



# Supporting pupils with medical conditions and administering medicines policy

Approved by: Trust Board Date: \*\*/\*\*/\*\*\*\*

Last reviewed on: Summer 2020

Next review due by: Summer 2023

## Contents

1. Aims .....	3
2. Legislation and statutory responsibilities .....	3
3. Roles and responsibilities .....	3
4. Equal opportunities .....	5
5. Being notified that a child has a medical condition .....	5
6. Individual healthcare plans .....	5
7. Managing medicines .....	6
8. Supporting children with health needs who cannot attend school. ....	8
<b>9. Inclusion</b> .....	8
10. Emergency procedures .....	9
11. Training .....	9
12. Record keeping .....	9
13. Pupils eligible for IPRA funding .....	9
14. Liability and indemnity .....	10
15. Complaints .....	10
16. Monitoring arrangements .....	10
17. Links to other policies .....	10
Appendix 1: Being notified a child has a medical condition .....	11

---

## 1. Aims

This policy aims to:

- › Ensure that pupils, staff and parents understand how our school will support pupils with medical conditions
- › Ensure that pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities
- › Explain our procedures for managing medicines which may need to be taken during the school day.
- › Explain our procedures for managing medicines on school trips.
- › Outline to roles and responsibilities for the administration of medicines

The governing board will implement this policy by:

- › Making sure sufficient staff are suitably trained
- › Making staff aware of pupil's condition, where appropriate
- › Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- › Providing supply teachers with appropriate information about the policy and relevant pupils
- › Developing and monitoring individual healthcare plans (IHPs)

**The named person with responsibility for implementing this policy is:**

Mr A Cosslett (Headteacher)

## 2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

This policy also complies with our funding agreement and articles of association.

## 3. Roles and responsibilities

### 3.1 The governing board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

### 3.2 The headteacher

The headteacher will:

- › Make sure all staff are aware of this policy and understand their role in its implementation
- › Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- › Take overall responsibility for the development of IHPs
- › Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way

- › Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- › Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

### 3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines. In general, school staff cannot be legally required to administer medication or supervise a pupil taking it. However, all staff in school have a duty to act as any reasonable prudent parent/carer would, to make sure that pupils in their care are healthy and safe and this might extend to administering medicine or taking action in an emergency.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Staff will:

- › Understand the importance of medication being taken and care received as detailed in the IHP.
- › On receipt of medicines, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber should be checked.
- › Ensure that the parent/carer completes a consent form for the administration of medicines following the prescriber's instructions
- › Complete the 'administration of medicines' record sheet each time medication is given.
- › Ensure that medicines are returned to parents/carers for safe disposal.
- › Teaching staff to ensure that inhalers/Epipens/blood glucose kits are taken to swimming, on trips and onto the field for outdoor lessons. All pupils have appropriate medicine or food with them during physical activity and pupils take them when needed.
- › report any concerns they may have about a child's health to the parent/carer and the Headteacher.

Supply staff: At Takeley each classroom has a folder for supply teachers left out for them on the teacher's desk which has listed any children with medical needs. Some children with a serious medical condition that have an EHCP or IPRA funding have an assigned learning support assistant. In their absence an other suitably trained LSA will have their timetable adjusted to help meet their need.

### 3.4 Parents

Parents will:

- › 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 IHP and may be involved in its drafting
- › Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment
- › Deliver all medicines to the school office in person.

### 3.5 Pupils

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

### 3.6 School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school nurses and notify them of any pupils identified as having a medical condition.

## 4. Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted. The administration of medicines whilst on trips must be in line with this policy, written records are to be kept and signed by the member of staff administering the medicine. A copy of any health care plan must be taken on visits.

## 5. Being notified that a child has a medical condition

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

See Appendix 1.

## 6. Individual healthcare plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the school's Inclusion leader, with support from the school nurse and monitored by the Trust's SENCo.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and Inclusion leader in consultation with the Trust's SENCo and Headteacher will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments

- › 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, e.g. 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, including in emergencies. If a pupil is self-managing their medication, this will 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 pupil'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 pupil'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 pupil can participate, e.g. risk assessments
- › Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- › What to do in an emergency, including who to contact, and contingency arrangements

## 7. Managing medicines

### 7.1 Prescription medicines

Prescription medicines will only be administered at school as these have been shown to be approved by a medical professional:

- › When it would be detrimental to the pupil's health or school attendance not to do so. This would be dependent on the frequency of the prescription i.e. to be administered 3 or more times daily meaning a break or lunchtime dose is required **and**
- › Where we have parents' written consent
- › On school journeys, particularly those that are residential **non-prescription** medication will also be considered, but only if it would be detrimental to the pupils health or attendance on the trip not to do so **and** where we have parents' written consent.

**The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.**

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

We will require parents/carers to complete a consent form detailing doses and times. An Individual Health Care plan will be made for managing long-term health needs.

The school will only accept prescribed medicines that are:

- › In-date
- › Labelled
- › Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

**Staff should never give a non-prescribed medicine.** We cannot administer non-prescribed paracetamol to primary school pupils. If there are extreme circumstances then the parent/carer will be contacted to come into school and supply and administer the paracetamol themselves.

## 7.2 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. At Takeley no child of primary age is considered competent and therefore would not be allowed to have it in their sole possession. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

## 7.3 Storage of medicine

All medicines should be delivered to the school office by the parent/carer. In no circumstances should medicines be left in the child's possession. Teachers and Learning Support Assistants should not take receipt of any medicine. All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines will normally be kept in the school office or staff room fridge and should not be kept in classrooms (unless otherwise specified on the child's Individual Health Care Plan). The medicine will only be given to the parent, not the child at the end of the school day.

