



## Supporting children with Medical Conditions

### Introduction and Legislation/Guidance

Queen Margaret Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. This policy has been developed in line with the Department for Education's guidance released in Dec 2015 – "Supporting pupils at school with medical conditions".

Pupils with special medical needs have the same rights of admission to the school as other children and cannot be refused admission or excluded from school on medical grounds.

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

- (a) Short-term affecting their participation in school activities whilst 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).

Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics.

- (c) Pupils who may very rarely require medication to be given in an Emergency. Where the pupil has not previously been known to have a medical condition and the medical emergency arises "out of the blue".

Key Points from DfE Guidance – Supporting Pupils at School with Medical Conditions - December 2015:

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

### Aims

-Pupils at school with medical conditions will be properly supported so that they have full access to education, including school trips and physical education.

-The governing body ensures that arrangements are in place in schools to support pupils at school with medical conditions.

-The governing body ensures that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.

At Queen Margaret Primary School, we ensure that pupils at school with medical conditions, are properly supported so that they have full access to education. This includes school trips and physical education so that

these children play a full and active role in school life, remain healthy and achieve their academic potential. The Governors support the school in achieving this and as a Governing Body, ensure that appropriate staff consult health and social care professionals, pupils and parents, to ensure that the needs of children with medical conditions are properly understood and effectively supported.

## Individual Healthcare Plans (IHCPs)

The Headteacher and SENDCo, have overall responsibility to ensure that procedures are in place and followed whenever the school is notified that a pupil has a medical condition (see procedures below). The Class Teacher has responsibility for writing the IHCP.

The Headteacher or SENDCo may delegate responsibility for Individual Health Care Plans and/or Medical Alerts, and their development and use in supporting pupils at school with medical conditions. Individual Health Care Plans and/or Medical Alerts, are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They are developed with the child's best interests in mind and assess and manage risks to the child's education, health and social well-being and minimises disruption.

The main purpose of an IHCP (Appendix 1) is to identify the level of support that is needed at school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school can provide and receive.

An IHCP will:

- Be clear and concise, giving brief details of the child's condition.
- Be written in partnership with parents, child, healthcare professional and the teacher
- Give details of what constitutes an emergency, what action to take and who to contact.
- Special requirements e.g. dietary needs, pre-activity precautions.
- Be reviewed annually or when there is a change in the condition of the child.
- Be easily accessible whilst preserving confidentiality. A copy of the IHP is kept with the medication in the child's classroom, the staffroom and in the folders in the main first aid room.
- Outline educational provision if the child is unable to attend school.
- Contain details of the medical condition, its triggers, signs, symptoms and treatments.
- Include relevant SEND information.
- Provide details of the child's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition.
- Outline the level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring.
- State who will provide this support, their training needs, expectations of their role and confirmation of

proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable.

The class teacher may also create a Medical Alert if needed for a child. (Appendix 2) This would be required if the child has a Healthcare need that all staff should be aware of and 'alerted' to.

### **The child's role in managing their own medical needs**

At Queen Margaret Primary School, we try to support and encourage children, who are able, to take responsibility to manage their own medicines from a relatively early age. Children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent. There may be circumstances where it is not appropriate for a child of any age to self-manage. Health professionals need to assess, with parents and children, the appropriate time to make this transition and advise the school accordingly.

## **Managing medicines on school premises**

Pupils are not allowed to carry any non-prescription drugs in school; this is to ensure that no pupil unwittingly or otherwise gives another pupil his or her medication. Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Prescription medicines must be in date, labelled, in the original container including prescriber's instructions re administration, dosage and storage.

Parents should be encouraged to look at dose frequencies and timing so that if possible medicines can be taken out of school hours. Parents can ask doctors for timed-release medication for a minimum number of daily doses.

Staff should not force a child to take their medicine or carry out a necessary procedure if the child refuses. Instead, they should follow the procedure agreed in the individual healthcare plan and inform the child's parents.

### **Prescription Medication**

No child under 16 should be given prescription or non-prescription medicines without their parents written consent (in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parent, every effort should be made to encourage the child to involve their parents while respecting their right to confidentiality.)

-Parents must complete the consent form for administering medicine (Appendix 3).

