



St. John's C. of E.

Blackpool's First Free School 1817

Supporting Pupils with Medical Conditions Policy

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Introduction

St John's CE Primary School endeavours to ensure that all its pupils achieve success in their academic work, social relationships and day-to-day experiences at school. We are an inclusive community that aims to support and welcome pupils with medical conditions.

All children will experience illness in the course of their school careers, most commonly transient self-limiting infections, but some will have more chronic or longer-term medical needs that will require additional support at school to ensure they have full access to the curriculum and to minimise the impact of their medical conditions.

Staff working with pupils who have specific medical needs should understand the nature of children's medical problems and will endeavour to work with the family and other professionals to best support the individuals concerned.

This policy has due regard to the following guidance:

- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on first aid for schools'
- Ofsted (2019) 'Education inspection framework'
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

This policy has due regard to the following school policies:

- Special Educational Needs and Disabilities (SEND) Policy
- Infection Control Policy
- Complaints Procedures Policy
- Equal Opportunities Policy: Pupils
- Health & Safety Policy (Covid-19 Addendum)

Responsibilities

Schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils so that they can access their full and equal entitlement to all aspects of the curriculum. In this case, individual procedures may be required.

St John's CE Primary School is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support that pupils with medical conditions (long or short term) may need. The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions.

Pupils with medical conditions have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.

However, teachers and other school staff in charge of pupils have a common law duty to act 'in loco parentis' and must ensure the safety of all pupils in their care. To this end, we

reserve the right to refuse admittance to a child with an infectious disease, where there may be a risk posed to others or to the health of the child involved. This duty also extends to teachers leading activities taking place off the school site.

The prime responsibility for a child's health lies with the parent, who is responsible for the child's medication and must supply the school with all relevant information needed in order for proficient care to be given to the child. The school takes advice and guidance from a range of sources, including the School Nurse, Health professionals and the child's GP in addition to the information provided by parents in the first instance. This enables us to ensure we assess and manage risk and minimise disruption to the learning of the child and others who may be affected (for example, class mates).

Definitions

Pupils' medical needs may be broadly summarised as being of two types:

- (a) **Short-term**, affecting their participation in school activities whilst they are on a course of medication.
- (b) **Long-term**, potentially limiting their access to education and requiring extra care and support

Our Aims

- To support pupils with medical conditions, so that they have full access to education, including physical education and educational visits
- To ensure that school staff involved in the care of children with medical needs are fully informed and adequately trained by a professional in order to administer support or prescribed medication
- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs.
- To write, in association with healthcare professionals, Individual Healthcare Plans where necessary
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition requires support
- To keep, monitor and review appropriate records

Entitlement

St John's CE Primary School provides full access to the curriculum for every child wherever possible. We believe that pupils with medical needs have equal entitlement and must receive necessary care and support so that they can take advantage of this.

However, we also recognise that employees have rights in relation to supporting pupils with medical needs, as follows:

Employees may:

- Choose whether or not they wish to be involved
- Receive appropriate training
- Work to clear guidelines

- Bring to the attention of Senior Leadership any concern or matter relating to the support of pupils with medical conditions

Expectations

It is expected that:

- Parents will inform school of any medical condition which affects their child.
- Parents will supply school with appropriately prescribed medication, where the dosage information and regime is clearly printed by a pharmacy on the container.
- Parents will ensure that medicines to be given in school are in date and clearly labelled.
- Parents will co-operate in training their children to self-administer medicine if this is appropriate, and that staff members will only be involved if this is not possible.
- Medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual.
- School will ensure that, where appropriate, children are involved in discussing the management and administration of their medicines and are able to access and administer their medicine if this is part of their individual healthcare plan (for example, an inhaler).
- School staff will liaise as necessary with Healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil.
- Transitional arrangements between schools will be completed in such a way that St John's CE Primary School will ensure full disclosure of relevant medical information, healthcare plans and support needed in good time for the child's receiving school to adequately prepare.
- Individual healthcare plans will be written, monitored and reviewed regularly and will include the views and wishes of the child and parent in addition to the advice of relevant medical professionals.

Information

Children with serious medical conditions will have their photo and brief description of condition, along with any other necessary information, in the staffroom, school office, kitchen, classroom and class register. Children with medical conditions which may require emergency attention, e.g. epilepsy, diabetes, will have their names and an individual healthcare plan clearly accessible in their classroom, and all adults dealing with the child will have their attention drawn to this information. All other medical conditions will be noted from children's SIMs records and this information will be provided to class teachers annually and a list included in the class register.

A risk assessment will be undertaken for any members of staff with medical conditions, which may require emergency attention and key staff and first aiders will be made aware of the medical condition and possible treatment required.

