

Danson Primary School

# Supporting Pupils with Medical Needs



#### Rationale

Local Authorities 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.

#### Aims

Pupils at school with medical conditions should be properly supported so that they can have full access to education, including school trips and physical education.

The school will have arrangements in place which support these pupils and which are reviewed regularly.

The school will maintain effective partnerships with health and social care professionals, pupils and parents/carers to ensure that the needs of pupils with medical conditions are fully met.

### **Key Principles**

The Head Teacher maintains overall responsibility for policy implementation ensuring procedures are understood and fulfilled.

All pupils with medical needs will be identified in a medical register.

We will uphold a commitment that all relevant staff (including supply staff) will be made aware of the pupil's medical condition/needs.

We will ensure that cover arrangements are made in case of staff absence or staff turnover to ensure that someone suitable is always available.

We will undertake risk assessments for school visits, holidays and other school activities outside of the normal timetable.

We will monitor, review and implement pupil's Individual Health Care Plans with the support of the school nursing service.

We will ensure there is effective communication with parents/carers, pupils, staff and all relevant health professionals concerning pupils' health needs.

Medicines should only be administered at the school when it would be detrimental to the pupil's health or school attendance not to do so.

#### **Roles and Responsibilities**

Designated Staff member will have overall responsibility for medical care. Staff members with responsibility to administer medicines or attend to injured staff and children are all either First Aid at Work, Paediatric or general First Aid trained. Staff members have also been trained in Administering Medications and dealing with specific conditions as appropriate (for example Asthma, Diabetes and Sickle Cell).

The school will have a Designated Governor with responsibility for Medical Policy.

## School Staff

The school has a responsibility to ensure that sufficient members of staff are suitably trained in carrying out their role to support pupils with medical conditions. Any member of staff providing support to a pupil with medical needs will be suitably trained. Training for all staff will be offered on a range of medical needs from Health Professionals.

Training needs are assessed throughout the year based on individual children's medical needs. Assessment of the training needs will be discussed with the school nurse/external health agencies and training opportunities will be provided accordingly based on recommendations given by the health professionals to the school.

Staff, including supply staff, will be informed of any pupil's medical needs where this is relevant and of any changes to their needs as and when they might arise. All staff, parents and pupils will be informed of the designated person with responsibility for medical care.

All medical information **MUST** be treated with confidentiality. Generally, all staff will need to be aware of the medical situation with the agreement of the parent.

Office members of staff are to be aware of the Medical Alert Book/Medical Lists on Arbor in the event of a planned emergency procedure.

Any member of staff giving medicine to a pupil **MUST** check on each occasion:

- Name of pupil;
- Written instructions by a doctor for prescription;
- Prescribed dose;
- Expiry date of the medication; and
- Signed consent provided by the parents/carers.

Staff **MUST** always complete and sign the form 'Record of Medication administered to an individual child' (see Appendix 2) each time they give medicine to a pupil.

Staff **MUST** always complete and sign the form 'Parent Notification of Medication Given' (see Appendix 3) each time they give medicine to a pupil if requested by parent on 'Request for the School to Give Medication' (see Appendix 1).

If in doubt about any procedure, staff should not administer the medicines but check with the parents or a health professional before taking further action. If staff members have any other concerns related to administering medicine to a particular pupil, the issue should be discussed with the parent, if appropriate, or with a Health Professional attached to the school.

#### Day trips, residential visits and sporting activities

School staff will undertake a risk assessment to ensure the safety of all participants in day trips, residential visits and all activities and areas of school life, such as sporting activities. This risk assessment will inform the planning of any such trips/activities so that pupils with medical conditions are included with any reasonable adjustments in place so that the pupil may participate according to their own abilities (unless evidence from a clinician such as a GP states this is not possible). This will require consultation with the pupils and their parents/carers, and where appropriate the relevant Healthcare Professional. No decision about a pupil with medical needs attending/ not attending a school visit will be taken without prior consultation with parents/carers.

Where a pupil is attending a day trip, residential visit or participating in an activity e.g. a sporting activity, sufficient and essential medicines and the pupil's Individual Health Care Plan will be taken and controlled by the member of staff supervising the visit/activity.

#### **Parents/Carers**

In order for the school to discharge its responsibilities it relies on effective liaison from a pupil's parent/ carer in relation to the matters for which they are responsible (see below). 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. The administration of medicine is, primarily, a parental responsibility.

Parents/carers should keep their children at home if they are acutely unwell or infectious.

The school acknowledges that clinicians may advise that pupils suffering from a short-term illness requiring antibiotics should still attend school.

Any pupils required to receive medication on a three times in a day ("TID") basis should have the medication at home: before school, after school and at bed time. This is consistent with the principle that, where possible, medicines should be administered off site. In any event, where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

It is the responsibility of parents/carers to:

- Inform the school of their child's medical needs;
- Provide any prescribed medication in the original container as dispensed by a pharmacist<sup>1</sup> with a pharmacy label detailing the following: pupil's name, name of medicine, dosage, frequency of medication and any special storage arrangements;
- Ensure that medicines have NOT passed the expiry date; and
- Collect any medications held in school (in date and expired) at the end of each term, and to dispose of any medicines that have expired.

Parents/Carers **MUST** inform the school in writing if their child has been given medication before they have come to school.

<sup>&</sup>lt;sup>1</sup> The exception to this is insulin which must still be in date, but is generally available as a pump/pen rather than in a container.

At the start of each school year, parents/carers should give the following information about their child's long-term medical needs. The information must be updated as and when required and at least annually:

- Details of pupil's medical needs;
- Medication including any side effects;
- Allergies;
- Name of GP/consultants/clinicians;
- Special requirements, e.g. dietary needs, pre-activity precautions;
- What to do and who to contact in an emergency; and
- Cultural and religious views regarding medical care.

Children with medical complications or severe medical conditions must have a clear Individual Health Care Plan including risk assessments written between the parent, School Nurse and SENCO/SLT prior to medicine being administered. The Individual Health Care plan will be reviewed annually (or earlier if there is evidence that the pupil's needs have changed).

#### **Pupils**

Pupils who are competent to manage their own health needs and medicines will be supported in doing so by the school following discussion and agreement between the pupil, parents/carers, Healthcare Professionals and school staff. This will be monitored and supervised by the school's named person who has overall responsibility for administration of medicines in school.

If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Parents/carers will be informed so that alternative options can be considered.

#### Managing medicines on school premises

Medication should only be taken to school when *absolutely essential* and when it would be detrimental to a pupil's health if the medicine were not administered during the school day.

No pupil under 16 will be given prescription or non-prescription medicines without their parent's written consent including written medical authority if the medicine needs to be altered (e.g. - crushing of tablets). A 'Request for the School to Give Medication' form **MUST** be completed (see Appendix 2). The only exception to this is in exceptional circumstances where the medicine has been prescribed without the knowledge of the parents. In such cases, every effort should be made to encourage the pupil to involve their parents while respecting their right to confidentiality. Non-prescribed medication eg. Calpol, will only be administered in **exceptional circumstances** and is limited to 48 hours.

Pupils under 16 should never be given medicine containing aspirin unless it has been prescribed. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken.

All medicines should be brought in via the school office by their Parent/Carer. Children must not bring any medicines in themselves.

All emergency medication such as inhalers and adrenalin injections should be available to pupils at all times and **MUST NOT** be locked away. All other medication will be stored securely in the School Office.

Medicine **MUST** be in the original container<sup>2</sup>, properly labelled showing:

- Name of pupil and class.
- Clear written instructions for administration.
- Name of the pharmacist (to whom reference should be made if there is doubt about the dosage).

The school will **NOT** accept medicines that have been taken out of the container as originally dispensed nor make changes to the dosage on parental instructions. The school will **NOT** administer any medication containing Aspirin unless prescribed by a Doctor.

## **Disposal of Medicines**

Staff should not dispose of medicines this is the parent's responsibility, as set out above in the section entitled "Parents/Carers".

### Arrangements for the administration and recording of medicines in school.

The Head Teacher has the final decision as to whether medicines will be administered by the school. Advice can be sought by the Head Teacher from the Consultant Community Paediatrician for enquiries relating to pupils <u>or</u> the LEA Medical Advisor for enquiries relating to staff.

Arrangements for the administration of medicines in school must be clearly understood by all staff and parents of pupils concerned.

The Head Teacher will be most reluctant to accept any responsibility for the administration of medicine to pupils where:

- 1. The timing of administration of medication is crucial.
- 2. Technical or medical knowledge or experience as required, as in the case of injections.
- 3. Intimate contact is necessary, e.g. assistance with catheters or the use of equipment for pupils with tracheostomies.

Staff administering medicines should do so in accordance with the prescriber's instructions and ensure that the medicine has been prescribed for the pupil in question.

All medicines administered **MUST** be recorded. A written record must be kept and written notification given to parent if requested. Parents should be informed if their child is unwell at school.