-A member of the First Aid Team, may administer such a drug to whom it has been prescribed, according to the instructions. This must be noted on the administering medicine form with the time, date, dose, child reaction and staff signature.

-Prescription drugs will be returned to the parents when no longer required. Parents are responsible for the disposal of any remaining prescription drugs.

-Medicines must always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.

## **Non-prescription**

Unless there is written confirmation from a GP that this has been agreed, non-prescription drugs will not be administered on a regular basis.

Storage, administration and handling of Medicines: For safety reasons, most medicines are stored safely in the Staff Room. The exception to this is inhalers which are stored in the classrooms so they are easily accessible to the children as required. Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Parents are asked to deliver any medication to school via the office so that medication can be stored safely. Only medicines that have parental authorisation and are appropriately named are allowed in school. When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.

## **Medical Equipment:**

It is the responsibility of trained First Aid staff in school, to ensure that the first aid stocks are checked and replenished regularly and that all first aid equipment is maintained. Where deficiencies are identified, they must ensure new stock is ordered by placing an order with the school administrators. For further information, please see our First Aid Policy.

### **Administration of Antibiotics:**

The administration of antibiotics in school, will be permitted only if the recommended dosage is four or more times per day. A prescribed dosage of 3 times per day is usually taken at home before school, after school and at bedtime.

### **EpiPens**

EpiPens are stored in clear plastic boxes with the picture of the child on the outside and the care plan enclosed. Children are required to have 2 EpiPens in school; one in class and one in the School office . Parents/Carers have the responsibility of checking whether the medication is in date; however the SBM /First Aid lead will also check this annually when the children change class.

A register of pupils who have been prescribed an EpiPen is kept in the School Office.

## **Asthma Pumps**

Children with asthma should have easy access to their inhaler, which must be clearly marked with their name. Inhalers for children should be kept in a clearly marked box in the classroom. Medicine should not be locked away.

The only inhaler a child should have at school is their blue inhaler, which is the relief inhaler. Other inhalers are preventative and should be taken in the morning and the afternoon at home.

## Role and Responsibilities

### The Role of the Governing Body

- To ensure that arrangements are in place to support pupils with medical conditions so they can access and enjoy the same opportunities at school as any other child.
- To take into account that many of the medical conditions that require support at school, will affect quality of life and may be life-threatening so the focus of action taken is on the needs of each individual child and how their medical condition impacts on their school life.
- To make arrangements - giving parents and pupils confidence in the school's ability to provide effective support for medical conditions in school; showing an understanding of how medical conditions impact on a child's ability to learn, as well as increasing confidence and promoting selfcare and finally ensuring staff are properly trained to provide the support that pupil's need.
- To monitor arrangements put in place to ensure that policies, plans, procedures and systems are properly and effectively implemented in accordance with statutory requirements - in particular procedures for administration of medicines.
- To ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.
- To ensure that the school's policy is explicit about what practice is not acceptable when administering medicines in school, sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition and outlines the role of Individual Health Care Plans.
- To ensure that any complaints made, concerning the support provided to pupils with medical conditions, are handled appropriately.
- To regularly review the policy for supporting pupils with medical conditions and ensure it is readily accessible to parents and school staff.
- To ensure the policy is implemented effectively by the Headteacher and the Pastoral Head of School who have overall responsibility for policy implementation and are responsible for:
  - ensuring that sufficient staff are suitably trained,
  - ensuring that all relevant staff will be made aware of the child's condition,
  - ensuring cover arrangements in case of staff absence or staff turnover to ensure someone is always available,
  - ensuring the briefing of supply teachers,
  - ensuring the completion of risk assessments for school visits and other school activities outside of the normal timetable, and
  - ensuring the monitoring of individual healthcare plans which are to be reviewed at least annually.

### **The Role of the Headteacher**

- To ensure that the Medical Policy is developed and effectively implemented.
- To ensure that all staff are aware of this policy and they understand their role in its implementation.
- To ensure that there are sufficiently trained members of staff available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

### **The Role of the Parents**

The prime responsibility for a child's health, lies with the parent/carer who is responsible for the child's medication and must supply the school with all relevant information needed in order for proficient care to be given to the child.

