Supporting Pupils with Medical Conditions

This policy was circulated for consultation to the named First Aiders (3 day) within school and Designated Governor for Safeguarding.

This policy was shared and adopted by staff on 1 March 2016

The next review date is during 2018/2019 unless legislation or Local Authority policy review dictates otherwise.

Rationale:
The Children and Families Act 2014 (section 100) placed a duty on the governing bodies of maintained schools … to make arrangements for supporting pupils with medical conditions. This duty came into force on 1st September 2014.

This policy has been written to ensure consistent practice in supporting pupils with medical conditions and the safe and clear administration of medicines, so that pupils with medical needs achieve regular attendance.

Aims:

- To ensure arrangements are in place to support pupils with medical conditions, so they can access and enjoy the same opportunities at school as any other child
- To provide parents and pupils with confidence in the school’s ability to provide effective support for medical conditions
- To support pupils to develop confidence and learn the necessary self-care skills to manage a medical condition
- To ensure the safe administration of medicines to pupils where necessary
- To explain the roles and responsibilities of school staff in relation to medicines
- To clarify the roles and responsibilities of parents in relation to pupils’ school attendance during and following illness
- To outline to parents and school staff the safe procedure for bringing medicines into school, when necessary, and their storage
- To outline the safe procedure for managing medicines on school trips

Definitions:

‘Medicines’ include liquid medication, tablets, eye and ear drops, lotions, creams and ointments.

Medical conditions: There is no definition of ‘medical condition’. School does not have to wait for a formal diagnosis before providing support to a pupil. In cases where a pupils’ medical condition in unclear or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence.

Admission arrangements for Pupils with Medical Conditions:
Pupils with medical conditions are entitled to a full education and have the same rights of admission to school as other children. No pupil with a medical condition should be denied admission or prevented from taking up a place in school because of arrangements for their medical conditions have not been made. However, in line with
safeguarding duties, governors do not have to accept a child in school at times where it would be detrimental to the health of the pupil or others to do so.

**Individual Healthcare Plans:**

Individual Healthcare Plans (IHP) will help school effectively support pupils with medical conditions. (See Appendix A and B)

Plans will be drawn up in partnership between school, parents and a relevant healthcare professional eg School or Specialist Nurse. Pupils will be involved whenever appropriate. These will be reviewed at least annually or earlier if evidence is presented that the child’s needs have changed. Where a child has a special educational need identified in an Educational Health and Care Plan (EHC), the individual Healthcare Plan (IHP) will be linked to, or become part of the EHC.

**An Individual Healthcare Plan should include:**

- The medical condition, its triggers, signs, symptoms and treatments;
- The pupils’ 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, eg crowded corridors;
- Specific support for the child’s educational, social and emotional needs eg how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed (some pupils will be able to take responsibility for their own health needs), including in emergencies. If a pupil is self-managing their medication this should be 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 head teacher, or delegated person, for medication to be administered by a member of staff or self-administered by the child during school hours;
- Separate arrangements or procedures for school trips or other school activities outside of the normal school timetable that will ensure that the child can participate, eg risk assessments;
- Where confidentiality issues are raised by the parent of a child the designated individuals to be entrusted with information about the child’s condition
- What to in an emergency, including whom to contact and contingency arrangements
Roles and Responsibilities:

Supporting a child with a medical condition during school hours is not the sole responsibility for one person. School will work in partnership with healthcare professional, social care professionals, local authorities, parents and pupils.

Governing Body: The governing body will make arrangements to support children with medical conditions in school and ensure that a policy is developed and implemented. The governing body will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

Head teacher: The Head teacher will ensure that:
• the school’s policy is developed and effectively implemented with partners
• all staff are aware of the policy and understand their role in its implementation
• all staff who need to know are aware of the child’s condition
• there are sufficient trained numbers of staff available to implement the policy and deliver against all IHPs including in contingency and emergency situations

School Staff: School staff may be asked to provide support to children with medical conditions, including administration of medicines (although they cannot be required to do so). They will receive sufficient and suitable training and achieve the necessary level of competency before they take on the responsibility to support children with medical conditions.

School staff are asked to follow the procedures outlined in this policy using the appropriate forms; to complete a health care plan in conjunction with parents and relevant healthcare professionals for pupils with complex or long term medical needs and to share medical information as necessary to ensure the safety of a pupil.

