

MEDICAL POLICY



EXCEEDING EXPECTATIONS

Review Date May 2021

INTRODUCTION AND GENERAL PRINCIPLES

The staff and governors of Warwick Primary School are wholly committed to pursuing a policy of inclusive education that welcomes and supports pupils with medical conditions. This policy is designed to support the management of medication and medical care in school and to support individual pupils with medical needs. The policy is drawn up in consultation with a wide range of local key stake holders within the school and health care setting and complies with DCFS guidelines for 'Managing Medicines in Schools and Early Years Settings (2004)'.

RATIONALE AND AIMS

To provide a clear policy that is understood and accepted by all staff, parents and children, providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that, for such children, attendance is as regular as possible.

DEFINITION OF A PUPIL WITH MEDICAL NEEDS

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many, this will be short-term; perhaps finishing a course of medication.

Other pupils have medical conditions that, if not properly managed, could limit their access to education. Such pupils are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. However, school staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.

An individual health care plan can help schools to identify the necessary safety measures to support pupils with medical needs and ensure that they and others are not put at risk.

The policy and procedures aim to:

- Enable regular school attendance
- Inform parents of the schools approach to taking medication during school hours
- To make clear individual responsibilities

RESPONSIBILITIES

- a. Parents/carers have prime responsibility for their child's health and should provide the school with up to date information about their child's medical conditions, treatment and/or any special care needed.

If their child has a more complex medical condition, they should work with the school nurse or other health professionals to develop an individual healthcare

plan (forms 2 and 3), which will include an agreement on the role of the school in managing any medical needs and potential emergencies.

- b. There is no legal duty which requires school staff to administer medication; this is a voluntary role. While school staff have a general professional duty to safeguard the health and safety of their pupils and to act in 'loco parentis', that is, to act as any reasonable parent would, this does not imply a duty or obligation to administer medication.
- c. The policy of this school is not to administer medication or medical care unless the pupil has a medical condition, which if not managed, could prove detrimental to their health or limit access to education. The Headteacher accepts responsibility, in principle, for school staff administering or supervising the taking of prescribed medication or medical care during the school day only where it is absolutely necessary.

Staff managing the administration of medicines and those who administer medicines receive appropriate training and support from health professionals.

- d. It is the parent/carer's responsibility to make sure that their child is well enough to attend school.

PRESCRIBED MEDICINES

- a. Prescribed medicines should only be brought to school when essential; that is, where it would be detrimental to a child's health if the medicines were not administered during the school day. ie **needs taking four times per day**. Medicines prescribed 'three times a day' should be administered 'before school, after school and at night'.
- b. The school recognises in extreme cases (as stipulated by a doctor in writing), and agreed by the Headteacher, that staff may administer medication, with a supporting letter from the doctor. Without a letter from a doctor, staff will not administer three times a day prescribed medicines. However, parents and carers are allowed into school to administer medication if they so desire.
- c. Exceptions to this are pupils on individual health care plans who have medical needs requiring emergency medication to treat specific conditions. (Forms 2 and 3 are completed).
- d. This school will only accept medicines that have been prescribed by a doctor, dentist, nurse or pharmacist prescriber and are presented in the original container dispensed by a pharmacist and include the pupil's name, prescriber's instructions for administering, expiry date and dosage. This includes inhalers and creams. All medication should be taken to the School Office and a record of medicine administered to an individual child form must be completed (form 5). This form is up dated each time a child is given a dose and is signed by the member of staff administering it. Where possible, two members of staff will be involved in the process.

- e. It is recommended that parents administer drops to children's ears and eyes due to the upsetment it can cause to the child. Staff are only willing to undertake administering these in extreme circumstances.

ADMINISTERING – PRESCRIBED MEDICINES

- a. This school recognises no child under 16 should be given medicines without their parent's written consent. Medicines should always be provided in the original container as dispensed by the pharmacist and include the prescriber's instructions. Following written consent (form 5). Staff administering medicines to a pupil should check:

- The child's name
- Name of medication
- The prescribed dose
- Expiry date
- Written instructions provided by the prescriber on the label or container.

If in doubt about the procedure, staff will not administer the medicine before checking with parents or a health professional.

- b. A written record must be kept following administration of medicines to pupils, (form 5).
- c. If a child refuses to take a medicine, staff will not force them to do so, but will record this on form 5 and parents/carers will be notified of the refusal.
- d. Inhalers are kept in classrooms in a designated container (yellow bag), and each time a pupil uses their inhaler it is recorded on the asthma register (form 6a)

ADMINISTRING - NON-PRESCRIBED MEDICINES

Staff will not give non-prescription medication to pupils. If a child at school requires non-prescription medicine, parents/carers can come into the School Reception to administer it.

Non-prescribed medicines will only be administered with prior written permission from parents in extreme circumstances such as residential trips. Staff will check the medicine has previously been administered without adverse effects.

Staff will never administer medicines containing aspirin or ibuprofen unless prescribed by a doctor.

SELF MANAGEMENT

The school supports and encourages pupils who are able to take responsibility to manage their own medicines (particularly when applying creams).

If pupils are competent to manage their medicines themselves, staff only need to supervise. After discussions with parents and children a request for the child to carry his/her own medicine or administer his/her own consent form (form 7) is completed. If the pupil has been described controlled drugs they will be kept in the School Office, however, if agreed that it is appropriate, pupils can access them for self-medication and staff will help younger children to apply cream.

