

# Medicine and Supporting Children at School with Medical Conditions Policy



Updated May 2021

## **Medicine and Supporting Pupils at School with Medical Conditions Policy**

### **Introduction**

Section 100 of the Children and Families Act 2014 places a duty on the school's Governing Body and senior leadership team to make arrangements for supporting pupils at school with medical conditions. At St. Gregory's we recognise that all children have a right to access the full curriculum, adapted to their medical needs and to receive the ongoing support, medicines or care at school to help them manage their condition and keep them well. We also recognise that medical conditions may impact social and emotional development as well as having educational implications.

This Policy will be reviewed annually by the school's Governing Body and will be readily accessible to all staff. Parents/carers are able to request a copy of the policy from the school office or view it on the school website.

### **Policy Implementation**

The school's Governing Body is responsible for determining this policy and ensuring arrangements are in place to support children with medical conditions. Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case the Governing Body will comply with their duties under that Act. Some children may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this policy should be read in conjunction with the SEND Code of Practice, St. Gregory's SEN Local Offer and the Inclusion Policy.

### **Roles and Responsibilities**

The Headteacher is responsible for overseeing the management and provision of support for children with medical conditions including;

- Informing relevant staff of medical conditions
- Arranging training for identified staff and ensuring sufficient numbers of trained staff are available to implement the policy
- Ensuring staff are aware of the need to communicate necessary information about medical conditions to supply staff and where appropriate, taking the lead in communicating this information
- Assisting teachers with risk assessment for school visits and other activities outside of the normal timetable
- Developing, monitoring and reviewing Individual Healthcare Plans (IHCP)
- Working together with parents/carers, pupils, the school nurse and other healthcare professionals and other agencies
- Ensuring school staff are aware that they are appropriately insured to support pupils in this way.

Teachers and support staff are responsible for the day to day management of the medical conditions of children they work with in line with this policy, training received and any IHCP in place. Any teacher or support staff may be asked to provide support to a child with a medical condition,

including administering medicines. However, no member of staff can be required to provide this support. The ultimate responsibility for a child's health lies with parents/carers who are responsible for their medication and for supplying the school with all relevant information.

### **Procedure to be followed when notification is received that a pupil has a medical condition**

An IHCP will be written for any pupils who have a medical condition that is long-term and/or complex or where there is a high risk that emergency intervention will be needed. Not all children with a medical condition will require an IHCP. The Headteacher, any healthcare professionals that are involved and the parents/carer should agree, based on the evidence, when a plan is needed. If consensus cannot be reached the Headteacher will take the final view. A flowchart for identifying and agreeing the support a child needs and developing an IHCP is attached at **annex A**.

Where an IHCP is required it should contain the following information (see suggested template attached at **annex B**);

- The name of the child and family contact details.
- Name/details of any healthcare professional/organisations involved and the child's GP.
- Name of person in school with responsibility for providing support in school.
- The medical condition, including symptoms, triggers, signs, treatments and any facilities or equipment needed.
- The child's resulting needs, including medication (dose, side effects and storage), method, time and by whom the medication will be administered.
- Any other daily care requirements.
- Specific support for the child's educational, social and emotional needs.
- Arrangements for school visits/trips and activities outside of the normal school timetable.
- What constitutes an emergency and what action is required, who should be contacted and whom within school should take this action.
- Any training needs for staff responsible for supporting the child.
- How the plan will be shared (i.e. who in school needs to be aware of the child's condition).

### **Administering Medicines**

The school understands the safe and effective administration and management of prescribed medication to be an essential part of its duties and procedures to safeguard the health and well-being of children in its care.

Many children have the occasional or regular need to take prescribed medication to keep them in good health and to ensure their well-being. The school is keen to ensure that the need for medical care, or the administration of prescribed medication, does not stop children from attending regularly and will therefore arrange for the administration of certain medication by advance agreement with their parents/carers.