School Administrator (with responsibility for First Aid/ Health and Safety): School Administrator will ensure that sufficient staff are suitably trained, cover arrangements made and Individual Health Care Plans are monitored.

School Nurse: Every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school, liaising with lead clinicians locally on appropriate support for the child and associated staff training needs. They can provide advice and liaise with staff on the implementation of a child’s IHP.

Other Healthcare Professionals including GPs and Paediatricians: They should notify the school nurse when a child has been identified as having a medical condition that will require support at school. Specialist local health teams may be able to provide support in schools for children with particular conditions (eg asthma, diabetes, epilepsy)
**Pupils:** Pupils will be fully involved in discussions about their medical support needs and contribute, and comply with, their IHP as appropriate.

**Parents:** Parents will provide the school with sufficient and up to date information about their child’s medical needs. They will be involved in the development and review of their child’s IHP, providing medicines and equipment (checking it is not empty and in date) and ensuring they, or another nominated adult, are contactable at all times. The adult, with parental responsibility, is required to complete a parental agreement form (See appendix A) at the school office for the medicine to be administered by school staff.

**Local Authority:** The Local Authority should provide support, advice and guidance to support children with medical conditions to attend full time. Where children would not receive a suitable education at Shakespeare Primary School because of their health care needs the Local Authority has a duty to make other arrangements.

**Providers of Health Services:** Providers of Health Services should co-operate with school in providing valuable support, information, advice and guidance.

**Staff training and support:**

- Staff, who are identified to administer routine prescribed and non-prescribed medicines, are First Aid trained and a list is held in the school office and First Aid Room notice board.
- Each September, or at the point of diagnosis, familiar year team staff are identified to support an individual with medical needs and they receive appropriate training, i.e. currently, this includes administering Epi-pens, supervising the administering of insulin and the management of diabetes. Teams are re-assessed each September, around the location of pupils with medical needs, and appropriate training given.
- Records are maintained of trained staff for first aid and the administering of the Epi-pens, supervising the administration of insulin. A current list of staff is available from the school office.
- Additional needs-led staff training will be implemented, as required. (i.e. Training of the administration of Midazolam must be undertaken by the School’s Nursing Service)
- Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.

**The Pupil’s role in Managing their own Medical Needs:**

- Pupils are encouraged to take responsibility for their own medicine from an early age. This will include encouraging supervised independence, which is age-appropriate, for example, pupils using Movicol, to prepare, mix and administer the medicine. See Asthma policy for advice on pupils using their own asthma reliever.
- Parents/carers must still complete a medicine record form, noting that the pupil will self-administer and sign the form. The school will store the medicine appropriately.
• Pupils requiring controlled drugs should attend the school office to access their medication from locked storage, and have the dose checked and recorded.

• We recognise that sometimes pupils need access to products to relieve discomfort, such as throat lozenges or lip balm. Teachers should allow this to happen, with verbal consent from the parent, encouraging appropriate independence according to the age and responsibility shown by the pupil.

• In sunny months, pupils may need to self-administer suntan lotion. Any lotion used should be provided by the parent and not shared between pupils, due to possible allergies. Pupils must self-administer or pupils can support one another. Younger pupils are encouraged to bring in spray lotions, so an adult can direct the spray onto the skin, allowing pupils to apply the lotion independently.

Procedures for managing medicines on school premises:

• Prior to staff members administering any medication, the parents/carers of the child must complete and sign a Parental agreement for school to administer medicine form. [See Appendix A]

• Medicines (controlled, prescribed or non-prescribed) should only be brought to school when essential, i.e. where it would be detrimental to the pupil’s health if the medicine were not administered during the school day. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the pupil to take them outside of school hours.

• Only medicines (including eye drops) in the original container will be accepted in school, so that age-related dosage instructions are clearly evident. For controlled and prescribed medicines, containers need to be clearly labelled by the pharmacy, with the pupil’s name and dosage. Medicines which do not meet these criteria will not be administered.

• All medicines must be brought to the school office by an adult (over 16 years). Medicines must never be brought to school in a pupil’s possession (except asthma inhalers, see Asthma Policy).

• No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.

• No child under 16 years of age will be given medication containing aspirin without a doctor’s prescription.

• Controlled drugs, required by pupils, must be brought to the attention of the Head teacher. Tablets, which are controlled drugs, should be counted and recorded when brought to the office and when collected again. These may be administered to the child, for whom it has been prescribed.

