



## WEST JESMOND PRIMARY SCHOOL

### POLICY FOR ADMINISTERING MEDICATION AND SUPPORTING PUPILS AT SCHOOL WITH MEDICAL CONDITIONS

Revision Record of Published Versions			
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West Jesmond Primary	November 2009	1.0	Draft Policy for Staff and governor consultation
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West Jesmond Primary	December 2011	2.0	Reviewed by GWC JR JS
West Jesmond Primary	8 <sup>th</sup> January 2013	3.0	Review by DHT
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West Jesmond Primary	6 <sup>th</sup> December 2016	4.0	Annual review by AHT (TJ) and Julie Sengupta, Medical Liaison
West Jesmond Primary	4 <sup>th</sup> December 2017	5.0	Annual review by DHT (RMcV) and Pupil Support Governor (JDS)

**AIM:**

To provide clear advice and guidance on supporting pupils in school with a medical condition/s and managing medication in school.

**RATIONALE:**

Schools and governing bodies have a statutory duty to ensure that arrangements are in place to support pupils with medical conditions and who require regular medication. Pupils at West Jesmond Primary School who have a medical condition and/or are required to take medication, should access and enjoy the same opportunities at school as any other child.

**PURPOSES:**

By implementing the policy, we intend to achieve the following objectives:

1. To safeguard the health and well-being of children
2. Parents and pupils will be confident in schools ability to provide effective support for medical conditions in school, given that school staff are not health professionals
3. To provide guidance and reassurance to staff
4. To develop policies related to the administration, storage and management of medicines in school.
5. To put in place effective management systems to support individual pupils with medical needs.
6. To identify roles and responsibilities in in supporting pupils with medical conditions and the management of medicines
7. To take account of statutory responsibility.

#### **GUIDANCE:**

- Based on 'Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England, December 2015 (Department for Education)
- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- 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 properly understood and effectively supported.

#### **INDIVIDUAL HEALTH-CARE PLANS:**

**Individual health care plans help ensure that pupils with medical conditions are effectively supported.**

1. On admission parents of children who have a medical condition are invited to a meeting with the SENDCO and Medical Liaison TA who discuss needs and provision. This information is then used to formulate a healthcare plan. If medical conditions develop after admission parents attend a similar meeting as soon as practicably possible.
2. Pupils with medical conditions, on regular medication or if the regime is complex should have a care plan e.g. asthma, diabetes, ADHD, epilepsy, mobility difficulties.
3. Pupils who have short term illness which requires significant intervention in school should have a care plan for the duration of their treatment. (Short term illness lasting only a few days would not normally merit a care plan).
4. The SENDCO/Deputy Head/Medical Liaison, in consultation with the class teacher, parents, support staff and health professionals is responsible for drawing up the care plan. This should include:-
  - Details about the child and his/her condition, triggers, signs and symptoms
  - Name and details of medication, including any side-effects
  - Any specific support required to access the curriculum
  - Special requirements, e.g. dietary needs, pre-activity precautions, facilities, equipment
  - Role of the staff and training requirements
  - Arrangements for off-site activities
  - Emergency procedures:
    - Who is responsible in an emergency
    - what constitutes an emergency
    - what to do
    - what not to do
    - who to contact
5. Care plans will be kept on pupil's files with the medication with a note on their contact details, with the SENDCO and the Class Teacher. Supply Teachers will be made aware of this information when required.
6. All care plans should be reviewed at least annually or earlier if evidence that the child's needs have changed

## **ROLES and RESPONSIBILITIES**

1. The Head of School accepts responsibility for staff carrying out:
  - the administering or supervising of children taking prescribed medication during the school day
  - supporting children with more complex medical needs during the school day
  - Personal care
2. The Head of School is responsible for the implementation of the policy and ensuring staff understand their roles and responsibilities.
3. The Deputy Headteacher is responsible for contacting the school nursing service in the case of any child who has a medical condition that may require support at school, who in turn can liaise with other healthcare professionals, as appropriate.
4. Parents are key partners responsible for
  - Informing the school of a child's medical needs
  - Developing and reviewing a health care plan with a member of staff
  - Complying with arrangements as outlined in the care plan and informing school of any changes required immediately.
5. Pupils can be involved in discussions about their medical support needs and if appropriate, contribute to the development of, and comply with, their healthcare plans.
6. The Deputy Headteacher is responsible for ensuring the policy is implemented and the annual review of the policy
7. Public Liability insurance is organised through the Local Authority.