In an emergency

In a medical emergency the school's first aiders, Mrs Campbell, Mr Corser, Mrs Hicks, Mrs Johnson, Mrs Randle or Miss Shorrocks, will be asked to attend.

If an ambulance needs to be called, staff will:

- Outline the full condition and how it occurred
- Give details regarding the child's date of birth, address, parents' names and any known medical conditions.

Children will be accompanied to hospital by a member of staff if this is deemed appropriate. Staff cars should not be used for this purpose. Parents must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

Giving regular medicines

Only essential medicines will be administered during the school day and parents must complete a Medication Administration request form before any medicine is administered. Medicines to be given during the school day must be in their original container. Controlled drugs can also be administered, subject to all other conditions as described in the Policy.

We encourage parents whose child is taking medication three times a day (or 'tds') to give it before school, after school and at bedtime. If a doctor has specified that one of the doses should be given at lunchtime and the parent/carer is unable to administer the dose, follow standard practice (see below).

If medicine has to be taken four times a day (or 'qds') and a lunchtime dose is necessary, the standard practice (see below) is followed.

Standard Practice

- Ask the Parent/Carer to complete a Medication Administration request form.
- Refer to this form prior to giving the medicine.
- Check the child's name on the form and the medicine.
- Check the prescribed dose.
- Check the expiry date.
- Check the prescribed frequency of the medicine.
- Keep the medication in the locked first aid cabinet in the school office or staff room from fridge (if medication is to be kept at specific temperature i.e. some penicillin)
- When the child attends the office for medication - check the child's name again and administer the medicine Measure out the prescribed dose (parents should provide measuring spoons/syringes). If the child is old enough, they can measure the medicine.
- Complete and sign the Medication Administration record sheet when the child has taken the medicine. Always note the time medication is administered.
- If uncertain, DO NOT give – check first with parents or doctor.
- If a child refuses medication, record and inform parents as soon as possible.

Documentation

Where medicines are to be administered at school, it is important that a written instruction should have been received from the parent or doctor, specifying:

1. Name and class of the child
2. Medication involved
3. Circumstances medication should be administered
4. Frequency and level of dosage - Use a copy of the medication administration forms (see Appendix 1 & 2).

For more serious or chronic conditions, including allergies that require the potential use of an epi-pen, we require a care plan from a child's doctor stating exactly what needs to be given and when. This is usually requested via the school nurse service.

Asthma medicines

Reliever inhalers kept in school are held in the pupil's classroom in a designated storage area. Parents/carers must ensure that the school is provided with a labelled reliever inhaler.

Members of school staff are not required to administer medicines to pupils (except in emergencies). Staff members will let pupils take their own medicines when they need to.

This guidance is predominantly for the use of reliever inhalers. Preventer inhalers are very rarely required at school. However, if they are needed, staff members may need to remind pupils to bring them in if they consistently forget.

Emergency inhaler

St John's CE Primary School keeps a supply of salbutamol inhalers for use in emergencies when a pupil's own inhaler is not available. These are kept in the 'emergency asthma kit' in the school office.

Emergency asthma kit contains the following:

- A salbutamol metered dose inhaler
- Two plastic, compatible spacers
- Disposable spacers
- Instructions on using the inhaler and spacer
- Instructions on cleaning and storing the inhaler
- Instructions for replacing inhalers and spacers
- The manufacturer's information
- A checklist, identifying inhalers by their batch number and expiry date
- A list of pupils with parental consent and/or individual healthcare plans permitting them to use the emergency inhaler
- A record of administration showing when the inhaler has been used

St John's CE Primary School buys our supply of salbutamol inhalers from CMUK Ltd. The emergency inhaler will only be used by pupils, for whom written parental consent has been received and who have been either diagnosed with asthma or prescribed an inhaler as reliever medication. The School Business Manager is responsible for overseeing the protocol for the use of the emergency inhaler, monitoring its implementation, and maintaining the Asthma Register.

Parental consent for the use of an emergency inhaler will form part of any pupil with asthma's individual healthcare plan (see Appendix 3).

When not in use, emergency inhalers are stored in the school office, out of reach and sight of pupils. Expired or used-up emergency inhalers are returned to Well Pharmacy, Blackpool to be recycled. Spacers must not be reused and may be given to the pupil for future home-use. Emergency inhalers may be reused, provided that they have been properly cleaned after use.

Appropriate support and training will be provided for relevant staff on the use of the emergency inhaler and administering the emergency inhaler.

Whenever the emergency inhaler is used, the incident must be recorded in the corresponding record of administration for the relevant pupil. The incident must also be recorded on the school's records, indicating where the attack took place, how much medication was given, and by whom, and the pupil's parents will be informed in writing (see Appendix 4).

