

# Policy to Support Children with Medical needs

# This policy has been approved by the Governing Body

TOH POLICY DOCS December 2017

# **Definition**

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

(a) <u>Short-term</u> affecting their participation in school activities which they are on a course of medication.

(b) <u>Long-term</u> potentially limiting their access to education and requiring extra care and support (deemed special medical needs). **Rationale** 

LAs and schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information. Contact details for our School Nurse can be found on the school website which also states a copy of this policy is available to parents. A reference copy of this policy is held on the school website and in the school office (Copies of the policy can be provided upon request.) Copies of the policy are made available to all new staff, governors and parents/carers at induction.

# **Aims and Objectives**

Most children will, at some time in their school career, have a medical condition which may affect their participation in school activities. For many this will be short-term; perhaps finishing a course of medication. We aim to maintain close co-operation with children, parents/carers and health professionals to provide a supportive environment for any children with medical needs.

We aim to address the following issues;

- assist parents in providing medical care for their children for both short term and long term medical needs
- Informed consent
- Prescription medication
- Non-prescription medication
- Record keeping
- Refusing medication
- Self-management
- Educate staff and children in respect of special medical needs
- Emergency procedures
- Creating Healthcare plans
- Confidentiality
- Arrange training for volunteer staff to support individual pupils

• Liaise as necessary with medical services in support of the individual pupil full education if possible.

- Monitor and keep appropriate records
- Adopt and implement the LA policy of Medication in Schools

# It is expected that:

- parents will be encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative;
- where parents have asked the school to administer the medication for their child they must ask the
  pharmacist to supply any such medication to be dispensed in a separate container, containing only
  the quantity required for school use. The prescription and dosage regime should be typed or printed
  clearly on the outside. The school will only administer medicines in which the dosage is required 4
  times a day. The name of the pharmacist should be visible. Any medications not presented properly
  will not be accepted by school staff. Pupils should not bring in their own medicine. This should be
  brought into school by the parent.
- parents should not send their child into school with 'over the counter' products such as throat lozenges or pastilles.
- that employees will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately.
- the school will liaise with the School Health Service for advice about a pupil's special medical needs, and will seek support from the relevant practitioners where necessary and in the interests of the pupil.
- Any medicines brought into school by the staff e.g. headache tablets, inhalers for personal use should be stored in an appropriate place and kept out of the reach of the pupils. Any staff medicine is the responsibility of the individual concerned and not the school.

#### Management of medication within school

Parents/carers are asked to provide the school with full information about their child's health needs. If a member of staff notices deterioration in health of any child over time they will inform the head teacher and let the parents/carers know.

#### Short term medical / health needs

We recognise that some children may need to take medication at school at some time in their school life eg antibiotics. However medication should only be taken at school when absolutely necessary. As much medication can be prescribed to avoid school hours we will encourage parents/ carers to seek advice about this from the prescribing doctor or the school nurse.

#### Long term medical / health needs

**Individual Healthcare Plans** (IHC) will be create individual for children with long term needs thus maintaining adequate support to maintain attainment and attendance. (see 'Healthcare plan for child with medical needs' – Appendix 1)

# **Informed consent**

Staff at this school are unable to give medication to children under the age of 16 without the consent of parents/carers. We also require that the first dose of any medication is given at home. Parents/carers will be asked to complete a consent form, giving details of any medication, dosage and emergency contact details. (see 'Request for school to administer medication' – Appendix 2) This consent form will be kept in the school's Medical File in the school office. Renewed written instructions will be requested in the event of any changes to the original arrangements.

A letter confirming arrangements, or a copy of the consent form, which is signed by the head teacher or, in his/her absence, by a nominated member of the School Management Team (see' Confirmation letter' - Appendix 3) will then be sent to parents/carers.

No verbal consent will be taken. All requests must be made on the appropriate form.

# **Administering Medication**

Any members of staff who administer medication will follow the agreed procedure.

- Confirm the child's name and the name on the medication.
- Check the written instructions provided by the parent/carer/doctor.
- Check the prescribed dose.
- Check the expiry date on the medication.
- Administer the medication with a second adult having checked the prescription and the dosage administered.
- Record the date and time and both adults sign the record sheet. (see 'Record of medication administered in school' Appendix 4)
- If there are any doubts about any of the details, staff will double check with parents/carers or the child's doctor before giving the medication

Records will be located in the school office, near to where the medicines are stored, and will be kept until the child listed no longer requires the medication. The completed record will then be placed with the child's personal file.

If a child refuses to take their medication no member of staff will enforce the dose. We will however inform parents/carers of the situation as soon as possible. Unless it is an emergency, medication will be administered in the school office where privacy and confidentiality can be maintained.

