



Beverley Minster Church of England Primary School

Managing Medical Conditions Policy

Beverley Minster CE Primary School

Introduction

The purpose of this policy is to put into place effective management systems and arrangements to support children and young people with medical needs in the school and to provide clear guidance for staff and parents/carers on the safe administration of medicines. This document, where appropriate, must be considered in conjunction with all other relevant policies, for example, Health and Safety, and Child Protection.

All staff in schools and early year's settings have a duty to maintain professional standards of care and to ensure that children and young people are safe. It is expected good practice that schools and settings will review cases individually and administer medicines in order to meet the all-round needs of the children. However, there is no legal duty requiring staff to administer medication or to supervise a child whilst taking medicines; this is a voluntary role.

Roles and Responsibilities

Under the Disability Discrimination Act (DDA) 1995, schools should be making reasonable adjustments for disabled children, including those with medical needs and are under a duty to plan strategically to increase access over time. Schools should consider reasonable adjustments they need to make to enable children with medical needs to participate fully in all areas of school life, including educational visits and sporting activities.

The head teacher, in consultation with the Governing body, 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. The head teacher is responsible for:

- Implementing the policy on a daily basis
- Ensuring that the procedures are understood and implemented
- Ensuring sufficient staff are suitably trained in First Aid and any relevant medical condition.
- Making sure there is effective communication with parents/carers, children and young people, school staff and all relevant health professionals concerning the pupil's health needs.
- Ensuring that all relevant staff will be made aware of the child's condition, including supply teachers.
- Ensuring that there are cover arrangements in case of staff absence.
- Ensuring risk assessments are completed for school visits and other school activities outside the normal school timetable.
- Ensuring that healthcare plans are monitored.

All staff will be informed of the designated person with responsibility for medical care. Appropriate staff will be notified each term of the list of children with medical needs. Staff will have access to all the relevant information, which is stored in the school office, to support the child's day to day care.

Parents/Carers

It is the responsibility of parents/carers to:

- Inform the school of their child's medical needs and complete the required paperwork.
- Provide any medication to the school office in a clear container clearly labelled with the following: child's name, name of medicine, dose and frequency of medication, special storage arrangements.
- Collect and dispose of any medicines held in school at the end of each term.
- Ensure that medicines have not passed the expiry date.

Parents/carers are required to give the following information about their child's long-term medical needs and to update it at the start of each school year or update school when changes arise:

- Details of pupil's medical needs
- Medication, including any side effects
- Allergies
- Name of GP
- Special requirements, e.g. dietary needs, pre-activity precautions (parents/carers may be required to provide evidence in this case)
- What to do and who to contact in an emergency
- Cultural and religious views regarding medical care.

Administering Medication

Staff are not legally required to administer medicines or to supervise a child when taking medicine. Any employee may volunteer to undertake this task but it is not a contractual requirement and appropriate training will be given before an individual takes on a role which may require administering first aid or medication.

Where appropriate and after discussion with parents, children who are able are encouraged to administer inhalers independently. They will always be supervised by staff, in accordance with medical procedures.

All schools should ensure that they have sufficient members of support staff who are appropriately trained to manage medicines as part of their duties. Within the Health and Safety policy it should incorporate managing the administration of medicines and supporting children with complex health needs. Staff following documented procedures are fully covered by their employer's public liability insurance should a parent/carer complain. Staff should also be aware when a child may need extra attention due to changes to their medical requirements as agreed with parents/carers and their care plan altered as necessary. In the likelihood of an emergency arising, all staff should be aware of what action to take and back up cover should be arranged if the staff member normally responsible for the child's care is absent.

It is expected that parents/carers will normally administer medication to their children at home. No medication will be administered without prior written permission from the parents/carers. A 'parental agreement for school to administer prescribed medicine' form must be completed. Invasion medication such as ear and eye drops will not be administered by school staff.

The school is able to administer a child's medicine once a day in school, around lunchtime. The medicine must be handed in to the school office by the parent/carer where they will be asked to complete a form giving details of the medication and dosage, and authorising a member of the school staff to give the medicine to the child.

