



## **Stoneydelph Primary School Medical Conditions Policy**

### **Supporting Pupils with Special Medical Needs**

#### **Definition**

Pupils' medical needs may be broadly summarised as being of two types:

- (a) Short-term affecting their participation in school activities which they are on a course of medication.
- (b) Long-term potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

#### **Rationale**

LAs and schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information. The school takes advice and guidance from the Staffordshire County Council Medicines in Schools policy which encourages self- administration of medication when possible.

This policy should read in conjunction with the following school policies:

- SEND School Information Report
- Safeguarding Policy
- Administration of Medication Policy
- Asthma Policy

## **Aims**

The school aims to:

- assist parents in providing medical care for their children;
- educate staff and children in respect of special medical needs;
- adopt and implement the LA policy of Medication in Schools and follow guidance in the DfE Statutory Guidance 2014;
- arrange training for staff to support individual pupils;
- liaise as necessary with medical services in support of the individual pupil;
- monitor and keep appropriate records;
- promotes positive practice which enables pupils to access a full education if possible.

## **Entitlement**

The school accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils. The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

## **Role of the Head teacher**

To ensure that:

- staff are suitably trained to administer medication or write health care plans
- all relevant staff are made aware of the child's condition.
- oversee appropriate risk assessments for school visits, residential, and other school activities outside of the normal timetable
- ensure that the appropriate levels of insurances are in place to cover staff providing support to pupils with medical conditions.
- monitor pupil's Individual Healthcare Plans (appendix 1), ensuring reviews take place at least annually or sooner if a child's medical needs change
- ensure no children carry medicines in their bags or self-administer without identified staff support.
- seek advice on the administration of medication when on trips and outing from the Head Teacher or identified staff.
- take care plans and medication for identified pupils on trips and outings and to include this as part of their risk assessment.
- know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

## **Role of Designated Staff**

Designated staff should:

- Receive sufficient and suitable training and achieve the necessary level of competency to enable them to take on responsibility of administering medication
- Be authorised to administer medication by the Head Teacher.
- Have access to the parental consent paperwork.
- Have full knowledge of the Medication Policy and Guidance and any local arrangements or procedures.
- Have basic knowledge of medication and its use before assisting or administering.
- Understand the safe procedures for handling medications and understand their responsibilities in the administration of medication.
- Ensure knowledge of emergency procedures in the event of an incident i.e. overdose, administration of wrong medication etc.
- Be aware of needs of children/young people with disabilities, and the effects of such factors as sight, hearing or physical dexterity in relation to medication.
- Have a good understanding of their role and responsibilities in relation to the safe storage, administration, and disposal etc of medication.

## **Role of the Governing Bodies**

- Make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented.
- Ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life.
- Ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- Ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.
- Ensure that no unacceptable practice take place including practice which:
  - prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
  - assumes that every child with the same condition requires the same treatment;
  - ignores the views of the child or their parents; or ignores medical evidence or opinion, (although this may be challenged);
  - sends 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;
  - penalises children for their attendance record if their absences are related to their medical condition eg hospital appointments;
  - prevents pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;

- requires parents, or otherwise make them feel obliged, to attend school to administer 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
- prevents 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.

### **Role of Parents**

- Provide the school with sufficient and up-to-date information about their child's medical needs
- be involved in the development and review of their child's Individual Healthcare Plan
- Carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times.
- To complete the school Administration of Medication Parental Agreement form (appendix 2) to give written permission for the administration of medicines in all cases, including prescription and non-prescription medicines.
- To check expiry dates on medicines and reliever inhalers and to provide additional medication when required.
- To support the school in assisting individuals with long-term or complex medical needs.
- Where parents have asked the school to administer the medication for their child the prescription and dosage regime should be typed or printed clearly on the outside. The name of the pharmacist should be visible. Any medications not presented properly will not be accepted by school staff. Pupils should not bring in their own medicine. This should be brought into school by the parent.