The school will arrange for certain prescription medication to be administered by staff trained in the administration of that medication. The school will only administer prescription medication that is essential to the health of a child and where it would be detrimental to a child's health if the medicine were not administered at a time when the child is present on the premises. Where

prescribed medication can be given to the child when they are at home then the school would expect the parents/carers to administer the medication outside school hours.

Non-prescribed medication will not be administered by staff under any circumstances. The school would expect parents/carers to administer such medication outside of school hours. The school would also expect parents/carers to keep children at home if they are acutely unwell or infectious.

The need for medication, along with all other relevant health details, should be discussed with the child's parents/carers during the admission process of a new child. In other cases such as a new diagnosis or a child coming into school as an in-year admission, the school will endeavour to ensure arrangements are put in place within two weeks. Children with complex or long-term medical or health needs will have an IHCP agreed with the parents/carers which will include a long-term plan for the administration of medication.

Where the school agrees to administer the medication then written and signed consent must be obtained in advance from the parents/carers clearly specifying the date, time, dosage and name of the medication to be given (see Parental Agreement attached at **annex C**).

The medication to be administered must be brought in by the parents/carers themselves to the school office. The medication must be in its original container and bear its original label which must be legible and must have the name of the child on it. If the medical condition is likely to be long-term the School requires the medicines to be in labelled, lidded boxes with the name and a picture of the child on the box together with dosage/administration information. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or pump, rather than its original container.

When administering medication staff will;

- a. Check that a signed consent form is in place.
- b. Check the administration record to ensure that the medication is due.
- c. Check the identity of the child.
- d. Check the label of the medication for the name of the medication, the name of the child, the strength of the medication and the expiry date of the medication.

Staff will administer the medication as instructed on the label and as specified in the written permission from the parents/carers. Wherever possible, a second member of staff will check and witness the administration. Accurate, signed records will be kept of all medication administered, withheld or refused. Any children taking medication will be closely monitored and any side effects or reactions reported immediately to the Headteacher.

Where a child refuses to take their medication no attempt will be made to coerce or make them take it, but the refusal will be recorded and the parents/carers informed. When they pick up their children, the parents/carers will be informed of any medication given or refused. All medication will be kept securely in the school office and any unused or surplus medication will be returned to the parent/carers. If the medicine provided has not been prescribed for the child, has the wrong name on it, is out of date or does not match the medication or strength specified in the written

permission, then staff will not under any circumstances administer it and parents/carers will be informed.

Written records will be kept of all medicines administered to children (see form attached at **annex D**). The records will be stored on the medical needs file in the school office and retained in accordance with the school Information Retention Schedule.

### **Management of Medicines**

The school recognises that certain medicines including asthma inhalers and adrenaline pens should always be readily available to children and not locked away. Parents/carers of children prescribed these medicines will be subject to the procedure above but the medication will be stored securely in class. It is the parents/carers responsibility to ensure the inhaler is in date, clean and ready for use and stored in a labelled, lidded box as described above. Children who are competent to self-administer this medication will, after discussion with parents/carers, be allowed to do so with staff supervision.

The school maintains 2 Salbutamol 100mcg/dose CFC free inhalers for use by a child in emergency situations where the child has already been prescribed this medication in accordance with the procedures set out above but who, for whatever reason, does not have access to their inhaler at that time. The inhaler will be self-administered by the pupil and overseen by trained staff only and parents/carers will be informed immediately of the School's need to utilise this emergency medication.

### **Action in Emergencies**

Where an ambulance is required in an emergency situation a member of the School Office staff will be required to dial 9 999 and be ready with the information below. The member of staff will speak slowly and carefully and be ready to repeat the information if required;

- The School's telephone number,
- Name of the person making the call,
- School address,
- Exact location of the patient within school,
- Provide the name and age of the child and a brief description of their symptoms,
- Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient.

The school will then contact parents/carers to inform them of the situation. A member of staff will remain with the child at all times until the parent/carer arrives. If a parent/carer does not arrive in time and the child needs to be transported to hospital a member of staff will accompany the child to hospital. Parents/carers will be contacted with the hospital details.