It is expected that parents will inform the school of any medical condition which affects their child, and provide evidence where requested.

Parents will supply school with appropriately prescribed medication, where the dosage information and regime is clearly printed by a pharmacy on the container and details included inside the container parents will ensure that medicines to be given in school are in date and clearly labelled parents will co-operate in training their children to self-administer medicine if this is appropriate.

### **The role of the Pupils**

After discussion with parents, children who are competent should be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected within Individual Healthcare Plans.

Wherever possible, children should be allowed to carry their own medicines and relevant devices, or should be able to access their medicines for self-medication quickly and easily. Children who can take their medicines themselves, or manage procedures, still require an appropriate level of supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the Individual Healthcare Plan. Parents should be informed so that alternative options can be considered.

### **The role of the Admin Team**

- To ensure that all new starters at the school receive and return a medical form.
- To ensure that if there is a medical condition, that this information is entered onto the child's electronic record (SIMs).
- To ensure that the Headteacher and SENDCo receives a copy of any medical forms that indicate the child having

a medical condition.

- To be responsible for the distribution of the consent to give medicine form.
- To ensure that the Pastoral Head of School has received consent forms once completed by the parent or carer.
- To support with the storage, administration and recording of medicines.

### **The role of staff**

Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

If a member of staff supports a child with an IHCP that requires them to administer regular medication i.e. insulin for a diabetic child, then it is their responsibility to ensure that they follow the procedure set out in this policy.

### **The role of school nurses**

The school nursing services are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical

conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example, on training.

### **The role of other healthcare professionals**

Other healthcare professionals, including GPs and pediatricians, should notify the school when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing individual healthcare plans. Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

## **Emergency Procedures**

The Headteacher will ensure that all staff know what action to take in the event of a medical emergency. This includes:

- How to contact the emergency services and what information to give.
- New staff and supply staff are inducted into school processes.
- Action to take in a general medical emergency is displayed in prominent locations for staff.
- If a pupil needs to be taken to hospital, and their parent or carer is not immediately available, a member of staff will accompany them and will stay with them until a parent/carer arrives.
- The Inclusion and Office Team will ensure that medical professionals have access to the child's health plan or any medicine that they are taken as soon as possible.
- Staff should not take pupils to hospital in their own car.

Named members of the school staff are trained first aiders and in the event of an accident, appropriate first aid will be given.

## Record Keeping

The Governing Body is responsible for ensuring that written records are kept of all medicines administered to children.

Completed medical forms should be kept in the medical folder in the office, in the child's classroom and a copy in the SEND files. The information from the medical form will be updated onto the child's central information (SIMs) by the Admin Team.

IHCP's will be stored in the class medical folder, CPOMs and on the Inclusion files. A copy of Healthcare Alerts will be displayed in the classroom, First Aid Room and in the Staff Room.

Administering medicine forms will be available from the office on request. The completed form will be kept in the Inclusion files.

## Day trips, residential visits and sporting activities

When arranging a school trip, staff carry out a risk assessment that includes children with medical needs.

A copy of the IHCP is taken on the trip alongside the medication. Staff supervising should always be aware of any medical needs and relevant emergency procedures.

Children with medical needs will be encouraged to take part in residential visits. The visit leader will carry out a specific and additional risk assessment. Where children without care plans have been prescribed medication, parents should include these details in the form provided for the school residential and complete a school medical form. Medication should be in the original packaging. A named member of staff will take responsibility for the medication, ensuring that it is stored securely during the time away, that it is administered according to the information provided by the parent and that a record is kept every time the medication is administered. (As per medicine administration during a school day).

### Sporting activities

Any restriction to PE / sports activities must be noted in the IHCP'S. PE lesson will be differentiated to allow all children to be able to participate at a level that is suitable to them.

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 (Class Teachers, Lead Teacher at

sporting activity) should ensure that they are aware of relevant medical conditions and any preventative medicine that may need to be taken and the emergency procedures.

### **Staff training and support**

All Staff are aware of the most common serious medical conditions at this school and they understand their duty of care to pupils in the event of an emergency. In an emergency school all staff are required to act responsibly.

