

The Governing adopted this po			of	England	(Aided)	Primary	School
Signed:	 	 		(Chair	of Govern	nors)	
Signed:	 			(Head	Teacher)	Review e	very 2 years

St Peter's CoE Primary School endeavours to ensure that all its pupils achieve success in their academic work, social relationships and day-to-day experiences at school. It is an inclusive community that aims to support and welcome pupils with medical conditions.

All children will experience illness in the course of their school careers, most commonly transient self-limiting infections, but some will have more chronic or longer-term medical needs that will require additional support at school to ensure they have full access to the curriculum and to minimise the impact of their medical conditions.

Staff working with pupils who have specific medical needs should understand the nature of children's medical problems and will endeavour to work with the family and other professionals to best support the individuals concerned.

#### **General medical information**

New parents at St Peter's are asked to declare whether their child has any health conditions or health issues on the pupil enrolment form. From this information, parents are given a School Asthma Card, if relevant (Appendix A), to complete with their Doctor. The Kitchen Manager is advised of any allergy or dietary requirements. Letters are issued to request the development of an Individual Healthcare Plan for any child with a serious medical condition, such as asthma, diabetes, epilepsy etc where appropriate (Appendix B & C).

Medical needs and conditions are recorded on the pupil BromCom database and the office produce medical notes that are given to the chief First Aider, the Midday Manager and a record is displayed in the First Aid Room, with class specific medical notes kept within the class registers so the class Teachers are aware. For more extreme medical issues, details with photographs are on display in the staff room and the First Aid Room.

Records are updated annually with the checking/updating of a Data Collection Sheet for each child by the parents.

#### **Managing medicines**

On occasion, children may need to take medicines whilst in school. Some children are on long term regular medication for chronic conditions or may need to take emergency/as needed medication to treat a change in their underlying condition.

There are cases where the responsibility for administering medicine can and should rest with the child. Where parents request the school to exercise a degree of supervision or to administer the medicine, the situation is more complicated. In such cases, staff should consult the Head Teacher and any practical and organisational implications need to be addressed prior to assuming responsibility for this.

#### **General Principles**

The administration of medicine is the responsibility of parents and carers. There is no absolute requirement on teachers or support staff to administer medicines. However, where they volunteer to do so, guidelines are helpful.

#### **Short-term illness**

- Children who are suffering from short-term ailments and who are clearly unwell should not be in school and Head Teachers are within their rights to ask parents/carers to keep them at home.
- Some parents may send children to school with non-prescribed medicines (e.g. cough mixture

   the Medicine and Healthcare Products Regulatory Authority warned against their use in the
   under 6s in 2009, see http://www.npc.nhs.uk/rapidreview/?p=311). Many of these are not
   effective treatments, but can cause potential harm and as a general rule, we discourage this
   practice.
- There are recommended times away from school to limit the spread of infectious disease.
   Please see HPA guidelines for this
   (http://www.hpa.org.uk/webc/HPAwebFile/HPAweb\_C/1274087715902)
- Note, children who have had sickness and/or diarrhoea should be kept off school until 48 hours symptom-free.

#### Chronic illness/disability

It may be necessary for children with long term conditions to take prescribed medicines during school hours.

Many health advisers encourage children to take control of their medical condition, including taking responsibility for managing their medical care (with help,) from very young. This can include self-administration of medicines eg. using an inhaler or giving own insulin injections. We support this practice wherever appropriate.

Where young children or those with special needs require medication, adult support will be needed. Whilst responsibility for the medical care of children rests with parents and their health professionals, it may not be feasible for these individuals to come to school to administer medicines, and such repeated attendances could slow the personal development of a child. In such cases, the school will endeavour to follow best practice (see below) to enable your child to stay in school.

#### **Acute illness**

The teaching profession has a general duty of care towards children in schools. Legally this duty cannot require teachers to administer medicines, but it is expected that teachers react promptly and reasonably if a child is taken suddenly ill. In these cases, clear procedures must be followed, particularly in life threatening situations.

#### **Good practice**

#### **Documentation:**

Where parents request that medicines are to be administered at school, it is important that a Request for Administration of Medicines be completed (Appendix D) and that all medication have the pharmacists label with the pupil's name, date of birth, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.

For more serious or chronic conditions, including allergies that require the potential use of an epipen, we require an Allergy: Emergency Action Plan from a child's doctor stating exactly what needs to be given and when. This is usually requested via the school nurse service.

**Training:** Teachers and support staff should receive appropriate training in the use of epipens.

#### Giving regular medicines:

- We encourage parents whose child is taking medication three times a day, to give it before school, after school and at bedtime. If a doctor has specified that one of the doses should be given at lunchtime and the parent/carer is unable to administer the dose, follow standard practice (see below).
- If medicine has to be taken four times a day and a lunchtime dose is necessary, the standard practice (see below) is followed.

#### **Standard Practice**

- 1. Ask the Parent/Carer to complete a Request for Administration of Medicines form. (Appendix D)
- 2. Refer to this form prior to giving the medicine.
- 3. Check the child's name on the form and the medicine.
- 4. Check the prescribed dose.
- 5. Check the expiry date.
- 6. Check the prescribed frequency of the medicine.
- 7. Measure out the prescribed dose (parents should provide measuring spoons/syringes). If the child is old enough, they can measure the medicine.
- 8. Check the child's name again and administer the medicine.
- 9. Complete and sign on the reverse of the Request for Administration of Medicine form when the child has taken the medicine and the child should counter-sign.
- 10. If uncertain, DO NOT give check first with parents or doctor.
- 11. If a child refuses medication, record and inform parents as soon as possible.