Using any medication for another pupil is an offence.

Pupils of primary school age should not be permitted to medicate themselves while at school without the knowledge of the Head Teacher and then only under supervision e.g. Asthma inhalers.

## **Reporting of errors**

The school should report all identified medicines-related patient safety incidents consistently and in a timely manner, in line with local and national patient safety reporting systems, to ensure that the pupil's safety is not compromised.

<sup>&</sup>lt;sup>2</sup> See footnote 1.

## Drugs administered other than orally.

Drugs or medication not administered orally should be given by staff who have agreed to assist the pupil, have received training and have written consent from the parent.

The administration of injections to any pupil in school will only be allowed with the express agreement after consultation with the relevant Medical Practitioners.

### **Emergency Aid**

As part of the risk assessment for each case, staff who are working with the child should be aware of the arrangements in the Individual Health Care Plan, where applicable, for dealing with emergencies.

Staff **MUST NEVER** take children to hospital in their own car. In such cases an ambulance **must** be called. Staff must be aware of their roles and responsibilities as detailed in the Medical Alert Booklet.

### Unacceptable Practice

Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assume that every child with the same condition requires the same treatment;
- Ignore the views of the child or their parent;
- Ignore medical evidence or opinion (although this may be challenged);
- Send children with medical conditions home frequently or prevent them from staying for normal school activities including lunchtime, unless it is specified in their individual healthcare plans;
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable or to leave them unattended or with someone unsuitable;
- Penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or to provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs;
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring the parent to accompany the child.

### Complaints

Should parents/carers or pupils be dissatisfied with the support provided by the school, they should discuss their concerns directly with the Head Teacher and Business Manager. If for whatever reason this does not resolve the issue, they may make a formal complaint via our school's Complaints Procedure.

## Appendix 1



# **Request for Danson Primary School to give medication.**

I request that: ...... (Name of child)

In Class ..... be given the following medication:

Pupil has Individual Health Care Plan?	Yes/No (Please Circle)
	If Yes refer to specific instructions for
	administering of medicines in IHCP
Date medicine provided by parent	
Quantity received (tablets)	
Name and strength of medicine	
Expiry date	
Quantity returned (tablets)	

Dosage	
At the following times	
For a period of (school days)	
Written notification to parent	Yes-Details(please circle)
following administration of	<b>No-Details</b> (please circle)
medication	

\*Delete as appropriate

\*The above medication has been prescribed by the family Doctor. It is clearly labelled indicating contents, dosage and child's name in FULL.

\*The above is an 'over the counter' medication which as a parent I wish to be administered to my child. It is clearly labelled indicating contents, dosage and child's name in FULL.

I understand that the medicine must be **delivered/collected personally to/from** the School Office and accept that this is a service which the school is not obliged to undertake.

Signature of Parent/Carer:

We, Danson Primary School, agree to an appointed member of Staff (see Appendix 1) to administer the medication as directed.

Staff signature:

Medication will not be accepted by the school unless this letter is completed and signed by the parent or legal guardian of the child and that the administration of the medicine is agreed by the Head Teacher.



# Record of Medicine administered to an individual child

Name of child	
Class	

Date		
Time given		
Dose given		
Administered by		
Staff signature		
Counter signature		

Date		
Time given		
Dose given		
Administered by		
Staff signature		
Counter signature		

Date		
Time given		
Dose given		
Administered by		
Staff signature		
Counter signature		

Date		
Time given		
Dose given		
Administered by		
Staff signature		
Counter signature		

Appendix 3

# **Parent Notification of Medication Given**



# Record of Medicine administered to an individual child

Dear Parent/Carer,

In accordance with your permission, we have given medication at school today.

Name of child	
Class	
Date	
Time given	
Dose given	
Administered by	

Staff signature:



## **Medical Plan**

Child's name	
Group/class/form	
Date of birth	
Child's address	

Medical diagnosis or condition

Date

Review date

#### **Family Contact Information**

Name

Relationship to child Phone no. (work)

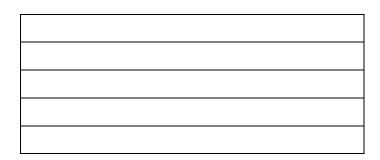
(home)

(mobile)

Name Relationship to child

Phone no. (work) (home)

(mobile)



#### **Clinic/Hospital Contact**

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

-			

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

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

Parents and relevant staff members

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to: Parents, Class teacher, Inclusion Manager, School Office