

Our Policy

Kington Primary is an inclusive community that aims to support and welcome pupils with medical conditions

This School understands that it has a responsibility to make our school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enrol in the future.

This School aims to provide all children with all medical conditions the same opportunities as others at school. We will help to ensure they can:

- be healthy;
- stay safe;
- enjoy and achieve;
- make a positive contribution
- achieve economic well-being.

Pupils with medical conditions are encouraged to take control of their condition. Pupils feel confident in the support they receive from the school to help them do this.

This School aims to include all pupils with medical conditions in all school activities.

Parents* of pupils with medical conditions feel secure in the care their children receive at this School.

The School ensures all staff understands their duty of care to children and young people in the event of an emergency.

All staff feels confident in knowing what to do in an emergency.

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

All staff understands the common medical conditions that affect children at this school. Staff receives training on the impact this can have on pupils.

The medical conditions policy is understood and supported by the whole school and local health community.

** The term 'parent' implies any person or body with parental responsibility such as foster parent, Carer, guardian or local authority.*

Aims of this policy

- 1 To explain our procedures for managing prescribed medicines which may need to be taken during the school day.
- 2 To explain our procedures for managing prescribed medicines on school trips.
- 3 To outline the roles and responsibilities of school staff.

THERE IS NO LEGAL DUTY THAT REQUIRES ANY MEMBER OF SCHOOL STAFF TO ADMINISTER MEDICINES.

Prescribed Medicines

- 1 Medicines should only be brought into school when essential; where it would be detrimental to a child's health if it were not administered during the school day.
- 2 Staff can only administer medicines prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.
- 3 Medicines **MUST** be in the original container as dispensed by a pharmacist with the prescription label, including the child's name and the prescriber's instructions for administration.
- 4 Medicines that need to be taken three times a day could be taken in the morning, after school and at bedtime so do not need to be administered in school.
- 5 Medicines that need to be taken four times a day can be administered once during the school day and must be spaced as evenly as possible over a 24-hour period.
- 6 Medication such as paracetamol cannot be administered by staff unless prescribed.

National guidance from the Department for Education and Employment, and Department of Health **Supporting Pupils with Medical Needs (2014 updated 2017)**, encourages schools to do all that is practical to help children to benefit from education.

PLEASE READ THIS BOOKLET IN CONJUNCTION WITH THIS NATIONAL GUIDANCE.

It is a requirement for all schools to have a medicine policy, which is communicated and available for parents.

All staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this School:

All staff at this School are aware of the most common serious medical conditions at the School.

Staff at this School understand their duty of care to pupils in the event of an emergency.

All staff who work with those groups of pupils at this School receive training and know what to do in an emergency for the pupils in their care with serious medical conditions.

Training is refreshed for designated staff regularly following a calendar plan of training.

Action for staff to take in an emergency for the common serious conditions at this school is displayed in prominent locations for all staff including classrooms, the school office and the staff room.

This School uses Healthcare Plans to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.

This School has procedures in place so that a copy of the pupil's Healthcare Plan is sent to the emergency care setting with the pupil. On occasions when this is not possible, the form is sent (or the information on it is communicated) to the hospital as soon as possible.

This School has made arrangements to ensure the timely transfer of Healthcare Plans in the event of an emergency.

RESPONSIBILITIES

Parents and Carers

If the school staff agree to administer medication on a short term or occasional basis, the parent(s) are required to complete a Consent Form. Verbal instructions should not be accepted.

If it is known that pupils are self-administering medication in school on a regular basis, a completed Consent Form is still required from the parent(s). For administration of emergency medication, a Care Plan must be completed by the Community Paediatrician or the school nurse in conjunction with the parent(s) and school staff. Minor changes to the Care Plan can be made if signed and dated by the school nurse. If, however, changes are major, a new Care Plan must be completed. Care Plans should be reviewed annually.

The parent(s) need to ensure there is sufficient medication and that the medication is in date. The parent(s) and carer(s) must replace the supply of medication at the request of relevant school/health professional.

Medication should be provided in an original container with the following, clearly shown on the label:

- Child's name, date of birth;
- Name and strength of medication;
- Dose;
- Expiry date whenever possible;
- Dispensing date.

Local Education Authorities (LEAs)

The Council fully indemnifies its staff against claims for alleged negligence, providing they are acting within the scope of their employment and have been provided with appropriate training. For the purposes of indemnity, the administration of medicines falls within this definition and hence the staff can be reassured about the protection their employer provides. In practice indemnity means the council and not the employee will meet the cost of damages should a claim for negligence be successful. It is very rare for school staff to be sued for negligence and instead the action will usually be between the parent(s) and the employer. Staff should at all times follow the guidance provided by Herefordshire Primary Care Trust.

