



*Connect,
Learn & Grow*

FRINTON-ON-SEA PRIMARY SCHOOL

SUPPORTING CHILDREN WITH MEDICAL NEEDS Including Managing Medicines in School & Early Years Settings

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**Executive
Head Teacher:** Mrs T. Caffull

Chair of Governors: Mrs S. Young

**Date Reviewed & Adopted
& Approved by Governors:** Spring 2020

Date for Review: Spring 2021

Please note we are a NUT FREE SCHOOL – this includes all nuts, Peanut Butter, Nutella and any other foods that contain nuts

Frinton-on-Sea Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full-time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance released in 2015 – "Supporting pupils at school with medical conditions".

Statement of Intent

Frinton on Sea Primary School is committed to:

- Have in place effective management systems to help support individual children with medical needs and to ensure that Health Care Plans are effectively delivered.
- Make sure that within school medicines are handled responsibly.
- Help ensure that all school staff are clear about what to do in the event of a medical emergency.

Organisation and Arrangements

Tracey Caffull (Executive Head Teacher) is responsible for ensuring that this policy is developed effectively and that class teachers and all employees are aware of the requirements of this policy, including identifying staff that need to be aware of child's medical conditions.

Staff are responsible for:

1. Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help. *A first-aid certificate is not sufficient.*
2. Knowing where controlled drugs are stored and where the key is held.
3. Taking into account the needs of pupils with medical conditions in lessons.
4. Undertaking training to achieve the necessary competency for supporting pupils with medical conditions.
5. Allowing inhalers and adrenalin pens to be held in an accessible location, following DfE guidance.
6. Ensuring confidentiality and data protection

Parents and carers are responsible for:

1. Keeping the school informed about any new medical condition or changes to their child/children's health.
2. Participation in the development and regular reviews of their child's HCP.
3. Completing a parental consent form to administer medicine before bringing medication into school.
4. Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
5. Carrying out actions assigned to them in the HCP with emphasis on, they or a nominated adult, being contactable at all times.

Training of staff

1. Newly appointed teachers, supply, agency and support staff will receive training on this policy as part of their induction.

Health Care Plans

1. Where necessary a Health Care Plan (HCP) will be developed in collaboration with the pupil, parents/carers, Executive Headteacher or Special Education Needs Co-ordinator (SENCO) and medical professionals.
2. An HCP will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality.
3. HCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.

Managing prescription medicines, which need to be taken during the school day

1. Medicines should only be taken to school when essential: that is where it would be detrimental to a child's health if the medicine were not administered during the school day, e.g. where the dosage number/level dictates that administration is necessary within school hours – 4 or more times a day or a certain number of hours between each dose.
2. It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies. Parents are to be encouraged to ask the Prescriber about this.
3. School should only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist,
4. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration and the child's name. **School should never accept medicines that have been taken out of the container as originally dispensed and should not make changes to dosages on parental instructions.**

Managing prescription medicines on trips and outings

1. A review and assessment of Health Care Plans for any children with medical needs shall be undertaken prior to any planned trip or outing. It is the responsibility of the trip/outing organiser to consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This might include reviewing and revising the visits policy and undertaking a risk assessment for such children. It may be necessary for an additional supervisor or a parent to accompany a particular child. Arrangements for taking any necessary medicines will also be taken into consideration.
2. Staff supervising excursions should always be aware of any medical needs and relevant emergency procedures.
3. A copy of any health care plans should be taken on visits in the event of the information being needed in an emergency.

Roles and responsibilities of staff managing administration of prescription medicines

1. **Confidentiality** – The Executive Headteacher and staff will always treat medical information confidentially. The Executive Headteacher will agree with the parent/carer who else should have access to records and other information about a child. **If information is withheld from staff, they should not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.**
2. **Parent/Carers consent** - No child should be given medicines without their parent/carers written consent.