A copy of this information is displayed in the school office.

### **Unacceptable Practice**



The school deems the following unacceptable practice for children with medical conditions, although the school will use discretion to respond to each individual case in the most appropriate manner.

- Preventing children from accessing their inhalers and medication and administering their medication when and where necessary.
- Assuming every child with the same condition requires the same treatment.
- Ignoring the views of the child or their parents/carers; or ignoring medical evidence or opinion (although this may be challenged).
- Sending children with medical conditions home frequently or preventing them from staying for normal school activities, including lunch, unless this is specified within their IHCP.
- If a child becomes ill, sending them to the School Office or medical room unaccompanied or with someone unsuitable.
- Penalising children for their attendance record if their absences are related to their medical condition e.g. medical appointments.
- Preventing pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Requiring parents/carers, or otherwise making them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs.
- Preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

### **Complaints**

Should parents/carers be dissatisfied with the support provided or any of the school's actions they should discuss their concerns directly with the Headteacher. If for whatever reason this does not resolve the issue, they may make a formal complaint under the procedure set out in the school's Complaints Procedure on the website.


### **Equality Impact Statement**

The school will do all they can to ensure that this policy does not discriminate, directly or indirectly. This shall be done through regular monitoring and evaluation of the school's policies. On review the school will assess and consult relevant stakeholders on the likely impact of its policies on the promotion of all aspects of equality, as laid down in the Equality Act 2010.

### **Storing and Managing Information**

Documents are stored and managed in line with the school's Information Security Policy:

- All documents stored in locked cabinets
- All electronic documents are password protected
- All documents no longer required are collected and destroyed by Shred It
- Record keeping procedures as contained in the school's Records Management Policy are followed.

Head Teachers name: Darren Darbyshire	Proposed Review date: May 2022
Signed: 	
Date: 24 <sup>th</sup> May 2021	Review date:



## Annex A – Model Process for Developing Individual Health Care Plans





**Annex B – Individual Health Care Plan Template**

---



**St Gregory's Catholic Primary School**

**Individual Health Care Plan**

Child's name	
Class	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

**Family Contact Information**

Name (1 <sup>st</sup> contact)	
Phone no. (work)	
(home)	
(mobile)	
Name (2 <sup>nd</sup> contact)	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

**Clinic/Hospital Contact**

Name	
Phone no.	

**G.P.**

Name	
------	--

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision and storage

Daily care requirements



Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency *(state if different for off-site activities)*

Plan developed with

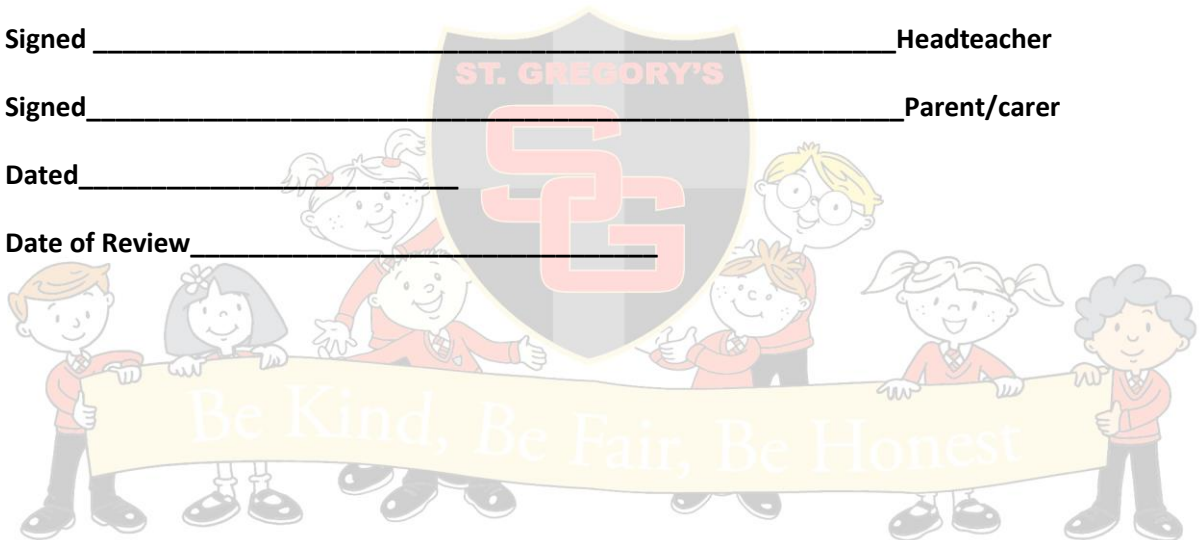
Staff training needed/undertaken – who, what, when