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

Safe storage of medicines

• Asthma inhalers should be stored in the pupil’s classroom within the pupil’s reach and labelled with their name and should be taken with the pupil during physical activities or when leaving the school premises.
No medicines, other than asthma inhalers, may be kept in the classroom
Antibiotics (including antibiotic eye drops) must be stored in a fridge, either in the Staff Room or Early Years Kitchen
Tablets must be stored in the locked first aid cabinet in the first aid room
Epipens and Midazolam should be stored on an accessible shelf, within the School Office
Controlled drugs must be locked in the wall-mounted medicines cupboard in the Medical Room.

Roles and responsibility of staff managing and supervising the administration of medicines:

An individual health care plan (See Appendix B) should be completed in conjunction with parents and relevant healthcare professionals for pupils with complex or long term medical needs
Administration of medicines at school must be recorded in the Medicines Folder (See Appendix C) by the appointed First Aider in the School Office.
Parents may come to the school office to administer medicines in the Medical Room, if necessary. Parents are asked to complete an entry on the ‘Record of Medicines Administered to Pupils’ form (See Appendix C).
Some pupils may self-administer medication, e.g. insulin, if this has been directed by the parents when filling in the medicine form. This should be overseen by a First Aider (other than ventolin).
If a pupil refuses to take medicine, staff must not force them to do so. The refusal should be recorded and parents informed, the same day.

Record keeping:

All medicines administered by school staff will have the correct parental consents in place, prior to administering the medication. In an emergency, the Head teacher may accept verbal consent via the telephone, which is followed up in writing the same day.
All medicines administered by school staff will be recorded within the Medicines Folder in the school office, at the time of administration by the staff administering the medication.

Confidentiality rules
The medical needs of the pupils will be maintained as confidential records.
The needs of pupils will be shared on a ‘need to know’ basis, to maintain the safety of the pupils, whilst issues of privacy and dignity are upheld.

Emergency procedures:

An individual health care plan should clearly define what constitutes an emergency for each individual and explain what to do, including ensuring all relevant staff are aware of emergency symptoms and procedures.
- Pupils (class and/or peer group) also need to know what to look for and when they need to tell a teacher.
- The school’s emergency procedures are kept within the Red Box, kept within the Head teacher’s Office. It is also available to all staff on the school’s server.
- Members of the senior team and the admin team are fully briefed around the procedures required, during an emergency.
- The school will call for medical assistance and the parent or named emergency contact will be notified.
- The Governing Body will support any member of staff who assists with administering medicine in a reasonable good faith attempt to prevent or manage an emergency situation, regardless of outcome.

In event of cardiac arrest, the school has a defibrillator kept in the First Aid room. First aiders are trained to use the defibrillator and can administer CPR. The local NHS ambulance service has been informed of its location.

Procedures for managing medicines on day trips, residential visits and sporting activities:

Pupils with medical needs are given the same opportunities as others. Staff may need to consider what is necessary for all pupils to participate fully and safely on school trips. Staff should discuss any concerns about a pupil’s safety with parents.

- The Educational Visits Leader is responsible for designating a school First Aider for the trip, with at least the Emergency First Aid qualification for day trips and preferably at least Paediatric First Aid for residential trips.
- The Educational Visits Leader is responsible for ensuring that arrangements are in place for any pupil with medical needs prior to a trip taking place, including ensuring that asthma inhalers are carried as required. A copy of any relevant Individual Health Care Plan should be taken on the day trip.
- The designated school First Aider on the day trip will administer any medicines required (prescribed, controlled or non-prescribed) in line with prior written permission from the parents, using Appendix A. The administration of all drugs will be recorded on the ‘Record of Medicines Administered to Pupils’ form (See Appendix C)
- The First Aider will return the forms and any unused medicines to the School Office/First Aid room or parent as appropriate, on return to school
- **For Residential Journeys**, Appendix D may be used to record the medical needs and medication requirements for the duration of the trip. The administering of medication will be recorded on Appendix C and handed back to the school office on the completion of the trip.

