Supporting Children with Medical Needs and Administration of Prescribed Medicines Policy

Date Policy Formally Agreed By Governors:
Date Policy Becomes Effective: 2014
Review Date: 2017, 2020, 2024
Person Responsible for Implementation and Monitoring: **Headteacher**

1. Aims

The purpose of this policy is to ensure effective management systems and arrangements are in place to support children and young people with medical needs in school and to minimise the disruption that illness or disability can cause to a childs' education.

This policy aims to provide clear guidance for staff and parents/carers on the administration of medicines and where appropriate, must be considered in conjunction with all other relevant policies, for example, Health and Safety, First Aid and Child Protection.

2. Roles and responsibilities

The Governing Board is responsible for:

- ensuring pupils are supported with medical conditions.
- ensuring training is provided to staff from a qualified health professional if administration of prescribed medications requires specific or technical knowledge e.g diabetes.

The Headteacher (in consultation with the Governing Board, staff, parents/carers, health professionals and the Local Authority) is responsible for:

- deciding whether the school or setting can assist a child with medical needs.
- implementing the policy on a daily basis
- ensuring that the procedures are understood and implemented
- ensuring appropriate training is provided for staff
- ensuring that there is effective communication with parents/carers, children and young people, school staff and all relevant health professionals concerning the pupil's health needs.

Staff

Whilst there is no legal duty requiring staff to administer medication or to supervise a child when taking medicines, anyone caring for a child within the school setting has a common law duty of care. This duty of care could extend to administering prescribed medication and/or taking action in the event of an emergency.

All staff, including supply staff should be provided with a medical needs summary in order to support pupils with day to day care. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition requires help.

Parents/carers

The major role of caring for a child with medical conditions rests with parents / carers. It is their responsibility to manage the child's health and to ensure attendance at school (Section 7 of the 1996 Education Act).

It is the responsibility of the parent/carer to provide the school with full information about their child's medical needs, including;

- Details of their child's medical needs
- Details of the treatment he/she will need at school, including any possible side effects of prescribed medication
- Other special needs such as dietary requirements or allergies
- The contact details of GPs/Consultants
- What to do or who to contact in the event of an emergency.

If prescribed medication is required to manage a child's medical need, the parent/carer must:

- Provide the medication to the school and complete a parental agreement for school to administer medicine (Appendix A)
- Ensure the medication has a dispensing label attached to the box/container which states the child's name, name of medication, expiry date and dosage required
- Provide instructions on when the medication is to be given
- Provide details on any special storage arrangements
- Collect and dispose of any medication held in school at the point of expiry
- Ensure that the medicine has not passed the expiry date.

3. Notification of a long-term health condition

When the school is notified that a pupil has a long-term medical condition, the process outlined in Appendix B will be followed to decide on the appropriate course of action.

Where appropriate, an Individual Health Care Plan and Emergency Information form (Appendix C) will be drawn up in consultation with the school, parents/carers and health professionals. This plan will outline the child's needs and the level of support required in school. It will be reviewed annually or earlier if there is evidence that the pupils' needs have changed. The Headteacher will ensure that all staff are aware of the school's planned emergency procedures in the event of a medical emergency in relation to a child with an Individual Health Care Plan and Emergency Information form.

Emergency Information Forms relating to administration of medication linked to children with a diagnosis of specific conditions will be completed in the same way as an Individual Health Care Plan. These forms will be reviewed annually or earlier if required. The conditions are: Anaphylaxis (Appendix D), Asthma (Appendix E), Diabetes (Appendix F) or Epilepsy (Appendix G).

For existing pupils, the school will make every effort to ensure that arrangements are put into place following notification of a medical need. For new starters, arrangements will be put into place for the beginning of the term in which they join the school.

4. Administering medication during the school day

Medication should only be given in school when essential and would otherwise be a detriment to a child's health if it were not administered during the school day. Medication will normally be administered during breaks and lunchtime. If, for medical reasons, medication has to be taken at other times during the day, arrangements will be made for it to be administered.

The school can only administer medication to a child if prior written consent is given by the parent/carer via the completion of a Parental Agreement for School to Administer Medication form (Appendix A).

Parents/carers must complete the form and provide the medication to the school administration staff at the start of the school day. The medication must be collected by a parent or a responsible adult at the end of the school day. Children will not be permitted to collect their medication to take home. If a child attends an after school activity club or the Nest provision, the medication will be handed to the member of staff leading that

activity to then be given to the adult collecting the child from the session. Long term medication such as inhalers can be kept in school for the duration of the school year providing the medication remains in date.

Over the counter/non-prescribed medication e.g. hay fever remedies, will only be administered by school in exceptional circumstances agreed by the Headteacher. These medications will be treated in the same way as prescription medication; parents/carers must follow the same process by providing the medication in the original packaging that is clearly labelled with the child's name and required dosage and completing a Parental Agreement for School to Administer Medication form. This medication will only be administered for a period of 48 hours. Beyond this, parents should consult with a healthcare professional for further advice. The school reserves the right to refuse to administer the medication if medical advice is not obtained.

