



# Managing Medical Conditions in School Policy

Version: V1.0 Draft

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Date: 7th March 2017

Review date: by July 2019

Approval level: School/Executive/Board, 20th April 2017

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Schools in ASSET Education (formally Ipswich Primary Academies Trust) wish to ensure that pupils with medical conditions receive appropriate support and care at school. This policy mostly applies to pupils with long term special medical needs.

### **Definition**

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

- (a) Short-term: affecting their participation in school activities while they are on a course of medication.
- (b) Long-term: potentially limiting their access to education and requiring extra care and support (deemed **special medical needs**).

### **1. Introduction**

ASSET Education and the individual school 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.** 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.

Schools follow the advice and guidance provided by the DfE, in particular "Supporting pupils with medical conditions at school" (September 2014). Advice should also be sought from the School Nurse.

### **Aims**

School in the Trust aim to:

- Assist parents in providing medical care for their children;
- Educate staff and children in respect of special medical needs;
- Adopt and implement the LA policy of Medication in Schools;
- Arrange training for volunteer staff to support individual pupils;
- Liaise as necessary with medical services in support of the individual pupil;
- Ensure access to full education if possible;
- Monitor and keep appropriate records.

### **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.

## **Expectations**

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 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.
- 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.

## **2. 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. Sample templates are given in the Appendices to this policy. The person responsible for ensuring the implementation of this policy in school is Katherine Milk, Headteacher. The person responsible for the day to day administration of this policy is Grace Rogers, School Administrator and Lisa Wood, Deputy Headteacher.

### **Procedure when the school is notified that a pupil has a medical condition**

The school administrator and Deputy Headteacher, with responsibility for medical conditions will arrange a meeting with the parents as soon as possible after the school has been informed. The information may come from the parent, the school nurse, a health visitor or another medical professional. The School Administrator and Deputy Headteacher will invite the parents, the school nurse and any other relevant health professionals to the meeting. At the meeting the School Administrator and Deputy Headteacher will gather all the relevant information including diagnosis, signs and symptoms and a treatment plan. The meeting will also cover the emotional needs of the child or young person and include emotional support/counselling as appropriate. The school will consult with parents about how much information can be shared with the child's class and peer group. The plan will be put in place and the relevant members of staff will be trained within four weeks of the first notification. The Headteacher will be kept informed of the operational implications of the health care plan.

### **The School's Right to Challenge**

The school will listen to children and parents but may challenge and ask for a second opinion if there is doubt or dispute about a child's medical condition. The School Administrator and Deputy Headteacher will consult with the Trust Executive and the NHS paediatrician (see Appendix one).

The Trust Executive will be asked to give advice if there is a dispute between the parents and the school.

## Staff Training

- Teachers and support staff will receive training about individual pupils' medical conditions which will be organised by the school
- The Deputy Headteacher will be responsible for monitoring and reviewing the quality of staff training
- New members of staff will receive relevant and up-to-date information about managing medical conditions in schools
- Temporary and supply staff will be given information by the school office (via supply notes given to all supply teachers) about individual children or young people who are likely to become ill and/or require medical intervention.

## Individual Health Care Plans

- The School Administrator and Deputy Headteacher with responsibility for medical conditions will write individual plans in partnership with the parent and relevant health care
- The plan will be shared with relevant members of staff and reviewed annually or as appropriate if there are significant changes.
- The plan will include details about the child's condition, treatment, symptoms and warning signs.
- The plan will be kept in the school office and not put on display unless this is agreed with the parents.
  - o Information about the child's medical condition will only be displayed in the staffroom or medical room if appropriate and **ONLY WITH THE PARENTS' PERMISSION.**

## 3. Medicines in Schools

**This applies to all pupils including those who do not have an individual health care plan.**

- any parent can request that their child is given prescription medicine in school
- if medicines (including asthma pumps) are to be administered in school the parents must complete and sign an agreement form which will be renewed annually
- it is preferable that pupils take medicine at home, before or after the school day. Parents are encouraged to ask their GPs for medical prescriptions that fit around the school day
- no pupil will be given medicine without parental consent unless there is a clear and dire emergency and/or ambulance/emergency personnel are in attendance
- prescribed medicines must be in date, prescribed by a NHS doctor and provided in the original container with dosage instructions
- parents must regularly renew the school supply of medicines and be responsible for visiting the GP to collect repeat prescriptions
- at the end of the school year in July the school will return all medicines in store to the parents
- Medicines will be safely stored in the school office or in the refrigerator in the staffroom/office if medicines need to be kept cool.
- A written record will be kept by the school office and stored in the school office
- the school will not be held responsible for any side-effects due to the correct administration of prescribed drugs.

## Arrangements for children who are competent to manage their own medicine in school

A child who has been prescribed a medicine may be responsible enough to carry and administer drugs or medical testing equipment e.g. blood sugar testing kit. The school will consult with parents and relevant school staff about the advisability of an individual child or young person taking responsibility for their own treatment. The decision in cases of dispute will rest with the Headteacher who has a duty to ensure the safety of all children and young people.

#### **4. Record keeping**

Written records will be kept of all medicines administered to pupils. The record will be kept in the school office and include date, time, dosage and name of the member of staff who administers the medicine. The school has discretion around how many staff need to be present during the administration of medicine. Where pupils may have an exceptionally complex condition where there is a particular risk or concern, then as a matter of good practice a second person will be present where possible.