Signed \_\_\_\_\_ Headteacher

Signed \_\_\_\_\_ Parent/carer

Dated \_\_\_\_\_

Date of Review \_\_\_\_\_



**Annex C – Parental Agreement to Administer Medicine**

---



**St. Gregory's Catholic Primary School**

**Request for School to Administer Prescribed Medication**

The school will not give your child medicine unless you complete and sign this form, and the Headteacher has agreed that school staff can administer medicine.

Name of child	
Date of birth	
Class	
Medical condition or illness	

**Medicine**

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

**NB: Medicines must be in the original container as dispensed by the pharmacy**

**Contact Details**

Name	
Daytime telephone no.	

Relationship to child

Address

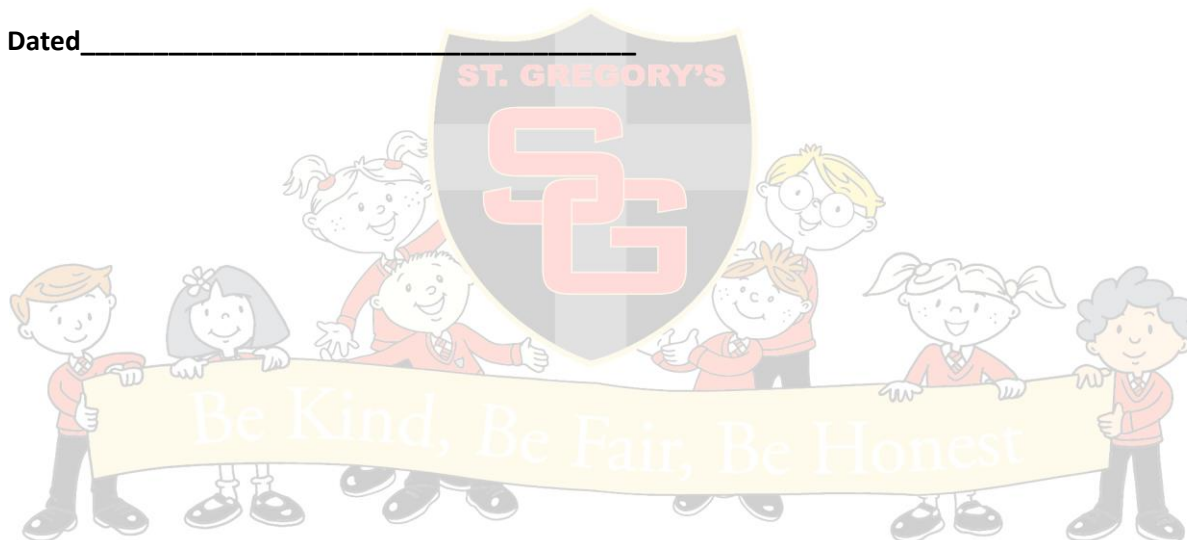

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school staff administering medicine in accordance with its policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

I understand that I must deliver the medication to the school office and accept that this is a service which the school is not obliged to undertake.

Parent/carers signature \_\_\_\_\_

Staff signature \_\_\_\_\_

Dated \_\_\_\_\_



Annex D – Record of Administration of Medicine

Form – Record of administration of medication

Date	Name of child	Time	Medication given	Dose	Observations	Signed