School Staff

Some teaching unions advise school staff not to administer medication to pupils, however, the unions also accept that sometimes it is done. If so they advise that the teacher has access to information, training and that appropriate insurance is in place. In practice, head teachers may agree that medication will be administered or allow supervision of self-administration to avoid children losing teaching time by missing school. This must be discussed with the Head Teacher/Deputy Head.

Each request should be considered on individual merit and school staff have the right to refuse to be involved. It is important that school staff who agree to administer medication understand the basic principles and legal liabilities involved and have confidence in dealing with any emergency situations that may arise. Regular training relating to emergency

medication and relevant medical conditions should be undertaken. Advice about this can be obtained from the School Nurse/ Health & Safety advisor N. O'Sullivan.

First aider(s)

First aiders have a responsibility to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the School;
- When necessary, ensure that an ambulance or other professional medical help is called.

STORAGE

Generally non-emergency medication should be stored in a locked cupboard preferably in a cool place, this is found in our school First Aid room. Items requiring refrigeration may be kept in a clearly labelled closed container in a refrigerator.

Children in primary schools generally will not be in charge of their own medication, except for medication such as asthma inhalers and dextrose tablets.

However, this will depend on the child's age, maturity, parental and school consent. All emergency medication e.g. inhalers, epi-pens and dextrose tablets must be readily accessible, but stored safely in a location known by the child and relevant staff. Possible locations include the classroom, kept on the person, medical room, school office or head teacher's office.

Medication should always be kept in the original dispensed containers, and should not be transferred from original containers.

SCHOOL TRIPS, VISITS AND SPORTING EVENTS

Children with medical needs are given the same opportunities as other children at Kington Primary. Staff may need to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits.

Medication required during a school trip should be carried by the pupil, if this is normal practice. If not, then a trained member of staff should carry and administer the medication as necessary. Parent(s) must complete a Consent Form if their child requires any medication whilst on a school trip or visit.

Residential visits

Parents are sent a residential visit form to be completed and returned to School shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours.

All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Healthcare Plan.

All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

The residential visit form also details what medication and what dose the pupil is currently taking at different times of the day. It helps to provide up-to-date information to relevant staff and supervisors to help the pupil manage their condition while they are away. See

It is essential to inform all staff members involved with sporting activities or extra-curricular activities of the need for medication for specific pupils, and what to do should a medical emergency occur.

The accessibility of medication, particularly for use in an emergency, will need to be considered.

Different Medications

ANALGESICS (PAINKILLERS)

For pupils who regularly need analgesia (e.g. for migraine), an individual supply of their analgesic should be kept in school and this medication should be kept in the locked cupboard in the First Aid room.

CHILDREN SHOULD NEVER BE GIVEN ASPIRIN OR ANY MEDICINES CONTAINING ASPIRIN.

OVER THE COUNTER MEDICINE (EG HAYFEVER REMEDIES)

These should be accepted only in exceptional circumstances, and be treated in the same way as prescribed medication. Parent(s) must clearly label the container with child's name, dose and time of administration and complete a Consent Form. Parent(s) should be discouraged from sending cough and cold remedies into school.

RITALIN (METHYLPHENIDATE)

Ritalin is sometimes prescribed for children with Attention Deficit Hyperactivity Disorder (ADHD). It is a Controlled Drug which in a healthcare setting has specific storage and administration requirements. In schools Ritalin must be stored in a locked place and a record of administration must be kept. A record should also be kept of Ritalin received into school.

EMERGENCY MEDICATIONS

Separate guidelines and policies are in place for emergency medication. Teachers and other staff are expected to use their best endeavours at all times, particularly in emergencies. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency. This type of medication must be readily accessible in a known location, because in an emergency, time is of the essence.

The emergency medication which might be used includes:

- Adrenaline (EpiPen/Anapen);

Allergies

Children who have severe allergies and need EpiPen medication, such as a nut allergy, will have their medication close to hand at all times.

- 1 The EpiPen will be the responsibility of the teacher/teaching assistant within their classroom.
- 2 Designated staff will take the medication into the playground at break times and lunchtimes as appropriate.
- 3 All staff will be made aware of the identity of children who suffer from anaphylaxis.

- Glucose (dextrose tablets or hypostop);
- Inhalers for asthma.

Training is given to all staff regularly by an external provider.

In school we also have our own defibrillator which staff are regularly trained in the use of. This is stored securely in the staff room and there is also information about the town defibrillator.

