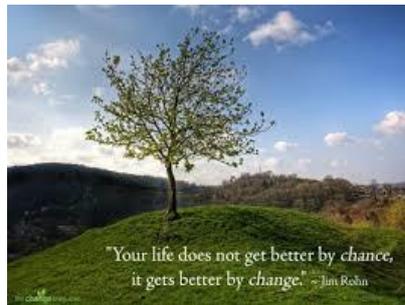




# Whiston Junior and Infant School

Part of White Woods Primary Academy Trust



**Engaging Minds Developing Lives**

## **Supporting Pupils with Medical Conditions and Managing Medicines Policy**

Reviewed by SLT: April 2017  
Approved by Governing Body: June 2017  
Review Date: June 2018

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### **Whiston Junior and Infant School, part of White Woods Primary Academy Trust, vision and aims:**

At Whiston Junior and Infant School, we aim to provide quality education for children between four and eleven years of age.

The school aims to provide high standards of teaching and learning through:

- A rich, broad, balanced and creative curriculum which sustains the engagement of all learners.
- Operating an environment which is safe, healthy, caring and supportive for everyone.
- Encouraging self-reliance and pride in all achievements.
- Developing learning skills and a love of learning, including the ability to question, enquire and be independent in their approach to learning.
- Promoting the development of tolerance and respect for others, regardless of race, creed or gender and ensure that all learners have equality of opportunity.

## Statement of Intent

Whiston Junior and Infant School, part of White Woods Primary Academy Trust, 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 April 2014 – "Supporting pupils at school with medical conditions".

Ofsted places a clear emphasis on meeting the needs of pupils with SEN and Disabilities and this includes children with medical conditions.

### 1. Key roles and responsibilities

#### 1.1. The Local Authority (LA) is responsible for:

- 1.1.1. Promoting cooperation between relevant partners and stakeholders regarding supporting pupils with medical conditions.
- 1.1.2. Providing support, advice and guidance to schools and their staff.
- 1.1.3. Making alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a medical condition.

#### 1.2. The Governing Body is responsible for:

- 1.2.1. The overall implementation of the Supporting Pupils with Medical Conditions Policy and procedures of Whiston Junior and Infant School.
- 1.2.2. Ensuring that the Supporting Pupils with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- 1.2.3. Handling complaints regarding this policy as outlined in the school's Complaints Policy.
- 1.2.4. Ensuring that all pupils with medical conditions are able to participate fully in all aspects of school life.
- 1.2.5. Ensuring that relevant training provided by the LA is delivered to staff members who take on responsibility to support children with medical conditions.
- 1.2.6. Guaranteeing that information and teaching support materials regarding supporting pupils with medical conditions are available to members of staff with responsibilities under this policy.
- 1.2.7. Keeping written records of any and all medicines administered to [individual pupils](#) and [across the school population](#).
- 1.2.8. Ensuring the level of insurance in place reflects the level of risk.

### 1.3. The Head Teacher is responsible for:

- 1.3.1. The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and procedures of Whiston Junior and Infant School.
- 1.3.2. Ensuring the policy is developed effectively with partner agencies.
- 1.3.3. Making staff aware of this policy.
- 1.3.4. Liaising with healthcare professionals regarding the training required for staff.
- 1.3.5. Making staff who need to know aware of a child's medical condition.
- 1.3.6. Developing Individual Healthcare Plans (IHCPs).
- 1.3.7. Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- 1.3.8. If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
- 1.3.9. Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- 1.3.10. Contacting the school nursing service in the case of any child who has a medical condition.

### 1.4. Staff members are responsible for:

- 1.4.1. Taking appropriate steps to support children with medical conditions.
- 1.4.2. Where necessary, making reasonable adjustments to include pupils with medical conditions into lessons.
- 1.4.3. Administering medication, if they have agreed to undertake that responsibility.
- 1.4.4. Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, if they have agreed to undertake that responsibility.
- 1.4.5. Familiarising themselves with procedures detailing how to respond when they become aware that a pupil with a medical condition needs help.
- 1.4.6. **Name of staff member** (See Appendix 6 to be updated where needed and kept in school office) is responsible for administering injections.

