

Mount Pleasant Primary School



Procedures for supporting pupils with medical conditions

Links: Trust 'Supporting Pupils with Medical Conditions Policy' January, 2021.
& 'Administration of Medication Policy' March, 2021

This policy is based on DfE 'Statutory guidance for governing bodies of
maintained schools and proprietors of academies in England', April 2014

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Aim

Our aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that such children can:

- play a full and active role in school life
- remain healthy
- achieve their academic potential
- feel safe

Children with Medical Needs

Most children will at some time have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some children however have longer term medical needs and may require medicines on a long-term basis to keep them well, for example children with well-controlled epilepsy or cystic fibrosis. Others may require medicines in particular circumstances, such as children with severe allergies who may need an adrenaline injection. Children with severe asthma may have a need for daily inhalers and additional doses during an attack.

Most children with medical needs are able to attend school regularly and can take part in normal activities. Some children and young people with medical needs have complex health needs that require more support than regular medicine. In such cases, individual health care plans will be put in place and medical advice sought.

Our aim is to ensure that children with medical needs receive proper care and support in school.

Short-Term Medical Needs

Many children will need to take medicines during the day at some time during their time in school. To allow children to do this will minimise the time that they need to be absent. However, such medicines will only be given at school where it would be detrimental to a child's health if it were not administered during the day.

Long-Term Medical Needs

Parents/carers must inform school of any particular needs before a child is admitted, or when a child first develops a medical need. This is to ensure that the child is well supported in school and that their medical needs are met.

For children with long term medical needs a Care Plan (proforma attached) will be developed in conjunction with school, parents, the school nurse and other relevant health professionals. This will include:

- details of a child's condition
- special requirement e.g. dietary needs, pre-activity precautions
- any side effects of the medicines
- what constitutes an emergency
- what action to take in an emergency
- who to contact in an emergency
- the role the staff can play

Prescribed Medicines

Medicines can only be administered in 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. School will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. They must be in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration, dosage and storage.

We will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.

Controlled Drugs

Identified members of staff may administer a controlled drug to the child for whom it has been prescribed.

Controlled drugs are kept in a locked non-portable container in the office to which only named staff (School Administrator, Office Assistant, Home School Mentors, named TAs and the Headteacher) have access.

Non-Prescription Medicines

Over-the-counter medicines can be administered by a member of staff in the nursery or school, for up to 5 days, following written permission by the parents and in agreement with the persons responsible for administration.

A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.

Administering Medicines

Medicines are administered by a member of staff in conjunction with office staff.

Members of staff giving medicines to a child must check:

- the child's name
- prescribed dose
- expiry date
- written instructions provided by the prescriber on the label or container

If in doubt about any procedure staff will not administer the medicines but check with the parents or a health professional before taking further action.

Staff complete and sign a record each time they give medicine to a child. This is counter signed by another member of staff. (pro forma attached)

Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should always be consulted before administering such medication, even though it is prescribed.

Refusing Medicines

If a child refuses to take medicine, staff will not force them to do so, but will note this in the records. Parents will be informed of the refusal on the same day. If a refusal to take medicine results in an emergency, the school's emergency procedures will be followed.

Record Keeping

Parents must complete a form before staff are allowed to administer any medicine. (proforma attached)

Staff receiving the medicine must check that any details provided by parents are consistent with the instructions on the container.

Educational Visits

We encourage children with medical needs to participate in safely managed visits. We consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits.

Arrangements for taking any necessary medicines will need to be taken into consideration. Staff supervising excursions will always be made aware of any medical needs, and relevant emergency procedures. Copies of Care Plans are also taken on visits.

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. For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a child's ability to participate in PE will be recorded in their Care Plan.

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.

Home to School Transport

Some children access our school through transport provided by the LA. Escorts are provided with Care Plans where necessary to ensure that children are supported appropriately.

ROLES AND RESPONSIBILITIES

Close co-operation between schools, settings, parents, health professionals and other agencies will help provide a suitably supportive environment for children with medical needs.

Parents and Carers

Parents have the responsibility to provide school with sufficient and up-to-date information about their child's medical needs if treatment or special care is needed. They should, jointly with the school, reach agreement on the school's role in supporting their child's medical needs, in accordance with our policy.

Parents are key partners and should be involved in the development and review of their child's individual healthcare plan. They should 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.

