



Supporting Pupils with Medical Conditions and Managing Medicines Policy



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1.0 Introduction:

This policy has originally been written in line with the guidance from DfE: Supporting pupils at school with medical conditions - Statutory guidance for governing bodies of maintained schools and proprietors of academies in England – December 2015 updated 16 August 2017. This document sets out the policy and associated practice to ensure pupils with medical needs receive appropriate care and support both in school and whilst on trips, visits and residential. As well as ensuring individual care is provided this policy is written in line with the school's statutory responsibility for Keeping Children Safe in Education, the SEN Code of Practice, Education Act 2002 and Equality Act 2010.

This policy addresses two key strands that are often inter-linked but which can present themselves in school as separate:

1. Pupils who need support for a medical condition and
2. Pupils who require medication to treat a condition

We pride ourselves on providing an inclusive, supportive and positive learning environment. Therefore we recognise that either needing support for a medical condition or requiring medication to treat a condition should not be a barrier to full and active engagement in the life of a school.

We acknowledge that at some point in their life at school, a pupil may need medication; have a short-term medical condition or require support for a longer-term, lifelong or life-threatening condition. The Governing Body will ensure that systems and procedures are in place to meet the needs of the individual and where possible, provide support for families. The school will ensure it works with families, health and social care providers and organisations to best support pupils and ensure medical conditions are properly understood so that individuals receive the appropriate treatment and are effectively supported.

1.01 Health Care Team

To ensure there is effective support for pupils and their families the school has in place the following Health & Care Team:

- **Deputy Headteacher and Assistant Headteacher (Named Leads)**
- **SENDCo (oversight of Health and Care Plans)**
- **Resourced Provision Leader (oversight of Health and Care Plans)**
- **Child Protection and Welfare Officer (oversight of Medical Plans with First Aid Lead)**
- **First Aid Lead (oversight of Medical Plans with CP & Welfare Officer)**
- **Year Leader and Assistant Year Leader (day-to-day contact for pastoral care)**

The school has a Medical Room situated alongside Pupil Services and pupils are made aware of its central location and ease of access. The Head teacher ensures that all members of staff are aware of this policy and related procedures. The Head teacher will ensure that the Health & Care Team are trained and supported to be able to effectively carry out their duties, implement the policy and deliver against all individual Medical Plans and Education Health Care Plans, including in contingency and emergency situations and that this is managed by



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Named Leads. They will monitor that members of staff are aware of medical needs and that appropriate training is being delivered.

1.02 Medical Plans and EHCPs

Medical Plans and EHCPs should consider:

- The medical condition, it's triggers, signs, symptoms and treatments
- The pupil's resulting needs including medication (dose, side effects and storage)
- 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 etc.
- Specific support for the pupil's education, wellbeing and SEMH needs e.g. management of any absences, access arrangements, need for rest periods, additional support catching up with missed learning, counselling etc.
- The level of support needed (some children will be able to take responsibility for their own needs whilst others may need targeted support etc) including in emergencies.
- Who will provide any support needed, expectations of their role, any training needs, healthcare professional input required and cover arrangements
- Who needs to be made aware of the child's condition and the support required
- Any confidentiality issues/agreements with the parent/carer and the individual about the medical condition
- Any emergency procedures including whom to contact and contingency arrangements.

1.03 Liability and indemnity

The Head teacher will accept responsibility for members of staff employed by the school administering or supervising pupils taking prescribed medication during the school day. For the purposes of indemnity, the administration of medicines falls within this definition and the Head teacher will ensure that all members of staff are provided with liability cover and protection as part of the school's insurance policies. The school's insurance policy covers liability arising from the provision of incidental medical treatment arising out of the following activities:

1. First Aid
2. Administration of prescribed and non-prescribed drugs or medicines

The school's summary of cover:

The liability insurances extend to provide cover for incidental medical treatment such as first aid and the administration of medicines, including use of EpiPens, defibrillators, injections, dispensing prescribed and non-prescribed medicines, application of appliances such as splints and oral and topical medication.

Cover only applies to employees/volunteers who have received appropriate medical training and kept up to date with refresher courses. Untrained staff should not provide any treatment/first aid.



2.0 Responsibilities

2.01 Named Lead Responsibilities:

The Named Leads will have oversight of managing the Health & Care Team who will individually consult with parents/carers and relevant Health and Care professionals. The Named Leads will oversee the production of Medical Plans and Education Health Care Plans (EHCP).

2.02 SENDCo and DSP Lead Responsibilities:

EHCPs are written by the SENDCo or DSP Lead and submitted to the Local Authority for review. These members of staff will then ensure all relevant members of staff are made aware of the pupil's needs or medical condition. They will ensure a "Quick Note" is visible on the pupil's individual data on the school's management information system (SIMS) alerting individuals in summary form with the a copy of the EHCP including any medical information stored on the pupil's Linked Documents; a further copy (printed) will be securely stored in either the SEN Office or DSP Office. Class registers will identify if a pupil has a SEN or medical need so teaching and those on Supply will be able to make themselves aware of any condition.