Parents will be encouraged to co-operate in training children to self-administer medication if this is feasible and that members of staff will only be asked to be involved if there is no alternative.

### **Receipt and handling of Medicines by the school**

Medicines must be provided in the original container as originally dispensed by the pharmacist. This should be clearly marked with the child's name, date of dispensing and the name of medication, and include the prescriber's instructions for administration. The label on the container supplied by the pharmacist should not be altered under any circumstances. All medicines brought into school to be administered must be recorded. Medicines should be administered directly from the dispensed container. However, medication can be placed in a small pot after removing it from the dispensed container as a way of hygienically handing it to the child if necessary.

### **Pupils Refusing Medicines**

If a child refuses to take medicine, staff must not force them to do so, but should note this in the records and follow agreed procedures. Parents should be informed of the refusal as soon as practicable and the refusal should be recorded on the Administration of Medication Parental Agreement Form. If a refusal to take medicines results in an emergency, the school's emergency procedures should be followed.

### **Storage of medication**

All medication must be stored in the original container issued by the Pharmacist and must be stored away from public areas, sources of heat, moisture or direct sunlight, as these elements can cause the medicines to deteriorate.

Storage by refrigeration in our school where low quantities of medicines are administered, medicines are stored in the domestic fridge located in the staff room, within the cookery room or in the First Aid room in the Key Stage building.

### **Emergency Provision of Care**

As part of our general risk management processes we have arrangements in place for dealing with emergency situations. All staff know who is responsible for carrying out emergency procedures. In the first instance this is the Head Teacher.

Individual healthcare plans include instructions as to how to manage a child in an emergency, and identify the role and responsibilities of staff during the emergency. Staff and other children know what to do in the event of an emergency, and all staff know how to call the emergency services. A member of staff always accompanies a child taken to hospital by ambulance, and stays until the parent arrives. Staff do not take children to hospital in their own car unless accompanied by another member of staff and only then in extreme emergencies.

### **Disposal of Medicines**

We will not dispose of any medication, except in the case of spoiled doses. Any unused medication will be returned to the parent/carer. Any other arrangements are formally recorded and agreed by all parties.

### **Management of Errors/Incidents in Administration of Medicines**

In the event that medication has been administered incorrectly or the procedures have not been correctly followed, then the following procedure will be implemented: -

- Ensure the safety of the child. Normal first aid procedures must be followed which will include checking pulse and respiration.
- Telephone for an ambulance if the child's condition is a cause for concern.

- Notify the Head Teacher/Person in Charge.
- Contact the child's Parents/Carers as soon as practicable.
- Contact the child's GP/Pharmacist for advice if necessary. (Out of hours contact NHS Direct).
- Document any immediate adverse reactions and record the incident in the child's file.
- Head Teacher to complete the Medication Incident Report Form HSF 36 (appendix 2) and, if injury results, the County Council Accident Investigation Report HSF40 (appendix 3.)
- Head Teacher to commence an immediate investigation about the incident, inform the Strategic Health and Safety Team, and, where applicable inform any relevant regulatory body. Statements should be taken from staff.
- The medication administration record sheet will reflect the error.
- Child's parent/carer/guardian will be informed formally in writing.

### **Confidentiality**

The Head Teacher and staff always treat medical information confidentially. Staff 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 will not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

### **Health and Safety Issues**

Staff make every effort to avoid direct contact with medicines. Where this is unavoidable staff will contact the dispensing pharmacist for advice, e.g. when staff have to apply steroid creams directly to a child, non-latex gloves must be used. Infection control principles are followed by staff administering medication and staff are familiar with effective hand washing principles.

### **Medicines for a staff members own use**

If a member of staff needs to bring medicine into school for their own use they have a responsibility to ensure that these medicines are kept securely and that children cannot have access to them, e.g. locked desk drawer or staff room. Any staff medicine is the responsibility of the individual concerned and not the school.

### **Complaints**

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint in writing to the Chair of Governors via the school address.