

WESTON TURVILLE CE SCHOOL

MISSION STATEMENT:
TO PURSUE WISDOM WITHIN A CHRISTIAN ETHOS

Supporting Pupils with Medical Conditions
(including the administration of medicines)

Co-ordinator	Mrs C Garbutt
Policy reviewed by	Mrs K Brooks
Policy agreed	Spring 2015
Adopted by governors	Summer 2015
Next review date	Summer 2019

This policy is written following the statutory guidance and non-statutory advice published by the government in the document 'Supporting Pupils at School with Medical Conditions' (April 2014). The document relates to the duty upon the Governing Body in section 100 of the Children and Families Act 2014.

Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.

Policy implementation

The named person who has overall responsibility for ensuring the policy is followed by all staff is the headteacher, who is supported by the Medical Needs co-ordinator and Special Educational Needs Co-ordinator (SENCo). They must ensure that –

- All relevant staff are made aware of a child's medical condition.
- Cover arrangements are in place in the case of staff absence.
- Supply teachers are briefed.
- Risk assessments are undertaken for school visits and other school activities outside of the normal timetable.
- Individual health care plans are monitored.

When the school is informed that a child has a medical condition

The Medical Needs Co-ordinator and/or the SENCo meet with the parents as soon as possible and collate the relevant information for the child's file and Individual Healthcare Plan. The plan is then confirmed by parents, and where relevant, medical professionals, before being communicated to all staff. If the child has not yet started at the school transition arrangements are made with the previous setting.

Individual Healthcare Plans

Each child's needs are assessed individually and a plan put in place to support them. These include –

- an outline of the child's condition, its triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medication (dose, side effects, storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues;
- specific support for the pupil's educational, social and emotional needs, for example how absences will be managed;
- the level of support needed, including in emergencies. If a child is self-managing their medication, this is clearly stated with appropriate arrangements for monitoring;
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents and the HT for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- separate arrangements or procedures for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, such as risk assessments;
- where confidentiality issues are raised by the parent/child, the HT and co-ordinator are entrusted with information about the child's condition; and

- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.
- Individual Health Care Plans are reviewed annually.

Roles and responsibilities

The Governing Body makes arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting these pupils is developed and implemented. They ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical needs.

The headteacher ensures that the policy is developed with partners, and communicates the policy with all staff. Information about a child's needs is communicated to the relevant staff, and the headteacher ensures all staff have the relevant training. S/he also ensures that individual healthcare plans are devised and that staff are insured to support pupils in this way.

School staff can be asked to provide support to pupils with medical needs, including the administering of medicines, although they cannot be required to do so. They must be properly trained and know what to do when a child with a medical condition needs help.

School nurses provide support for staff on implementing Individual Healthcare Plans and offer advice and liaison.

Other healthcare professionals provide advice on supporting pupils with particular needs.

Pupils with medical conditions are often best placed to provide information on how their condition affects them. They are fully involved in discussions about their medical support needs.

Parents are key partners and provide the school with sufficient and up to date information about their child's medical needs. They are involved in the drafting of their child's Individual Healthcare Plan and carry out any actions pertaining to them.

The Local Authority are commissioners of school nurses for schools and have a duty to promote co-operation between relevant partners. They provide support, advice and guidance. Where a pupil cannot attend school for long periods due to health reasons the Local Authority has a duty to make alternative provision.

Providers of health services support and communicate with schools.

Clinical Commissioning Groups provide professionals such as specialist nurses where necessary.

Ofsted has a duty to consider the quality of teaching and progress of disabled pupils and those with SEN.

Staff training and support

The Medical Needs Co-ordinator and the SENCo receive regular training updates which they communicate to other staff, and all staff receive regular training from the school nurse team in the management of specific conditions like asthma, and how to use an epipen. Staff do not undertake healthcare procedures without training. Each year information about pupils with medical needs is passed to the next teacher and others who will be working directly with the children.

Individual Healthcare Plans are displayed on the staff room board where appropriate (for example, those requiring epipen treatment in the event of an allergic reaction) with a photograph of the child.

The child's role in managing their own medical needs

Those pupils who are competent to manage their own health needs do so and this is reflected in Individual Healthcare Plans. Children have easy access to their medicines for self-administration where appropriate. Where pupils are unable to self-administer, staff do so instead, as long as they are trained and have agreed to take on the role. Where children refuse to take their medication they are not forced, but parents are informed.

Managing medicines on school premises

On most occasions medicines can be given at home. They are only administered at school when it would be detrimental to a child's health or school attendance not to, and are only administered with a parent's written consent. They fall into the categories of –

- Children on an agreed Individual Healthcare Plan
- Children with asthma
- Children with allergies
- Children on prescribed medicines which have to be administered during the day

Parents fill in the necessary medication form (see appendix 1) and note the expiry date so that they can provide a new prescription when necessary. Where clinically possible parents are encouraged to ask their doctors for medicines to be prescribed in dose frequencies which enable them to be taken outside school hours, eg antibiotics.

The school only accepts prescribed medicines which are in date, labelled with the child's full name, provided in the original container (with a spoon where necessary) and include instructions for administration, dosage and storage. School staff administer controlled drugs to children where necessary in accordance with the prescriber's instructions. They keep a record of all medicines administered, stating what, how and how much was administered, when and by whom (see appendix 2). Any side effects are noted.

Antibiotics should be collected by parents each day or, where children are attending After-School Club, the After-School Club staff.

