

**FOXWOOD ACADEMY**

**SUPPORTING PUPILS WITH MEDICAL CONDITIONS AND MANAGING MEDICATIONS POLICY**

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| Committee/Person Responsible for Policy:  | SLT/Headteacher |
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**Managing Medication in Academy**

Foxwood Academy is committed to ensuring that all students have full access to the Academies curriculum experiences and extra-curricular activities. This Academy is an inclusive community that aims to support and welcome pupils with medical conditions. A number of our students are required to take regular prescribed medication or to have prescribed medication administered in emergency situations. Within the Academy, during the Academy day, such medication is given or supervised by named staff who have had relevant training. All staff complete specific risk assessments prior to any visit. Control measures on the risk assessment will inform the need for a first aider.

The aim of this policy is to effectively support individual children with medical needs and to enable pupils to achieve regular attendance. This corresponds with the Children and Families Act 2014 and follows all medical needs.

## The Academy aims to provide all students with all medical conditions the same opportunities as their peers. We will help to ensure they stay safe and healthy, are able to access learning and ensure they receive full entitlement to their education.

## The Academy ensures all staff understand their duty of care to children and young people in the event of an emergency.

## The Academy understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill-managed or misunderstood.

## Such medical conditions identified under the Children and Families Act 2014 are:

## Asthma

## Cancer

## Diabetes

## Epilepsy

## Allergies

## The Academy understands the importance of medication being taken as prescribed.

All First Aid within the Academy is administered by a **fully qualified First Aider**. First aiders are trained every 3 years with regular updates between renewals. We ensure there are at least 15 trained First Aiders onsite. First aiders are assessed practically and are responsible for administering first aid, keeping first aid bags stocked and recording first aid incidents. The Senior First Aider is responsible for ordering stock as required. There may be occasions when a First Aider requires the assistance of another First Aider to ensure the best possible treatment is given. **First Aiders are not able to assess whether a bone is broken and they not they do not have the medical equipment or training to do this.** Where there is a potential sprain, twist or fracture/broken bone parents will be called to take their child to hospital for a medical check-up so that the correct treatment can take place. In some cases the Academy will call an ambulance and share essential details with medical professionals. Parents/carers have given written consent for this. However, in an emergency and in the absence of parental permission, if appropriate, attempts will be made to contact parents/carers. The Senior First Aider will risk-assess the situation and share the necessary medical information with health professionals if it is in the interest of the safety of the child. Staff cannot administer/keep medication onsite for accidents and/or injuries.

**Provision Map**

Health Care Plans, detailing medical diagnosis, medications and an action plan in school are stored in individual student files on Provision Map, which is a secure online software recording system.

## Academy Staff

## In these situations the Academy will accept responsibility in principle for staff to give or supervise students taking prescribed medication subject to the following conditions:

* Full parental consent has been received in writing and signed by parents/carers for long term medication (see appendix A)
* The movement of medication within the Academy is taken very seriously. Two senior First Aiders supervise the receiving, storing and managing of all medication in and out of the Academy. Individual members of staff are trained as and when required to fulfil specific roles involving the movement of medication. The administering of medication is only done by trained First Aiders or staff trained in a specific condition (e.g. Diabetes)
* All staff involved have received adequate training.
* Parents complete medication forms before short term or occasional use medication can be given in the Academy. (Appendix B)
* Parents accept responsibility for sending their child’s medication into Academy clearly labelled and indicating the required dosage. The Academy does not accept medication which does not have the packaging. The amount of medication must match the total described on the packaging.
* The Academy reserves the right to refuse to administer medication or treatment under guidance or instruction from Health or Education Authorities.
* Staff fully understand the importance of ensuring that medication is administered correctly. They understand that mistakes involving medication may be injurious to the health and well-being of a child and will do all it can to ensure that its policies and procedures are robust and reflect good practice in line with national guidance.

## Illness

Parents/carers should not send a child to the Academy if they are unwell. Foxwood Academy is **not** an extension of Accident & Emergency. If a child sustains an injury it is their duty of care to ensure they take their child to their local A + E or GP. We can only deal with first aid issues that occur on site. There may however be exceptional circumstances, as Foxwood Academy is a Special School, when parents and carers needs support from Academy staff to address emergency medical visits. This is undertaken at the discretion of the Engagement, Safeguarding and Family Liaison Officer (ESFLO).