### **1.5. School nurses are responsible for:**

- 1.5.1. Notifying the school when a child has been identified with requiring support in school due to a medical condition.
- 1.5.2. Liaising locally with lead clinicians on appropriate support.

### **1.6. Parents and carers are responsible for:**

- 1.6.1. Keeping the school informed about any changes to their child/children's health.
- 1.6.2. Completing a [parental agreement for school to administer medicine](#) form before bringing medication into school.
- 1.6.3. Providing the school with the medication their child requires and keeping it up to date.
- 1.6.4. Collecting any leftover medicine at the end of the course or year.
- 1.6.5. Discussing medications with their child/children prior to requesting that a staff member administers the medication.
- 1.6.6. Where necessary, developing an [Individual Healthcare Plan](#) (IHCP) for their child in collaboration with the Head Teacher, other staff members and healthcare professionals.

## **2. Definitions**

- 2.1. "Medication" is defined as any prescribed or over the counter medicine.
- 2.2. "Prescription medication" is defined as any drug or device prescribed by a doctor.
- 2.3. A "staff member" is defined as any member of staff employed at Whiston Junior and Infant School, including teachers.

## **3. Training of staff**

- 3.1. Teachers and support staff will receive training on the Supporting Pupils with Medical Conditions Policy as part of their new starter induction.
- 3.2. Teachers and support staff will receive regular and ongoing training as part of their development.
- 3.3. Teachers and support staff who undertake responsibilities under this policy will receive the following training externally:

- Paediatric First Aid (2 day)
- Basic First Aid Training (1 day)
- Epipen Training
- Manual Handling Training
- Diabetic training (if identified as a pupil needs)

- 3.4. The lead for organising this training is Mrs Finney and Mrs Angell.
- 3.5. No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility, including administering.
- 3.6. No staff member may administer drugs by injection unless they have received training in this responsibility
- 3.7. The School Secretary will keep a record of training undertaken and a list of school staff qualified to undertake responsibilities under this policy.

#### **4. The role of the child**

- 4.1. Medicines will be located in an easily accessible location (Classroom lockable tall cupboard).
- 4.2. If pupils refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- 4.3. Where appropriate, pupils will be encouraged to take their own medication under the supervision of a trained adult.

#### **5. Individual Healthcare Plans (IHCPs)**

- 5.1. Where necessary, an Individual Healthcare Plan (IHCP) will be developed in collaboration with the pupil, parents/carers, Head Teacher, Special Educational Needs Coordinator (SENCO) and medical professionals.
- 5.2. IHCPs will be easily accessible whilst preserving confidentiality.
- 5.3. IHCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- 5.4. Where a pupil has an Education, Health and Care plan or special needs statement, the IHCP will be linked to it or become part of it.

- 5.5. Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the child needs to reintegrate.

## 6. Prescribed Medicines

- 6.1. **Medicines** should only be **taken to school when essential**; that is where it would be detrimental to a child's health if the medicine were not administered during the school. **Note: Schools should only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.** Medicines should always be provided in the **original container** as **dispensed by a pharmacist** and include the prescriber's instructions for administration and dosage.
- 6.2. We **will never accept medicines that have been taken out of the container** as originally dispensed **nor make changes to dosages on parental instructions.**
- 6.3. Where possible, **it is preferable for medicines to be prescribed in frequencies that allow the pupil to take them outside of school hours.** If this is not possible, prior to staff members administering any medication, the **parents/carers** of the child **must complete and sign a parental agreement** for a school to administer medicine form.
- 6.4. It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken **outside school hours.** Parents could be encouraged to ask the prescriber about this.
- 6.5. **It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime.**
- 6.6. **If four times per day, school will only administer one dose during the school day.**
- 6.7. **No child will be given any prescription medicines without written parental consent except in exceptional circumstances.**

### SITUATIONS IN WHICH CHILDREN MAY TAKE ANY NON-PRESCRIPTIVE MEDICINES

- 6.8. **Non-prescribed medicines will not be administered to pupils at Whiston Junior and Infant School unless advised by the medical practitioner.** If a child is suffering regularly from frequent or acute pain, the parents should be encouraged to refer the matter to the child's GP. If the medical practitioner deems that any non-prescribed medication, or products used for medicinal purposes such as soothers, cough sweets, throat sweets, lip balm etc. are a clinical requirement, and that not taking them would be detrimental to the child's medical health, then the onus is on the parents providing a note from the practitioner to that effect. Any such products will only be given short term, and will be administered at set times such as break or lunch. The principle here is that if the product

is clinically necessary the practitioner will either prescribe or provide notification that it is necessary. Otherwise the assumption is that it is not necessary during school hours.

**6.9. A CHILD UNDER 16 SHOULD NEVER BE GIVEN ASPIRIN OR MEDICINES CONTAINING IBUPROFEN UNLESS PRESCRIBED BY A DOCTOR. THEREFORE, WE WILL NOT BE ABLE TO ADMINISTER THESE MEDICINES WITHOUT A DOCTOR'S PRESCRIPTION.**

**6.10. Medicines MUST be in date, labelled, and provided in the original container** (except in the case of insulin which may come in a pen or pump) with dosage instructions. **Medicines which do not meet these criteria will not be administered.**

6.11. A maximum of **four weeks** supply of the medication may be provided to the school at one time (except asthma pumps).

6.12. Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence which will be dealt with under our Drug and Alcohol Policy.

6.13. Medications will be stored in the child's classroom in the lockable cupboard.

6.14. Any medications left over at the end of the course will be returned to the child's parents.

6.15. Written records will be kept of any medication administered to children.

6.16. Pupils will never be prevented from accessing their medication.

**6.17. Whiston Junior and Infant School cannot be held responsible for side effects that occur when medication is taken correctly.**

6.18. **Sun cream** - Parents are requested to apply liberally first thing in the morning before school. On very hot days, children may independently reapply in afternoon if outside for Games. Sun cream would need to be clearly labelled, and kept in a box by the class teacher.

## **7. Emergencies**

7.1. Medical emergencies will be dealt with under the school's emergency procedures.

7.2. Where an Individual Healthcare Plan (IHCP) is in place, it should detail:

- What constitutes an emergency.
- What to do in an emergency.

7.3. Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.

7.4. If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

## 8. Avoiding unacceptable practice

8.1. Whiston Junior and Infant School understands that the following behaviour is unacceptable:

- Assuming that pupils with the same condition require the same treatment.
- Ignoring the views of the pupil and/or their parents.
- Ignoring medical evidence or opinion.
- Sending pupils home frequently or preventing them from taking part in activities at school.
- Sending the pupil to the school office alone if they become ill.
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

## 9. Insurance

9.1. Teachers who undertake responsibilities within this policy are covered by the school's insurance.

9.2. Add details of the insurance arrangements your school has in place which cover staff providing support to pupils with medical conditions.