ANTIBIOTICS

Parent(s) should be encouraged to ask the GP to prescribe an antibiotic, which can be given outside of school hours wherever possible.

Individual cases will be assessed if this is not feasible with a consent form completed by parents. (See form at back of policy).

Most antibiotic medication will not need to be administered during school hours. Twice daily doses should be given in the morning before school and in the evening. Three times a day doses can normally be given in the morning before school, immediately after school (provided this is possible) and at bedtime.

It should normally only be necessary to give antibiotics in school if the dose needs to be given four times a day, in which case a dose is needed at lunchtime. Parent(s) must complete the Consent Form and confirm that the child is not known to be allergic to the antibiotic. The antibiotic should be brought into school in the morning and taken home again after school each day by the parent.

Whenever possible the first dose of the course, and ideally the second dose, should be administered by the parent(s). All antibiotics must be clearly labelled with the child's name, the name of the medication, the dose and the date of dispensing. The antibiotics should be stored in a secure cupboard or where necessary in a refrigerator. Many of the liquid antibiotics need to be stored in a refrigerator – if so; this will be stated on the label.

Some antibiotics must be taken at a specific time in relation to food. Again, this will be written on the label, and the instructions on the label must be carefully followed. The dose of a liquid antibiotic must be carefully measured in an appropriate medicine spoon, medicine pot or oral medicines syringe provided by the parent.

The appropriate records must be made. If the child does not receive a dose, for whatever reason, the parent must be informed that day.

RECORD KEEPING

When staff administer medication, a record must be made of the date, time and dose, and this record must be signed on the reverse of the Consent Form. Reasons for any non-administration of regular medication must be recorded and parent(s) informed on the same day. The Consent Form will be kept securely in the school office.

RETURN OF MEDICATION

Medication should be returned to the child's parent(s) when:

- The course of treatment is complete;
- Labels become detached or unreadable;
- Instructions are changed;
- The expiry date has been reached.

In exceptional circumstances e.g. when a child has left school, it can be taken to a community pharmacy for disposal. Medication should not be disposed of in the normal refuse, flushed down the toilet, or washed down the sink.

It is the parent's responsibility to replace used or expired medication.

FIRST AID KITS

First aid kits, are provided within the workplace to ensure that there are adequate supplies for the nature of the hazards involved. Every classroom has their own kit, lunchtime staff have kits for each area of the outside space and there are additional kits in the school office and Head teacher's office. All kits will contain at least the minimum supplies required under law. Only specified first aid supplies will be kept.

First aid kits should be maintained and restocked when necessary by authorised personnel.

A. Welson and A. Lewis maintain the supplies needed for the kits across school.

For information regarding use of Epi-pens and management of asthma please see our separate guidelines and policies.

CONFIDENTIALITY

The head and staff should always treat medical information confidentially. The head should agree with the parent/carer who else should have access to records and other information about a child.

INCLUSION OF THOSE WITH MEDICAL NEEDS

This School ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

Physical environment

This School is committed to providing a physical environment that is accessible to pupils with medical conditions.

Pupils with medical conditions are included in the consultation process to ensure the physical environment at this School is accessible.

This School's commitment to an accessible physical environment includes out-of-school visits. The School recognises that this sometimes means changing activities or locations.

Social interactions

This School ensures the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

This School ensures the needs of pupils with medical conditions are adequately considered to ensure they have full access to extended school activities such as school discos, breakfast club, school productions, after school clubs and residential visits.

All staff at this School are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the School's anti-bullying and behaviour policies.

Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of medical conditions amongst pupils and to help create a positive social environment.

Exercise and physical activity

This School understands the importance of all pupils taking part in sports, games and activities.

This School ensures all teachers, PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.

This School ensures all teachers, PE teachers and sports coaches understand that pupils should not be forced to take part in an activity if they feel unwell.

Teachers and sports coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities.

This School ensures all PE teachers, teachers and school sports coaches are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these triggers.

This School ensures all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.

This School ensures all pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

Education and learning

This School ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

If a pupil is missing a lot of time at school, they have limited concentration or they are frequently tired, all teachers at this school understand that this may be due to their medical condition.

Teachers at this School are aware of the potential for pupils with medical conditions to have special educational needs (SEN). Pupils with medical conditions who are finding it difficult to keep up with their studies are referred to the SEN coordinator. The School's SEN coordinator consults the pupil, parents and the pupil's healthcare professional to ensure the effect of the pupil's condition on their schoolwork is properly considered.

