

## **New Scotland Hill Primary School and Nursery**

Enjoying living and learning together

# SUPPORTING PUPILS AT SCHOOL WITH A MEDICAL CONDITION POLICY

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	Print name	Signature	Date
On behalf of the			
Head Teacher			
On behalf of the			
Governing Body			

#### Introduction

Section 100 of the Children and Families Act 2014 places a duty on the Governing Body to make arrangements for supporting pupils at school with medical conditions.

The Governing Body will ensure that arrangements are in place in schools to support pupils at school with medical conditions so that they can play an active part in school life and achieve their academic potential. No child with a medical condition should be denied admission because arrangements for their medical condition have not been made. However, in line with their safeguarding duties, governors do not have to accept a child in school where it would be detrimental to the health of that child or others to do so.

Governing Bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

**The Headteacher** has responsibility for policy implementation and will ensure that all staff understand their role and that sufficient staff are suitably trained.

Parents have the prime responsibility for ensuring a child's health and for deciding whether they are fit to attend school.

**Parents** should also provide all necessary information about their child's medical needs to the school. **School Staff** have no legal obligation to administer medicines to pupils nor supervise them while they take medicine, unless contracted to do so. Staff may volunteer to assist in the administration of medicines but must be given appropriate training and guidance. However, any member of staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

#### PROCESS FOR THE ADMINISTRATION OF MEDICINES IN SCHOOL – SHORT TERM MEDICAL NEEDS

Medicines should normally be administered at home and only taken into school when absolutely necessary (where it would be detrimental to the child's health, or would greatly impact on a child's attendance, if the medicine were not taken during the school day).

The school will only accept:

- Medicines that are in date
- Medicines that need to be administered in excess of 3 times per day
- Medicines in their original container
- Containers with labelling identifying the child's name and with where appropriate original pharmacy instructions for administration, dosage and storage.

The school will NOT accept or administer:

Medicines that are to be administered 3 times per day (unless the child is attending a residential)

In order for medicines to be administered a parent/carer must complete and sign the form "Parental/carer consent to administer a prescribed medicine" (Appendix 1) or Parental/carer consent to administer an 'overthe-counter (OTC) medicine' (Appendix 2).

The medicine, apart from inhalers and auto-injectors, must be kept in the locked cupboard in the First Aid Room or in the fridge in the staff room if this type of storage is required. Auto-injectors and inhalers will be kept in an unlocked cupboard, accessible to staff only, for easy access.

When administering medicine staff must complete the record on the 'Administration of Medication Record Form' (Appendix 3) detailing the date, time and dosage of the medication given. In the case of the child being allowed to administer their own medication, this must again be added to the record and countersigned by an adult.

Parents may come into school to administer medicines themselves, at an agreed time, to give medication that the school is unable to give, for reasons stated above.

Under no circumstances should a parent send a child to school with any medicines, e.g. throat sweets/tablets etc. These could cause a hazard to the child or to another child if found and swallowed.

#### PROCESS FOR THE ADMINISTRATION OF MEDICINES IN SCHOOL – LONG TERM MEDICAL NEEDS

This policy may be superseded by a child's Education Health and Care Plan (EHC) or Individual Health Care Plan (ICHP) or may be used in conjunction with them.

An IHCP may be needed for a child with special medical needs. This plan is to identify the level of support required and clarifies for staff, parents and the child the help that can be provided. It is important for staff to be guided by the child's GP, paediatrician or other health care professionals. Details on information to be recorded on an IHCP is detailed in the Schools Health & Safety Manual Sect 3(4):2. A flow chart for identifying and agreeing the support a child needs and developing an IHCP is provided (Appendix 4).

It is the parent's responsibility to inform the school of any changes to the child's condition that may require the details of the Care Plan to be altered. The plan should be reviewed annually or when the condition changes .

If the school has can meet the level of care required the Headteacher must ensure that named staff are trained to administer or provide the care required in a IHCP. Specific training or dealing with emergencies may be required. Staff should not give medicines without appropriate training from health professionals. This training can be arranged in collaboration with the local health services.

If the school is unable to secure a willing competent person to administer specific medication the function will then rest with the parent or the health service. The Headteacher will make this clear to the parent. The parent will then be responsible for providing a person to administer the medication, to competently monitor and test a fluctuating condition for administration of medication in response to either a fluctuating or stable but enduring medical condition.