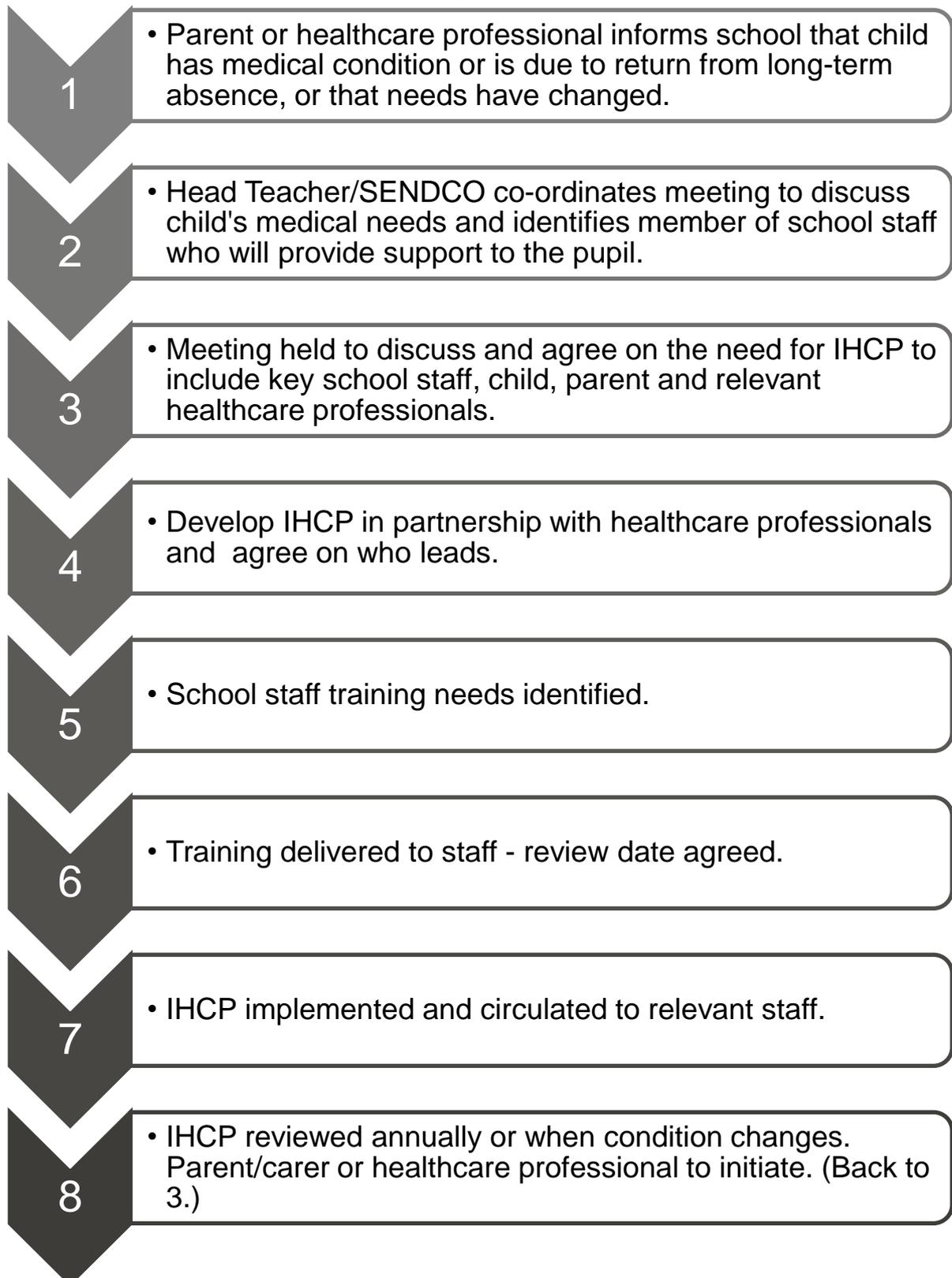
9.3. Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Business Manager.

## 10. Complaints

10.1. The details of how to make a complaint can be found in the Complaints Policy:

- 10.1.1. Stage 1 - Complaint heard by Staff Member
- 10.1.2. Stage 2 - Complaint heard by Head Teacher
- 10.1.3. Stage 3 – Complaint heard by Governing Bodies' Complaints Appeal Panel (CAP)

## Appendix 1 - Individual healthcare plan implementation procedure



## Appendix 2 - Individual healthcare plan template

### Whiston Junior and Infant School Individual Health Care Plan

Child's name

Year group

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

#### Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

#### Clinic/Hospital Contact

Name

Phone no.

#### G.P.

Name

Phone no.

Who is responsible for providing support in school

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

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

Daily care requirements

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

Arrangements for school visits/trips etc.

Other information

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

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

This document will be kept in a child's **Learning Journey File** and reviewed at **Parent's Evening**

**Note regarding the administering of asthma pumps:**

**Preventative: Follow IHCP – Part of daily routine**

**Reliever: Record administration in the accident/illness notes and tick asthma pumps – report slip to be given/sent home to parent**

**Appendix 3 - Parental agreement for a school to administer medicine**

**The school will not give your child medicine unless you complete and sign this form, and the school has a policy that the staff can administer medicine.**

**Whiston Junior and Infant School medicine administering form**

Name of child

--

Date information provided by parent

--

Year group

--

Medical condition or illness

--

**Medicine**

Name/type/strength of medicine  
*(as described on the container)*

--

Expiry date

--

Dosage and method

--

Timing and duration of course

--

Special precautions/other instructions

--

Are there any side effects that the school/setting needs to know about?