#### **5. Unacceptable Practice**

It is unacceptable to:

- require parents to attend school to administer medication or carry out personal care such as going to the toilet if this is difficult for parents to manage
- prevent pupils from easily accessing their inhalers and medication
- prevent pupils from drinking or eating if needed to manage their medical condition
- assume that every pupil with the same condition needs the same treatment
- ignore the views of the child or their parents, or ignore medical evidence unless there is good reason to challenge those views
- exclude pupils from lunchtime or after-school activities because of a medical condition
- prevent pupils from participating, or create barriers to normal school activities including day trips and school journeys
- leave children who are ill unattended in a medical room or school office or any room
- penalise parents if poor attendance is related to a long-term medical condition.

#### **6. Medical Emergencies**

All members of staff who have contact with pupils who have medical conditions will be informed about the best course of action if a child becomes seriously ill and needs emergency treatment.

The child and the parents will be informed about the school's arrangements and there will be details in the plan if appropriate.

The school will call an ambulance before contacting parents if a child becomes seriously ill – this applies to all children and not only those with health care plans.

The school will arrange for a competent member of staff to travel to hospital in an ambulance and act in loco parentis until the parents arrive. The member of staff in loco parentis will have the right to sanction emergency procedures as advised by medical staff in the ambulance or at the hospital.

#### **7. Day trips, residential visits and sporting activities**

The school will make every effort to ensure that all children are included in the full range of school activities. The school will make sure that reasonable precautions are taken to safeguard children's health and carry out risk assessments for trips and school journeys which take into account the individual child's needs. Parents will not be required to accompany their children on school trips or journeys unless this is a normal activity.

#### **8. Liability and indemnity**

All schools within the Trust buy into and are covered by the DFE Risk Protection Arrangement (RPA) Scheme. Cover includes all sums the school may become legally liable to pay (including claimants' costs and expenses) following death, injury or disease sustained by employees and arising out of and in the course of their employment by the school.

## **9. Complaints**

We will work with parents to ensure that children and young people with medical conditions are treated fairly and in a way that will promote good health outcomes.

All complaints should be made under the school's Complaints Policy. Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

## **10. LIST OF APPENDICES**

APPENDIX 1: Key roles and responsibilities

APPENDIX 2: Individual Healthcare Plan template

APPENDIX 3: Parental agreement for setting to administer medicine template

APPENDIX 4: Record of medicine administered to an individual child template

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APPENDIX 6: Staff training record – administration of medicines

APPENDIX 7: Contacting emergency services advice

APPENDIX 8: Model letter inviting parents to contribute to IHCP development template

## **Appendix 1**

### **Key roles and responsibilities**

#### **1.1 The Trust 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
- 1.1.4 Ensuring the level of insurance in place reflects the level of risk.

#### **1.2 The Headteacher/Governing Body is responsible for:**

- 1.2.1 The overall implementation of the Supporting Pupils with Medical Conditions Policy and procedures of Edgar Sewter Primary 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 trust 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 Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.

#### **1.3 The Headteacher/Responsible Person is responsible for:**

- 1.3.1 Keeping written records of any and all medicines administered to individual pupils.
- 1.3.2 The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and procedures.
- 1.3.3 Ensuring the policy is developed effectively with partner agencies.
- 1.3.4 Making staff aware of this policy.
- 1.3.5 Liaising with healthcare professionals regarding the training required for staff
- 1.3.6 Making staff who need to know aware of a child's medical condition.
- 1.3.7 Developing Individual Healthcare Plans (IHCPs).
- 1.3.8 Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- 1.3.9 If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
- 1.3.10 Contacting the school nursing service in the case of any child who has a medical condition.

#### **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, if they have agreed to undertake that responsibility.
- 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 Headteacher, other staff members and healthcare professionals.

**Appendix 2 – Individual Healthcare Plan**

Name of school/setting	
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 the child	
Telephone number (work)	
Telephone number (home)	
Telephone number (mobile)	
Name	
Relationship to the child	
Telephone number (work)	
Telephone number (home)	
Telephone number (mobile)	

**Clinic/Hospital Contact**

Name	
Phone number	

**G.P.**

Name	
Phone number	

Who is responsible for providing support in school?	
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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

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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 action to take if this occurs

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

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

### Appendix 3: parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Group/class/form	
Medical condition or illness	

#### Medicine

Name/type of medicine (as described on the container)	
Expiry date	
Dosage & method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration (yes/no)	
Procedures to take in an emergency	

**NB: Medicines must be in the original containers as dispensed by the pharmacy.**

#### Contact Details

Name	
Daytime telephone number	
Relationship to the child	
Address	
I understand that I must deliver the medicine personally to	(agreed member of staff)

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Edgar Sewter School staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

**Appendix 4: record of medicine administered to an individual child**

Name of school/setting	
Name of child	
Date medicine provided by the parent/carer	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Date			
Time given			
Dose given			
Staff Name			
Staff Initials			

Date			
Time given			
Dose given			
Staff Name			
Staff Initials			

Date			
Time given			
Dose given			
Staff Name			
Staff Initials			

Date			
Time given			
Dose given			
Staff Name			
Staff Initials			

Date			
Time given			
Dose given			
Staff Name			
Staff Initials			

Parent signature \_\_\_\_\_ Date \_\_\_\_\_



## Appendix 6: contacting emergency services

Request an ambulance – dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. School telephone number - **01986 892209**
2. Your name
3. Your location as follows – **Bungay Primary school, Wingfield street, Bungay Suffolk**
4. Post code – **NR35 1HA**
5. Provide the exact location of the patient with the school setting
6. Provide the name of the child and their symptoms
7. Inform the control centre of the best entrance to use and state that the crew will be met and taken to the patient – **to the rear of the school**
8. Put a completed copy of this form by the telephone.

## Appendix 7: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

### **Developing an individual healthcare plan for your child**

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children require one. We will need to make adjustments about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for [DATE]. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you to contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely