



St White's Primary School

Medical Policy

Date of Review: September 2017

Date of Next Review: **September 2018**

Signed, Chair of Governors:

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1. St White's Primary School Medical Policy

1.1 Definition:

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

- Short-term - affecting their participation in school activities while they are on a course of medication.
- Long-term - potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

2. Rationale

2.1 LAs and schools have a responsibility for the health and safety of pupils in their care.

The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

2.2 The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions.

This policy has been written using the "Supporting pupils at school with medical conditions" Statutory guidance for governing bodies of maintained schools and proprietors of academies in England December 2015 (See Appendix 5). Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis, and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

3. Aims

3.1 The school aims to:

- Assist parents in providing medical care for their children.
- Educate staff and children in respect of special medical needs.
- Adopt and implement the LA policy of Medication in Schools.
- Arrange training for volunteer staff to support individual pupils.
- Liaise as necessary with medical services in support of the individual pupil.
- Ensure access to full education if possible.

- Monitor and keep appropriate records.

4. Entitlement

4.1 The school accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils.

4.2 The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

4.3 The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

- Choose whether or not they are prepared to be involved.
- Receive appropriate training.
- Work to clear guidelines.
- Have concerns about legal liability.
- Bring to the attention of management any concern or matter relating to supporting pupils with medical needs.

5. Administering Medicines

5.1 Pupils with Medical Needs

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many this will be short-term, perhaps finishing a course of medicine. Other pupils have medical conditions that, if not properly managed, could limit their access to education.

5.2 Support for pupils with Medical Needs

Parents or guardians have the prime responsibility for their children's health and should provide the school with information about any medical condition.

5.3 There is no legal duty which requires school staff to administer medicine. This is a voluntary role. Staff who provide support for pupils with medical needs or who volunteer to administer medicine will require access to relevant information and training.

5.4 Short Term Medical Needs

5.4.1 Medicines should normally be administered at home and only taken to school when absolutely essential. It is helpful if, where possible, medication can be prescribed in dose frequencies which enable it to be taken outside school hours. Parents should ask the prescribing doctor or dentist about this.

5.4.2 However, the school recognises that sometimes children do need to take medicines in school time. If this is the case, parents or carers may arrange to come into school to administer the medicine. If this is not possible, an application for school to administer medication must be completed and authorised by the Headteacher. This request form can be downloaded from the school website or collected from the Office.

5.5 The school will only accept:

- Medicines prescribed by a medical practitioner
- Medicines in their original container, labelled with the child's name and original instructions for administration (Appendix 4 - form)

5.6 Non-Prescription Medication

5.6.1 If non-prescribed medicine is required, parents should supply and authorise appropriate medicine for their child's use, with written instructions and permission.

5.6.2 On residential visits, the school will send a letter prior to the visit to ask permission from parents to administer children's pain killers, such as Calpol, should the need arise whilst the child is away from home. (Appendix 4 - form)

5.7 Long term Medical Needs

The school needs to know about any medical needs before a child starts school, or when a pupil develops a condition. (Appendix 3 - Form) The school will need to know:

- Details of the condition
- Special requirements
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the school can play

5.8 Administering Medicines

No pupil under 16 should be given medication without written parental consent. Authorised staff should check:

- Pupil's name
- Written instructions provided by parents or doctor
- Prescribed dose
- Expiry date

5.9 Self-Management

It is good practice to allow pupils who can be trusted to do so to manage their own medication from an early age. With this aim in mind, and for reasons of immediacy, children with inhalers will be expected to administer the required dose themselves. At the teacher's discretion, children may also carry their inhaler or keep it in their drawer. Other inhalers should be kept in the classroom in a safe place known and accessible to the children. All inhalers must be named. Children are reminded not to share inhalers.

5.10 Refusing Medication

If pupils refuse to take medication, the school will not force them to do so and will record the fact and inform parents as soon as practicable.

5.11 Record Keeping

5.11.1 Parents are responsible for supplying information about medicines and for letting the school know of any changes to the prescription or the support needed.

5.11.2 Parents and carers are responsible for ensuring any medication kept in school is contained in the original packaging, within the expiry date and to provide a replacement before expiry.

5.12 School Trips

5.12.1 Pupils with medical needs are encouraged to participate in visits. Staff are made aware of any medical needs and arrangements for taking any necessary medication are put in place.

5.12.2 Sometimes an additional adult might accompany a particular pupil. There may also be the need to undertake a risk assessment for a particular child.

5.13 Sporting Activities

Our PE and extra-curricular sport is sufficiently flexible for all pupils to follow in ways appropriate to their own abilities. Some pupils may need to take precautionary measures before or during exercise and be allowed immediate access to their medication if necessary, inhalers for example. Teachers supervising sporting activities are made aware of relevant medical conditions.

5.14 Storing Medication

5.14.1 Any medication should be in a container that is labeled with the name of the pupil, name and dose of the drug and frequency of administration and within expiry date. Where a pupil needs two or more prescribed medicines, each should be in a separate container.

5.14.2 Medicines are kept in the office or, when necessary, in the staffroom fridge, in a clearly labeled container.

5.15 Disposal of Medicines

The school does not dispose of medicines. Parents should collect medicines held at school and are responsible for the disposal of out-of-date medicines.

5.16 Health Care Plans

5.16.1 Some children require a health care plan to identify the level of support that is needed at school. The plans may identify specific training needed by volunteer staff. Staff should not give medication without appropriate training.

5.16.2 Training is given on an individual child basis, by the local health authority (usually the school nurse) for administering epipens.

5.16.3 Agreeing to administer intimate or invasive treatment is entirely up to each individual member of staff. No pressure is put on staff to assist in treatment.

5.16.4 Two adults should be present for the administration of intimate or invasive treatment, unless there are exceptional circumstances.

5.16.5 This policy will be reviewed every **2 years**, or sooner if circumstances change.

5.17 Emergency Salbutamol Inhaler

5.17.1 The school will retain a salbutamol inhaler in the first aid room for emergency use.

5.17.2 The school will follow the protocol from The Department of Health Guidance on the use of emergency salbutamol inhalers in school. (**Appendix 6**)

5.17.3 The emergency inhaler will be stored together with a register of pupils who have been diagnosed with Asthma or prescribed a reliever inhaler. The emergency inhaler will only be used for children on this list in the event of their own inhaler being empty or broken. Parents will be asked to complete a permission form (**Appendix 1**). Under no circumstances will the emergency inhaler be used on any other child.

5.17.4 A record will be kept of use of the emergency inhaler and a letter sent home to parents. (**Appendix 2**).

6. Expectations

6.1 It is expected that Parents will be encouraged to co-operate in training children to self-administer medication if this is practicable, and that members of staff will only be asked to be involved if there is no alternative

7. Consistency of Policies

This Policy should be read in conjunction with the School's Safeguarding and First Aid Policy

APPENDIX 1

CONSENT FORM: USE OF EMERGENCY SALBUTAMOL INHALER
ST WHIE'S PRIMARY SCHOOL

Child showing symptoms of asthma/having asthma attack

1. I can confirm that my child has been diagnosed with asthma and/or has been prescribed an inhaler (delete as appropriate).
2. My child has a working, in-date inhaler, clearly labelled with their name, which is kept in school in their inhaler bag and will be carried with them at all times

Or (delete as appropriate)

3. My child only needs an inhaler from time to time i.e. when suffering from a cold, and when necessary it will be brought to school and handed to the teacher.
4. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

SIGNED: **DATE:**

NAME (print):

Child's Name:

Class:

Parent's address and contact details:

.....
.....

Telephone:

Email:

APPENDIX 2

**ST WHITE'S PRIMARY SCHOOL
EMERGENCY SALBUTAMOL INHALER USE – NOTIFICATION TO PARENTS**

CHILD'S NAME:

CLASS:

DATE:

Dear _____

(Delete as appropriate)

This letter is to formally notify you that has had problems with his/her breathing today. This happened when

A member of staff helped them to use their asthma inhaler.

They did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given puffs.

Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given Puffs.

(Delete as appropriate)

Although they soon felt better, we would strongly advise that you have your son/daughter seen by your own doctor as soon as possible.

Yours sincerely

**T CROSS
HEAD TEACHER**

APPENDIX 3

ST WHITE'S PRIMARY SCHOOL
MEDICAL PROCEDURE/CONDITION
INDIVIDUAL HEALTH CARE PLAN
(Parents/Carer to complete for Schools)

NAME:

DATE OF BIRTH:

CONDITION:

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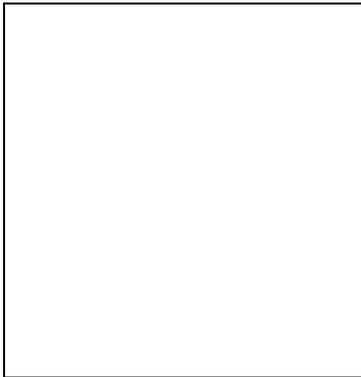
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CLASS/FORM:

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NAME OF SCHOOL:



DATE:

REVIEW DATE:

CONTACT INFORMATION:

Family contact (1)

NAME:

PHONE NO: (Work):
(Home):

RELATIONSHIP:

Family contact (2)

NAME:

PHONE NO: (Work):
(Home):

RELATIONSHIP:

CLINIC/HOSPITAL CONTACT:

NAME:

PHONE NO:

GP:

NAME:

PHONE NO:

Date of Health & Safety Risk Assessment (to be carried out by school):

NAMES OF SCHOOL STAFF WHO HAVE VOLUNTEERED TO BE INVOLVED IN THIS CHILD'S CARE:

- (1) (2)
(3) (4)
-

Outline of procedure/condition requiring management:

Describe condition and give details of pupil's individual symptoms:

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.....
.....

Describe treatment required:

.....
.....
.....
.....

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

Signature(s): **Date:**

.....

Relationship to pupil:

Head Teacher: **Date:**

School Health Nurse: **Date:**

Copy to: Parents/School/GP/Consultant/School Team

APPENDIX 4

St White's Primary School

REQUEST FOR SCHOOL TO ADMINISTER MEDICINE

The school will not give your child medicine unless you complete and sign this form, and the Headteacher has agreed that school staff can administer the medication. School staff have no legal obligation to administer medicines or supervise their administration.

DETAILS OF PUPIL

Surname:.....

Forename(s):.....

Address:.....

M/F

.....

Date of Birth:.....

.....

Class:.....

Condition/illness:.....

MEDICATION

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

For how long will your child take this medication:.....

Date dispensed:.....

Full Directions for use:

Dosage and method:.....

Timing:.....

Special Precautions:.....

Side Effects:.....

Self Administration:....yes/no.....

Procedures to take in an emergency:.....

CONTACT DETAILS

Name:.....

Daytime Telephone No:.....

Relationship to pupil:.....

Address:.....

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I understand that I must deliver the medicine personally to The Office and accept that this is a service which the school is not obliged to undertake.

Date:.....

Signatures:.....

.....

Relationship to pupil:.....