### **STAFF TRAINING:**

Staff training will be regularly provided for those staff who will be administering medication and first aid. This will be undertaken by an agreed external provider. Whole staff training for staff who may be working with pupils requiring specific equipment e.g. the use of an epi-pen, will be arranged on a needs basis.

Within the TA staff training plan regular medical updates will be provided and a training needs analysis will highlight any further training opportunities.

The Deputy Headteacher will provide regular support to staff as part of her role within the Inclusion Team. An identified Medical Liaison Teaching Assistant will receive appropriate training on a regular basis to support her role within school.

## **MANAGING MEDICINES ON SCHOOL PREMISES**

### **PRESCRIPTION MEDICATION**

1. Medicines should only be taken at school when essential; that is where it would be detrimental to a pupil's health if the medicine were not administered during the school day. Where administration is required during the school day, e.g. 4 or more times a day; written details of the prescription and administration guidelines, from the prescriber, in the form of a letter, are necessary for school records. Without these documents, school will not administer the medicine.

2. Medicines that need to be taken 3 times a day will not be administered at school. They should be taken in the morning, after school and at bedtime.
3. School will only accept medicines that have been prescribed by a doctor, dentist or independent prescriber. Non-prescribed medication will not be accepted or administered to a pupil by school staff.
4. Parents must request in writing that their child be given medication and any subsequent changes must also be in writing.
5. Medicines must always be provided in the original container as dispensed by a pharmacist and not repackaged. Medicines that have been taken out of the container as originally dispensed will not be accepted.
6. The label should include the date, pupil's name and the prescriber's instructions for administration. Instructions must be 'as directed' only and not 'as required'.
7. Staff receiving the medication should read the label carefully, ensure the pupil's name is stated, ensure that they understand the instructions and check prescribed dosage and expiry date.
8. Changes to dosage on parental instruction will not be accepted.
9. Medication must be brought in by an adult to the school office.
10. Records of all medication received must be kept, even if not subsequently administered.
11. Parents must give written consent. It only requires one parent to agree or request that medicines are administered.
12. Children should know how to access their medication at any time, when it is required

Prescribed medicine will not be given:

1. Where the timing of the dose is vital and where mistakes could lead to serious consequences
2. Where medical or technical expertise is required
3. Where intimate contact would be necessary
4. It is prescribed as 'three times a day' In these circumstances, parents will be expected to administer the medication. Most medicines that need to be given three times a day should be administered by parents before and after school and at bedtime.

#### **NON-PRESCRIPTION MEDICATION**

1. Non-prescription medicines such as (liquid) paracetamol, ibuprofen, painkillers and cough medicines must not be administered in school
2. In extenuating circumstances the school may consider administration of non-prescription medicine. For example where pain relief is needed following an allergic reaction to a bite or sting. Written advice from parents detailing the reason for medication, dose, duration and consent must be provided for the school to proceed
3. We do not allow cough sweets in school

#### **STORAGE:**

1. Only the minimum amount necessary should be provided for the pupil. Large volumes of medication should not be stored.
2. A record should be kept of all medication received, even if it is not subsequently administered. This allows for an audit trail to be constructed.
3. Pupils must not keep their own medicines, other than inhalers. Class teachers will monitor the use of inhalers and inform parents if usage exceeds the usual requirement

4. Controlled drugs e.g. Ritalin must be kept in the locked cupboards located in the main office. Only named staff to have access.
5. Epi-pens, inhalers and antihistamine, must be clearly marked and easily accessible in case of emergency.
6. In the event of loss, theft or burglary, the Head of School must be informed immediately.

