

# Bromley Hills Primary School Supporting Students with Medical Conditions

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# Introduction

The Governing Body of the School ensures that pupils with medical conditions receive appropriate care and support at school. This policy has been developed in line with the Department for Education's guidance released in December 2015 – 'Supporting Pupils at School with Medical Conditions'.

Ofsted places a clear emphasis on meeting the needs of pupils with SEN and Disabilities and this includes children with medical conditions.

# 1. Key roles and responsibilities

# 1.1. The Local Authority (LA) is responsible for:

- 1.1.1. Promoting cooperation between relevant partners and stakeholders regarding supporting pupils with medical conditions.
- 1.1.2. Providing support, advice and guidance to schools and their staff.
- 1.1.3. Making alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a medical condition.

# **1.2.** The Governing Body is responsible for:

- 1.2.1. The overall implementation of the Supporting Pupils with Medical Conditions Policy and procedures the School.
- 1.2.2. Ensuring that the Supporting Pupils with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- 1.2.3. Handling complaints regarding this policy as outlined in the school's Complaints Policy.
- 1.2.4. Ensuring that all pupils with medical conditions are able to participate fully in all aspects of school life.
- 1.2.5. Ensuring that relevant training provided by the LA is delivered to staff members who take on responsibility to support children with medical conditions.



- 1.2.6. Guaranteeing that information and teaching support materials regarding supporting pupils with medical conditions are available to members of staff with responsibilities under this policy.
- 1.2.7. Keeping written records of any and all medicines administered to individual pupils and across the school population.
- 1.2.8. Ensuring the level of insurance in place reflects the level of risk.
- 1.2.9. Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- 1.2.10 Ensuring clear emergency procedures are in place and understood by staff. If a child needs to be taken to hospital, staff should stay with the child until parent/carer arrives, or accompany a child taken to hospital by ambulance.

# **1.3.** The Senior Leaders are responsible for:

- 1.3.1. The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and procedures of the School
- 1.3.2. Ensuring the policy is developed effectively with partner agencies.
- 1.3.3. Making staff aware of this policy.
- 1.3.4. Liaising with healthcare professionals regarding the training required for staff.
- 1.3.5. Making staff who need to know aware of a child's medical condition.
- 1.3.6. Developing Individual Healthcare Plans (IHCPs).
- 1.3.7. Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- 1.3.8. Liaising with staff in the case of any child who has a medical condition on a need to know basis.
- 1.3.9. Liaising locally with lead clinicians on appropriate support.



# **1.4.** Staff members are responsible for:

- 1.4.1. Taking appropriate steps to support children with medical conditions.
- 1.4.2. Where necessary, making reasonable adjustments to include pupils with medical conditions into lessons.
- 1.4.3. Administering medication (in Care room overseen by a member of Office staff).
- 1.4.4. Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, if they have agreed to undertake that responsibility.
- 1.4.5. Familiarising themselves with procedures detailing how to respond when they become aware that a pupil with a medical condition needs help.

# 1.5. School Nurses are responsible for:

- 1.5.1. Notifying the school when a child has been identified with requiring support in school due to a medical condition.
- 1.5.2. Liaising locally with lead clinicians on appropriate support.

# **1.6.** Parents and Carers are responsible for:

- 1.6.1. Keeping the school informed about any changes to their child/children's health.
- 1.6.2. Completing a parental agreement for school to administer medicine form before bringing medication into school.
- 1.6.3. Providing the school with the medication their child requires and keeping it up to date.
- 1.6.4. Collecting any leftover medicine at the end of the course or year.
- 1.6.5. Discussing medications with their child/children prior to requesting that a staff member administers the medication.
- 1.6.6. Where necessary, developing an Individual Healthcare Plan (IHCP) for their child in collaboration with the Senior Leaders, staff members and healthcare professionals.



