



Polehampton C. of E. Schools Federation

**Supporting Children in School with Medical Conditions Policy,
including Medicines Policy
(Infant School Version)**

Document Version: 1

**Initial Approval Date: 5/2/15
Review Period – every 3 years**

Document History

Version	Issue Date	Comments	Total pages	Signed by chair of committee
1	3/2/15	First policy – new statutory arrangements. Adds in the previous Medicines Policy	16	

This policy is written in regard to Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.

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Key points and responsibilities

- Governing bodies must ensure that arrangements are in place so that pupils at school with medical conditions should be properly supported. Such pupils should be able to play a full and active role in school life, remain healthy and achieve their academic potential.
- Governing bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

This policy complements the schools' work in all other areas. It is particularly useful to read alongside

- Health and Safety policy
- Inclusion policy

This policy was written with regard to the DFE's statutory guidance "Supporting pupils at school with medical conditions".

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statutory_guidance_on_supporting_pupils_at_school_with_medical_conditions.pdf

and the DFE's "Statutory framework for the early years foundation stage"

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/335504/EYFS_framework_from_1_September_2014_with_clarification_note.pdf

Procedure

The named person is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained
- all relevant staff are made aware of a child's condition
- cover arrangements in case of staff absence/turnover is always available
- supply teachers are briefed
- risk assessments for visits and activities out of the normal timetable are carried out
- individual healthcare plans are monitored (at least annually)
- transitional arrangements between schools are carried out
- if a child's needs change, the above measures are adjusted accordingly

Where children are joining our schools at the start of a new academic year, these arrangements should be in place for the start of term. Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring medication or support in school should have an **Individual Healthcare Plan (IHP)** which details the support that child needs. If the parents, healthcare professional and school agree that an IHP is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

Schools do not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place.

Individual Healthcare Plans (IHPs)

The following information should be considered when writing an individual healthcare plan:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- specific support for the pupil's educational, social and emotional needs
- the level of support needed
- emergency procedures
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- who in school needs to be aware of the child's condition and the support required
- arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate
- confidentiality
- what to do if a child refuses to take medicine or carry out a necessary procedure
- what to do in an emergency, who to contact and contingency arrangements
- where a child has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan
- annual review procedures

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The schools will work collaboratively with any relevant person or agency to provide effective support for the child.

The Governing Body

- must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented
- must ensure that such children can access and enjoy the same opportunities at school as any other child, including trips, visits and sporting activities
- must take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Governors should, therefore, ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.
- must ensure that arrangements give parents and pupils confidence in the schools' ability to provide effective support for medical conditions in school.
- must ensure arrangements show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care.

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- must ensure sufficient staff receive suitable training and are competent to support children with medical conditions
- must ensure that written records are kept of all medicines administered to children
- must ensure the schools' policy sets out what should happen in an emergency
- must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

The Head of School

- is the named person who has overall responsibility for policy implementation
- should ensure all staff are aware of this policy and understand their role in its implementation
- should ensure a IHP is written for children with a medical condition and monitor its implementation
- should ensure all staff who need to know are informed of a child's condition
- should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured
- should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse

School Staff

- any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions
- any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help

School Nurses

- are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school
- may support staff on implementing a child's IHP and provide advice and liaison

Other Healthcare Professionals

- should notify the school nurse when a child has been identified as having a medical condition that will require support at school
- may provide advice on developing healthcare plans
- specialist local teams may be able to provide support for particular conditions (e.g. Asthma, diabetes)

Pupils

- should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP
- other pupils will be sensitive to the needs of those with medical conditions

Parents

- must provide the school with sufficient and up-to-date information about their child's medical needs

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- are the key partners and should be involved in the development and review of their child's IHP
- should carry out any action they have agreed to as part of the IHP implementation

Local Authority

- has a duty to promote cooperation between relevant partners
- should provide support, advice and guidance, including suitable training for school staff, to ensure the support specified within IHPs can be delivered effectively
- should work with schools to support pupils with medical conditions attend school fulltime

Emergency Procedures

If a child has an IHP, details of how to handle an emergency will be included.

For all other children, the schools' general risk management process will be initiated.