Unacceptable practice:

Staff at Shakespeare Primary School understand that the following behaviour is unacceptable:
Shakespeare Primary School

- Preventing pupils from easily accessing their inhalers, medication and administering their medication when and where necessary
- Assuming that pupils with the same condition require the same treatment
- Ignoring the views of the pupil or their parents; ignoring medical evidence or opinion
- Sending pupils home frequently or preventing them from staying for normal school activities
- If a pupil becomes unwell, sending them to the school office of medical room alone
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition, e.g. hospital appointments
- Preventing pupils from drinking, eating or taking toilet breaks, whenever they need in order to manage their medical condition effectively
- Requiring parents, or make them feel obliged, to attend school to administer medication or provide medical support to their child, including toileting issues. No parent should have to give up working because the school is failing to support their child’s medical needs.
- Preventing pupils from participating in any aspect of school life, including school trips, e.g. by requiring the parent to accompany the child

School Attendance during or following Illness:

- Pupils should not be at school when unwell, other than with a mild cough/cold
- Symptoms of vomiting or diarrhoea require a pupil to be absent from school and not to return until clear of symptoms for 48 hours
- Pupils should not be sent to school with earache, toothache or other significant discomfort, until they have seen a medical practitioner
- Pupils should not be sent to school with an undiagnosed rash or a rash caused by any contagious illness
- Any other symptoms of illness which might be contagious to others or will cause the pupil to feel unwell and unable to fully participate in the school day require the pupil to be absent from school

Liability and indemnity:
Shakespeare Primary School has an Insurance Policy that provides liability cover relating to the administration of medication.

Complaints:
Any parents of pupils dissatisfied with the support provided should discuss their concerns directly with the school. If this cannot be resolved parents may make a formal complaint using the school’s Complain Policy and Procedures.

Appendices:

Appendix A ~ Parental agreement for school to administer medicine
Appendix B ~ Health care plan
Appendix C ~ Record of Medicines Administered to Pupils form
Appendix D ~ Residential Medical Form
Appendix A ~ Parental agreement for school to administer medicine

Shakespeare Primary School will not give your child medicine unless you complete this form and the school has a policy that staff can administer medicine.

Name of Child: _________________________________________________________
Date of Birth: _________________________________________________________
Class: ________________________________________________________________
Medical condition/illness: _______________________________________________

<table>
<thead>
<tr>
<th>Name/Type/Quantity of Medicine (as described on the container):</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date dispensed:</td>
<td></td>
</tr>
<tr>
<td>Expiry date:</td>
<td></td>
</tr>
<tr>
<td>Dosage and method:</td>
<td></td>
</tr>
<tr>
<td>Timing:</td>
<td></td>
</tr>
<tr>
<td>Special Precautions:</td>
<td></td>
</tr>
<tr>
<td>Are there any side effects that the school/setting needs to know about?</td>
<td></td>
</tr>
<tr>
<td>Self Administration: Yes/No (delete as appropriate)</td>
<td></td>
</tr>
<tr>
<td>Procedures to take in an Emergency:</td>
<td></td>
</tr>
</tbody>
</table>

Contact Details

Name: _________________________________________________________________
Daytime Telephone No: _________________________________________________
Mobile No: ___________________________________________________________
Relationship to Child: _________________________________________________
Address: _____________________________________________________________

I understand that I must deliver the medicine personally to Mrs. Tracy Fielding and accept that this is a service that Shakespeare Primary School is not obliged to undertake.
I understand that I must notify the school of any changes in writing.

Date: ________________
Signature(s): _________________________________________________________
Relationship to child: _________________________________________________
Confirmation of the Head’s agreement to administer medicine

Shakespeare Primary School

It is agreed that __________________ [name of child] will receive __________________ [quantity and name of medicine] every day at __________________ [time medicine to be administered e.g. Lunchtime or afternoon break].

__________________ [name of child] will be given/supervised whilst he/she takes their medication by __________________ [name of member of staff].

This arrangement will continue until__________________ [either end date of course of medicine or until instructed by parents].

Date: ______________________________

Signed: ______________________________

[The Head teacher /Named Member of Staff]

The school will make every effort to provide this service; should any circumstances prevent the school from doing so, the school will inform the named contact at once, so that alternative arrangements can be made by the parent.
Appendix B ~ HEALTHCARE PLAN

Part A For completion by the parent/carer

Name of School: Shakespeare Primary School

Child’s name: __________________________

Class: __________________________

Date of birth: __________________________

Child’s address: __________________________

Medical diagnosis or condition: __________________________

Date: __________________________

Review date: __________________________

CONTACT INFORMATION

<table>
<thead>
<tr>
<th>Family contact 1</th>
<th>Family contact 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Name</td>
</tr>
<tr>
<td>Phone number (work)</td>
<td>Phone number (work)</td>
</tr>
<tr>
<td>(home)</td>
<td>(home)</td>
</tr>
<tr>
<td>(mobile)</td>
<td>(mobile)</td>
</tr>
</tbody>
</table>

