



COMPASSION, ACCEPTANCE, RESPONSIBILITY, FORGIVENESS, TRUST

Our Christian Values

God teaches us to forgive and always accept **forgiveness**

We receive the Christian way of life as a gift from God (**responsibility**)

Each of us will give an account of himself to God (**responsibility**)

We believe and **trust** in God who loves each one of us

We are all unique children of God (**acceptance**)

Whatever you wish that men would do to you do to them (**compassion**)

We are all equally precious and loved by God (**acceptance**)

Supporting Children With Medical Conditions; Administering Medicines & Sickness Policy

Policy statement

Burham CE Primary School is an inclusive community that aims to support and welcome pupils with medical conditions.

Burham CE Primary School aims to provide all pupils 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.
- The school ensures all staff understand their duty of care to children and young people in the event of an emergency.
- All staff feel 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.
- This school understands the importance of medication being taken as prescribed.
- All staff understand the common medical conditions that affect children at this school.
- Staff receive training on the impact medical conditions can have on pupils.

INTRODUCTION

This policy has been formulated from local authority guidance by school staff in conjunction with the Headteacher and with approval by Governors. There is no legal requirement for school staff to administer medicines. Staff are expected to do what is reasonable and practical to support the inclusion of all pupils.

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 is the parent who should provide the school with medication and information about the child's condition.

AIMS OF THIS POLICY

- 1) To assist parents by providing on-going care and support of children with long term medical needs via a health care plan
- 2) To ensure the safe administration of medicines to children where necessary and to help to support attendance
- 3) To explain the roles and responsibilities of school staff in relation to medicines and provide on-going training in relation to children with medical needs
- 4) To clarify the roles and responsibilities of parents in relation to children's attendance during and following illness

- 5) To outline to parents and school staff the safe procedure for bringing medicines into school when necessary and their storage
- 6) To outline the safe procedure for managing medicines on school trips

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;
- 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.

ROLES AND RESPONSIBILITIES

HEADTEACHER

- To bring this policy to the attention of school staff and parents and to ensure that the procedures outlined are put into practice
- To ensure that there are sufficient First Aiders and appointed persons for the school to be able to adhere to this policy

- To ensure that staff receive appropriate support and training
- To ensure that parents are aware of the school's Medicines Policy
- To ensure that this policy is reviewed annually

STAFF

- Admin: New intake children – medical needs when identified on forms to be notified to SENCO and Headteacher.
- 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 children with complex or long term medical needs (CC)
- To share medical information as necessary to ensure the safety of a child.
- To retain confidentiality where possible
- To take all reasonable precautions to ensure the safe administration of medicines
- To contact parents with any concerns without delay
- To contact emergency services if necessary without delay
- To keep the first aid room and first aid boxes stocked with supplies.
- Medical list to be available on inside of registers and office.
- To annually update the medical lists and distribute to teachers.

PARENTS/CARERS

- To give the school adequate information about their children's medical needs prior to a child starting school
- To follow the school's procedure for bringing medicines into school. Medicines should be in prescribed container with a measuring spoon.
- To only request medicines to be administered at school when essential
- To ensure that medicines are in date and that asthma inhalers are not empty
- To notify the school of changes in a child's medical needs, e.g. when medicine is no longer required or when a child develops a new need, e.g. asthma

SCHOOL ATTENDANCE DURING/AFTER ILLNESS

- Children should not be at school when unwell, other than with a mild cough/cold
- Symptoms of vomiting or diarrhoea require a child to be absent from school and not to return until clear of symptoms for 48 hours
- Children should not be sent to school with a rash caused by any contagious illness
- Any other symptoms of illness which might be contagious to others or will cause the child to feel unwell and unable to fully participate in the school day require the child to be absent from school

SAFE ADMINISTRATION OF MEDICINES AT SCHOOL

- Medicines should only be brought to school when essential, i.e. where it would be detrimental to the child's health if the medicine were not administered during the school day.
- In the case of antibiotics, only those prescribed four times a day may be administered at school
- Only prescribed medicines (including eye drops) in the original container labelled with the child's name and dosage will be accepted in school
- Medicines will not be accepted in school that require medical expertise or intimate contact unless prior arrangement through health care plan or personal care plan
- All medicines must be brought to the school office by an adult. Medicines must NEVER be brought to school in a child's possession
- The adult is required to complete a parental agreement form (see appendix) with the member of staff who will be responsible for administering the medicine at the school office for the medicine to be administered by school staff
- The Headteacher must be informed of any controlled drugs required by children, e.g. Equasym.
- Administration of medicines at school must be recorded on the medicines form and witnessed by a second member of staff
- Parents may come to the school office to administer medicines if necessary
- Some children may self-administer medication, e.g. insulin, if this has been directed by the parents when filling in the medicine form
- If a child refuses to take medicine, staff must not force them to do so. The refusal should be recorded and parents informed

HEALTHCARE PLANS.

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 with the local hospital to ensure the timely transfer of Healthcare Plans to the hospital in the event of an emergency

Drawing up Healthcare Plans

b. This school uses a Healthcare Plan to record important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Healthcare Plan if required.