Notes

The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.

The following practice is considered not acceptable:

- preventing children from easily accessing their medication and administering it when and where necessary
- assuming children with the same condition require the same treatment
- ignoring the views of the child, their parents; ignoring medical advice or opinion
- sending children with medical conditions home frequently or prevent them from staying for normal school activities (unless specified in IHP)
- 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 that is recognized under this policy
- preventing children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively
- to require parents 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 children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips (such as requiring parents to accompany the child)
- considering a first aid certificate as appropriate training in supporting children with medical conditions
- refusing admission or exclusion from school on medical grounds alone

Complaints

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

MEDICINES POLICY

INTRODUCTION

Children with medical needs have the same rights of admission to our school as other children. Most children will at some time have short-term medical needs, while other children may have longer term medical needs and may require medicines on a long-term basis to keep them well. Other children may require medicines in particular circumstances, such as children with severe allergies. Children who are acutely unwell should be kept at home.

DEFINITIONS

Throughout this document the term 'parent' is used. Parents, as defined in section 576 of the Education Act 1996, include any person who is not a parent of a child but has parental responsibility for or care of a child. In this context, the phrase 'care of the child' includes any person who is involved in the full-time care of a child on a settled basis, such as a foster parent, but excludes baby sitters, child minders, nannies and school staff.

AIMS OF THIS POLICY

- to explain our procedures for managing prescription medicines which may need to be taken during the school day
- to explain our procedures for managing prescription medicines on school trips
- to outline the roles and responsibilities for the administration of prescription medicines

LEGAL REQUIREMENTS

THERE IS NO LEGAL DUTY THAT REQUIRES ANY MEMBER OF SCHOOL STAFF TO ADMINISTER MEDICINES UNLESS SUCH SPECIFIC DUTIES ARE STATED IN THEIR JOB DESCRIPTION.

PRESCRIBED MEDICINES

Medicines should only be taken to school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day. **Staff will only administer medicines prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.** Medicines will only be accepted in the original container as dispensed by a pharmacist and should include the child's name and prescriber's instructions for administration. It is helpful if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. For example, medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime. Medicines will be administered at lunchtime.

Exceptions

Prescribed medicine will not be given:

- Where the timing of the dose is vital and where mistakes could lead to serious consequences.
- Where medical or technical expertise is required unless training is given beforehand to staff (on a voluntary basis).
- Where intimate contact would be necessary, unless appropriate training is given beforehand to staff (on a voluntary basis).

NON-PRESCRIPTION MEDICINES

We are unable to administer medicines that have not been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. We can administer medication such as Piriton if it has been prescribed by the doctor.

REFUSAL OF MEDICINES

If a child refuses to take medicines, staff should not force them to do so, but should note this in the records and inform parents immediately or as soon as is reasonably possible.

STORAGE OF MEDICINES

All medicines should be delivered to the school office by the parent or carer. Teachers and teaching assistants must not themselves take receipt of any medicines. In no circumstances should medicines be left in a child's possession. All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines must be stored in their original containers and be clearly labeled with the name of the child, the name of the medicine and dosing instructions.

DISPOSAL OF MEDICINES

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. Medicines held on a long term basis should be collected by parents at the end of the school year. Medicines held on a short term basis should be collected by parents at the end of each day. Needles must only be disposed of in a sharps box.

RECORD KEEPING

Medicines should be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. Staff should check that written details include:

- name of the child
- name of the medicine
- dose
- method of administration
- time and frequency of administration
- any side effects
- expiry date

A parental agreement form (see appendix) must be completed and signed by the parent before medicines can be administered. At the time of administering medicines, the member of staff must complete the medicines record sheet, one copy to be retained by school and one copy to be sent home. No medication should be given unless it has been checked by a second adult.

TRIPS AND OUTINGS

Children with medical needs are given the same opportunities to go on outings as other children. Staff may need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on outings. This should include carrying out a risk assessment for such children. A member of staff will be nominated as having responsibility for the administration of medication. The appropriate health care plans and medicines must always be taken on any outing. Supervising staff should always be aware of any medical needs and relevant emergency procedures.