Where a child has a long-term medical need, a written health care plan will be drawn up with the parents and health professionals and/or staff. This would normally be produced by the Health Service. However, this can be a lengthy process and in the interests of the student's entitlement to a full education, the Academy may seek permission from parents/carers to produce a temporary care plan which **must** be signed by parents/carers. Minor changes to the Care Plan can be made if signed and dated by the parents/carers. If, however, changes are major, a new Care Plan is completed. Care Plans are reviewed annually. For off-site visits, where there is **only** a temporary plan in place, email permission **must** be sought from parent/carers explicitly asking their permission for a student to be part of an offsite visit. The plan must be recorded on Evolve.

Parents must inform the Academy about any particular needs before a child is admitted or when a child first develops a medical need. A care plan must be drawn up. Typically these include plans for managing asthma, allergies, diet, toileting, wheelchair use. Conditions such as epilepsy, peg-feeding, epi-pens.

If a student arrives ill, he/she is seen by a First Aider. The ESFLO takes the decision as to whether the student is fit to attend the Academy. In the absence of the ESFLO, the Senior First Aider will make this decision in conjunction with SLT. If the student needs to go home, the parent should be asked to collect him/her.

Children with the following signs and symptoms should be sent home and parents advised that their child should not return until 48 hours after they have been symptom free:

* Diarrhoea and /or vomiting
* Weeping rash
* Infectious illness, for example flu, chicken-pox, mumps, measles or Scarlet Fever

The ESFLO may review cases on an individual basis.

**Parents and Carers Responsibilities**

If the Academy staff agree to administer medication on a short term or occasional basis, the parents/carers are required to complete a Medication Form (Appendix B).

If it is known that pupils are self-administering medication in Academy on a regular basis, a completed Medical Form is still required from the parent(s).(Appendix A or B).

Parents accept responsibility for sending their child’s medication into the Academy by bringing medication themselves or by the bus escort who will hand the medication over the receptionist. Students should **not** be carrying medication themselves. The exception to this is inhalers. In some cases, due to the nature of the student’s needs, a member of staff may carry the inhaler. This is primarily agreed to prevent any other students accidently and unknowingly taking medication not required for them.

For administration of emergency medication, a Care Plan must be completed by the parent(s)/carers in conjunction with the Academy staff.

The parents/carers need to ensure there is sufficient medication and that the medication is in date. The parents/carers must replace the supply of medication at the request of relevant Academy/Health professional. Medication should be provided in an original container with the following, clearly shown on the label:

• Child’s name, date of birth.

• Name and strength of medication.

• Dose.

• Expiry dates whenever possible.

• Dispensing date/pharmacist’s details.

**Non-Prescribed Medication**

Non-prescribed medication (pain killers, cough linctus, creams etc) can be administered by Foxwood Academy staff if a medication form (appendix B) has been completed and signed by the parent/carer. However, the Academy reserves the right to refuse to administer medication if it is deemed there to be a good reason. This will always be explained to the parent / carer.

No student under 16 should be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. For pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken.

Where clinically possible, medication should be prescribed in dose frequencies which enable them to be taken outside the Academy hours.

**Health Care Plans (Long term medical needs)**

All students who have a medical condition will have their own Health Care Plan which should be completed by Parent/Carer, ESFLO or Senior First Aider. It should include the following information:

* details of a child’s condition
* special requirement e.g. dietary needs, pre-activity precautions
* any side effects of the medicines
* what constitutes an emergency
* what action to take in an emergency
* who to contact in an emergency

The completed Health Care Plan will be signed by parents/staff and reviewed annually or sooner if required.

It will be the responsibility of the parent/carer to inform the Academy of any changes in Health Care Plan as soon as possible. At times, some students may need a short-term HCP to address a new short-term medical condition. If the main condition is still prevalent, the original HCP is kept and the new HCP attached. The ESFLO or Senior First Aider lets relevant staff know there is an additional HCP. Staff ensure they are placed in the student file.

In an emergency, a copy of the student’s’ health care plan will be given to the emergency team who are with the student.