#### **ADMINISTRATION OF MEDICATION:**

1. Administering medicines, supervising a child taking medicines or carrying out personal care tasks is not part of teachers' professional duties. It is a voluntary role. Teachers will take into account the needs of pupils with medical conditions that they teach.
2. All staff have common law duty to act as any reasonable parent to make sure that children are healthy and safe in school, therefore staff would be expected to assist in an emergency and respond accordingly
3. Pupils, who are competent and willing, may self administer own inhalers, creams etc; therefore school staff will only need to supervise.
4. Medicines must only be administered to the person named on the medication.
5. No-one must be given anyone else's medication under any circumstances. This would be an illegal act.
6. Before administering medication check the packaging for child's name, prescribed dose, expiry date, and pharmacist's instructions. If in doubt about a procedure, staff should not administer the medication but check with parents and/or health professionals, before taking further action.
7. Confirm the identity of the pupil to be given the medication.
8. There must be an adult witness present when the medicine is administered.
9. Ensure pupil has actually taken the medication. If a pupil refuses to take medication, they should not be forced to take it. Parents/Carers should be informed as soon as possible.
10. Record sheets must be signed and dated by the person administering and the witness immediately after administering the medication.

#### **DISPOSAL OF MEDICATION:**

1. Staff should not dispose of medication.
2. Medicines should not be flushed down the sink or the toilet
3. Parents are responsible for ensuring that date expired medicines are returned to a pharmacy for safe disposal. Date-expired medication or any medication no longer required should be returned to the parent/carer. This must be given to an adult. The amount of returned medication should be logged.
4. Parents should collect medicines at the end of the summer term. Medicines should not be stored over the summer holiday period in school.
5. Uncollected medicines should be collected by the Northumbria Police drugs team officer. Sharps boxes should always be used for the disposal of needles e.g. epi-pens. These can be obtained by parents on prescription from a G.P. Collection and disposal of the boxes should be arranged with the Local Authority environmental services.

#### **PARENTS' RESPONSIBILITY**

1. Parents must give sufficient information about their child's medical needs if treatment or special care is required

2. Parents must deliver all medicines to the school office in person and complete and sign a medicine form
3. Where it is practicable, parents should administer medicines to their child outside of school hours, for example where a medicine is to be given three times a day
4. Older children may be able to manage their own medication, under adult supervision, but only with parental agreement on completion of the appropriate forms e.g. creams and inhalers
5. Parents are responsible for ensuring that all medication kept in school e.g. asthma inhalers and Epi-pens, are kept up to date
6. Parents are responsible for notifying the school if there is a change in circumstances e.g. if symptoms change, or a child is no longer asthmatic

#### **SCHOOL TRIPS**

1. Pupils with medical needs must not be discriminated against and should be encouraged to participate in school trips.
2. A copy of their care plan, and medication if required, should be taken.
3. Staff should be made fully aware of medical needs of pupil and procedures for administration of medication and relevant safety procedures.

#### **CONFIDENTIALITY:**

1. This policy should be used in conjunction with the school's confidentiality and equal opportunities policies
2. Pupils have a right to privacy and medical information should be treated as confidential. Medical information should be shared with the minimum number of people possible that would ensure the pupils safety
3. Parental agreement should be sought about passing health information to staff. Sharing information is important if staff and parents are to ensure the best care for the pupil. However, if information is withheld from staff, they should not generally be held responsible if they act incorrectly in giving medical assistance, but act otherwise in good faith.

#### **SPORTING ACTIVITIES:**

1. Most pupils with medical conditions can participate in PE but may require reasonable adjustments
2. Some pupils may need to take precautionary measures before or during exercise and may need immediate access to their medication.
3. Staff supervising sporting activities should be aware of the relevant medical conditions, medication requirements and emergency procedures.
4. Any restrictions should be appropriately recorded in the pupil's individual Health Care Plan.

#### **HYGIENE AND INFECTION CONTROL:**

1. Basic hygiene precautions for avoiding infection should be followed, such as washing and drying hands before and after the administration of medication.
2. Disposable gloves should be used as appropriate and extra care taken when dealing with blood or other bodily fluids and when disposing of dressings or equipment.

#### **EMERGENCY PROCEDURES:**

1. Where a child requires a serious level of care, including hospital:
2. The parents must be informed immediately

3. If the parent is not available, the nominated emergency contact for the child should be informed
4. Staff must never take children to hospital in their own car; it is safer to call an ambulance
5. Where necessary, a member of staff will accompany the child until such time as a parent arrives
6. The staff member should provide any vital information about the injury / illness and the child's medical background to pass on to the nurse / doctor

### **COMPLAINTS**

Should parents be dissatisfied with the support provided to their child with a medical condition, they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, a formal complaint may be made via the school's complaints procedure