CHILDREN WITH LONG TERM MEDICAL NEEDS, who require regular medication

It is important that the school has sufficient information about the medical condition of any child with long term medical needs. A health care plan will be written for children with long term medical needs, involving the parents, school staff and relevant health professionals. The plan will be reviewed annually or as agreed with parents.

At the time of administering medicines, the member of staff must complete the medicines record sheet, one copy to be retained by school and one copy to be sent home. No medication should be given unless it has been checked by a second adult.

CHILDREN WITH ASTHMA

- At **Polehampton Infant School**, inhalers will be kept in a labeled cupboard in the first aid room.

Inhalers are taken on all outings and school visits. An inhaler, like any other prescribed medication, must be in the original container as dispensed by the pharmacist and must be labeled with the child's name and include dosing instructions. If children are able to administer their own inhaler, this should be indicated on the parental consent form. A member of staff will supervise the child's use of the inhaler.

Parents are responsible for checking the following:

- the condition of inhalers.
- that inhalers are working and have not been completely discharged.
- that inhalers are within their date of expiration.

CHILDREN WITH EPIPENS/JEXT PENS

At **Polehampton Infant School**, Epipens/Jext Pens will be kept in the school office and there will be one cupboard for each year group. Each cupboard will be clearly labelled with a) the name of the relevant classes and b) the names of the children who's medication is stored there. Each child will have a clearly labelled bag containing their photograph, their care plan and their medication. All staff are required to know where the Epipens/Jext Pens are located. Training on the administration of Epipens/Jext Pens will be given annually to all staff who volunteer. Epipens/Jext Pens are taken on all outings and school visits. An Epipen/Jext Pen, like any other medication, must be in the original container as dispensed by the pharmacist and must be labelled with the child's name.

Parents are responsible for checking that Epipens/Jext pens are within their date of expiration and for the collection and disposal of all out of date medications from school. (These have to be returned to Doctor's surgeries for disposal).

CONFIDENTIALITY

The head and staff should always treat medical information confidentially.

The head should agree with the child/parent who else should have access to records and other information about a child.

STAFF TRAINING

Training opportunities should be identified for staff with responsibilities for administering medicines. Staff should be familiar with normal precautions for avoiding infection and follow basic hygiene

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procedures. Staff must have access to disposable protective gloves. They must take care when dealing with spillages of blood and other bodily fluids, and the disposal of dressings and equipment.

ROLES AND RESPONSIBILITIES

Parents must:

- Give sufficient information about their child's medical needs if treatment or special care is required.
- Deliver all medicines to the school office in person.
- Complete and sign the parental agreement form.
- Keep staff informed of changes to prescribed medicines.
- Keep medicines in date – particularly emergency medication, such as adrenaline pens.
- Return any date expired/unused medicines to a pharmacy for safe disposal.

Headteacher must:

- Ensure that all staff are aware of the school's medicine policy.
- Ensure that this policy is implemented.
- Ensure that there are members of staff within the school willing to volunteer to administer medication to specific pupils if required.
- Ensure that staff receive support and appropriate training where necessary.
- Share information, as appropriate, about a child's medical needs.
- Ensure that parents are aware of the medicines policy.
- Ensure that medicines are stored correctly.

Staff responsibilities:

- All staff to direct any medication or questions about medicines to the school office.
- The school secretary (or another member of the admin team in her absence) ensures that on receipt of medicines, the child's name, prescribed dose, expiry date and written instructions provided by the prescriber.
- The school secretary (or another member of the admin team in her absence) ensures that the parent completes a consent form for the administration of medicines following the prescriber's instruction.
- The school secretary (or another member of the admin team in her absence) informs the designated first aider at lunchtime if there is any medication to administer that day.
- The designated first aider ensures that, on administering medicines, the child's name and identity, the prescribed dose, the expiry date and the written instructions provided by the prescriber are all checked.
- The designated first aider ensures that a second member of staff is present when medicines are administered.
- The designated first aider completes the 'administration of medicines' record sheet each time medication is given. One copy to be kept at school and one copy to be sent home.
- The school secretary (or another member of the admin team in her absence) ensures that medicines are returned to parents for safe disposal.
- Staff do not administer medicines if they are in any doubt about the procedure, but check with parents before proceeding.
- Staff should be aware of issues of privacy and dignity for children with particular needs.