**Refusing Medication**

If a student refuses to take their medication, Academy staff do not force them to do so. Parents are consulted as a matter of urgency and if necessary, the Academy should contact the emergency services if the student's health is at risk.

**Staff Training**

Training is sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual HCP. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

When any medication training is delivered to Academy staff, training records are completed and retained.

It is staff’s responsibility to provide a copy of their certificate to the Office Manager. The Office Manager can track when the training needs updating.

**Managing Medicines on Academy Premises**

Medicines should only be administered at the Academy when it would be detrimental to a child’s health or Academy attendance not to do so.

No students in the Academy should be given prescription or non-prescription medicines without their parent/carer’s written consent.

**Home to Academy Transport**

This is the responsibility of local authorities, who may find it helpful to be aware of a pupil’s individual health care plan and what it contains, especially in respect of emergency situations.

**Labelling of Medication**

The Academy will only accept prescribed medicines that are in-date, labelled with the student’s name provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date but will generally be available to the Academy inside an insulin pen or a pump, rather than in its original container. Where a student needs two or more prescribed medicines each should be in a separate container.

If medication arrives in the Academy unlabelled it will not be given to the student. Parents will be contacted straight away.

**Storage of Medication**

When items need to be available for emergency use, e.g. asthma pumps and Epi pens, they may be kept in the classroom or area designated (reception) according to the size/layout of the building, or with the pupil, as appropriate. It is not necessary for a locked cupboard to be used, but such items should be easily available for the use of pupils and/or staff. When prescription items are held by the Academy for administration by Academy staff they are stored in a fixed lockable cupboard/cabinet, with a combination padlock.

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

**Administrating of Medication**

Long/short term medication will be given to the student in an adequate and appropriate space where the student will feel comfortable, away from distractions, as well as respecting their dignity. Trained staff record the administering of the medication while the student is still with them to also monitor for any side effects.

**Monitoring**

The Academy keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at the Academy should be noted.

**Hygiene/Infection Control.**

All staff are familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff ensure they have access to disposable gloves (if required) and take care when dealing with spillage of blood or other body fluids. Dressing or equipment disposed of in designated clinical waste containers (Yellow bags or sharp containers.)

**Class 1 and 2 Drugs**

When Class 1 and 2 drugs (primarily Methylphenidate prescribed for Attention Deficit Syndrome) are kept on Academy premises, a written stock record is also keptin order to comply with the Misuse of Drugs Act legislation. This details the quantities kept and administered, taken and returned on any educational visit and returned to the parent/carer, e.g. at the end of term. These drugs should be kept in a locked cabinet within a room with restricted access (staff only).

**Antibiotics**

Parents/carers are encouraged to ask the GP to prescribe an antibiotic which can be given outside of Academy hours wherever possible. Most antibiotic medication will not need to be administered during Academy hours. Twice daily doses should be given in the morning before the Academy opens and in the evening. Three times a day doses can normally be given in the morning before coming to the Academy, immediately after the Academy (provided this is possible) and at bedtime. If there are any doubts or queries about giving antibiotics in the Academy the ESFLO will seek advice from the GP.

It should normally only be necessary to give antibiotics in the Academy if the dose needs to be given four times a day, in which case a dose is needed at lunchtime.

Parents/carers complete the Medical Form and confirm that the child is not known to be allergic to the antibiotic. The antibiotic will be brought into Academy in the morning and taken home again at the end of each day by the parent/bus escort. Whenever possible the first dose of the course and ideally the second dose, should be administered by the parent(s).

All antibiotics will be clearly labelled with the child’s name, the name of the medication, the dose and the date of dispensing. The antibiotics are stored in a secure cupboard or where necessary in a refrigerator. Many of the liquid antibiotics need to be stored in a refrigerator – if so; this will be stated on the label. Some antibiotics must be taken at a specific time in relation to food. Again, this will be written on the label, and the instructions on the label are carefully followed. Tablets or capsules must be given with a glass of water. The dose of a liquid antibiotic must be carefully measured in an appropriate medicine spoon, medicine pot or oral medicines syringe provided by the parent.

Record keeping - The appropriate records will be made (record sheets in Medical Room) If the child does not receive a dose, for whatever reason, the parent will be informed that day.