The school Administration Officer is responsible for:

- Checking that the emergency inhalers and spacers are present and in working order, with a sufficient number of doses, on a monthly basis.
- Advising the SBM that replacement inhalers are required when expiry dates are approaching.
- Ensuring replacement spacers are available following use.
- Ensuring that plastic inhaler housing has been cleaned, dried and returned to storage following use, and that replacements are ordered where necessary.

Training

Teachers and support staff will receive appropriate training and guidance via the School Nurse Team for non-routine administrations. Staff who administer medication in school (i.e. Office staff) will be required to complete the Administration of Medication in Schools training module through EduCare.

Epi-pen – Any member of staff can administer an epi-pen in an emergency. The pen (cap off) should be pushed against the child's thigh, through clothing if necessary. The pen should be held for a count of 10 seconds before being withdrawn. Ambulances must be called for a child who may require an epi-pen. Cetrizine may be given if slight tingling of the lips occurs following ingestion of possible irritants for nut allergy sufferers. This is a liquid medicine stored with the epi-pen (if prescribed). If symptoms are more severe, the epi-pen should be given immediately. An ambulance must be called immediately. Parents should be contacted after this call has been made.

Medicine storage

It is the responsibility of the head teacher to ensure safe storage of medicines. All medicines should be kept in the container supplied which should be clearly labelled with the child's name, another identifier (such as date of birth) and instruction for usage.

All children with serious medical conditions should have easy access to their emergency medication. Some medicines (eg liquid antibiotics, insulin) require refrigeration – but must not be frozen. These should be kept in suitable additional and airtight containers (eg Tupperware boxes) and marked 'Medicines'

All prescribed medicines and controlled drugs will be kept in the locked cabinet in the main school office and access to these medicines is restricted to the named persons. Epi-pens will be kept securely in the relevant children's teaching areas. In the case of Epi-Pens all teaching & support staff will have access to the medication, which is clearly labelled and accessible.

Staff will record any doses of medicines given on the Medication Administration form. Children self-administering asthma inhalers do not need to be recorded.

Inhalers are kept in the child's classroom. Children have access to these inhalers at all times, though must inform a member of staff that they are taking a dose. All inhalers are marked with the child's name and are kept in a plastic box in their classroom. Expiry dates for inhalers will be checked on a termly basis by the business manager. All children with an inhaler must take them on educational visits, however short in duration.

Medicine disposal

Parents are asked to collect out-of-date medication. If this does not occur, medication should be taken to a pharmacy for disposal. The Administration Officer is responsible for checking dates of medication kept in the school office and arranging disposal if any have expired. This check should occur three times a year and be documented. Sharps boxes are used to dispose of needles. These can be obtained on prescription. They should be stored in a locked cupboard. Collection of sharps boxes is arranged with the local authority's environmental services.

General medical issues

Record keeping

The following documentation must be retained and kept updated:

- Enrolment forms and annual data collection sheets should highlight any health condition.
- Healthcare plans – for children with medical conditions giving details of individual children's medical needs at school. These needed to be updated after a medical emergency or if there is a change in treatment etc. and should be reviewed at least annually. They should be kept in a secure location but specified members of staff (agreed by parents) should have access to copies. All staff must protect a pupil's confidentiality.
- Centralised register of children with medical needs
- Request to administer medicines at school
- Log of training relevant to medical conditions
- Medi-alerts (bracelets/necklaces alerting others to a medical conditions) As with normal jewellery, these items are a potential source of injury in games or some practical activities and should be temporarily removed for these sessions.

Impaired mobility

Providing the GP or hospital consultant has given approval, children can attend school with plaster casts or crutches. There will be obvious restrictions on games and on some practical work to protect the child (or others). This includes outside play. Some relaxation of normal routine in relation to times of attendance or movement around the school may need to be made in the interests of safety. Children with impaired mobility can use the lift to access upper floors but must only do so in the company of an adult. Prior to a child's return to school following a fracture, serious illness or hospital procedure / operation a risk assessment will be completed to ensure the safety and health of the child and identify any potential impact on other pupils and of staff members.

Off-Site visits

Essential medicines will be administered on Educational Visits (EV), subject to the conditions above and will be documented in the EV risk assessment. Staff supervising the visit will be responsible for safe storage and administration of the medicine during the visit. All staff accompanying the trip / visit will be made aware of any pupils with medical conditions prior to the visit.

Named staff members will give medicines (see end of Policy).

A first aid kit must be taken whenever children are taken off-site. There is a first aid kit on the school minibuses and mini portable kits are available from the school office. Buckets, wipes and sick bags, in case of sickness on a journey, are also to be taken on minibus or coach journeys. All staff attending off-site visits must be made aware of any pupils with medical conditions on the visit. They should receive information about the type of condition, what to do in an emergency and any other additional medication or equipment necessary.

