



That they may have life; life in all its fullness - John 10:10

Hordle CE (VA) Primary School & Nursery

SUPPORTING PUPILS WITH MEDICAL NEEDS (INCORPORATING ADMINISTRATION OF MEDICINES POLICY) H&S APPENDIX A 2020

Any reference to ‘the school’ throughout this policy shall mean Hordle CE (VA) Primary School and Nursery.

The purpose of this policy is to ensure that there is a plan in place to support pupils with medical conditions and that employees are aware of their responsibilities and that relevant staff understand the administration of medicine arrangements.

A child with Medical Needs for the purposes of this policy is a child who requires something additional and different in order for them to access any aspect of school life.

It is recommended that you read and complete this policy template in conjunction with the DfE statutory guidance document ‘Supporting Pupils with Medical Conditions’ December 2015.

Any writing in black bold in this policy is statutory guidance which must be followed.

Introduction

Section 100 of The Children and Families Act 2014 places a duty on the governing body of Hordle CE VA Primary School to make arrangements for supporting children at their premise with medical conditions. The Department of Education has produced statutory guidance ‘Supporting Pupils with Medical Conditions’ and the school will have regard to this guidance when meeting this requirement.

The school will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. The aim is to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

It is our policy to ensure that all medical information will be treated confidentially by the Headteacher and staff. All administration of medicines is arranged and managed in accordance with the Supporting Pupils with Medical Needs document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Where children have a disability, the requirement of the Equality Act 2010 will apply.

Where children have an identified special need, the SEND Code of Practice will also apply.

The school recognise that medical conditions may impact social and emotional development as well as having educational implications.

Key Roles & Responsibilities

Statutory Requirement: The Governing Body should ensure that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support children at school with medical conditions.

The Governing Body is responsible for:

ensuring that the school's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils at school with medical conditions. This includes making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

The Headteacher is responsible for:

ensuring that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

Teachers and Support Staff are responsible for:

Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Local Arrangements Identifying children with health conditions

Statutory Requirement: The Governing Body will ensure that the policy sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition.

The school will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers. The School will use the 'Medical Questionnaire for Schools' to obtain the information required for each child's medical needs to ensure that the school has appropriate arrangements in place prior to the child commencing at the school to support them accordingly.

Where a formal diagnosis is awaited or is unclear, the school will plan to implement arrangements to support the child, based on the current evidence available for their condition. The school will ensure that every effort is made to involve some formal medical evidence and consultation with the parents.

Individual Healthcare Plans

Statutory Requirement: The Governing Body will ensure that the school's policy covers the role of individual healthcare plans, and who is responsible for their development in supporting children at school with medical conditions.

The school recognise that Individual Healthcare Plans are recommended in particular where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However, not all children will require one. The school, healthcare professional and parent will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

Where children require an individual healthcare plan it will be the responsibility of the Headteacher and SENCO to work with parents and relevant healthcare professionals to write the plan.

A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional involved in providing care to the child. The Headteacher and SENCO will work in partnership with the parents/carer, and a relevant healthcare professional. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the individual healthcare plan will be linked to or become part of that statement or EHC plan.

See Appendix 2 for the flowchart for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

The School will use the individual healthcare plan template produced by the DfE to record the plan.

If a child is returning following a period of hospital education or alternative provision (including home tuition), the School will work with the relevant county council and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Statutory Requirement: The Governing Body should ensure that all plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. Plans should be developed with the child's best interests in mind and ensure that the school assesses and manages the risks to the child's education, health and social well-being and minimise disruption.

The school will publish annual review dates to families and healthcare professionals or sooner should a child's condition change sufficiently to affect the contents of the IHCP.

Statutory Requirement: When deciding what information should be recorded on individual healthcare plans, the governing body should consider the following:

When deciding what information should be recorded on individual healthcare plans, the governing body should consider the following:

- 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 (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should 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 child'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 child's condition and the support required;

arrangements for written permission from parents and the headteacher 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 child can participate, e.g. risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Staff training

Statutory Requirement: The Governing Body should ensure that this policy clearly sets out how staff will be supported in carrying out their role to support children with medical conditions, and how this will be reviewed. It should specify how training needs will be assessed and by whom training will be commissioned and provided.

The school policy should be clear that any member of school staff providing support to a child with medical needs should have received suitable training.

Staff must not administer prescription medicines or undertake any health care procedures without the appropriate training (updated to reflect any individual healthcare plans).

All new staff will be inducted on the policy when they join the school if they have a responsibility for the administration of medicines. This policy is an appendix to the Health & Safety policy which is distributed to all staff annually.

In addition, all staff who have responsibility for a child with specific medical needs will be provided with awareness training on the school's policy for supporting children with medical conditions which will include what their role is in implementing the policy. This training will be carried out as required and at least annually.

Where required the school will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and have confidence in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

A 'Staff training record- administration of medicines' form will be completed to document the type of awareness training undertaken, the date of training and the competent professional providing the training. See Appendix 1

The child's role

Statutory Requirement: The Governing Body will ensure that the school's policy covers arrangements for children who are competent to manage their own health needs and medicines.

Where possible and in discussion with parents, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity).