The school will not keep Calpol or hay fever remedies to administer on an ad-hoc basis during the school day. Parents will be contacted if their child has a fever. If pupils require medication to control hay fever symptoms parents will be asked to take their children to their GP for a formal diagnosis and advice on appropriate medication. Parents will be asked to sign a consent form confirming that the medicine has been administered without adverse effect to the child in the past and that they will inform the school immediately if this changes.

Pain relief will only be given with the expressed consent of the Headteacher, for example, for pupils returning to school after sustaining a fracture or having dental treatment. Parents will be asked to sign a consent form. When a pupil requests pain relief staff will first check maximum dosages and when the previous dose was taken. Parents will be contacted for confirmation. If parents are unavailable, a dose will not usually be given before 12 noon.

Emergency medicines, eg inhalers, epipens, are stored securely in the child's classroom and children and staff know where the packs are. Other controlled drugs are locked away in the medical cupboard next to the staff room, and medicines requiring refrigeration are stored in the labelled container in the staff room fridge.

Emergency medications are taken on school trips and are readily available to pupils and staff. One member of staff accompanying the visit will be asked to take on the lead role for administering medicines or healthcare procedures. Individual Healthcare Plans, medicines, equipment and consent forms are taken on school visits.

When no longer required, medicines are returned to the parent to arrange for safe disposal. Sharps boxes are used for the disposal of needles and other sharps.

A child is legally permitted to have medication in school but it is an offence for them to pass it to another child. This is carefully monitored.

An audit of pupils' medication will be undertaken every term disposing of any medication that is no longer required. It is the parent's responsibility to ensure their child's medication remains in date. Parents should collect medicines at the end of the summer term.

Procedures

Medicines should be brought to the school office by parents where they will be asked to fill in and sign the relevant consent form (available also on the school website). The member of staff will check that the medicine is in its original container and the details match those on the form. The medicine will be stored appropriately and the form sent to the headteacher for signing.

Staff will not force children to take their medicine but will record the incident and inform the parent. If refusal results in an emergency the emergency procedures will be followed. If a member of staff has a concern about a medicine they will not administer it but will check with the parent or a healthcare professional before taking further action.

Non-prescription medicines

The school does not administer, or allow pupils to administer, non-prescription medicines at school. If parents would like their children to take non-prescription medicines at school they are asked to attend themselves to administer the medicine to their child.

Non-prescription medicines are, however, permitted on residential trips/visits. The same rules apply as for prescribed medicines.

Emergency procedures

There are set procedures in the school for dealing with emergencies which all staff and pupils are aware of.

For pupils who have Individual Healthcare Plan there may be specific emergency procedures. These are set out in their plan and communicated with staff. Other pupils know what to do in general terms and especially that they should follow instructions given to them by adults.

If a child needs to be taken to hospital a member of staff stays with the child until the parent arrives, or accompanies a child taken to hospital by ambulance.

Trips and sporting activities

All pupils with medical needs are supported to enable them to take part in school trips, residential and sporting activities. No child is barred from a trip because of their medical needs, and the school makes reasonable adjustments to programmes in communication with parents and healthcare professionals. Risk assessments are carried out.

Home to school transport

Where a pupil with medical needs is being provided with home to school transport by the Local Authority it is the duty of the LA to have regard to the Individual Healthcare Plan.

Asthma inhalers and defibrillators

We do not consider it necessary to purchase either a spare school inhaler or a defibrillator.

Unacceptable practice

It is unacceptable to –

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their Individual Healthcare Plans.
- if the children becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend school to administer prescribed medication or provide medical support to their child, including with toileting issues;
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg. by requiring parents to accompany the child.

Liability and indemnity

The school is insured and the policy reflects the level of risk. Any requirements of the policy are followed by the school.

Complaints

Parents who are dissatisfied with the care their child receives in relation to support for their medical needs should use the school's Complaints Policy.

WESTON TURVILLE CE SCHOOL

REQUEST FOR SCHOOL TO ADMINISTER PRESCRIBED MEDICATION

Please note that the school will not administer medicine to your child unless you complete and sign this letter, and the headteacher/deputy headteacher has agreed that the school staff can administer the medication. All medicines must be clearly labelled with the child's name and dosage, and a spoon must be provided.

Dear Headteacher,

I request the administration of medicine to:

Pupils Details

Surname:..... First Names:

M/F Class Form: Date of Birth:

Address:

.....

.....

Condition or Illness

Medication

Name/Type of Medication (See container)

For how long will this medicine be administered?

Date Dispensed:

The above medication(s) have been prescribed by a doctor. They are clearly labelled indicating contents, dosage and child's name in full.

Name of Prescribing Doctor

Address of Prescribing Doctor.....

.....

.....

Telephone Number of Prescribing Doctor:

TURN OVER

Directions for Use:

Dosage and Method:

Times of Administration:

Any special precautions:

.....

Any possible side effects:

Is supervised self administration possible:

Contact Details:

Name:

Daytime Telephone Number:

Mobile Telephone Number:

Relationship to pupil:

Address:

.....

I understand that the medicine must be delivered personally to the school and that the school will only be able to administer the medicines if it can make the staff time available. I understand that I remain responsible for ensuring that my child receives medication and that I may have to make the necessary arrangements for its administration if the school is unable to.

Signed:.....

Address (If different from pupil address above):

.....

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Date:

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For completion by the school

I agree to arrange for the administration of medicines requested by the parent.

Signed: Date:

