## Limehurst Primary School



# Supporting pupils with medical conditions & administering medication

Last Reviewed on: August 2024

**Review: August 2026** 

#### Rationale

We strive to ensure compliance with the relevant legislation and guidance in *Health Guidance for Schools* with regard to procedures for supporting children with medical requirements, including managing medicines. Responsibility for all administration of medicines is held by the headteacher but delegated to the School Business Manager (Kirsty Dowden) & School Clerical Officer (Deborah Wycrij) to manage on a daily basis.

Medicines should only be given in school when it is necessary and essential to a child's health or school attendance, Medicines should not be given on an ongoing basis, unless prescribed by a doctor. Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent or carer.

Our policy is to ensure that children with medical conditions whom need medication whilst in our care have their medical needs met to ensure that they retain the fullest access to the life and work of our school. This policy sets out how we will establish safe procedures.

We acknowledge that under the standards terms and conditions for the employment of teachers there is no legal duty for them to administer or to supervise a child taking medication. Administration of medicines by teachers is undertaken purely on a voluntary basis and individual decisions will be respected. The principles also apply to the support staff in school.

#### 1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the school curriculum

#### 2. Roles and responsibilities

#### 2.1 The governing board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

#### 2.2 The head teacher

The head teacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this
  policy and deliver against all individual healthcare plans (IHPs), including in
  contingency and emergency situations
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way

• Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

#### 2.3 Staff

Only members of staff whom have been appropriately trained will be asked to administer medicine. Mrs Deborah Wycrij (School Clerical Officer) attended a 'Level 2 medication for schools' training course in February 2022 and leads on administering medication to pupils. Any other member of staff may be asked to provide support to pupils with medical conditions e.g. supervise a pupil who is able to self-administrate or to attend medication training to support pupils e.g. to provide regular on-going medication as part of a specific medical condition, although they will not be required to do so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

#### 3.4 Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs and inform of any changes or diagnosis's
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment

#### 3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

#### 3.6 School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school nurses and notify them of any pupils identified as having a medical condition.

#### 4. Equal opportunities

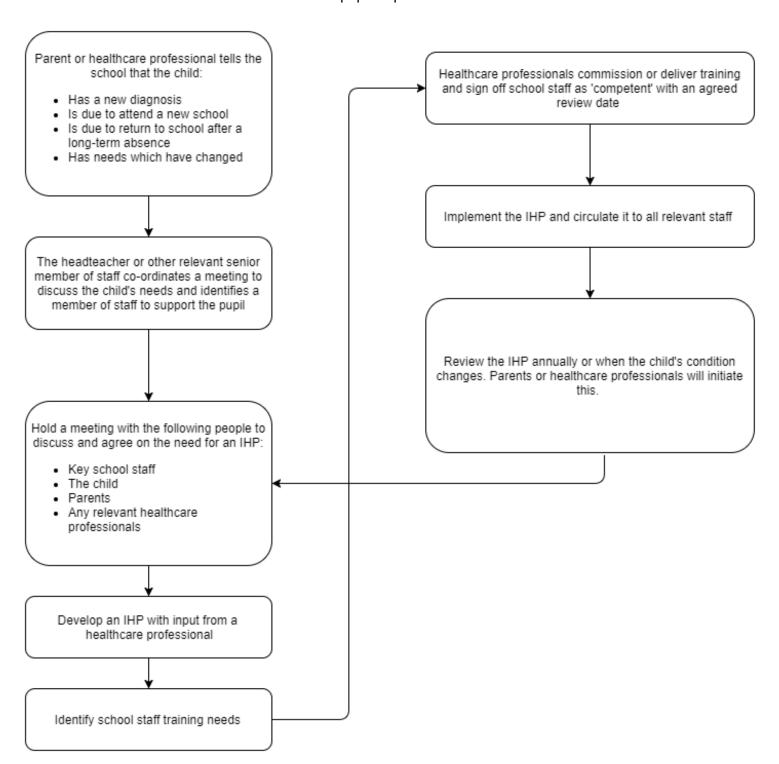
Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

#### 5. Being notified that a child has a medical condition

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.



#### 6. Individual healthcare plans

The head teacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Mrs. L Taylor (Designated Safeguarding Lead)

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the head teacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can give the best advice on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing body and Mrs. L Taylor, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments

- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

#### 7. Managing and administering medicines

Prescription medicines will only be administered at school:

 When it would be detrimental to the pupil's health or school attendance not to do so and where we have parents' written consent

### The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will be contacted to gain permission prior to administering pain relief and they will be asked to visit the school office to sign the medication record at the end of the school day upon collection of their child.

The school will only accept medicines that are:

- In-date
- Labelled
- Provided in the original container and include instructions for administration, dosage and storage

All medicines will be stored safely in the school office and stored in the medicine fridge if required. Pupils will be informed about where their medicines are at all times. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

#### 7.1 Record Keeping

As part of the school's admissions process and annual data collection exercise parents/carers are asked to complete a data collection form which has as section for detailing any medical conditions. This is checked by the school office upon receipt of the form.

Upon notification from a parent/carer that their child needs to be administered medication during the school day, they are asked to complete and sign a parental agreement form which includes the specific medication information (name, expiry date, recommended dosage etc) and reason it is required. The school office then keep a record of the dates, dosage and times the medication has been administered and parents are asked to check and sign each day.

Changes to instructions are only accepted by the school when received in writing. parents/carers cannot give verbal changes it has to be documented in a letter.

#### 7.2 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHCP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents (although this may be challenged)
- Ignore medical evidence or opinion (although this may be challenged)

- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

#### 8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

#### 9. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with Mrs. L Taylor. Training will be kept up to date.

#### Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

#### 10. Liability and indemnity

The governing body will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

#### **Medical Treatment**

The **Insurer** shall provide indemnity for legal liability consequent upon the rendering of or failure to render the following medical or paramedical services in connection with the **Business** 

- a) Emergency and/or first aid medical services by any employee
- b) The administering of drugs or medicines or procedures
  - i) Pre-prescribed by a medical practitioner and
  - ii) Subject to any written guidelines

by any **employee** authorised by the **insured** provided that no indemnity is available from any other source

#### 11. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with Mrs. L Taylor in the first instance followed by the Head teacher if the complaint remains unsolved. If the Head teacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

#### 12. Monitoring arrangements

This policy will be reviewed and approved by the governing body every two years.

#### 13. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy