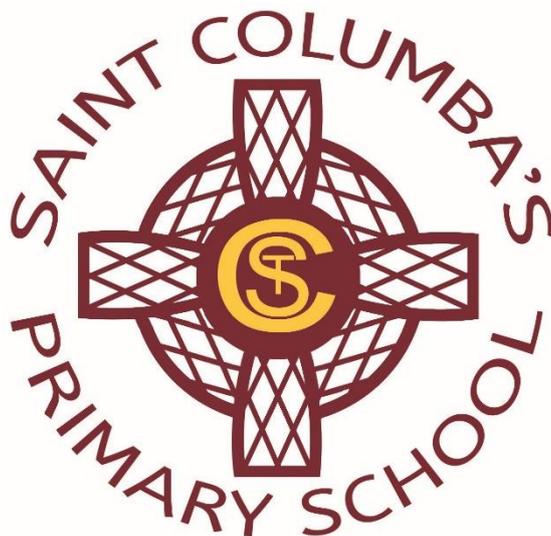


St. Columba's Roman Catholic Primary School



Medical Policy

Head Teacher: Mrs. C. Jordan

ORIGIN: Guidance Document North Tyneside Education HR Advisory Team

This Policy was ratified by St. Columba's Governing Body in **May 2018**

Signed by the Head Teacher: *Mrs C. Jordan*

Signed by the Chair of Governors: *Mr. P. Dinsley*

Date of next review:

This policy will be reviewed in **May 2020** or sooner if deemed necessary. All staff and governors will be consulted as to its effectiveness as part of the review process.

Requests for copies - If a signed paper copy of this policy is requested, the school office will provide this free of charge.

St. Columba's Catholic 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 December 2015 – "Supporting pupils at school with medical conditions" under a statutory duty form section 100 of the Children and Families Act 2014. The statutory duty came into force on 1st September 2014. The policy has also been developed in conjunction with guidance documentation from North Tyneside Council's HR department – 'Guidance on Managing Medicines in Schools'.

The school will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all efforts to comply. Ofsted places a clear emphasis on meeting the needs of pupils with SEN and Disabilities, also including those pupils with medical conditions.

Parents or guardians have prime responsibility for their children's health and should give schools sufficient information about their children's medical condition and treatment or special care needed at school.

There is no legal duty which requires staff to administer medication; this is a voluntary role. Staff who assist with any form of medication, in accordance with the procedures detailed within this policy, are explicitly reassured that they will be acting within the scope of their employment and that they will be indemnified. Indemnity requires that the procedures are followed as described here.

Unless children are acutely ill they should attend school. To facilitate this it may be necessary for them to take medication during school hours; however this should only be when essential. Where clinically appropriate medicines can be prescribed in dose frequencies, which enable it to be taken outside of school hours. Parents should be encouraged to ask the prescriber about this. It is noted that medicines that need to be taken three times a day could be taken in the morning, after school and at bedtime.

Written agreement from parents/guardian is required prior to administering any medication.

Written confirmation of instructions from a health practitioner is required prior to administering prescribed medication.

Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent and/or carer

The school will have a system of record keeping. Records of all administration and disposal of medications must be kept in a bound book to prevent falsification.

This policy applies to: All Pupils

Statement of the Policy

The purpose of this policy is to give advice to school staff in relation to the administration of medicines in school both as a matter of routine and in an emergency.

Main Policy

1. All medication must be in the original container.
2. All medication **MUST** be clearly labelled with:
 - the child's name
 - the name and strength of the medication
 - the dosage and when the medication should be given
 - the expiry date
3. All prescribed medication (including homeopathic medicines) must be accompanied by a written confirmation by a health practitioner (e.g. GP, clinical nurse specialist, nurse practitioner) including the time/dose to be given in school.
4. Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child's parent and/or carer
5. If two medications are required, these should be in separate, clearly and appropriately labelled containers.
6. On arrival at school, all medication is to be handed to the designated member of staff by the parent, unless there is prior agreement with school and pupil for the pupil to carry medication (e.g. asthma inhalers) and details of this are entered in the medication record.

The school's Medical Policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

Stakeholders include:

- Headteacher
- Trained First Aid Administrators
- Governing Body
- North Tyneside's HR department

Storage of Medication in school

1. Medication must be stored in a locked, cabinet with the key stored in an accessible but restricted place known to the designated members of staff.
2. If refrigerated storage is required this must be lockable and in a designated area of the school and used solely for that purpose.
3. Once removed from the cabinet, medication should be administered immediately and never left unattended.

Documentation

1. The school office holds copies of all of the necessary documentation that must be completed. It can also be found on the school website under: Virtual Office – Forms – Medical Consent

N.B verbal and text messages are not acceptable.

2. Each pupil receiving medication will have the following documentation:

- Written request and permission by Parents/Guardians for school to administer medication
- Written confirmation of administration from a health practitioner for prescribed medicines
- Pupil record of medication administered.
- Parental/guardian consent for school trips

3. In addition, pupils with complex medical needs will have an Individual Health Care Plan (IHCP).

Administration of Medication

Employees who undertaken within their role the administration of medication and health care:

- Shall receive training and advice from the appropriate health practitioner through the Local Authority
- Training will be updated appropriately and recorded.
- Are responsible for notifying the school when their training requires updating and for ensuring this is arranged.
- Staff involved in specific complex procedures e.g. medication via gastrostomy tube, oxygen therapy, will receive a certificate following training accreditation confirming their ability to perform the procedure.
- Medicine should be administered in an appropriate/confidential room.
- Before medication is administered, the child's identity must be established by checking with another competent adult, who should also confirm the correct medication is being administered and countersign the administration record
- Staff will follow directions for administration provided in writing by the health practitioner.
- Staff will record details of each administration.
- A child should never be forced to accept medication and where medication is refused parents will be informed.

Self-Administration of Medication

Parents/guardians must complete a written request form for a child to self-administer medication. (Examples of medication include; Insulin or asthma medication). This will only be permitted where a child has been trained and is competent to administer their own medication.

Record Keeping

1. A system of record keeping will include:

- Records of parental/guardian consent and or health practitioner instructions including those for self-administration consent, which should be reviewed and confirmed annually (September) in addition to ongoing updating.
- Record of administration of medication including amount administered and amount remaining (running total) is to be kept in a bound book.

- Record of medication returned to the parent/carer wherever possible.
 - Record of medication disposed of and the form of this disposal.
2. A parent/guardian request form should be completed each time there is a request for medication to be administered or there are changes to medication/administration instructions.
3. The request form must include:
- Child's name, class, (date of birth is recorded on SIMS)
 - Reason for request
 - Name of medication, timing of administration and dosage of medication
 - Emergency contact names and telephone numbers (if different to those held on SIMS)
 - Name and details of Doctor and/or health practitioner (if different to those held on SIMS)
4. Reasons for not administering regular medication (e.g. refusal by pupil) must be recorded and parents informed immediately/within the timescale agreed by the health practitioner.
5. The school must keep records of administration of medication in a bound book. This bound book must be kept in the storage cabinet.

Emergency Medication

6. Emergency medication is subject to the same request and recording systems as non-emergency medication, with additionally signed CONSENT and written Individual Care Plan.
7. This type of medication will be READILY AVAILABLE.
8. Consent and Care Plan to be kept with the medication.
9. The Care Plan must be checked and reviewed TERMPLY.
10. It is the parents"/guardians" responsibility to notify school of any change in medication or administration.
11. Procedures in the Care Plan (sample in appendix) should identify:
- Where the medication is stored
 - Who should collect it in an emergency
 - Who should stay with the child
 - Who will telephone for an ambulance/medical support
 - Contact arrangements for parents/carers
 - Supervision of other pupils
 - Support for pupils witnessing the event

Monitoring of Impact:

The Headteacher shall monitor the policy.

The Health and Safety Committee of the Governing Body are responsible for monitoring this policy, specifically Mrs P Lee.

Mrs Craggs (Office administrator) is trained on administration of medicines, along with other named First Aiders in school who support her in this role.

Medicines will be stored in the First Aid room.

1) Key roles and responsibilities

a) The Local Authority (LA) is responsible for:

- 1) Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- 2) Providing support, advice/guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) are effectively delivered.
- 3) Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

b) The Governing Body of St. Columba's Catholic Primary School is responsible for:

- 1) Ensuring arrangements are in place to support pupils with medical conditions.
- 2) Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- 3) Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/national/origin, religion or belief, sex, gender reassignment, pregnancy and maternity, disability or sexual orientation.
- 4) Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- 5) Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits/trips/sporting activities, remain healthy and achieve their academic potential.
- 6) Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- 7) Ensuring written records are kept of, any and all, medicines administered to pupils.
- 8) Ensuring the policy sets out procedures in place for emergency situations.
- 9) Ensuring the level of insurance in place reflects the level of risk.
- 10) Handling complaints regarding this policy as outlined in the school's Complaints Policy.

c) The Headteacher is responsible for:

- 1) Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- 2) The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of St. Columba's Catholic Primary School.
- 3) Liaising with healthcare professionals regarding the training required for staff.
- 4) Identifying staff who need to be aware of a child's medical condition.
- 5) Developing Individual Healthcare Plans (IHPs).
- 6) Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations.
- 7) If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays/absences and emergencies.
- 8) Ensuring the correct level of insurance is in place for staff who support pupils in line with this policy.
- 9) Continuous two way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.
- 10) Ensuring confidentiality and data protection.
- 11) Assigning appropriate accommodation for medical treatment/care.
- 12) Considering the purchase of a defibrillator.
- 13) Voluntarily holding 'spare' salbutamol asthma inhalers for emergency use.

d) Staff members 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 account of the needs of pupils with medical conditions in lessons.

- 4) Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- 5) Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

e) School nurses are responsible for:

- 1) Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- 2) Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- 3) Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- 4) Liaising locally with lead clinicians on appropriate support. Assisting the Headteacher in identifying training needs and providers of training.

f) 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) Participating in the development and regular reviews of their child's IHP.
- 3) Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- 4) Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicines.
- 5) Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adults, being contactable at all times.

g) Pupils are responsible for:

- 1) Providing information on how their medical condition affects them.
- 2) Contributing to their IHP where appropriate, depending upon age.
- 3) Complying with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

2) Training of staff

- a) Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.
- b) The clinical lead for each training area/session will be named on each IHP.
- c) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- d) School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy. They will notify Health & Safety DCC, and Risk, Insurance & Governance Manager, DCC.

3) Medical conditions register/list

- a) Schools admissions forms should request information on pre-existing medical conditions. Parents must have easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the IHP and also to share information for recording attendance.
- b) A medical conditions list or register should be kept, updated and reviewed regularly by the nominated member of staff. Each class teacher should have an overview of the list for the pupils in their care, within easy access.
- c) Supply staff and support staff should similarly have access on a need to know basis. Parents should be assured data sharing principles are adhered to.
- d) For pupils on the medical conditions list key stage transition points meetings should take place in advance of transferring to enable parents, school and health professional to prepare IHP and train staff if appropriate.

4) Individual Healthcare Plans (IHPs)

- a) Where necessary (Headteachers will make the final decision) an Individual Healthcare Plan (IHP) will be developed in collaboration with the pupil, parents/carers, First Aid administrator, Headteacher, Special educational Needs Coordinator (SENCO) and medical professionals.
- b) IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHP as visitors/parent helpers etc. may enter. If consent is sought from parents a photo and instructions may be displayed. More discreet location for storage such as Intranet or locked file is more appropriate. **However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone.**

- c) IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- d) Where a pupil has an Education, Health and Care Plan or special needs statement, the IHP will be linked to it or become part of it.
- e) Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA/AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

5) Transport arrangements

- a) Where a pupil with an IHP is allocated school transport the school should invite a member of DCC Transport team and kept on the pupil record. The IHP must be passed to the current operator for use by the driver/escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
- b) For some medical conditions the driver/escort will require adequate training. For pupils who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that pupil's transport.
- c) When prescribed controlled drugs need to be sent in to school, parents will be responsible for handing them over to the adult in the car in a suitable bag or container. They must be clearly labelled with name and dose etc.
- d) Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change on this arrangement will be reported to the Transport team for approval or appropriate action.

6) Education Health Needs (EHN) referrals

- a) All pupils of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such pupils.
- b) In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

7) Medicines

- a) Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.
- b) If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form.

- c) No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- d) Where a pupil is prescribed medication by a healthcare professional without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- e) No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- f) Medicines **MUST** be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- g) A maximum of **four** weeks' supply of the medication may be provided to the school at one time.
- h) A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.
- i) Medications will be stored in the First Aid room.
- j) Any medications left over at the end of the course will be returned to the child's parents.
- k) Written records will be kept of any medication administered to children.
- l) Pupils will never be prevented from accessing their medication.
- m) Emergency salbutamol inhaler kits may be kept voluntarily by school
- n) General posters about medical conditions (diabetes, asthma, epilepsy etc.) are recommended to be visible in the staff room.
- o) St. Columba's Catholic Primary School cannot be held responsible for side effects that occur when medication is taken correctly.
- p) Staff will not force a pupil, if the pupil refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHP which will include informing parents.

8) Emergencies

- a) Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.
- b) Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- c) If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

9) Day trips, residential visits and sporting activities

- a) Unambiguous arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- b) To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits will be separate to the normal day to day IHP requirements for the school day.

10) Avoiding unacceptable practice

Each case will be judged individually but in general the following is not considered acceptable.

The following behaviour is unacceptable in St. Columba's Catholic Primary School

- a) Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- b) Assuming that pupils with the same condition require the same treatment.
- c) Ignoring the views of the pupil and/or their parents or ignoring medical evidence or opinion.
- d) Sending pupils home frequently or preventing them from taking part in activities at school.
- e) Sending the pupil to the medical room or school office alone or with an unsuitable escort if they become seriously ill.
- f) Penalising pupils with medical conditions for their attendance record where the absences relate to their condition, with advice and guidance from school nurse or GP.

- g) Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- h) Creating barriers to children participating in school life, including school trips.
- i) Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

11) Insurance

- a) Staff who undertake responsibilities within this policy will be assured by the Headteacher that are covered by the LA/school's insurance.
- b) Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Headteacher

12) Complaints

- a) All complaints should be raised with the school in the first instance.
- b) The details of how to make a formal complaint can be found in the School Complaints Policy.

13) Definitions

- a) 'Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- b) 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.
- c) 'Medication' is defined as any prescribed or over the counter treatment.
- d) 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- e) A 'staff member' is defined as any member of staff employed at St. Columba's Catholic Primary School.

Supporting Pupils with Medical Conditions

1	<ul style="list-style-type: none"> Parent or healthcare professional informs school that child has medical condition or is due to return from long-term absence, or that needs have changed.
2	<ul style="list-style-type: none"> Headteacher or delegated SLT member co-ordinates meeting to discuss child's medical needs and identifies member of school staff who will provide support to the pupil.
3	<ul style="list-style-type: none"> Meeting held to discuss and agree on the need for IHP to include key school staff, child, parent and relevant healthcare professionals and other medical/health clinician as appropriate (or to consider evidence provided by them)
4	<ul style="list-style-type: none"> Develop IHP in partnership. Agree who leads on writing it and input from healthcare professionals must be provided.
5	<ul style="list-style-type: none"> School staff training needs identified.
6	<ul style="list-style-type: none"> Healthcare professional commissions and/or delivers training. Staff signed off as competent – review date agreed.
7	<ul style="list-style-type: none"> IHP implemented and circulated to all relevant staff
8	<ul style="list-style-type: none"> IHP reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate.

Processes specific to St. Columba's

- All pupils who need to have medication held within school for a long term condition such as asthma, eczema, allergies, ADHD, bladder and bowel conditions, seizures etc will have an IHP.
- All pupils who need to have medication held within school for a short term condition such as antibiotics, parents must complete a medical consent form as found on school website. Copies are also available from the school office.
- Inhalers and Epi Pens are kept in the child's classroom in the teacher's cupboard. These are named and in storage boxes.
- All other medication including controlled drugs, are kept in the First Aid Room in a locked cupboard.
- Mrs D Craggs is the main First Aid administrator within St. Columba's. In conjunction with the Headteacher, Mrs Craggs has responsibility for completing the IHPs, ensuring the medical equipment and First Aid kits are well stocked and within date.
- All documentation is held in the school office or First Aid room – see Mrs Craggs.