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RELATED POLICIES

For more information see

- the Health and Safety policy
- the school's first aid procedures
- the DFE's "Supporting pupils at school with medical conditions" statutory guidance April 15, particularly section entitled Managing medicines on school premises
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statutory_guidance_on_supporting_pupils_at_school_with_medical_conditions.pdf
- Emergency Management of Severe Allergic Reactions Information for Schools (known as SAR) - Berkshire West NHS Primary Care Trust – June 2008
- Protocol for use of Clinical Procedures by Staff and Carers in Children's Social Care and Educational Settings – Wokingham NHS Primary Care Trust – June 2005
- Asthma in Schools Policy – Wokingham District Council – August 2005

MONITORING

This policy should be reviewed annually in accordance with national guidelines.

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Polehampton C. of E. Schools Federation

REQUEST FOR THE SCHOOL TO GIVE MEDICINE

LONG TERM MEDICATION PRESCRIPTION – including asthma inhalers

- Parental agreement for school to administer medicine – must be completed by someone with parental responsibility (i.e. not a child-minder or relative).
- Medication will be administered at lunchtime.
- Parents must ensure that the correct medication and dosage still applies and that the medication is still within date.

The school will not give your child medicine unless you complete and sign this form.

Name of Child:	
Date of Birth:	
Registration Group:	
Medical condition/illness:	
Name/Type of Medicine (as described on the container):	
Date dispensed:	
Expiry date:	
Dosage and method:	
The above medication was prescribed by:	Dr.
Special Precautions:	
Are there any side effects that the school needs to know about?	
Do you wish your child to administer their own medication?	YES/NO (delete as appropriate)
Procedures to take in an Emergency:	
Please give any additional information here:	

I understand that I must deliver and collect the medicine personally to and from the school office and I accept that this is a service that the school is not obliged to undertake. I understand that I must notify the school of any changes in writing.

Date:

Signature(s):

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Relationship to the child: _____

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ASTHMA INHALERS

For asthma inhalers, please indicate clearly whether asthma medication should be given on a daily basis, or whether it is being held at school for use only when needed.

This inhaler should be used on a daily basis

This inhaler should be used only when necessary, as determined by parent

Please give any additional information here:

NOTE:

Medication will not be accepted in the school unless this form is completed and signed by the parent or legal guardian of the child and administration of the medicine is agreed by the Headteacher.

The Headteacher reserves the right to withdraw this service.

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REQUEST FOR THE SCHOOL TO GIVE MEDICINE

SHORT TERM MEDICATION PRESCRIPTION

- Parental agreement for school to administer medicine – must be completed by someone with parental responsibility (i.e. not a child-minder or relative).
- Medicine must be delivered and collected by an adult at the beginning and end of each day.
- Medication will be administered at lunchtime.

The school will not give your child medicine unless you complete and sign this form.

Name of Child:	
Date of Birth:	
Registration Group:	
Medical condition/illness:	
Name/Type of Medicine (as described on the container):	
Date dispensed:	
Expiry date:	
Dosage and method:	
The above medication was prescribed by:	Dr.
Special Precautions:	
Are there any side effects that the school needs to know about?	
Procedures to take in an Emergency:	
Please give any additional information here:	

I understand that I must deliver and collect the medicine personally to and from the school office and I accept that this is a service that the school is not obliged to undertake. I understand that I must notify the school of any changes in writing.

Date:

Signature(s):

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Relationship to the child:

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Medication given during the school day

Dear parent

Child's name: _____

In accordance with previous agreement with you, your child was given:

Date: _____

Time: _____

Administered by: _____

Please contact the school if you would like to discuss this further; contact details given below:

For Polehampton C of E Infant School:

Tel.: 0118 9340246

Email: admin@polehampton-inf.wokingham.sch.uk

For Polehampton C of E Junior School:

Tel.: 0118 9341338

Email: admin@polehampton-jun.wokingham.sch.uk (check)