3. **Administering medicines – Only the office and nominated staff should administer medicines.** If in doubt about any procedure staff should not administer the medicines and check with parents or a senior member of staff before taking action.
4. **Gloves** - Staff will have access to protective disposable gloves and take care when dealing with spillages of blood or other bodily fluids and disposing of dressings or equipment.
5. **Record keeping** - Written records must be kept each time any medicines are administered to children. This includes the usage of all types of asthma inhalers.
Parents should tell the school about the medicines that their child needs to take and provide details of any support required. *See points 7 – 10 below for the appropriate forms.*
6. **Medicines** - should always be provided in the original container as dispensed by a pharmacist and include the Prescriber's instructions. In all cases it is necessary to check that written details include:
 - i. Name of child
 - ii. Name of medicine
 - iii. Dose
 - iv. Method of administration
 - v. Time/frequency of administration
 - vi. Any side effects
 - vii. Expiry date
7. **Children Refusing to take their medicine** - If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and follow agreed procedures – refer to individual child's health care plan where applicable. Parents should be informed.
8. **Forms** – The following forms are to be used appropriately to comply with the School's Medicines Policy. Compliance is essential, as procedures need to be followed by staff and parents, and records need to be held by the School as part of the School's insurance requirements.
 1. **Health and Care Plan** – A Health Care Plan form is to be completed for any child diagnosed with a medical condition that the School needs to be aware of and/or is required to administer long term medication.
 2. **Request for school to administer medication** – This form should be given to parents to record detail of medicines to be administered. Nominated staff should check that any details provided by parents.
 3. **Executive Headteacher consent** - All requests from parent, for staff to administer medication to children, need to first be approved by the Executive Headteacher or Head of School.
 4. **Record of medicine administered to an individual child** – A written record of all medicines administered to children. The record sheet requires 2 members of staff to confirm that the correct medicine has been given.
 5. **Sporting Activities** – Most children with medical conditions can participate in physical activities and extra-curricular sport. There should be sufficient flexibility for all children to follow in ways appropriate to their own abilities. Any restrictions on a child's ability to participate in PE should be recorded in their individual HCP. All adults should be aware of issues of privacy and dignity for children with particular needs. It is important that a copy of HCPs should be available to relevant staff with regard to sporting activities, P.E etc. Some children may need to take precautionary measures before or during exercise and may also need to be allowed immediate access to their medicines such as asthma inhalers. Staff supervising sporting activities should consider whether risk assessments are necessary for some children, be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

6. **Supply Staff** – Will have necessary information available to them as part of their school/classroom induction paperwork.

Emergency procedures

1. The School's Health, Safety and Wellbeing policy provides details of procedures to follow in the case of an emergency.
2. Other children should know what to do in the event of an emergency, such as tell another member of staff/adult.
3. In the absence of the parent/carer, a member of staff should always accompany a child taken to hospital by ambulance and should stay until the parent arrives.
4. Staff should NEVER take children to hospital in their own car: an ambulance should always be called.
5. Individual HCPs should include instructions as to how to manage a child in an emergency, and identify who has the responsibility in an emergency, for example, if there is an incident in the playground, a lunchtime supervisor needs to be very clear of their role.

Non-prescription medicines

1. There are **NO** circumstances under which the School will administer or supervise the taking of non-prescription medicines. ALL medication for School's pupils must have been prescribed and dispensed by pupils' doctors and trained medical professionals.
2. Children must NOT bring medication to school unless an agreement has been signed by parents and School (e.g. 'Soothers', cough sweets, cold sore cream, emollient creams etc. are NOT permitted).

Policy on children caring for medicines themselves

1. It is the policy of this school that ALL medicines (including adrenaline pens) requiring administration during school time will only be held at the main school office, after completion of the necessary paperwork. NO other medication will be held by a child for self-administration with the exception of asthma which are held in the classroom.
2. Children who are able to use their inhalers themselves (as agreed by the Executive Headteacher), should be allowed to have them to hand at all times. These are kept securely in a labelled box in a cupboard within all classrooms.
3. If the child is too young or unable to take personal responsibility for their inhaler, staff will make sure that it is stored in a safe but readily accessible place, and clearly marked with the child's name.
4. Inhalers will always be available during physical education, sports activities, swimming and educational visits. The class teachers are responsible for the inhalers/adrenaline pens being made available prior to such activities/events.
5. An asthma record sheet must be completed when a child has used their inhaler. One copy to be sent home with the child and one retained in the classroom asthma box.

Staff training in dealing with medical needs

1. The School is responsible for making sure that the relevant staff have appropriate training to support children with medical needs.
2. The School is responsible for making sure that there are appropriate systems in place for sharing information about children's medical needs. Information such as Health Care Plans and Allergy Notices must be kept up to date at all times.
3. If School staff are in any doubt, the school nurse is available to help draw up any individual HCP.

4. A health care professional should provide written confirmation of proficiency in medical procedures adopted by the School.

Safe storage of medicines

1. Staff should only store, supervise and administer medicine that has been prescribed for an individual child.
2. Medicines can only be accepted in the original container in which dispensed.
3. Medicines are to be stored strictly in accordance with product instructions (paying particular note to temperature).
4. Staff must ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration.
5. All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and should not be locked away.
6. All medicines should be either stored in the lockable first aid cabinet in the school office or if they need to be refrigerated must be kept in the school office refrigerator.

Disposal of medicines

1. Staff should NOT dispose of any medicines.
2. Parents are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal.
3. Parents are to collect prescribed medicines at the end of each day, where they will sign to acknowledge that they have collected them.