#### School supplied medicine

Whilst it is the parent/carer's responsibility to supply medicine for their child, in some circumstances, it may be appropriate for the school to administer medicine. We try to keep children in school wherever possible, so where a child has a minor ache or pain that could be treated with paediatric paracetamol (eg Calpol) or ibuprofen (eg Nurofen), the parent will be contacted and permission sought. Only where parental permission is given will the child be given the medicine. Details of consent and the dose given should be recorded on the Record of Medicine Administered form (Appendix F)

#### Medicine storage

Medicines are kept in a locked cupboard within the School Office apart from epipens which are kept on a high shelve within easy reach by adults.

All medicines should be kept in the container supplied which should be clearly labelled with the child's name, another identifier (such as date of birth) and instruction for usage.

All children with medical conditions should have easy access to their emergency medication. In the case of inhalers for asthma and epipens for allergies, the child keeps these on their person, but parents are strongly encouraged to supply a second supply to be kept in the School Office.

Some medicines (eg liquid antibiotics, insulin) require refrigeration – but must not be frozen. These should be kept in suitable additional and airtight containers (eg Tupperware boxes) and marked 'Pupil Medicines'.

#### Medicine disposal

Parents are asked to collect out-of-date medication. If this does not occur, medication should be taken to a pharmacy for disposal.

The School Secretary is responsible for checking dates of medication and arranging disposal if any have expired. This check should occur three times a year and be documented on the Disposal of Out of Date Medication form (Appendix E) which is kept in the rear of the medical consent forms folder.

#### **General medical issues**

#### **Record keeping**

- Enrolment forms should highlight any health condition
- Individual Healthcare Plans for children with medical conditions giving details of individual children's medical needs at school. These needed to be updated after a medical emergency or if there is a change in treatment etc. and should be reviewed at least annually. They should be kept in a secure location but specified members of staff (agreed by parents) should have access to copies. All staff must protect a pupil's confidentiality.
- Centralised register of children with medical needs
- Request to administer medicines at school
- Log of training relevant to medical conditions

#### Medi-alerts (bracelets/necklaces alerting others to a medical condition)

As with normal jewellery, these items are a potential source of injury in games or some practical activities and should be temporarily removed or covered with sweatbands for these sessions.

#### **Impaired mobility**

Providing the GP or hospital consultant has given approval, children can attend school with plaster casts or crutches. There will be obvious restrictions on games and on some practical work to protect the child (or others). This includes outside play. Some relaxation of normal routine in relation to times of attendance or movement around the school may need to be made in the interests of safety.

#### **Off-Site visits**

Take a First Aid kit whenever children are taken off-site. Buckets and towels, in case of sickness on a journey, are also sensible precautions.

All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They should receive information about the type of condition, what to do in an emergency and any other additional medication or equipment necessary.

#### **Employee's medicines**

Staff and other employees may need to bring their own medicine into school. They have clear personal responsibility to ensure that their medication is not accessible to children.

#### Staff protection

"Universal precautions" and common sense hygiene precautions will minimise the risk of infection when contact with blood or other bodily fluids is unavoidable.

- Always wear gloves.
- Wash your hands before and after administering first aid and medicines
- Use the hand gel provided.

#### **APPENDIX A**

**APPENDIX B** 

**Dear Parent** 

#### DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Appendix C



## St Peter's Church of England Primary School Individual Healthcare Plan

Child's name	
Class	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	

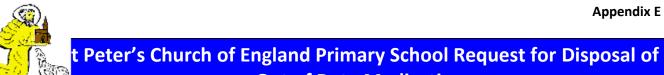
Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc.
Other information
Describe what constitutes an emergency, and the action to take if this occurs
Who is responsible in an emergency (state if different for off-site activities)
Plan developed with
Staff training needed/undertaken – who, what, when
Form copied to



# St Peter's Church of England Primary School Medicine Consent Form

Child's name and class					
Child's date of birth					
My child has been diagnosed as having (condition)					
He/she is considered fit for school but requires thours	the following medicine to be giver	during school			
Name of medicine					
Dose required					
Time/s of dose					
With effect from [start date]					
Until [end date]					
The medicine should be taken by (mouth, nose, appropriate)	in the ear, other: please provide d	etails as			
I consent/do not consent for my child to take the request/do not request that you arrange for the indicated. (Please delete as appropriate)	• •	•			
I consent/do not consent for my child to carry he request/do not request the school to store it on need to be kept in a fridge. (Please delete as app	his/her behalf. This medicine do	•			
By signing this form I confirm the following stat	tements:				
That my child has taken this medicine or at not suffered any adverse reactions.	least two doses of this medicine b	efore and has			
That I will update the school with any change in medication routine use or dosage					
That I undertake to maintain an in date sup	ply of the medication				
<ul> <li>That I understand the school cannot undert medication carried by my child and that the damage to any medication</li> </ul>					
<ul> <li>That I understand the school will keep a rec informed that this has happened.</li> </ul>	ord of medicine given and will kee	ep me			
<ul> <li>That I understand staff will be acting in the medication.</li> </ul>	best interests of my child whilst a	dministering			
Signed					
Name (please print)					
Contact details					
Date					
Staff member signature					
Name (please print)					

Date	Time given	Dose given	Child Signature	Name of Staff	Staff Initials
		1			



#### **Appendix E**

## **Out of Date Medication**

Date	Medication being disposed of	Childs Name (if applicable)	Name of Staff	Staff Initials



### St Peter's Church of England Primary School Record of Medicine Administered

Date	Child's Name	<b>Consent Given by</b>	Time	Name of Medicine	Dose Given	Any reactions?	Staff Signature	Print Name