The SENDCO and DSP Lead will ensure relevant members of the Health Care Team are aware of all SEND or medical conditions. They will link with the relevant member of the Health Care Team to ensure a Medical Needs Register is maintained that sits alongside the SEND Register and to produce an Individual Health Care Plan using medical evidence, parental consultation and support from health care professionals where needed. When necessary, the SENDCO and DSP Lead will support the Named Leads to ensure that any relevant staff training is delivered. In addition to educational impacts, some medical conditions may have social and emotional implications. Some pupils may become self-conscious about their condition, may feel bullied or develop emotional disorders such as anxiety or depression around their medical condition. Where there are SEMH concerns the SENDCO and DSP Lead will ensure that appropriate assessment, referral and intervention to support this need, takes place. Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where an individual with a medical need has a SEND or an Education Health Care Plan (EHCP) which brings together their health and social care needs, as well as their special educational provision the SENDCO will work alongside the Local Authority and health bodies to ensure that these needs provided for those with SEND under part 3 of the Children and Families Act 2014 and that their needs are dully met in conjunction with the SEND Code of Practice 2014.

2.03 CP & W Officer and First Aid Lead Responsibilities:

Medical Plans are produced by the CP & W Officer with the First Aid Lead through consultation with parents/carers. These members of staff will then ensure all relevant members of staff are made aware of a pupil's medical condition. They will ensure a "Quick Note" is visible on the pupil's individual data on the school's management information system (SIMS) alerting individuals in summary form, with the a copy of the Medical Plan stored on the pupil's Linked Documents; a further copy (printed) will be securely stored in the Medical Room. The Medical Plan contains information on the symptoms/condition; advice on actions to be taken; details of medication; escalation procedures and family contact details. Class registers will identify if a pupil has a SEN or medical need so teaching and those on Supply will be able to make themselves aware of any condition.



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2.04 First Aid Lead Specific Responsibilities:

- First port of call for medical issues in the school including the creation and update of Medical plans for pupils
- Publication and maintenance of spreadsheet which contains information of pupils with medical plans/medication in school
- Ensuring all medication in school held on behalf of pupils is stored and labelled accurately and advising parents/carers of expired medication
- First aid – timetable to be written of all staff available for First Aid and training programme identified to ensure full day coverage
- Checking the Defibrillators are working and organising the replacement of battery/pads upon their expiry
- Maintaining adequate First Aid medical supplies and ensuring First aid bags used for trips are adequately supplied
- Ensuring an accurate record of injuries are kept and appropriate accident forms completed, copied to the school's Business Operations Manager and completed online at www.bradford.gov.uk/hands/

Where there are long-term or frequent absences due to health problems or appointments connected with a pupil's medical condition the relevant member of the Health Care Team will work with pastoral staff to ensure this is effectively managed. If absence has impacted on an individual's educational attainment the relevant member of the Health Care Team will liaise with pastoral and teaching staff to establish a clear reintegration plan to support them to fully engage in their learning. Where a new pupil requires medical support, transitional arrangements should be made to ensure that measures are in place to meet their medical needs in advance of them starting. In cases where a new diagnosis has been made or a pupil starts at short notice the relevant member of the Health Care Team should ensure that arrangements are put in place within two weeks.

2.05 All members of staff responsibilities:

All staff have a 'duty of care' to act as a responsible adult for children they work with to keep them safe. No member of staff should routinely administer medication. In exceptional circumstances the duty of care could extend to administering medicine and/or taking action in emergency. All staff must ensure that procedures set out in this policy are followed and that the Named Leads are notified when information is received that a pupil has a medical condition. Members of staff will never prevent a child from easily accessing their medication and administering it when and where necessary.

2.06 Parents/Carers Responsibilities:

All parents/carers have the prime responsibility for their child's health and should provide the school with full, up-to-date information about their child's medical needs, including details on medicines. Parents are responsible for making sure their child is well enough to attend school. Where a child is acutely unwell it is advised that the child be kept at home by the parent/carer. Where detailed medical needs exist parents should work with the school to produce an Individual Health Care Plan. Parents must provide written consent to the school for any medication to be administered by a member of staff. The school will not give medicine unless a parent has been consulted. If there is an urgent need for medication then a parent will be contacted by telephone. For longer term medication needs it is the parent/carer's responsibility to monitor when further supplies of medication are needed in the school/setting.

2.07 Pupil's responsibilities:



Pupils with medical conditions will, where appropriate, be fully involved in discussions about their medical support needs. They should contribute to the development of their Individual Health Care Plans and comply with them. Some pupils may be competent to take responsibility for managing their own medicines and procedures. Where this is the case this should be formally agreed with parents/ carers and should be reflected in their Individual Health Care Plans. If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but parents should be informed so that alternative options can be considered.