Employee's medicines

Staff and other employees may need to bring their own medicine into school. They have clear personal responsibility to ensure that their medication is not accessible to children.

Staff protection

"Universal precautions" and common sense hygiene precautions will minimise the risk of infection when contact with blood or other bodily fluids is unavoidable. Always wear gloves. Wash your hands before and after administering first aid and medicines. Use the hand gel provided. Further guidance regarding minimising the risks of infection from bodily fluids is located in the Infection Control Policy and the Risk Assessment file in the main office.

Complaints

Should parents be unhappy with any aspect of their child's care at St John's CE Primary School, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be managed. If this does not resolve the problem or allay concern, the problem should be brought to a member of the leadership team, who will, where necessary, bring concerns to the attention of the Head teacher. In the unlikely event of this not resolving the issue, the parents must make a formal complaint using the St John's CE Primary School Complaints Procedure.

Trained Staff

All staff can administer basic first aid where necessary, however, for more serious accidents / incidents there are designated members of staff in school who have completed first aid training

School First Aiders (full certificate) are:

Michelle Campbell – KS1 Teaching Assistant (training completed December 2019)

Michael Corser – Year 6 teacher (refresher training completed Summer 2020)

Jodie Shorrocks – Inclusion Team (training completed September 2020)

Jill Hicks – Business Manager (training completed September 2020)

Sam Randle – KS1 teaching support (training completed January 2019)

Paediatric First Aid (one day training)

Anne Marie Johnson – Early Years (training completed January 2019)

Emergency First Aid (one day training):

Janine Sharratt – School Office (training completed Autumn 2018)

Named people for administering medicines:

Mrs Nadine Galloway – Head teacher

Miss Adele Johnston – Deputy Head teacher

Mrs Jill Hicks – Business Manager

Mrs Janine Sharratt – Office Manager

Mrs Kate Taylor – Family Engagement Manager

Miss Jodie Shorrock – Inclusion (specific pupil only)

Mr Craig Whiteside – KS2 (specific pupil only)

St John's CE Primary School Medication Administration Form

St John's CE Primary School will not give your child medicine unless you complete and sign this form.

Name of Child:	
Date of Birth:	
Class / Year Group:	
Medical condition/illness:	
Name/Type of Medicine (as described on the container):	
Date dispensed:	Expiry date:
GP or Medical Practice name and contact number:	
Dosage, method and timing:	
Special Precautions:	
Are there any side effects that the school needs to know about?	
Self-Administration: Yes/No (delete as appropriate)	
I authorise staff at St John's CE Primary school to administer the medication as described above at the time / dosage stated. The medication is in its correct packaging and clearly labelled with my child's name and medication instructions.	
Signed:	
Name: Date:	

MEDICATION ADMINISTRATION RECORD

NAME OF CHILD		CLASS	
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CHILD'S MEDICAL CONDITON REQUIRING MEDICATION	
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MEDICATION PRESCRIBED		DOSAGE		TIME(S) REQUIRED	
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ADDITIONAL INFORMATION / KNOWN SIDE EFFECTS	
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GP's NAME		GP / GP PRACTICE TELEPHONE NUMBER	
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PARENTAL CONSENT HAS BEEN GIVEN FOR STAFF AT ST JOHN'S C OF E PRIMARY SCHOOL TO ADMINISTER MEDICATION AS DETAILED ABOVE AT THE TIME / DOSAGE STATED. THE MEDICATION IS IN ITS CORRECT PACKAGING. THE NAME OF THE MEDICATION AND DOSAGE REQUIRED FOR MY CHILD IS CLEARLY VISABLE.

Authorised by: Date:.....

DATE	DOSAGE	TIME GIVEN	GIVEN BY	SIGNATURE

Appendix 3

Emergency inhaler consent form

Please complete this form to provide consent for your child to receive salbutamol from an emergency inhaler in a medical emergency.

1. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [delete as appropriate].
2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:	Date:
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Parent's name:	Child's Year Group:
Child's name:	

Parent's address:
Parent's telephone:

Second emergency contact name:
Address:
Telephone:

Appendix 4

**LETTER TO INFORM PARENTS OF
EMERGENCY SALBUTAMOL INHALER USE**

Child's name:

Class:

Date:

Dear

This letter is to notify you that.....has had problems with his / her breathing today. This happened when.....

A member of staff helped them to use an asthma inhaler.

* They did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given puffs.

* Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given puffs.

Although they soon felt better, we would advise that you have your seen by your own doctor as soon as possible.

Yours sincerely,

Mrs. N. Galloway

Head teacher

* Delete as appropriate