Staff are aware that there is no legal or contractual duty to administer medication, or supervise a pupil taking medication, unless they have been specifically contracted to do so. Staff who work with groups of pupils at this school receive training and know what to do for the pupils in their care with medical conditions.

Training is refreshed for all staff at least once a year.

Action for staff to take in an emergency, for the common serious conditions at this school, is displayed in prominent locations for all staff

## **Unacceptable Practice**

Although school staff should use their discretion and judge each case on its merits with reference to the child's Individual Healthcare Plan, it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication.
- Prevent the administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence.

Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.

- If a child becomes ill, send them to the school office unaccompanied or with someone unsuitable.
- Penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.

-Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues.

-Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips.

### **Liability and indemnity**

The governing body will ensure annually, that the appropriate level of insurance is in place. This will include liability cover relating to the administration of medication but individual cover may need to be arranged for health care procedures associated with more complex conditions.

## **Complaints**

Should any parent or carer be unhappy with any aspect of their child's care at Queen Margaret Primary School, they must discuss their concerns with the school. This will be with the child's Class Teacher in the first instance. If this does not resolve the problem, then it should be taken to a member of the Senior Leadership Team. In the unlikely event of this not resolving the issue, the parent/carers can follow the school's complaints procedure.

## **Policy Review**

This policy will be monitored yearly and updated when necessary ensuring new legislation is incorporated. Staff will regularly receive opportunities to discuss and evaluate the management of the procedures and protocols in school.

This policy will also be made available to parents on the school website. We will ask parents for annual updates regarding medical information.

Prepared by: Sara Bennion

Date: November 2022

Review due: November 2023



**Individual Health Care Plan**

Child's name	
Class	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
<b>First contact details (Name, address, phone number)</b>	
<b>Second/ Third contact details (Name, address, phone number)</b>	

<b>Clinic/Hospital Contact</b>	
Name	
Phone number	
Name	
Phone number	

**G.P. Name**

**Phone number**

**Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.**

Symptoms:

**Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision**

Name of medication	Type of medication	Location	Dose to be given	Storage requirements

**Staff trained in use of medication (use separate sheet if necessary)**

**TAs who are first aid trained**

**Daily care requirements**

**Specific support for the pupil's educational, social and emotional needs**

**Arrangements for school visits/trips etc**

**Arrangements for keeping (and use of) medication during off-site visits:**

Medication to be carried by school staff (delete as appropriate)

Ensure First Aider in same group as pupil (if party splits) Ensure  
access to emergency services (eg mobile telephone)

**Other information**

**Describe what constitutes an emergency, and the action to take if this occurs**

**In the event of an emergency:**

**In an emergency always contact Ambulance Service - dial 999**

This 'Health Care Plan' has been drawn up

for \_\_\_\_\_ (name of pupil)

by \_\_\_\_\_ (name of staff and school)

with the involvement and co-operation of

\_\_\_\_\_ (parents / guardian).

Parent's signature: \_\_\_\_\_

HT/SENDCo signature: \_\_\_\_\_

Date: \_\_\_\_\_

Review on or before: \_\_\_\_\_



## 'Administration of Medicine in School' Form

**To the Parent or Carer: The School will not give your child medication unless you complete and sign this form.**

**(Whenever possible, medicines should be administered by parents/carers outside school hours).**

**Name of Child:**

**Address of Child:**

**Illness/Condition:**

**I understand that medication must be delivered to and collected from the office at the beginning and end of the day by an adult. If this is not practical, medication can be left in school until the end of the course or it is collected by parents or carers.**

**I understand that the school will only administer prescribed medicines if they are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage.**

**I understand that if I am agreeing to non-prescribed medicines being administered, that I will need to provide accurate information on maximum dosages and when the last dose was administered.**

**I accept that this is a service which the school is not obliged to undertake.**

**Medication Name/Type of Medication (as described on the container):**

**Full Direction for use:**

**How long will your child take this medication?**

**Dosage & Method:**

**Timing:**

**Special Precautions:**

**Procedure to be taken in an emergency:**

**Contact Details: Name of Parent/Carer:**

**Relationship to child:**

**Daytime Tel No:**

**Signature:**

**Date:**