Where an Individual Health Care Plan is in place unless otherwise indicated, all medication to be administered will be kept in a locked medicine cabinet. The First Aid Lead, SENDCO and DSP Lead, will ensure that information and guidance on health related issues is readily available for members of staff and any members of staff training needs are met. All Individual Health care plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

3.0 Managing medicines on school premises:

3.01 Storage

All medicines will be stored safely and kept in a clearly labelled, locked cabinet or refrigerated when needed. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be readily available to children and stored securely in the medical room; some are locked away some are made available for quick access in emergency.

All medication should be clearly labelled with:

- Child's name
- Prescribed dose
- Expiry date
- Written instructions provided by the prescriber on the label or container
- When no longer required, medicines will be returned to the parent to arrange safe disposal
- Sharp boxes must always be used for the disposal of needles and other sharps

3.02 Administering Medicines

Medicines should only be administered at school when it is deemed detrimental to a child's health or school attendance not to do so. No child under 16 should be given prescription or non-prescription medicines without parent's written consent except in critical situations where verbal consent should be sought. The only exception to this is where the medicine has been prescribed without the parents' knowledge. In such cases, every effort should be made to encourage the child to involve their parents whilst respecting their right to confidentiality.

All members of staff administering medicines should check:

- Child's name
- Prescribed dose
- Expiry date
- Written instructions provided by the prescriber on the label or container

A written record for each time medicines are given should be logged in the pupil's planner and on the First Aid record sheet which will be counter-signed by the pupil. Where stated on



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the Medical Plan or EHCP, any medication or treatment may need to be recorded on a separate medication log.

Members of staff administering medicines should do so in accordance with the prescribers' instructions; they should not make changes to the dosage or parental instructions. Any medication that has been taken out of the container as originally dispensed should not be administered. Any alterations to the label on the medication should not be accepted. Any alteration to dosage must be accompanied by written instructions provided by the prescriber. Tablets should never be crushed, or capsules opened, unless specified, as it is an unlicensed use of the medication. If the child is unable to take oral medication in the solid dosage form it should be referred back to the parent to seek an amendment to a suitable liquid/soluble preparation the prescriber/pharmacist.

3.03 Members of staff administering medication

The administering of medicines is a voluntary role however the school will ensure that members of the Health Care Team are appropriately trained to manage medicines as part of their duties.

3.04 Self Administration of Medication

In the writing of the Medical Plan and/or EHCP, through consultation with parents/carers the decision will be made whether it is appropriate for a pupil to self-administer medication and the level of supervision required.

3.05 Record Keeping

Written details of medication or medical condition should be provided by the parent/carer either in the form of a letter or through completion of the Medication Consent Form (Appendix 1). This information should be stored securely in the Medical Room and relevant information recorded on the Medical List spreadsheet. The following details should be checked:

- Child's name
- Name of medication
- Dose
- Method of administration
- Time/frequency of administration
- Any side effects
- Expiry date

3.06 Risk Assessment and management procedures

The school will ensure that risks to the health of others are properly controlled. This may involve undertaking individual risk assessments for pupils with long term medical needs. The Health Care Team will ensure risk assessments are recorded and available for access by all members of staff.

3.07 Emergency Procedures

The Named Leads will ensure that all members of staff are aware of clearly defined emergency procedures and symptoms for all pupils with a Medical Plan. In the event of an emergency general risk management procedures should be followed. All members of staff should know how to call the emergency services. The school's First Aiders are responsible for carrying out emergency procedures in the event of need. A member of staff should always accompany a child taken to hospital by ambulance and should stay until a parent/carer



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arrives. Where possible the parent should travel from the school with the child in the ambulance. Members of staff should refrain from taking children to hospital in their own vehicle. Where parents are not available health professionals are responsible for any decisions on medical treatment.

3.08 Educational visits, residential trips and sporting activities

Arrangements for taking any necessary medicines will need to be taken into consideration when going on educational visits, residential trips and sporting activities. Members of staff supervising visits must always be aware of any medical needs and relevant emergency procedures in accordance with the Managing External Events Policy. The First Aid Lead, SENDCO and DSP Leads should be consulted, and all members of staff involved in the external event be made aware of how an individual's medical condition will impact on their participation. A copy of relevant individual Medical Plans should be taken on visits in the event of the information being needed in an emergency. Where necessary reasonable adjustments must be made, and a risk assessment produced.

3.09 Staff training

All members of staff who assists in the administration of medication will receive appropriate training/guidance as identified by the Named Leads in liaison with health care professionals. This training will be provided by the relevant health care professional who is qualified to identify and agree the type and level of training required. Where needed, whole school awareness training will be delivered to ensure medical conditions affecting a pupil is fully understood which includes preventative and emergency procedures.

3.10 Complaints

If a member of staff is contacted with regards to a complaint concerning any aspect of this policy, they are to be referred to the school's Complaints Procedure.