Over the counter/non-prescribed medication, such as Calpol or Ibuprofen, can be administered by school staff on a short-term basis. The medicine must be in sachet form in the correct quantity to be administered, in a sealed, named envelope and the appropriate medical form must be completed at the school office.

All medicine will normally be administered during breaks or lunchtime. If, for medical reasons, medicine has to be taken at other times during the day, arrangements will be made. Medicine will be administered by school office staff and recorded on the appropriate form in the office.

On any occasion when medicine is handed in to school, the member of staff must check the following:

The label should be clearly named with the following information:

- Name of pupil
- Dispensing pharmacy name, address and telephone number
- Name of medicine
- The right medication is in the box
- The prescribed dose and frequency
- The correct administration procedures
- Date medicine dispensed and expiry date
- Amount in bottle
- Cautions/side effects.

The parent will be required to complete the form "Parental agreement for school to administer medicine".

Storage

Medicines will be securely stored in the administration office and logged in the school medical file. Any medicine requiring refrigeration will be stored in a fridge.

Inhalers and Epipen's will be stored in their classrooms ensuring medication/equipment is readily available wherever the child is in the school.

Records

Staff will complete the "Administered Medicine" folder to record each time medication is given to a child; this is kept in the school office. The sheets will record the following: date, child's name, time, name of medicine, dose given, any reactions, initials and printed name of staff administering the medicine.

Refusing medication

If a child refuses to take their medication, staff will not force them to do so. Parents/carers will be informed as soon as possible. Refusal to take medicine will be recorded and dated on the child's record sheet. Reasons for refusal to take medication must also be recorded as well as the action taken by staff.

Training

Training may be required as part of a pupil's individual care plan specific to the pupil's requirements. This will be provided on a range of medical needs, including any resultant learning needs, as and when appropriate. The Headteacher will ensure there are trained and named individuals to undertake first aid responsibilities, ensuring training is regularly monitored and updated.

Health Care Plan

Health Care Plans will be written to provide clarity about the support a child needs where conditions fluctuate or where there is a high risk that emergency intervention will be needed. Where appropriate, a personal Health Care Plan will be drawn up in consultation with the school, parents/carers and health professionals. If there is a disagreement whether a plan should be in place then the Headteacher is deemed to be best placed to take a final decision.

The Health Care Plan will outline the child's needs and the level of support required in school. Health Care Plans will be reviewed annually unless evidence is presented that the child's needs have changed. They will be accessible to all staff, whilst preserving confidentiality and can be found in the office. Where a child has SEN but does not have a statement or EHC plan, their special educational needs should be mentioned in their individual Health Care Plan. Where a child has a special educational need identified in a statement or EHC plan, the individual Health Care Plan should be linked to or become part of that statement or EHC plan.

The Headteacher will ensure that all staff are aware of the school's planned emergency procedures in the event of medical needs.

School Trips

Teachers should be aware of how a child's medical condition will impact on their participation on school trips, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. To ensure that, as far as possible, all children have access to all activities and areas of school life, a thorough risk assessment will be undertaken to ensure the safety of all children and staff. No decision about a child with medical needs attending/not attending a school trip will be taken without prior consultation with the parent/guardians.

Residential trips and visits off site:

- Sufficient essential medicines and appropriate Health Care Plans will be taken and controlled by the member of staff supervising the trip;
- If it is felt that if additional supervision is required during activities, e.g. swimming, the school may request the assistance of the parent/carer.

Best practice

Although staff should use their discretion, generally best practice is to:

- Ensure children have easy access to their inhalers and medication and are able to administer their medication when and where necessary.
- Maximise children's attendance and learning opportunities by supporting children's frequent medical needs and ensuring they stay in school for normal school activities;
- Supervise a child who becomes ill, by accompanying them to the school office by someone suitable.
- To encourage children to drink, eat or take toilet or other breaks whenever they need to in order to manage their medical condition effectively.

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