Non-prescribed paracetamol will only be administered via oral suspension sachets. Parents must bring the required dose to school on the day it is required. It is important parents note the time the medication was last given to the child and when the next dose is required on the Parental Agreement for School to Administer Medication form.

If a child refuses to take their medication, staff will not force them to do so. The parent will be contacted to advise as soon as possible. Refusal to take medication will be recorded and dated on the child's record sheet alongside the reason for refusal and the action then taken by staff.

When pupils engage in learning outside of the classroom, e.g. PE, during the school day, it is the responsibility of the member of staff leading the learning to ensure that inhalers/epipens are taken with the group for use in the event of an emergency.

Educational visits

Staff supervising an educational visit must always be aware of any medical needs of children, including travel sickness, and the relevant emergency procedures. A thorough risk assessment will take place prior to the visit to determine if any adjustments may need to be made to enable pupils with medical needs to participate safely in activities on educational visits. Staff supervising the visit will take responsibility for emergency medication such as Epipens and/or inhalers and will ensure that procedures detailed within Individual Health Care Plans Emergency Information forms and/or specific Emergency Information forms are followed.

If it is felt that additional supervision is required during an education visit due to medical needs, the school may request the assistance of the parent/carer.

5. Administering medication outside of the school day

Sporting activities/clubs (School staff led)

Staff supervising after school activities/clubs, either on or off the school site, must always be aware of any medical needs of children and the relevant emergency procedures. A thorough risk assessment will take place prior to the visit to determine if any adjustments may need to be made to enable pupils with medical needs to participate safely in activities on educational visits. Staff supervising the visit will take responsibility for emergency medication such as Epipens and/or inhalers and will ensure that procedures detailed within Individual Health Care Plans Emergency Information forms and/or specific Emergency Information forms are followed.

Sporting activities/clubs (External provider)

Staff of an external provider supervising after school activities/clubs, either on or off the school site, must always be aware of any medical needs of children and the relevant emergency procedures. It is the responsibility of the staff member leading the session to ensure the emergency inhaler/epipen are accessible at all times for use in the event of an emergency.

6. Storage of medication

Medication that needs to be kept refrigerated will be stored in the refrigerator in the main office. Medication that does not require refrigeration will be kept in a cabinet located in the main school office. Asthma inhalers and spacers must be readily available for pupils to access throughout the day; these will be kept in the child's classroom cupboard in a contained box. The school has two emergency inhalers, one stored in the main school office and another in The Nest for use in the event of an emergency. All parents who complete Asthma forms will consent to the use of the school's emergency inhaler. Parents/carers of children who require an epipen must provide two epipens; one will be kept in the main office and the other in the child's classroom cupboard in a contained box.

7. Record keeping and monitoring

At the start of each new academic year, staff will be provided with a medical needs summary for children who have medical needs. If any medical needs change throughout the course of the year, this document will be updated by the administration team and the updated version shared with staff.

If a pupil requires the frequent use of a long term medication i.e. insulin for diabetes or a controlled drug for the treatment of epilepsy, a record of long term prescribed medicine administered to an individual child (Appendix H) will be completed for each dose given. This form will record the time the medication was administered and the actual dosage. Two members of staff are required to witness the medication being taken and record this on the form. For short term medication such as antibiotics or for the use of an Epipen in the event of an emergency, a record of short term medicines administered to all children (Appendix I) will be completed. It is the responsibility of the staff member who administers the medication to complete the record log.

Emergency Salbutamol Inhaler Records (Appendix J) are kept in each classroom alongside pupil inhalers and a copy of the Asthma form signed by the parent. If a child requires their inhaler during the school day, the staff in the classroom/on the playground are responsible for recording the dose and time on the inhaler log. In all instances where an inhaler is used during the school day, the office will be made aware in order to inform parents/carers.

All medication in school will be recorded centrally including the date of expiration. Termly reviews will be carried out by the administration team to ensure that all medication in school remains in date. This check will be recorded and dated. For any medication that is within a month of the expiration date, the administration team will request a replacement from the parent/carer. It is the responsibility of the parent/carer to provide replacements before the expiry date to ensure that no child is unable to access medication as and when required.

8. Emergency procedures

Individual Health Care Plans and forms relating to Anaphylaxis, Asthma, Diabetes or Epilepsy will clearly set out what constitutes a medical emergency for the child and action to follow. If a pupil needs to be taken to hospital, a member of staff will remain with the child until a parent arrives. This may mean travelling with the child in an ambulance. In the event of a fire evacuation, staff in the classrooms are responsible for ensuring inhalers are taken outside as part of the evacuation procedures.

9. Monitoring this policy

This policy will be reviewed by the Headteacher and Governing Board every three years.

Appendix A Parental agreement for school to administer medicine

Appendix B Individual Health Care Plan Process

Appendix C Individual Health Care Plan

Appendix D Anaphylaxis.pdf

Appendix E Asthma.pdf

Appendix F Diabetes.pdf

Appendix G Epilepsy.pdf

Appendix H Record of long term prescribed medicine administered to an individual child.docx.pdf

Appendix I Record of short term medicines administered to children.docx.pdf

Appendix J Emergency salbutamol inhaler record.docx.pdf