All medicines must be stored in the supplied container and be clearly labelled with the name of the child; the name and dose of the medicine and the frequency of administration.

## 7.5 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

## 7.6 Refusal of medicines

If a child refuses to take medicines, staff should not force them to do so, but should note this in the records and inform parents/carers immediately or as soon as is reasonably possible.

If a pupil misuses medication, either their own or another pupil's, their parents are informed as soon as possible. These pupils are subject to the school's usual disciplinary procedures.

## 7.7 Disposal of medicines

Staff should not dispose of medicines. Parents/carers are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. They should collect medicines at the end of the agreed administration period.

Three times a year a member of staff will check expiry dates for all medication stored at school. All medication is sent home with pupils at the end of the school year. Medication is not stored in the Summer holidays.

It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year.

Parents are also responsible for the disposal of sharp boxes and providing the school with a new one.

## 7.8 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- › Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- › Assume that every pupil with the same condition requires the same treatment
- › Ignore the views of the pupil or their parents
- › Ignore medical evidence or opinion (although this may be challenged)
- › 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 IHPs
- › If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- › Penalise pupils 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 pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- › Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- › Administer, or ask pupils to administer, medicine in school toilets

## 8. Supporting children with health needs who cannot attend school.

Please refer to the separate policy 'Supporting children with health needs who cannot attend school'

## 9. Inclusion

The school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

All staff at this school are aware of the potential social problems that pupils with medical conditions may experience. Staff use knowledge to try and prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.

The school ensures all classroom teachers, P.E teachers and Sports Coaches understand that pupils should not be forced to take part in an activity if they feel unwell. The school ensures all P.E teachers, classroom teachers and school sports coaches are aware of potential triggers for pupil's medical conditions when exercising and how to minimise these triggers.

The school ensures all pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

Teachers at this school are aware of the potential for pupils with medical conditions to have special educational needs (SEN). Pupils with medical conditions who are finding it difficult to keep up with their studies are referred to the SENCo or Inclusion Manager.

## 10. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

## 11. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the headteacher. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

Where pupils require individual treatment (e.g. Insulin injection) relevant training will be given to a minimum of two members of staff. This is to ensure that in the case of staff absence or staff turnover that someone is always available to support the pupil. In the case of an emergency whereby no trained members of staff are available, parents will be informed immediately and the relevant healthcare professionals contacted.

## 12. Record keeping

The governing board will ensure that written records are kept of all medicine administered to pupils. Parents will be informed if their pupil has been unwell at school.

Parents are asked if their child has any health conditions or health issues in their starter booklet, filled out when their child starts school. At the beginning of each academic year, parents are given the opportunity to update their details. Parents also have the responsibility of informing the school if there is a change in their child's health needs.

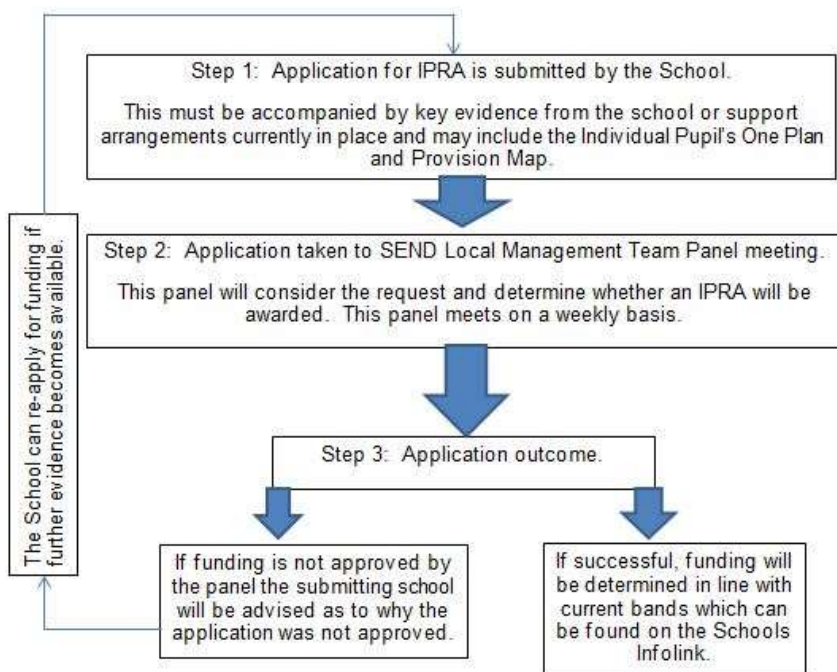
The school uses Individual Health Care Plans (see section 6) to record important details about individual children's medical needs at school. Every child with an IHP has their plan reviewed at least yearly. IHPs are kept in a readily accessible place which all staff are aware of.

A parent/carer is required to complete a consent form detailing doses and times of medication needed.

## 13. Pupils eligible for IPRA funding

In some cases, individuals will be eligible for IPRA (Individual Pupil Resourcing Agreement) funding from Essex Local Authority. This funding can be sought to support pupils with medical needs.

Where funding is received, this will be reviewed on a time-limited basis specified by the Local Authority. Pupils, parents, staff and medical professionals will be invited to share their views regarding the funding and support being received and the Local Authority will be updated. This is similar to an annual review for children with EHC Plans but on a medical basis only.



[Source: Essex Schools InfoLink]

## 14. Liability and indemnity

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

## 15. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the headteacher in the first instance. If the headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

## 16. Monitoring arrangements

This policy will be reviewed and approved by the Trust Board every 3 years.

## 17. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints

- Administering Medicines
- Safeguarding
- Special educational needs information report and policy
- Children with Health Needs who cannot attend school

## Appendix 1: Being notified a child has a medical condition