--

Self-administration – y/n

--

Procedures to take in an emergency

--

**NB: Medicines must be in the original container as dispensed by the pharmacy**

**Contact Details**

Name

--

Relationship to child

--

I understand that I must deliver the medicine personally to

<b>School Office only</b>
---------------------------

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent Signature(s) as contact details

Signature of staff (s) \_\_\_\_\_ Date \_\_\_\_\_

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**Appendix 4 – Record of medicine administered Name:**

(Page to be photocopied on the back of Appendix 3 and completed when medicine administered)

Date			
Time given			
Staff name/initials			

Date			
Time given			
Staff name/initials			

Date			
Time given			
Staff name/initials			

Date			
Time given			
Staff name/initials			

Date			
Time given			
Staff name/initials			

## Appendix 4i – Record of medicine administered (Insulin) Name:

(Page to be photocopied on the back of Appendix 3 and completed when medicine administered)

Date		Notes:
Time given		
Dose		
Staff name/initials		

Date		Notes:
Time given		
Dose		
Staff name/initials		

Date		Notes:
Time given		
Dose		
Staff name/initials		

Date		Notes:
Time given		
Dose		
Staff name/initials		



## Appendix 6 – Whole School Staff training record – administration of medicines

Medical Training	Teachers	Teaching Assistants		Other Staff – Office and SMSAs	Date of Training	Validity of training	Date for renew
Paediatric First Aid (2 day)		Karen Powell	Paula Fretwell		28-11-14	3 years	28-11-17
		Tracy Mercer	Carol Carlin		23-06-16		22-06-19
			Helen Green		23-06-16		22-06-19
Basic First Aid Training (1 day)	Laura Neal	Helen Green	Grainne Haynes	Gill Mitchell	7-05-15	3 years	7-05-18
	Amanda Hall	Carol Carlin		Liz Hill			
	Rachel Thomson-Plant			Nicky Riley			
	Nicola Woodward						
	Louise Lodge				5-09-15		5-09-18
		Tracy Mercer	Amanda Moore	Michelle Finney			
		Joanne Campbell	Donna Jackson	Kirsty Freeman			
		Gina Farmer	Craig Roberts				
		Hazel Hopps					
				Helen Lilleyman	21-10-16		21-10-19
			Natalie Wood	29-02-17		29-02-20	
Epipen Training		Gina Farmer	Lesley Whiting		4-12-15	1 year	4-12-16
		Craig Roberts					
		Joanne Campbell	Donna Jackson		6-05-16		6-05-17
		Carol Carlin	Amanda Moore				
		Paula Fretwell					
Diabetic Training		Donna Jackson Karen Powell Lesley  Whiting	Joanne Campbell Gina Farmer Amanda Moore		01-09-16	1 year	01-09-17
Manual Handling Training							

**Appendix 7 - Incident Reporting Form**

Date of incident	Time of incident	Place of incident	Name of ill/injured person	Details of the illness/injury	Was first-aid administered? If so, give details	What happened to the person immediately afterwards?	Name of first-aider	Signature of first-aider

## Appendix 8 - Staff training record – administration of medicines

Name of school/setting:

Name:

Type of training received:

Date of training completed:

Training provided by:

Profession and title:


I confirm that \_\_\_\_\_ has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated

by \_\_\_\_\_.

Trainer's signature \_\_\_\_\_

Date \_\_\_\_\_

**I confirm that I have received the training detailed above.**

Staff signature \_\_\_\_\_

Date \_\_\_\_\_

Suggested review date \_\_\_\_\_

## Appendix 9 - Contacting emergency services

**Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.**

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

- Your telephone number – **01709 828189**
- Your name.
- Your location as follows: **Whiston Junior and Infant School, Saville Road, Whiston, Rotherham, S60 4DX.**
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and state that the crew will be met and taken to the patient.

Put a completed copy of this form by the phone.

## Appendix 10 - Model letter inviting parents to contribute to individual healthcare plan development

Dear Parent,

RE: DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership with the school, parents/carers, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will include add details of team. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I or Mrs Goodwin would be happy for you contact us by email or to speak by phone if this would be helpful.

Yours sincerely,

Mrs T. Angell

Head Teacher