HEALTH CARE PLANS/LONG-TERM MEDICAL NEEDS

The school uses a healthcare plan to record important details about individual children's long-term medical needs at school, their triggers, signs, symptoms, medication and other treatments (form 2). Further documentation can be attached to the healthcare plan if required.

The plan will be drawn up by health care professionals in consultation with the child's parents or guardians and Headteacher or identified trained member of school staff.

The plan contain the following information:

- Definition and details of the condition
- Special requirements e.g. dietary needs, pre-activity precautions
- Treatment and medication
- What action to take/not to take in an emergency
- Who to contact in an emergency
- Staff training where required
- The role the staff can play
- Consent and agreement

It is necessary to have an individual health care plan for all pupils suffering from asthma, a separate asthma care plan form is completed and the information is kept in the asthma register (see form 4).

STORING MEDICINES

- a. Staff will only store, supervise and administer medicine that has been prescribed for an individual child. Medicines are stored safely in the pharmacist's original container and clearly labelled with the child's name, the dosage and instructions for administering.
- b. Non-emergency prescribed medication is stored in accordance with instructions, particularly temperature, any requiring refrigeration are stored in the staffroom or nursery fridge otherwise they are kept in the School Office.
- c. Emergency medications such as epi-pens and asthma inhalers are readily available in designated containers in the classroom. Inhalers are stored in yellow PE bags which are hung clearly in the classroom so children are aware of where their medicines are stored at all times. The School Office have spare inhalers which can be used in an emergency, however these are only for pupils who have been diagnosed as asthmatic by their carers and parents.

- d. Parents are ultimately responsible for checking expiry dates on their children's medicines and replacing as necessary, school will check them periodically. Inhalers are returned to pupils at the end of Year 6.

DISPOSAL OF MEDICINES

- a. Parents have a responsibility to collect out-of-date medication.
- b. If pupils use needles to self medicate, parents should obtain sharps boxes from the child's GP or paediatrician on prescription. All sharps boxes at the school are stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis and are returned to the parent for safe disposal.

RESIDENTIALS/EDUCATIONAL VISITS

- a. This school actively encourages children with medical needs to participate in trips and visits. Staff will aim to facilitate reasonable adjustments to enable pupils with medical needs to participate fully and safely on visits. Risk assessments will be used to highlight any potential difficulties and ensure procedures are in place to support pupils. Additional staff/adults will be considered for this purpose. Under the Disability Discrimination Act (DDA) if, after reasonable adjustments have been planned, the risk assessment indicates there is an unacceptable risk to the health and safety of the individual or the group then this fact overrides the DDA.
- b. Prior to any residential trips, parents are sent a medical form which is completed and returned to the school. This form requests details about the child's overall health and includes information about medication not normally administered by the school. Parents are invited to provide written consent to enable staff to act 'in loco parentis' and administer Calpol analgesia if required. Copies of the medical forms may be taken on all visits, as well as emergency medication.
- c. A check is made to ensure children with asthma have their inhalers with them before a trip leaves the school.
- d. A record of any medication administered to a child during a residential is kept. (form 6)

STAFF TRAINING

The school identifies training requirements and maintains training records. All staff who volunteer or who are contracted to administer medication are provided with training. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions

- a. Training is refreshed for all staff at regular intervals. In addition more specific training is provided to staff where they are required to meet the specific needs of a child eg using an Epi-pen or responding to a child who is having an epileptic fit.

- b. Warwick School have appointed first aiders and paediatric first aiders. Training is reviewed regularly and updated every three years.
- c. The school keeps an up-to-date list of members of staff who have agreed to administer medication and have received the relevant training (see form 8).

EMERGENCY PROCEDURES

- a. All staff are aware of procedures when dealing with a medical emergency. When possible they will be supervised by a trained first aider.
- b. All staff are aware of pupils on health care plans and understand the need to follow agreed emergency support.
- c. If a child needs to be taken to hospital, every effort will be made to contact a parent so that they may accompany their child. If this is not possible, a member of staff will accompany the child to hospital by ambulance and stay until the parent arrives. Health care professionals are responsible for any decisions on medical treatment when parents are not available.
- d. Staff will not take pupils to hospital in their own cars. However, in a non-emergency, if an ambulance is not available and the school is unable to contact the parent, two members of staff will accompany a child to hospital and the above procedure will be followed.

RECORD KEEPING

The school has clear guidance about record keeping.

- Prior to a child being admitted to the school, parents are asked if their child has any health conditions, allergies or health issues on the enrolment form.
- Annually, an update form is sent out to parents, this is an opportunity for parent's to make the school aware of any short or long term medical conditions.
- If medical conditions arise at other times in the school year, it is the parent's responsibility to inform the school, so records can be updated.
- Updated medical conditions and reviews of policies and practice are monitored and disseminated by the School Business Manager to the relevant staff.
- Children with severe food allergies or require their own diet have their own individual health care plan, which is supported with medical evidence from the child's GP. Photographs and details are displayed in the catering manager's office and classroom to ensure that food products are safe for children. This must be done prior to the child having school meals. Annually this is reviewed by the School Business Manager. Kirklees Council have a separate policy on this.

Signed by Headteacher:

Date 14 May 2018



Signed by the Chair of Governors:

Date 14 May 2018