(See Appendix 1 – Form 1)

c. A Healthcare Plan, accompanied by an explanation of why and how it is used, is sent to all parents of pupils with a long-term medical condition. This is sent:

- at the start of the school year
- at enrolment
- when a diagnosis is first communicated to the school.

d. If a pupil has a short-term medical condition that requires medication during school hours, a medication form plus explanation is sent to the pupil's parents to complete.

e. The parents, healthcare professional and pupil with a medical condition, are asked to fill out the pupil's Healthcare Plan together. Parents then return these completed forms to the school.

f. This school ensures that a relevant member of school staff is also present, if required to help draw up a Healthcare Plan for pupils with complex healthcare or educational needs.

School Healthcare Plan register

g. Healthcare Plans are used to create a centralised register of pupils with medical needs. An identified member of staff has responsibility for the register at this school.

h. The responsible member of staff follows up with the parents any further details on a pupil's Healthcare Plan required or if permission for administration of medication is unclear or incomplete.

Ongoing communication and review of Healthcare Plans

i. Parents at this school are regularly reminded to update their child's Healthcare Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change.

j. Staff at this school use opportunities such as teacher–parent interviews to check that information held by the school on a pupil's condition is accurate and up to date.

k. Every pupil with a Healthcare Plan at this school has their plan discussed and reviewed at least once a year.

Storage and access to Healthcare Plans

l. Parents and pupils at this school are provided with a copy of the pupil's current agreed Healthcare Plan.

m. Healthcare Plans are kept in a secure central location at school.

- n. Apart from the central copy, specified members of staff securely hold copies of pupils' Healthcare Plans. These copies are updated at the same time as the central copy.
- o. All members of staff who work with groups of pupils have access to the Healthcare Plans of pupils in their care.
- p. When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the Healthcare Plans of pupils in their care.
- q. This school ensures that all staff protect pupil confidentiality.
- r. This school seeks permission from parents to allow the Healthcare Plan to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This permission is included on the Healthcare Plan.
- s. This school seeks permission from the pupil and parents before sharing any medical information with any other party, such as when a pupil takes part in a work experience placement.

USE OF HEALTHCARE PLANS.

Healthcare Plans are used by this school to:

- inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care
- remind pupils with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times
- identify common or important individual triggers for pupils with medical conditions at school that bring on symptoms and can cause emergencies. This school uses this information to help reduce the impact of common triggers
- ensure that all medication stored at school is within the expiry date
- ensure this school's local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency
- remind parents of pupils with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication.

Consent to administer medicines

t. If a pupil requires regular prescribed or non-prescribed medication at school, parents are asked to provide consent on their child's Healthcare Plan giving the pupil or staff permission to administer medication on a regular/daily basis, if required. A separate form is sent to parents for pupils taking short courses of medication.

u. All parents of pupils with a medical condition who may require medication in an emergency are asked to provide consent on the Healthcare Plan for staff to administer medication.

v. If a pupil requires regular/daily help in administering their medication then the school outlines the school's agreement to administer this medication on the pupil's Healthcare Plan. The school and parents keep a copy of this agreement.

w. Parents of pupils with medical conditions at this school are all asked at the start of the school year on the Healthcare Plan if they and their child's healthcare professional believe the child is able to manage, carry and administer their own emergency medication.

Residential visits

x. 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.

y. 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.

z. 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.

aa. 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.

Other record keeping

bb. This school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medication administered, this is also recorded and parents are informed as soon as possible.

cc. This school holds training on common medical conditions once a year. All staff attending receive a certificate confirming the type of training they have had. A log of the medical condition training is kept by the school and reviewed every 12 months to ensure all new staff receive training.

dd. All school staff who volunteer or who are contracted to administer medication are provided with training by a healthcare professional. The school keeps a register of staff who have had the relevant training.

ee. This school keeps an up-to-date list of members of staff who have agreed to administer medication and have received the relevant training.

STORAGE OF MEDICINES

- Antibiotics (including antibiotic eye drops) must be stored in the fridge if appropriate
- Tablets must be stored in the school office
- EpiPens should be stored in the office and classroom.
- Asthma inhalers should be stored in the child's classroom within the child's reach and labelled with their name and should be taken with the child during physical activities
- Antihistamine eye drops for severe hayfever must be stored in the office.
- No medicines, other than asthma inhalers, may be kept in the classroom
- Parents are responsible for the safe return of expired medicines to a pharmacy

MEDICINES ON SCHOOL TRIPS

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

- The trip leader is responsible for designating a school First Aider for the trip

- The trip leader is responsible for ensuring that arrangements are in place for any child with medical needs prior to a trip taking place, including ensuring that asthma inhalers are carried as required. A copy of any relevant health care plan should be taken on the trip
- The designated school First Aider on the trip will administer any medicines required and record the details on the School Trips Medical Form
- The First Aider will return the form and any unused medicines to the First Aid cabinet on return to school

This school's medical condition policy is reviewed, evaluated and updated every year in line with the school's policy review timeline.

b. New Department for Children, Families and Schools and Department of Health guidance is actively sought and fed into the review.

c. In evaluating the policy, this school seeks feedback on the effectiveness and acceptability of the medical conditions policy with a wide-range of key stakeholders within the school and health settings. These key stakeholders include:

- pupils
- parents
- school nurse and/or school healthcare professionals
- headteacher
- teachers
- special education needs coordinator
- pastoral support/welfare officer
- first aider
- all other school staff
- local emergency care service staff (including
- accident & emergency and ambulance staff)
- local health professionals
- the school employer
- school governors.

d. The views of pupils with various medical conditions are actively sought and considered central to the evaluation process.

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November 2017
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Appendix 1