The Governing Body

The governors are responsible for:

- reviewing the policy regularly and ensuring that it is put into practice by school staff.
- ensuring that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life.
- ensuring that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

The headteacher

The headteacher is responsible for:

- ensuring that all staff have a full understanding of policy and procedures
- ensuring that children with medical needs are fully supported in school.
- ensuring that all staff who need to know are aware of the individual child's condition.
- ensuring that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- ensuring the development of individual healthcare plans.
- ensuring that school staff are appropriately insured

Home School Mentors (HSM)

The HSMs are responsible for collating Care Plans with parents and Health Professionals and ensuring all staff are fully informed and appropriately briefed and trained.

They are also responsible for ensuring information about children with asthma is updated annually and that inhalers are up to date.

The School Administrator

The School Administrator is responsible for the receipt of request forms from parents, the safe storage of medicines, including controlled drugs, and the completion and retention of records indicating medicines administered. She is also responsible for administering medication or, with the agreement of the Headteacher, allocating the administration of medication to relevant staff.

Teachers and Other Staff

Staff with children with medical needs in their class or group are responsible for familiarising themselves about the nature of the condition, and when and where the children may need extra attention.

All staff are made aware of the likelihood of an emergency arising with an individual child and what action to take if one occurs. 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.

The school nurse provides guidance on medical conditions and supports school in developing Care Plans. She also provides a link to other health care professionals for more specialist guidance and advice.

Staff training and support

The policy and procedures for children with medical needs is discussed annually at staff meetings. It is available to staff on the staff intranet. It forms part of the induction of new staff. In this way, staff are fully informed of procedures.

Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Generic staff training, such as the administration of prescribed medicines or the use of inhalers, is delivered periodically by the School Nurse to the whole staff. A record of this is kept in the Care Plan File.

Specific training for key staff may arise from Care Plan meeting. Staff are involved in the development of Care Plans where they work closely with a particular child. At such meetings, the need for specific training is discussed with the School Nurse. Where possible the School Nurse will provide appropriate training or she may commission it on our behalf from other Health Professionals. A record of such staff training is kept with the Care Plan. (Proforma attached)

The child's role in managing their own medical needs

Some children are competent to take responsibility for managing their own medicines and procedures. This is agreed with parents as part of Care Plan meetings. The agreed procedures reflect the ability and maturity of the child and the nature of the medical need. An appropriate level of supervision is provided and outlined in the Care Plan.

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan.

DEALING WITH MEDICINES SAFELY

All medicines may be harmful to anyone for whom they are not appropriate.

Storing Medicines

Medicines are stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which dispensed.

Children know where their own medicines are stored.

All emergency medicines, such as asthma inhalers, are readily available to children and not locked away.

Other non-emergency medicines are kept in a secure place not accessible to children.

Controlled drugs are kept in a locked non- portable store with restricted access.

Disposal of Medicines

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They also collect medicines held at the end of each term. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

Sharps boxes are always used for the disposal of needles.

Hygiene and Infection Control

All staff are familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

Record keeping

Written records are kept of all requests by parents to administer medicines and of all medicine administered to children.

Records offer protection to staff and children and provide evidence that agreed procedures have been followed.

Confidential records will be stored and, then disposed of, in line with our policy.

Emergency Procedures

A list of First Aiders are displayed in key areas in school - the main office, the DH office, the staff room, the hall and all corridors.

In an emergency, office staff will call an ambulance and then inform parents. (Proforma attached)

A member of staff will always accompany a child taken to hospital by ambulance, and will stay until the parent arrives.

Health professionals are responsible for any decisions on medical treatment when parents are not available.

Care plans include instructions as to how to manage a child in an emergency. First Aiders take the responsibility for action in an emergency.

DRAWING UP A HEALTH CARE PLAN

Purpose of a Health Care Plan

The main purpose of an individual Care Plan for a child with medical needs is to identify the level of support that is needed and ensure that school effectively supports pupils with medical conditions.

Not all children who have medical needs will require an individual plan.

Care Plans provide clarity about what needs to be done, when and by whom. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is attached.

An individual health care plan clarifies for staff, parents and the child the help that can be provided. It is developed with the school nurse or other health professionals. Pupils should also be involved whenever appropriate.

Care plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan.

When developing / reviewing Care Plans the following will be considered and recorded on the plan:

- medical condition, its triggers, signs, symptoms and treatment;
- the pupil'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, dietary requirements and environmental issues eg crowded corridors, travel time between lessons;
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- 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;

- 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;
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition;
- what to do in an emergency, including whom to contact, and contingency arrangements.

