Hygiene/infection control

All staff are familiar with normal precautions for avoiding infection and following basic hygiene procedures and regulations. Protective disposable gloves are worn when dealing with spillages of blood or other body fluids and disposing of dressings or equipment. Medical waste is disposed of in the medical waste disposal unit.

Managing medicines in the classroom

Any medicines kept in the classroom are stored in the class medical box. The teacher keeps this box in their resources cupboard or somewhere safe but accessible. Each medicine in the box is clearly labelled as above. Pupils who have inhalers for asthma are permitted to carry their own inhalers or keep them in the box.

Inhalers

- The parents of pupils who are required to have inhalers in school for emergency use should complete a care plan
- Teachers should check that pupils have access to their inhalers during PE sessions (particularly when they are out on the park or visiting the swimming pool) and when they are taking part in off-school site visits.

Educational visits

- On educational visits a designated person will also attend in order to administer medications.
- For residential visits, young people sometimes need minor treatment for conditions such as headaches, rashes, colds and insect bites. If necessary, and only with parental permission, staff will treat these ailments with the following 'off-the-shelf' products which are commonly available from most pharmacists:
    - antihistamine
    - Calpol
    - sun cream

Sporting activities

- Most pupils with medical conditions are able to participate in the PE curriculum and in extra-curricular sports, which are sufficiently flexible for pupils to follow in ways appropriate to their own needs and abilities.
- Any long-term restriction on a pupil's ability to take part in PE will need to be verified by an appropriate health professional with a written record kept on the pupil's personal file and attached to their healthcare plan.
- Some pupils may need to take precautionary measures before or during physical exercise and/or need to be allowed immediate access to their medication. Teachers responsible for PE and sporting activities should be aware of the medical needs of the pupils in their care and how to respond in an emergency situation.
- We will ensure that pupils have immediate access to their own asthma inhalers during sporting activities in the school day and during extra-curricular clubs.

Emergency procedures

- A telephone is situated in the school office. There are extensions in the Headteacher's room, the Deputy Headteacher's room, the inclusion room and in each of the halls and in the kitchen. An emergency call can be made from any of these. Parents must be informed as soon as possible.
- Where a pupil has to be taken to hospital, a member of staff will accompany and remain with them until a parent arrives.
- First Aid boxes are located around the school, in classrooms, halls and practical areas. The school office should be informed when supplies are getting low so that they can be re-ordered.
- See First Aid policy for further emergency procedures.

Staff training and information

- Emergency first aid training is made available to staff at regular recommended intervals, currently every three years. The training takes place in school in person or virtually. Not all staff have to have first aid training. A member of staff in each year group will receive first aid training.
- Class teachers are provided with a list of their current pupils' medical needs.
- Master lists of all pupils' medical information are available from the school office.
- Care Plans are in medical boxes, on SIMS and in a file for the MDSAs and Kids Club.
- All staff are aware of the school's child protection procedures and have read (and have access to) the school's Child Protection and Safeguarding Policy.

Procedure for dealing with accidents or illness in school

- In the event of a minor accident at school, immediate appropriate action is taken. An entry is made in one of the accident books and is initialled by a qualified first aider. These are kept with the first aid kits. A slip is sent home with the pupil informing parents. Master copies of these slips and the pages for the accident book are available from the office.
- In more serious incidents, including head bumps, or when children are too unwell to stay in school, emergency telephone contact numbers are used. If a parent cannot collect a child from school the school will supervise as appropriate.
- It is the parents' responsibility to inform the school of any emergency number changes.
- The school nurse and other medical professionals carry out various medical checks and inspections during a child's time in school. If it is considered appropriate for parents to attend any of these medical inspections they will be invited by the health professional concerned. Appointments with the school nurse can be arranged through the Headteacher/ Medical Lead.
- If the school is concerned about the health or medical well-being of a child then the parents are informed. A referral may be made to the school nurse to support the parents and the parents informed of this.
- Where anyone on the school site (pupil or adult) sustains an injury, which may have Health and Safety implications a separate Accident Report should be completed by the member of staff or school office.

Complaints

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

This policy should be read in conjunction with:
KCSIE
Attendance Policy
Child Protection and Safeguarding Policy
Children with Health Needs Who Cannot Attend School Policy
Intimate Care policy