This School ensures that lessons about common medical conditions are incorporated into PSHE lessons and other parts of the curriculum.

Pupils at this School learn about what to do in the event of a medical emergency.

Residential visits

Risk assessments are carried out by this School prior to any out-of-school visit and medical conditions are considered during this process. Factors this school considers include: how all pupils will be able to access the activities proposed how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

This School understands that there may be additional medication, equipment or other factors to consider when planning residential visits. This School considers additional medication and facilities that are normally available at school.

Risk assessments are carried out before pupils start any work experience or off-site educational placement. It is this School's responsibility to ensure that the placement is suitable, including travel to and from the venue for the pupil. Permission is sought from the pupil and their parents before any medical information is shared with an employer or other education provider.

Appendices

Roles and responsibilities

Parent/carer

- 1 Should give sufficient information about their child's medical needs if treatment or special care is required.
- 2 Must deliver all medicines to a member of staff.
- 3 Must complete and sign the parental agreement form.
- 4 Must keep staff informed of changes to prescribed medicines.
- 5 Keep medicines in date – particularly emergency medication such as EpiPens, asthma inhalers (have spare school inhalers which are in the first aid kits of our 'first aid at work' first aiders) and Piriton.

Headteacher

- 1 To ensure that the school's policy on administering medicines is implemented.
- 2 To ensure there are members of staff in school willing to volunteer to administer medicines to specific pupils as required.
- 3 To ensure staff receive support and appropriate training as necessary.
- 4 To share information, as appropriate, about a child's medical needs.
- 5 To ensure that parents are aware of the school's medicine administration policy.
- 6 To ensure that medicines are stored correctly.

Staff

- 1 To check details are accurate and clear on prescription labels.
- 2 To ensure that the parent/carer completes a consent form for the administration of medicines.
- 3 To complete the 'administration of medicines' record sheet each time medicine is given.
- 4 To ensure medicines are returned to parent/carer at the end of the school day.
- 5 To ensure medicines are returned to parent/carer for disposal.

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

CONSENT TO ADMINISTER MEDICINES

The school staff will not give any medication unless this form is completed and signed.

Dear Head Teacher

I request and authorise that my child:

Name _____ Date of Birth _____

Address _____

Phone No _____ School _____ Class _____

be given the following medication/gives himself/herself (delete as appropriate) the following medication:

Name of Medicine _____

Time of Dose _____ Dose _____

Start Date _____ Finish Date _____

This medication has been prescribed for my child by:

Name of GP: _____ whom you may

contact for verification. **I have confirmed that it is necessary to give this medication during the school day.**

The medication must be in the original container indicating the contents, dosage and child's full name.

Signed _____ (Parent/Guardian)

Date _____

CARE PLAN FOR PUPIL WITH MEDICAL NEEDS

NAME: DATE OF BIRTH:

ADDRESS:

CONDITION:

Class/Form:

Name of School:

Date:

Review Date:

CONTACT INFORMATION

Family Contact 1 Family Contact 2

Name: Name:

Phone No: Work: Phone No: Work:

Home: Home:

Mobile: Mobile:

Relationship: Relationship:

Clinic/Hospital Contact GP

Name: Name:

Clinic/Hospital: Phone No:

Phone No:

Completed by and date:

Photo

Describe condition and give details of pupil's individual symptoms:

Describe any particular triggers:

Daily care requirement (e.g. before sport/at lunchtime):

Describe what constitutes an emergency for the pupil and the action to take if this

occurs:

Follow up care:

Who is responsible in an Emergency: (State if different on/off-site activities)

CARE PLAN FOR PUPIL WITH MEDICAL NEEDS

This form completes the Care Plan and it is a record that parent(s), school staff and school nurse/doctor all agree with the Care Plan. The original will be kept at

school, and copies made for parent(s), school nurse, GP and LEA.

Name of Child _____

Parent(s) _____ Date _____

On behalf of school

Head Teacher _____ Date _____

On behalf of Herefordshire Primary Care Trust

Doctor/Nurse _____ Date _____

On behalf of LEA

LEA/Officer _____

STAFF INDEMNITY

The Council fully indemnifies its staff against claims for alleged negligence, providing they are acting within the scope of their employment and have been provided with appropriate training. For the purposes of indemnity, the administration of medicines fall within this definition and hence staff can be reassured about the protection their employer provides. In practice, indemnity means the Council and not the employee will meet the cost of damages should a claim for negligence be successful. It is very rare for school staff to be sued for negligence and instead the action will usually be between the parent(s) and the employer. Staff should at all times follow the guidance provided by Herefordshire Primary Care Trust.