#### ADMINISTRATION OF MEDICINES ON SCHOOL TRIPS - ALL MEDICAL NEEDS

Children with medical needs should be supported to participate in school trips and visits and experience all educational opportunities. The school may need to take additional safety measures for the inclusion of children with medical needs and a thorough risk assessment should be carried out.

#### **Residential visits**

For the purpose of residential visits, there will be a named person with responsibility for the administration of medicines and care of children. Parents will be asked to complete either "Parental/carer consent to administer a prescribed medicine" (Appendix 1) or "parental/carer consent to administer an "over-the-counter (OTC) medicine" (Appendix 2) and may be required to meet with the named staff to ensure that staff are aware of all medical requirements.

School staff will administer medicines for common medical conditions that would normally be treated at home by parents with medicines. Medication supplied by parents must be tried licenced and tested. Medication would include hay fever tablets, eye drops, travel sickness tablets, paracetamol for headache/migraine and period pain.

In the case of higher levels of care eg intimate care, the named member of staff will also meet with the school nurse, or other recognised medical advisor to ensure that they are trained in dealing with the level of care required.

#### **TRAINING**

#### Induction

All staff should receive Induction Training upon joining the school to include the school's policy on the administration of medicines and how to respond to an emergency (Appendix 5). All staff must be aware of the likelihood of an emergency arising in a pupil with medical needs, whom to contact and what action to take.

#### **Routine Administration**

There will be many cases where the administration of routine medicines eg prescribed painkillers, antibiotics etc requires no professional training.

#### **Non-routine Administration**

Non routine administration includes injection, administration of rectal diazepam, assistance with catheters or use of equipment for children with tracheotomies etc. Before the school accepts any commitment; professional training and guidance must be provided from the School Nursing Team or appropriate medical professionals.

Records of specific training should be provided by the trainer and retained by the school.

#### **Appointed First Aiders & Paediatric First Aiders**

A minimum of three staff will be trained as Appointed First Aiders. In addition there will a minimum of two trained Paediatric First Aiders. Qualified First Aiders are not suitably trained to administer complex medicines or care, specific training would have to be undertaken when the need arose. All other staff will have the opportunity to attend group emergency first aid training session every three years.

There will be regular training for specific support staff (in the class where there was the requirement) on more generalised needs eg. Auto-injector, asthma and epilepsy. The school is well supported by the School Nurses who provide staff with advice and any relevant training on request.

#### **MEDICAL ALERTS**

Any child with specific medical conditions that may need urgent attention will have a poster with their name, photograph and year group clearly displayed. These posters will have their medical condition in bold print, followed by their symptoms and clear medical procedures to follow. These are displayed in the First Aid room and the staff room.

#### INJURIES AND ACCIDENTS

All accidents or injuries must be recorded in the Accident Register and detail:

Date and time

Pupil's name and class

Nature of injury and area of body effected (including left or right as appropriate)

Where the injury occurred First Aid administered Name and signature of first aider. Witness (if appropriate).

If an injury is of a more serious nature, requiring professional medical treatment, an accident report form must be submitted to Bracknell Forest.

#### **FIRST AID KITS**

There are clearly marked and fully operational first aid kits at both of the first aid sites. First Aid bags are available to be taken off school premises for school or sports visits.

#### **DEFIBRILLATOR**

A Lifeguard CR Plus Defibrillator is located in the reception area of the school's main entrance.

#### STAFF PROTECTION

Staff should have access to protective disposable gloves and take care when dealing with spillage of blood or other body fluids and disposal of dressings or equipment. Guidance is available in Section 3.9 of Corporate H&S Manual.

#### **DISPOSAL OF MEDICINES**

Parents are responsible for ensuring that date expired medicines are returned to the pharmacy for safe disposal.

Sharp boxes must be used for the disposal of needles and any sharp points. These can be obtained by parents on prescription from their GP.

Used epi-pens are always given to the ambulance medical staff taking the child to hospital.

#### **MEDICATION ERRORS**

A medical error is when the administration deviates from the instructions of the medical professional and parent. A medication error must be reported to the Headteacher and an Incident Report Form completed and copied to the Corporate H & S Team.