### 2. Definitions

- 2.1. 'Medication' is defined as any prescribed or over the counter medicine.
- 2.2. 'Prescription medication' is defined as any drug or device prescribed by a doctor.
- 2.3. A 'staff member' is defined as any member of staff employed at Bromley Hills School including teachers.

#### 3. Training of staff

- 3.1. Teachers and support staff will receive training on the Supporting Pupils with Medical Conditions Policy as part of their induction as appropriate.
- 3.2. Teachers and support staff will receive regular and ongoing training as part of their development.
- 3.3. Teachers and support staff who undertake responsibilities under this policy will receive the training externally as necessary.
- 3.4. The lead for this training are the Senior Leaders in conjunction with clinical partners.
- 3.5. Where necessary, staff will be trained to administer certain prescribed medication to ensure safe practice.
- 3.6. No staff member may administer drugs by injection unless they have received training in this responsibility.
- 3.7. The Headteacher will keep a record of training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

#### 4. The role of the child

- 4.1. Children who are competent will be encouraged to take responsibility for administering their own medicines.
- 4.2. If pupils refuse to take medication or to carry out a necessary procedure, Parents/carers will be informed so that alternative options can be explored.
- 4.3. Where appropriate, pupils will be encouraged to take their own medication under the supervision of a staff member, in the care room, where the medication is stored and always available for the student.



# 5. Individual Healthcare Plans (IHCPs)

- 5.1. Where necessary, an Individual Healthcare Plan (IHCP) will be developed in collaboration with the pupil, parents/carers, Senior Leaders and medical professionals.
- 5.2. IHCPs will be easily accessible whilst preserving confidentiality.
- 5.3. Where a pupil has an Education, Health and Care plan or special needs statement, the IHCP will be linked to it or become part of it.
- 5.4. Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the child needs to reintegrate.
- 5.5 All children requiring prescribed medication on a school trip/residential, must be included on the school risk assessment.
- 5.6 IHCP will be monitored/reviewed on an annual basis.
- 5.7 When a pupil moves to another class/school, the IHCP will be shared with the new teacher/school.

# 6. Medicines:

- 6.1. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the pupil to take them outside of school hours.
- 6.2. If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental agreement for school to administer medicine form.
- 6.3. No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- 6.4. Where a pupil is prescribed medication without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- 6.5. No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- 6.6. Medicines **MUST** be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be



administered.

- 6.7. A maximum of four weeks supply of the medication may be provided to the school at one time.
- 6.8. Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence and will be dealt with accordingly.
- 6.9. Medications will be stored in the Care Room in a locked cabinet or temperature controlled ones will be in a locked fridge in the staffroom.
- 6.10. Any medications left over at the end of the course will be returned to the child's parents or taken to a pharmacy to be disposed of.
- 6.11. Written medical registers will be kept and all medication administered will be logged and signed for on each occasion.
- 6.12. Pupils will never be prevented from accessing their medication.
- 6.13. School cannot be held responsible for side effects that occur when medication is taken correctly.
- 6.14 GSL (general Sales List medication) These should only be administered for **short term pain relief** and anything requiring more than 3 days dosage, must be referred to the GP. Parents/Carers have to be asked how long the child has been taking the medication and what dosage they have been receiving. Permission forms still need to be signed and registers filled in.

# 7. Emergencies

- 7.1. Medical emergencies will be dealt with under the school's emergency procedures.
- 7.2. Where an Individual Healthcare Plan (IHCP) is in place, it should detail:
  - What constitutes an emergency.
  - What to do in an emergency.
- 7.3. Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- 7.4. If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents/carers arrive.



# 8. Avoiding unacceptable practice

School understands that the following behaviour is unacceptable:

- Assuming that pupils with the same condition require the same treatment.
- Ignoring the views of the pupil and/or their parents.
- Ignoring medical evidence or opinion.
- Sending pupils home frequently or preventing them from taking part in activities at school.
- Sending the pupil to the care room or school office alone if they become ill.
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- Making parents/carers feel obliged or forcing parents/carers to attend school to administer prescribed medication or provide medical support, including toilet issues.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

# 9. Insurance

- 9.1. Teachers who undertake responsibilities within this policy are covered by the school's insurance.
- 9.3. Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Headteacher.

