



St Peter's Church of England Primary School Medical Conditions Policy

The Governing Body of St Peter's Church of England Primary School adopted this policy on 17th December 2024

Signed: _____ (*Chair of Governors*)

Signed: _____ (*Head Teacher*)

Review every 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 database – BromCom - and the office produce medical notes that are given to the designated First Aider, the Midday Manager and a record is displayed in the First Aid Room. Class specific medical notes are kept within the class registers so the class Teachers are aware. For more extreme medical issues, details with photographs are on display in 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) We discourage this practice, but as products for children from 6 – 12 years are available in pharmacies where advice can be given, we may still see this.
- There are recommended times away from school to limit the spread of infectious disease. Please see UKHSA guidelines for this ([UKHSA issues health advice following the half-term break - GOV.UK](#))
- 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 pharmacist's 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 (e.g. Calpol) or ibuprofen (e.g. 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 shelf 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 (termly) 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. A Risk Assessment will be undertaken before a child with impaired mobility returns to school.

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 commonsense 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 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 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



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

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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 <i>(condition)</i>	
He/she is considered fit for school but requires the following medicine to be given during school hours	
Name of medicine	
Dose required	
Time/s of dose	
With effect from [start date]	
Until [end date]	
The medicine should be taken by <i>(mouth, nose, in the ear, other: please provide details as appropriate)</i>	
I consent/do not consent for my child to take the medicine by him/herself and therefore kindly request/do not request that you arrange for the administration of the above medicine as indicated. <i>(Please delete as appropriate)</i>	
I consent/do not consent for my child to carry his/her own medicine and therefore kindly request/do not request the school to store it on his/her behalf. This medicine does/does not need to be kept in a fridge. <i>(Please delete as appropriate)</i>	
By signing this form I confirm the following statements:	
<ul style="list-style-type: none"> • That my child has taken this medicine or at least two doses of this medicine before and has not suffered any adverse reactions. 	
<ul style="list-style-type: none"> • That I will update the school with any change in medication routine use or dosage 	
<ul style="list-style-type: none"> • That I undertake to maintain an in date supply of the medication 	
<ul style="list-style-type: none"> • That I understand the school cannot undertake to monitor the use of self-administered medication carried by my child and that the school is not responsible for any loss of/or damage to any medication 	
<ul style="list-style-type: none"> • That I understand the school will keep a record of medicine given and will keep me informed that this has happened. 	
<ul style="list-style-type: none"> • That I understand staff will be acting in the best interests of my child whilst administering medication. 	
Signed	
Name (please print)	
Contact details	
Date	
Staff member signature	
Name (please print)	
Date	



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

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