#### **STAFF INDEMNITY**

Bracknell Forest Council fully indemnifies its staff against claims for alleged negligence providing they are acting within the scope of their employment. This indemnity includes all governors and volunteers assisting the school in their business activities. The Council's liability insurance provides indemnity for the administration of most oral medication and most pre-assembled, pre-dosed medications.

#### **COMPLAINTS**

Any parent dissatisfied with the support provided should discuss their concerns with the Headteacher. If this cannot be resolved parents may make a formal complaint via the School's Complaint Procedure.

## Appendix 1

## Parental/carer consent to administer a prescribed medicine

- All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included on the pharmacy label.
- A separate form is required for **each medicine**.

Child's name	
Child's date of birth	
Class/form	
Name of medicine	
Strength of medicine	
How much (dose) to be given. For example:	
One tablet	
One 5ml spoonful	
At what time(s) the medication should be given	
Reason for medication	
Duration of medicine Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to administer	Yes
their own salbutamol asthma inhaler/Adrenaline auto	No
injector pen for anaphylaxis [delete as appropriate].	Not applicable
I give permission for my son/daughter to administer	Yes
their own salbutamol asthma inhaler and use it themselves in accordance with the agreement of the	No
school and medical staff.	Not applicable

I give permission for my son/daughter to administer their own	Yes	
medication in accordance with the agreement of the school and	No	
medical staff.	Not applicable	

Mobile number of parent/carer	
Daytime landline for parent/carer	
Alternative emergency contact name	
Alternative emergency phone no.	
Name of child's GP practice	
Phone no. of child's GP practice	

- I give my permission for a staff member to administer the prescribed medicine to my son/daughter during the time he/she is at school/nursery. I will inform the school/nursery immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school/nursery activities, as well as on the school/nursery premises.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school/nursery, if necessary.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carer name	
Parent/carer signature	
Date	

## Appendix 2

## Parental/carer consent to administer an 'over-the-counter' (OTC) medicine

- All over the counter (OTC) medicines must be in the original container.
- A separate form is required for **each medicine**.

Child's name		
Child's date of birth		
Class/form		
Name of medicine		
Strength of medicine		
How much (dose) to be given. For example:		
One tablet		
One 5ml spoonful		
At what time(s) the medication should be given		
Reason for medication		
Duration of medicine		
Please specify how long your child needs to take the medication for		
Are there any possible side effects that the school needs to know about? If yes, please list them		
	Yes	
	No	

I give permission for my son/daughter to administer their own		
medication in accordance with the agreement of the school and	Not applicable	
medical staff.		

Mobile number of parent/carer	
Daytime landline for parent/carer	
Alternative emergency contact name	
Alternative emergency phone no.	
Name of child's GP practice	
Phone no. of child's GP practice	

- I give my permission for a staff member to administer the OTC medicine to my son/daughter during the time he/she is at school/nursery. I will inform the school/nursery immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is no longer needed.
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school/nursery activities, as well as on the school/nursery premises.
- I confirm that the dose and frequency requested is in line with the manufacturers' instructions on the medicine.
- I also agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal. If the medicine is still required, it is my responsibility to obtain new stock for the school/nursery.
- The above information is, to the best of my knowledge, accurate at the time of writing.

Parent/carer name	
Parent/carer signature	
Date	

### **Appendix 3**

## **Administration of Medication Record Form**

Childs	Name	<b>Childs Date of</b>	Birth
Cillias	14d111C	Cillias Date of	

DATE	TIME	MEDICINE	AMOUNT	SIGNATURE	COMMENTS

#### **APPENDIX 4**

#### **Process for Developing IHCP's**

The school will follow this process for developing individual healthcare plans:

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed.



Headteacher or senior member of school staff to whom this has been delegate, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil.



Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them).



Develop IHCP in partnership – agree who leads on writing it. Input from healthcare professional must be provided.





Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed



IHCP implemented and circulated to all relevant staff

IHCP reviewed annual or when condition changes. Parent or healthcare professional to initiate.

#### **APPENDIX 5**

#### **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 01344 772184
- 2. Your name
- 3. School location New Scotland Hill Primary, Grampian Road, Sandhurst GU47 8NQ
- 4. Provide the exact location of the patient within the school setting
- 5. Provide the name of the child and a brief description of their symptoms
- 6. Advise that a member of staff will be waiting for the ambulance at the school gates and will take the crew to the patient.