# 10. Complaints

10.1. The details of how to make a complaint can be found in the Complaints

Policy.



Appendix 1

# **Register of Medication Administered**

Child's Name	Date of Birth
Address	

Date	Name of Person who brought it in	Name of Medication	Amount supplied	Form	Expiry date	Dosage regime

Date	Medication	Amount given	Amount left	Time	Administered by	Comments/Action Side effects



**Appendix 2** 

# **School Procedure:**

- □ No medicine will be accepted unless brought to school by a responsible adult **NOT** the child.
- Medicines can only be accepted at the school office not at classroom doors. Pre-School must be handed to Key Worker/Manager; they must complete the current permission form and bring it up to be signed.
- □ At the office (Pre-School) checks to be completed:
  - Medicine in date;
  - In original packaging from pharmacy (incl: name/address/phone no/logo) displaying
  - Dosage;
  - Medicine is for pupil concerned.
- □ Tablets **CAN NOT** be cut in half unless there is a line on the tablet and dosage prescribed requires us to do this.
- Storage: All medicines MUST be locked away safely and away from children (TO BE KEPT IN LOCKED WALL MOUNTED CUPBOARD IN CARE ROOM.) However, medicines such as asthma inhalers, blood glucose testing meters, Epi-pens, should be always readily available to children and **not** locked away. Children should **always** know where these medicines are. This is particularly important when outside school premises on trips/swimming etc.
- On offsite trips, a locked container will be taken to store medication needed during the excursion. The complete amount of medication will be taken, not separated from the original amount in school. This includes the original packing from pharmacy and dosage information.
- Lockable fridge to be purchased and put into staffroom and lockable bag to be purchased for school trips.
- Record Keeping: Medical register each child will have a medical register and this must be completed each time a member of staff administers medication. These will be kept in the office.
- □ New record must include amount supplied, amount administered and *amount left,* and it must tally exactly essential in establishing a clear audit trail for medications.
- □ Short-term medication can be recorded on individual medical registers and an IHCP is not necessary.

# **Completing Medical Registers:**

- □ **NEVER** write over the top of an error.
- □ **NEVER** use Tipp-ex.
- □ **NEVER** cross out.
- Do not alter what has been written in anyway. If an error is made, the error should be identified with an asterisk (or 2 if it is not the first error on the page). Then either on the next line or at the bottom of the page write:



'ENTERED IN ERROR, SHOULD READ...' and then insert the correct entry and sign/date it.

- □ Non-Prescribed Medication can **NOT** be administered by school staff without prior written permission by parents/carers.
- □ Where a parent has come into school requesting that *they* provide pain relief during the day, office staff MUST ask:
  - When was the last dose administered?
  - Check maximum dosage.
  - How long have they been taking this medication? (*3 days max*)
  - $\circ$  Check that medication is in date and original packaging and not decanted.
  - Only then will parents be allowed to give medication and this will be recorded on the medical register. However, if medication has been given for longer than 3 days, parents must be referred to the GP by school.
- □ If parents have not provided medication, office to contact parents requesting that they come in to school (**NO** permission given over phone) and the above questions still asked, *even if parents administering medication*. Must also still be noted on medical register what parents have administered.
- □ New **Calpol** permission form to be completed prior to residential trips.
- □ No Calpol to be administered without prior contact with parent.
- □ We can't take a single tablet to administer on a trip must take complete amount and packaging. School is not allowed to separate tablets or decant.
- □ ALL staff handbags/bags containing medication (POMs/OTCs/GSLs) **MUST** be kept **locked** away at ALL times, out of reach of children.