**Analgesics (Painkillers)**

For students who regularly need analgesia (e.g. for migraine), an individual supply of their analgesic should be kept in Academy. The Academy does **not** keep stock supplies of analgesics e.g. paracetamol (in the form of soluble), for potential administration to any pupil. Parental consent must be in place. ***CHILDREN UNDER 16 SHOULD NEVER BE GIVEN ASPIRIN OR ANY MEDICINES CONTAINING ASPIRIN.***

**Guidelines for the Administration of Epi pen by Academy Staff**

An Epi pen is a preloaded pen device, which contains a single measured dose of adrenaline (also known as epinephrine) for administration in cases of severe allergic reaction. An Epipen is safe, and even if given inadvertently it will not do any harm. It is not possible to give too large a dose from one dose used correctly in accordance with the Care Plan. An Epipen can only be administered by the Academy staff that have volunteered and have been designated as appropriate by the Headteacher and who has been assessed as competent by the Academy trainer. Training of designated staff is provided by the Academy and a record of training undertaken will be overseen by the Engagement, Safeguarding & Family Liaison Officer and Deputy Headteacher. Training is updated once a year or as and when needed for example when there are staff changes.

1. Ensure that the Epi pen is in date. The Epi pen should be stored at room temperature and protected from heat and light. It should be kept in the original named box.
2. The Epi pen should be readily accessible for use in an emergency and where children are of an appropriate age; the Epi pen can be carried on their person.
3. Expiry dates and discoloration of contents should be checked by the Academy staff and then inform the ~~Head of Care~~ ESFLO. The Epi pen should be replaced by the parents/carers at the request of the Academy staff.
4. The use of the Epi pen must be recorded on the child’s Health Care Plan, with time, date and full signature of the person who administered the Epi pen.
5. Once the Epi pen is administered, a 999 call must be made immediately. If two people are present, the 999 call should be made at the same time of administering the Epi pen. The used Epi pen must be given to the ambulance personnel. It is the parent’s responsibility to renew the Epi pen before the child returns to Academy.
6. If the child leaves the Academy site e.g. Academy trips, the Epi pen must be readily available.

**Guidelines for Managing Asthma**

Students with asthma have airways which narrow as a reaction to various triggers. The narrowing or obstruction of the airways causes difficulty in breathing and can usually be alleviated with medication taken via an inhaler. Inhalers are generally safe, and if a pupil took another pupil’s inhaler, it is unlikely there would be any adverse effects.

1. If Academy staff are assisting children with their inhalers, an Asthma care plan must be completed by parent(s). Asthma Care Plans need only be in place if children have severe asthma which may result in a medical emergency.
2. Inhalers MUST be readily available when students need them. Pupils should be encouraged to carry their own inhalers. If the pupil is too young or immature to take responsibility for their inhaler, it should be stored in a readily accessible safe place e.g. the classroom.
3. It would be considered helpful if parent(s) could supply a spare inhaler for children who carry their own inhalers. This could be stored safely at Academy in case the original inhaler is accidentally left at home or the child loses it whilst at the Academy. This inhaler must have an expiry date beyond the end of the Academy year.
4. All inhalers should be labelled with the child’s name.
5. Some children, particularly the younger ones, may use a spacer device with their inhaler; this also needs to be labelled with their name. The spacer device needs to be sent home at least once a term for cleaning.
6. Academy staff should take appropriate disciplinary action if the owner or other pupils misuse inhalers.
7. Parents/carers are responsible for renewing out of date and empty inhalers.
8. Parents/carers are informed if a child is using the inhaler excessively.
9. Physical activities will benefit pupils with asthma, but they may need to use their inhaler 10 minutes before exertion. The inhaler MUST be available during PE and games. If pupils are unwell they should not be forced to participate.
10. If students are going on offsite visits, inhalers MUST still be accessible.
11. It is good practice for Academy staff to have a clear out of any inhalers at least on an annual basis. Out of date inhalers, and inhalers no longer needed must be returned to parent(s).
12. Asthma can be triggered by substances found in the Academy e.g. animal fur, glues and chemicals. Care is taken to ensure that any pupil who reacts to these are advised not to have contact with these.