Where possible the school will endeavour to ensure that children can carry their own medicines and relevant devices or have easy access to allow for quick self-medication. The school will agree with relevant healthcare professionals/parent the appropriate level of supervision required and document this in their healthcare plan.

Managing medicines on School Premises

Statutory Requirement: The Governing Body will ensure that the school's policy is clear about the procedures to be followed for managing medicines

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible the school will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours.

- medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- it is our policy to manage prescribed and non-prescribed medicines provided by parents, where appropriate, following consultation and agreement with , and written consent from the parents
- a child will never be given medicine containing aspirin unless prescribed by a doctor.

Medication, e.g. for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed.

- where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- schools will only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container
- all medicines will be stored safely. Children will know where their medicines are at all times and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips.
- The school will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held.
- school staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, dosage administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school.

The name of the child, dose, expiry and shelf life dates will be checked before medicines are administered.

On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.

Emergency Medicines (inhalers, epipens, Glucagan injections etc.)

Inhalers and spacers will be stored in a named zippy wallet in a box in the child's classroom. The box will go out at PE and Games lessons. An emergency inhaler and spacer will be part of the first aid box at break and lunch times. Each classroom will have a whole school asthma register.

The School will only administer non-prescribed medicines on request from the parent if they are in original packaging and only on a short term basis.

Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the Head teacher.

Emergency medicines will be stored in a safe location but not locked away to ensure they are easily accessible in the case of an emergency.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication ie. Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures (see storage section).

When a medical condition causes the child to become ill and/or requires emergency administration of medicines, then emergency services will be summoned at the earliest opportunity.

Storage

The storage of medicines is the overall responsibility of the headteacher who will ensure that arrangements are in place to store medicines safely.

The storage of medicines will be undertaken in accordance with product instructions and in the original container in which the medicine was dispensed.

It is the responsibility of all staff to ensure that the received medicine container has been clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration.

It is the responsibility of the parents to provide medicine that is in date. This should be agreed with the parents at the time of acceptance of on-site administration responsibilities.

All medication other than emergency medication will be stored safely in a locked cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premise.

Where medicines need to be refrigerated, they will be stored in a clearly labelled airtight container. There must be restricted access to a refrigerator holding medicines.

Children will be made aware of where their medicines are at all times and be able to access them immediately where appropriate. Where relevant they should know who holds the key to the storage facility.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. The school will also ensure that they are readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

Disposal

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required to the parents/carers for disposal. Parents/carers will be informed of this when the initial agreements are made to administer medicines.

Medical Accommodation

The medical room will be used for administration/treatment purposes. The room will be made available when required. For children that need medicine before their lunch, the office staff will take medicines to the children and administer them outside their classroom.

Record keeping

Statutory Requirement: The Governing Body should ensure that written records are kept of all medicines administered to children.

A record of what has been administered including how much, when and by whom, will be recorded on an 'Administration of Medicines & Treatment consent' form. The form will be kept on file. Any side effects of the medication will also be noted and reported to the parent/carers.

Emergency Procedures

Statutory Requirement: The Governing Body will ensure that the school's policy sets out what should happen in an emergency situation.

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. The school will ensure other children in the school know what to do in the event of an emergency ie. informing a teacher immediately if they are concerned about the health of another child.

Where a child is required to be taken to hospital, a member of staff will stay with the child until their parents arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc that the school holds).

The first aider will complete the 'Child Transfer to Hospital' form which will be given to the paramedics or person taking the child to hospital.

Day trips/off site activities

Statutory Requirement: The Governing Body should ensure that their arrangements are clear and unambiguous 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 ensure that teachers are aware of how a child's medical condition will impact on their participation in any off site activity or day trip, but the school will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

The school will consider what reasonable adjustments the school might make to enable children with medical needs to participate fully and safely on visits. The school will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. The school will consult with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

Other issues

Defibrillators – The school has a defibrillator on the premises by the school office.

Salbutamol Asthma inhalers for emergency use – the school has two Salbutamol Asthma inhalers for emergency use.

Unacceptable practice

Statutory Requirement: The Governing Body will ensure that the school's policy is explicit about what practice is not acceptable.

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition, eg. 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 PRESCRIBED medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips eg. by requiring parents to accompany the child.

Liability and Indemnity

Statutory Requirement: The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

Staff at the school are indemnified under the County Council self insurance arrangements.

The County Council is self insured and have extended this self insurance to indemnify school staff who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, The School will ensure that staff at the school have parents permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure.

Complaints

Statutory Requirement: The Governing Body will ensure that the school's policy sets out how complaints may be made and will be handled concerning the support provided to pupils with medical conditions.

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

This policy was reviewed by the Governing Body in the year:	2020
This policy is scheduled for review in the year:	2021

Appendix 1



Hordle C E Primary School

Policy for Supporting Pupils with Medical Needs

STAFF TRAINING RECORD

Name of person trained.....

Type of training received

.....

Date of training completed

Training provided by

Profession and title

I confirm that the named member of staff has received the training detailed above and is competent to carry out any necessary treatment.

I recommend that the training is updated [please state how often]

Trainer's signature

Date

I confirm that I have received the training detailed above.

Staff signature

Date

Suggested review date

Appendix 2: Process for developing individual healthcare plans