Clinic/Hospital contact GP

Name: __________________________

Phone no. __________________________

Name: __________________________

Phone no. __________________________
Part B For completion by the Health Professional

Name of Health Professional: __________________________

Job title: __________________________

Medical diagnosis or condition: __________________________

Describe medical needs and give details of child's symptoms:
________________________________________________________________________
________________________________________________________________________

Daily care requirements: (eg before sport/at lunchtime/during extra-curricular activities)
________________________________________________________________________
________________________________________________________________________

Describe what constitutes an emergency for the child, and the action to take if this occurs:
________________________________________________________________________
________________________________________________________________________

Follow up care:
________________________________________________________________________
________________________________________________________________________

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

Form copied to: ___________________________________________________________________
Appendix C ~ RECORD OF MEDICINES ADMINISTERED TO PUPILS AT
SHAKESPEARE PRIMARY SCHOOL

NAME OF PUPIL: ________________________________

<table>
<thead>
<tr>
<th>DATE</th>
<th>MEDICINE</th>
<th>DOSAGE</th>
<th>TIME OF DAY</th>
<th>ANY REACTIONS/ADDITIONAL NOTES</th>
<th>SIGNATURE</th>
<th>PRINT NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Dear Parents and Carers

Please complete and return the form below. It relates to the forthcoming journey or activity for which you have already received details. The form gives your consent for your child to take part in this activity.

VISIT OR ACTIVITY:
DATE:

NAME OF CHILD:
DATE OF BIRTH:

SPECIAL DETAILS:
Any relevant information concerning your child’s health or diet requiring special attention but which does not prevent him or her taking part should be noted below.

- Have any allergies or conditions eg diabetes, asthma or epilepsy
Does your child have any specific dietary requirements?

Experience travel sickness?
YES ☐
NO ☐

Travel sickness tablets required?
YES ☐
NO ☐

Medication and dosage: (please list all medication)

• ______________________________________________
• ______________________________________________
• ______________________________________________

Any additional comments (please include any recent illness):

C:\Users\chughes\AppData\Local\Temp\Temp3_policiesthatneedupdatingattached.zip\Supporting Pupils at School with Medical Conditions.docx
- I would like my son/daughter to take part in the above mentioned visit or activity and having read the information provided agree to him/her taking part in any or all of the activities described.
- I consent to any emergency medical treatment required by my child during the course of the visit.
- I confirm that my child is in good health and I consider him/her fit to participate.

NAME OF FAMILY DOCTOR
______________________________________________

SIGNATURE OF PARENT/CARER:
______________________________________________

PRINT NAME: __________________________________________

ADDRESS:
____________________________________________________________________
____________________________________________________________________

TELEPHONE NUMBER (HOME): ________________________________

(WORK): ________________________________

(MOBILE): ____________________________  DATE ______________
Process for developing Individual Healthcare Plans (IHPs)

1. Parent or healthcare professional informs school that child has been newly diagnosed, is due to start school or is due to return from long-term absence, or that needs have changed.

2. Head teacher or Inclusion Co-ordinator co-ordinates a meeting to discuss child's medical needs and identifies member of school staff who will provide support to the pupil.

3. Meeting held to discuss and agree on the need for IHP to include key school staff, child, parent and relevant healthcare professionals. Both classroom and extra-curricular activities will be considered.

4. Develop IHP in partnership with healthcare professionals and agree on who leads. Input from healthcare professional must be provided.

5. School staff training needs identified.

6. Healthcare professional or parent delivers training and staff signed-off as competent - review date agreed.

7. IHP implemented and circulated to relevant staff.

8. IHP reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate. (Back to Step 3)
# Staff Training Record Sheet: Administration of Medicines

<table>
<thead>
<tr>
<th>Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of training received:</td>
<td></td>
</tr>
<tr>
<td>Date of training:</td>
<td></td>
</tr>
<tr>
<td>Training provided by:</td>
<td></td>
</tr>
<tr>
<td>Profession and title:</td>
<td></td>
</tr>
</tbody>
</table>

I confirm that this member of staff has received training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated annually.

<table>
<thead>
<tr>
<th>Trainer’s signature</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>

I confirm that I have received the training detailed above.

<table>
<thead>
<tr>
<th>Staff signature</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>