**Guidelines for Managing Hypoglycaemia (Hypo’s or low blood sugar) in Pupils who have Diabetes**

Diabetes is a condition where the person’s normal hormonal mechanisms do not control their blood sugar levels. In the majority of students, the condition is controlled by insulin injections and diet. It is unlikely that injections will need to be given during Academy hours, but some older students many need to inject during Academy hours. Relevant staff will be offered training on diabetes and how to prevent the occurrence of hypoglycaemia.

Staff who have volunteered and have been designated as appropriate by the ESFLO administer treatment for hypoglycaemic episodes.

*To prevent “hypo’s”*

1. There is a bespoke hospital Diabetes Care Plan (Appendix C) completed by a nurse and Foxwood Academy Medication Form in place. Staff should be familiar with pupil’s individual symptoms of a “hypo”. This is recorded in the Care Plan.
2. Students must be allowed to eat regularly during the day. This may include eating snacks during class time or prior to exercise. Meals should not be unduly delayed e.g. due to extra-curricular activities at lunchtimes. Offsite activities e.g. visits, overnight stays, will require additional planning and liaison with parent(s).

*To treat “hypo’s”*

1. If a meal or snack is missed, or after strenuous activity or sometimes even for no apparent reason, the pupil may experience a “hypo”. Symptoms may include sweating, pale skin, confusion and slurred speech.
2. Treatment for a “hypo” might be different for each student, but will be either dextrose tablets, or sugary drink, chocolate bar or hypostop (dextrose gel), as per Care Plan. Whichever treatment is used, it should be readily available and not locked away. Many students will carry the treatment with them when appropriate and mature enough to do so. Expiry dates must be checked each term, either by a member of Academy staff or the Academy nurse.
3. It is the parent’s responsibility to ensure appropriate treatment is available. Once the student has recovered a slower-acting starchy food such as biscuits and milk should be given. If the student is very drowsy, unconscious or fitting, a 999 call must be made and the child put in the recovery position. Do not attempt oral treatment. Parent(s) are informed of “hypos” where staff have issued treatment in accordance with the care plan.

If Hypostop has been provided the hospital Diabetes Care Plan Medication Form should be available. Hypostop is squeezed into the side of the mouth and rubbed into the gums, where it will be absorbed by the bloodstream. The use of Hypostop will be recorded on the child’s Diabetes plan with time, date and full signature of the person who administered it. It is the parent’s responsibility to renew the Hypostop when it has been used. ***DO NOT USE HYPOSTOP IF THE CHILD IS UNCONSCIOUS.***

**Guidelines for Managing Epilepsy**

It is unlikely that a student will need to take their regular epilepsy medication during Academy hours. Academy staff can give prescribed medication but consent must be given by the parents in advance. Academy staff are aware that epilepsy medication can cause side effects that may affect the student during the Academy day. Seizures can happen at any time.

All appropriate staff have access to a summary medication document which is stored securely*.* This details the condition including epilepsy and gives the status of the epilepsy and medication details. Instructions on what to do if a child has a seizure can be found in their individual Health Care Plans Student Files in the same folder-*Care Plans-Seizure Plans.* Staff are instructed to inform any supply staff of any student who has epilepsy and the Care Plan shared. All staff (teaching and support) who are responsible for a student with epilepsy, will receive basic epilepsy awareness training, including what to do if a student has a seizure. New staff are given this information as part of their induction.

The Academy’s ESFLO or the Senior First Aider take responsibility for sharing any changes to the pupil’s Individual Health Care Plan, with appropriate members of staff.

The Academy will give voice to the views of pupils with epilepsy, for example regarding feeling safe, respect from other pupils, teasing and bullying, what should happen during and following a seizure, adjustments to support them in learning, adjustments to enable full participation in Academy life and raising epilepsy awareness in the Academy.

VNS is another treatment for epilepsy, where a small electric impulse generator is implanted under the skin below the left collar bone in an operation. Relevant Staff are trained by the specialist epilepsy nurse to use the special magnet which needs to be swiped over the devise to deliver another stimulation during a seizure.

The Ketogenic diet is a treatment for students with difficult to control epilepsy. The diet uses high fat and low carbohydrate levels to mimic the effect of starvation on the body. The diet must be carried out under close medical supervision. It is important that students on the Ketogenic diet do not eat or drink anything that is not part of their diet, as this can lead to a seizure. All staff will be aware of this diet through completing a health care plan.