Should the school have concerns about the frequency of medicine being prescribed professional advice will be sought from the school nurse.

School staff will not administer non-prescription medicines. No verbal authorisation will be taken.

#### **Storing Medication**

A lockable cupboard is situated in the school office. Inhalers are kept in a box in the children's classrooms. Epi pens are stored in a clearly marked cupboard in the staffroom. A nominated member of staff will ensure the cupboard is maintained and will remove medication when complete or out of date. Medicines will be disposed of by returning them to parents/carers.

We will not store large quantities of medication. We ask that all medication is supplied in a container clearly labelled with the child's name, class and the medication dose required. Any child needing more than one medication will require a separate container for each medication.

The head teacher is responsible for ensuring that medicines are stored safely. Children will, however, know where their medicine is stored and who has the key to such storage. If medication requires refrigeration it will be kept in the fridge in the staff room.

We will not dispose of any medication but will ask parents/carers to collect and dispose of any medicines left at school.

#### Self Management

We believe that it is good practice to allow children who are capable of managing their own medication to do so. However, a member of staff will need to supervise this activity. The school will consider requests from parents/carers for children suffering from asthma/diabetes/certain allergic reaction to carry their own medication. This can only be authorised when a risk assessment establishes that it would be safe to do so. In the event that a child is authorised to carry their own medication the medication must be clearly labelled with their full name and dose required. Parents/carers will be required to complete and sign a request form which will be stored in the usual place. (See 'Request for child to carry his/her own medication' - Appendix 5). Parents/carers will be asked to review the information on this record at the beginning of each term.

## **Entitlement**

The school accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils.

The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

- choose whether or not they are prepared to be involved
- receive appropriate training (see 'Staff training record' Appendix 6)
- work to clear guidelines
- have concerns about legal liability
- bring to the attention of management any concern or matter relating to supporting pupils with medical needs

#### **Emergency procedures**

All staff are aware how to call the emergency services. Staff are also aware who is responsible for carrying out emergency procedures in the event of a need. Any child taken to hospital by ambulance will be accompanied by a member of staff who will remain with the child until a parent/carer arrives. All calls to emergency services will be recorded on the Emergency Planning form. (see Emergency Planning - Appendix 8)

#### **Specific training**

All staff who are required to deal with specific issues or specific health needs will receive appropriate training from health professionals. We will respect any concerns of individual staff regarding administrating medication but hope that appropriate training and support will enable staff to feel confident to fulfil this caring role.

#### **Individual Healthcare Plans - IHC**

All children who have particular ongoing health needs have an individual healthcare plan. The purpose of this is to identify the level of support that a child requires in school. It is a written agreement that clarifies for staff, parents/carers and children the help that school can provide and receive. Each child's healthcare plan has a regular review date with parents/carers, child and member of staff and/or health worker. Each plan clearly states what information may be shared and with whom.

#### **Sporting activities**

Our PE curriculum and provision of sporting activities is flexible enough for all children to take part in ways which are appropriate to their abilities. Any restrictions on a particular child's ability to participate in PE will be clearly identified and incorporated into the child's individual healthcare plan. Where there is occasion for a child to wear a medic alert bracelet, which may be a source of potential injury, we will arrange for it to be kept safely by the teacher in charge of the activity. Staff will always be alerted to the significance of these bracelets and will be clear who they belong to.

#### **Confidentiality**

Medical and health information will be treated confidentially and information about children only shared with those whom the parents/carers or child have given consent for. However we will ensure that important information about particular health needs will be clearly communicated to relevant teaching and support staff (e.g. PE, technology)

Specific health needs of individual children will only be shared with peers after consent from the child. This will help to normalise any special needs and establish a sense of caring.

## **Policy into Practice**

There is a need for proper documentation at all stages when considering the issue of support for pupils with medical needs in school.

#### **Policy Review**

This policy will be reviewed every three years by the Governing Body. This review will also involve staff, children and parents/carers. This review will take place through staff meetings, parent/carer questionnaires and consultation meetings with the school nurse and the school's health and safety officer.

This policy was reviewed and approved by the Governing Body in September 2014

Interim review completed Jan 2016 Next review September 2017

Headteacher

Adrian Morris Chair of Governors

# CHECKLIST

- 1. Up to date policy/guidelines Reviewed February 2014. To be reviewed February 2017
- 2. Named member of staff responsible for maintaining policy/guidelines Headteacher
- 3. Named member(s) of staff responsible for administering routine medication Suzanne Wilby/Jeanette Williams/Elaine Grant/Julie Carter (Any 2 from 4)
- 4. Named member(s) of staff responsible for administering Epipen Any member of staff with Epipen training (teachers and teaching assistants).
- 5. Named member(s) of staff responsible for haemophiliac child Natalie Jarvis, Margaret Pettipher or Bharti Patel
- 6. Named member of staff responsible for maintaining storage Suzanne Wilby/Jeanette Williams
- 7. Location of key to secure cupboard Key chest in School Office
- 8. Supply of parental consent forms and other records School Office
- 9. Storage / location of completed forms School Office

# Individual Healthcare Plan for a Pupil with Medical Conditions - Appendix 1

Name:		
Date of Birth:		РНОТО
Condition:		
Date Diagnosed:		
Class:	Date:	
Name of School:		

**Review Date:** 

## CONTACT INFORMATION

Family Contact 1	Family Contact 2
Name:	Name:
Phone No (mobile):	Phone No (mobile):
Phone No (home):	Phone No (home):
Relationship:	Relationship:
Emergency Contact 3	G.P.
Name:	Name:
Phone No:	Phone No:

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

Care requirements: (e.g. before sport/at lunchtime)

Describe what constitutes an emergency for the pupil, and the action to be taken if this occurs :

Follow-up care:

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

## Agreement and Conclusion:

School and parents/carers will hold a copy of this Healthcare Plan. A copy will be sent to the School Nurse to be held in the Child Health records. Any necessary revisions will be subject to further discussions between the school and parents/carers.

Agreed and Signed: Signature (Parent/carer): \_\_\_\_\_\_ Date: \_\_\_\_\_

Signature (Head Teacher/Named Member of Staff): \_\_\_\_\_ Date:

# REQUEST FOR MEDICINE TO BE ADMINISTERED IN SCHOOL - Appendix 2

To: Headteacher

From ...... Parent/Carer

The doctor has advised that it is necessary for my child to receive his/her medication during school time for:

Days/Weeks
Child's Name
Name of Medicine
Type (eg) tablets/mixture/inhaler/other
Dosage
Times of dosage required

			be held responsible for any proble accordance with these instruction	
Signed	Parent/Carer	Date		
	Pearl Hyde C	Community Primary S	School	
Confirmation	of the Headteacher's a	greement to adminis	ster medicine - Appendix 3	
It is agreed that	[name	of child]will receive	e	
-			[time medicine to be adminis	ered
e.g. Lunchtime or aftern	oon break].			
	<i>[name of child]</i> will be g	iven/supervised whi	ilst he/she takes their medication	by
	[name of member of sto	aff].		
-		[eith	er end date of course of medicin	? or
until instructed by parer	nts].			
Date:				
Date.				

[The Head teacher/Named Member of Staff]

medicine hot to be daministered without withess						
Date	Name of Medicine	Dosage	Parent Authorisation Sheet Checked	Time Given	Medicine Administered By	Witnessed By
					<u> </u>	

# Medicine not to be administered without witness

1 1			

Pearl Hyde Community Primary School

Request for child to carry his/her medicine - Appendix 5

# THIS FORM MUST BE COMPLETED BY PARENTS/CARERS

If staff have any concerns discuss request with school healthcare professionals

Child's Name:	
Class:	
Address:	
Name of Medicine:	
Procedures to be taken in an emer	gency:
Contact Information	
Name:	
Daytime Phone No:	
Relationship to child:	
I would like my son/daughter to ke	eep his/her medicine on him/her for use as necessary.
Signed:	Date:
If more than one medicine is to be	e given a separate form should be completed for each one. Pearl Hyde Community Primary School

Staff training record - administration of medicines - Appendix 6

Staff Name:

Type of training received:		
Date of training completed:		
Training provided by:		
Profession and title:		
	<i>[name of member of staff]</i> has receive to carry out any necessary treatment. I recommend that )	
Trainer's signature:		
Date:		
I confirm that I have received t	he training detailed above.	
Staff signature:		
Date:		
Suggested Review Date:		
Contacting Emergency Services -	- Appendix 8	
	Request for an Ambulance	
Dial 999, ask for ambulance and be	e ready with the following information	
1. Your teleph	one number (School Number – 024 7661 0165)	

Give your location as: Pearl Hyde Community Primary School, Dorchester Way, Coventry.
 State that the postcode is: CV2 2NB
 Give <u>exact</u> location in the school:
 Give your name
 Give name of child and a brief description of child's symptoms
 Give name of child and a brief description of child's symptoms
 Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the child.

Speak clearly and slowly and be ready to repeat information if asked Put a completed copy of this form by the telephone