Information for Staff and Others

Staff who may need to deal with an emergency need to know about a child's medical needs. The class teacher ensures that additional staff such as students or supply staff have relevant information relating to individual children's needs.

Confidentiality

School will always treat medical information confidentially.

Unacceptable practice

School staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan. However, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and 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;
- ignore medical evidence or opinion, (although this may be challenged);

- send 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;
- penalise children for their attendance record if their absences are related to their medical condition eg 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, eg by requiring parents to accompany the child.

Liability and indemnity

Insurance is provided by Lingfield Education Trust. The school's insurance arrangements cover staff providing support to pupils with medical conditions.

Details of insurance are available from the school office.

Complaints

Should parents 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 via the school's complaints procedure.

Contacting Emergency Services Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information

1. **Telephone number** : 01325 244950

2. **Location** : Mount Pleasant Primary School, Newton Lane, Darlington

3. **Postcode**:DL3 9HE

4. **Give exact location in the school** (e.g. playground, hall etc)

5. **Give your name**

6. **Give name of child and a brief description of child's symptoms**

7. **Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the location of the incident**

Speak clearly and slowly and be ready to repeat the information if asked.

Put a completed copy of the form by the telephone.

Staff training record - administration of medication

Mount Pleasant Primary School

Name:

Type of training received:

Date of training completed:

Training provided by:

Profession and title:

I confirm that _____ *[name of member of staff]* has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated (please state how often)

Trainer's signature:

Date:

I confirm that I have received the training detailed above.

Staff signature:

Date:

Suggested Review Date:

Mount Pleasant Primary School

CARE PLAN

Name of child: D.O.B. Address: Medical Condition:	Photo
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Family Contact 1	Family Contact 2
Name:	Name:
Telephone	Telephone
Work:	Work:
Home:	Home:
Mobile:	Mobile:

Describe the medical condition /need, its triggers, signs and symptoms;
Daily Care Requirements: Please specify the child's role in this, if appropriate.
Describe when medication needs to be given, including dosage.
Describe what constitutes an emergency for the child and the action to take if this occurs:
Follow-up care after medication is given:

Named staff members to administer medication:

Details of staff training attached

Supply and storage of medication

List medication, including expiry dates:

Supplied by:

Stored:

Outline any additional arrangements or support needed and how this will be provided eg

- for school visits / after school clubs
- specific support for the pupil's educational, social and emotional needs

Agreed at meeting held on _____

Present : _____ Parent/Carer

_____ Health Professionals

Signed : _____ School Staff

Additional Action following meeting
(what, by whom, by when)



- Copies to all at meeting
- Care Plan File
- Display in staff room
- SIMS notation by office staff



Mount Pleasant Primary School –

Request for Administration of Prescribed Medication

PLEASE NOTE SCHOOL CAN ONLY ADMINISTER THIS MEDICATION IF IT HAS BEEN
PRESCRIBED BY A DOCTOR AND IS IN THE ORIGINAL CONTAINER

Part A – to be completed by parent/carer:

Name of child	
Class	
Name and strength of medication	
Dosage	
Time/s to be administered with school day	
Parent/Carer signature	
Date	

Part B – to be completed by school staff.

Refer to the information on the medication. Do not accept medication without the original container or without prescribing details.

Confirm name of child as on medication	
Confirm name and strength of medication received	
Quantity received	
Expiry date	
Confirm dosage	
Confirm time/s to be administered with school day	
Staff Signature	
Date	

Part C – to be completed by school staff.

Medication must be given back to an adult, not a child.

Amount of medication returned	
Date of return	
Staff Signature	

Mount Pleasant Primary School –
Request for Administration of Over the Counter Medication

PLEASE NOTE SCHOOL CAN ONLY ADMINISTER THIS MEDICATION IF IT IS IN THE ORIGINAL CONTAINER

Part A – to be completed by parent/carer:

Name of child	
Class	
Name and strength of medication	
Dosage	
Time/s to be administered with school day	
Parent/Carer signature	
Date	

Part B – to be completed by school staff.

Refer to the information on the medication. Do not accept medication without the original container

Confirm name of child as on medication	
Confirm name and strength of medication received	
Quantity received	
Expiry date	
Confirm dosage	
Confirm time/s to be administered with school day	
Staff Signature	
Date	

Part C – to be completed by school staff.

Medication must be given back to an adult, not a child.

Amount of medication returned	
Date of return	
Staff Signature	

Process for developing individual healthcare plans