The student’s Individual Health Care Plan includes the names and contact details of the staff trained to administer medication. There is a trained member of staff available at all times to deliver emergency medication. The Academy ensures that enough staff are trained and available, so that even if the person who usually administers emergency medication is unexpectedly absent, there will still be a trained member of staff available to administer the emergency medication.

**Guidelines for Managing the Defibrillator**

Sudden cardiac arrest is when the heart stops beating and can happen to people at any age and without warning. When it does happen, quick action (in the form of early CPR and defibrillation) can help save lives. A defibrillator is a machine used to give an electric shock to restart a patient’s heart when they are in cardiac arrest. The Academy has purchased a defibrillator as part of our first aid equipment and has been installed in the office in the Reception area of the Academy. Staff members appointed as first aiders are trained in the use of CPR.

**Day Trips, Residential Visits and Sporting Activities**

The Academy ensures that their arrangements are clear and unambiguous about the need to support actively pupils with medical conditions to participate in Academy trips and visits, or in sporting activities, and not prevent them from doing so. Teachers should be aware of how a child’s medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. The Academy will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

The Academy considers what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. Where risk assessments are in place arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This requires consultation with parents/carers and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

**Record Keeping**

The Academy ensures that written records are kept of all medicines administered to children. Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents are informed if their child has been unwell at Academy. There are recording sheets in place for this purpose. (Appendix D).

**Roles and Responsibilities**

The governing body ensures that the Academy’s policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support students at the Academy with medical conditions.

Supporting a student with a medical condition during Academy hours is not the sole responsibility of one person. An Academy’s ability to provide effective support will depend, to an appreciable extent, on working cooperatively with other agencies. Partnership working between Academy staff, healthcare professionals (and where appropriate, social care professionals), local authorities, and parents and pupils will be critical.

Some of the most important roles and responsibilities are listed below:

* **Governing Body** – make arrangements to support pupils with medical conditions in the Academy, including making sure that a policy for supporting pupils with medical conditions in the Academy is developed and implemented. They ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of Academy life. The Governing body will ensure that sufficient Academy staff have received suitable training and are competent before they take on responsibility to support children with effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
* **Headteacher** ensures that all staff who need to know are aware of the child’s condition. They also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. They also make sure that the Academy staff are appropriately insured and are aware that they are insured to support pupils in this way. The ESFLO has overall responsibility for the development of individual healthcare plan.
* **Academy Staff** – The ESFLO, Senior First Aiders and First Aiders will be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers’ professional duties, they should consider the needs of pupils with medical conditions that they teach. Academy staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.
* **Other Healthcare Professionals**, including GPs and paediatricians - will notify the ESFLO when a child has been identified as having a medical condition that will require support at the Academy. They may provide advice on developing Health Care plans. Specialist local health teams may be able to provide support in the Academy for students with particular conditions (e.g. asthma, diabetes).
* **Students** – with medical conditions will may be best placed to provide information about how their condition affects them. They will, where appropriate, be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual Health Care Plan. Other students will often be sensitive to the needs of those with medical conditions. Symbols and social stories can be used to support the student’s understanding.
* **Parents** – will provide the Academy with sufficient and up-to-date information about their child’s medical needs. They may in some cases be the first to notify the Academy that their child has a medical condition. Parents are key partners and are involved in the development and review of their child’s individual Health Care Plan and may be involved in its drafting. They sign the HCP to agree to carry out any action as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times

**Further Advice**

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| Academies, local authorities, health professionals, commissioners and other support services work together to ensure that children with medical conditions receive a full education. In some cases this will require flexibility and involve, for example, programmes of study that rely on part-time attendance at the Academy in combination with alternative provision arranged by the local authority. Consideration may also be given to how children will be reintegrated back into the Academy after periods of absence. Where a child is returning to the Academy following a period of hospital education or alternative provision (including home tuition), the Academy will work with the local authority and education provider to ensure that the individual Health Care plan identifies the support the child will need to reintegrate effectively. In these circumstances a Risk Assessment is usually created to ensure a safe return to the Academy. |
| 1 Individual healthcare plan implementation procedure |

**Unacceptable Practice**

All Academy staff will use their discretion and judge each case on its merits with reference to the student’s Individual Health Care Plan. However it is not generally acceptable practice to:

* prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary;
* assume that every student with the same condition requires the same treatment;
* ignore the views of the students or their parents; or ignore medical evidence or opinion, (although this may be challenged);
* send students with medical conditions home frequently or prevent them from staying for normal Academy activities, including lunch, unless this is specified in their individual Health Care Plans;
* if the students becomes ill, send them to the Academy office or medical room unaccompanied or with someone unsuitable;
* penalise student for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
* prevent students 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 Academy to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the Academy is failing to support their child’s medical needs. There may however be exceptional circumstances in the case of a student refusing to take vital medication. A parent / carer may be offered the opportunity to persuade the student to take the medication if the risk of not taking it is high. This will be attempted by phone in the first instance. See *Refusing Medication* above.
* prevent students from participating or create unnecessary barriers to students participating in any aspect of Academy life, including Academy trips, e.g. by requiring parents to accompany the child.

**Complaints**

If parents/carers are dissatisfied with the support provided they should discuss these with the Academy and if is not resolved than they can make a complaint via the Academy’s Complaint’s Procedure which can be found in the Comments, Compliments and Complaints policy.

**Administering prescription medication – addendum to policy – 11th March 2024.**

Training in most cases will follow that outlined by the [Children’s Community Nursing Team](https://www.nottinghamshirehealthcare.nhs.uk/community-training-team) (CCNT) (Nottinghamshire Healthcare NHS Foundation Trust).

Medication should always be administered by two people to ensure correct procedures are followed and possible errors are prevented.

In some cases staff may complete training from other providers such as the National College. Where this is the case, and competencies are not checked in the same detail as that provided by the CCNT, these staff should avoid being the ‘lead’ administrator where possible.

In events such as school visits or residentials, staff that have completed training from other providers can administer the medication but medication and appropriate record keeping procedures should be prepared and provided by the school first aid/medication lead. This paperwork should be collected and checked at the end of all visits.

In emergency situations such as sudden staff absence or partial closure, those that have completed the training from other providers are permitted to administer the medication as long as the Headteacher is confident in the competency of the individuals.

It is important that those trained by the CCNT and those trained by other providers keep their training up-to date. Opportunities should be available for all ‘trained’ staff to support daily medication to ensure that they remain competent. Where or if competency is in doubt, the Headteacher should be informed.

**Appendix A**

**Medication Information and Permission for Long Term Medication**

The school will not give any medication unless this form is fully completed and signed. Medication will only be given if prescribed by a medical professional and follows Foxwood’s administering medication policy.

|  |  |
| --- | --- |
| Student name |  |
| Date of birth |  |
| Home address |  |
| Parent/carers telephone number |  |
| Doctors name and address  |  |
| Telephone number  |  |

 **Medication**

|  |  |
| --- | --- |
| Medication name (not brand) |  |
| Medication required for(reason for taking) |  |
| How long will the medication be taken for? |  |
| Dosage  |  |
| Time  |  |
| Method |  |

**Student history**

|  |  |
| --- | --- |
| Known allergies |  |
| Side effects of medication |  |

I confirm all information is correct and I will inform the school immediately if there are any changes in medication.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Appendix B**

**Medication Information and Permission for Short Term Medication**

The Academy will not give any medication unless this form is fully completed and signed.
Medication will only be given if prescribed by a medical professional and follows Foxwood’s Administering Medication policy. **Medication will only be given for medical conditions.**

|  |  |
| --- | --- |
| Student Name |  |
| Date of birth |  |
| Home address  |  |
| Parent/Carerstelephone number |  |
| Doctors name and address  |  |
| Telephone number |  |

 **Medication**

|  |  |
| --- | --- |
| **Medication Name** (not brand) |  |
| **Medication required for**:(reason for taking, i.e. linked to medical condition) |  |
| **Dosage and time** (cannot be a higher dosage than stated, without medical practitioners consent) |  |
| **Method** (syringe. spoons etc must be supplied)  |  |
| **Duration**(how long for) |  |
| **Is medication to go home at night** | Yes | No |

**Student history**

|  |  |
| --- | --- |
| Known allergies |  |
| Side effects of medication |  |

I confirm all information is correct and I will inform the school immediately if there are any changes in medication

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_