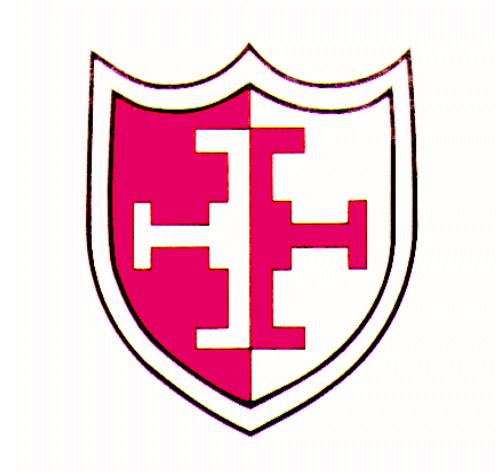


ST. CHAD'S CATHOLIC PRIMARY SCHOOL

Policy for Children with Medical Needs



'Christ in our heads, our hearts, our hands'

Reviewed September 2016.

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This policy should be read in conjunction with the following forms which are part of it:

Form 1 - Health care plans

Form 2 - Request for school to administer medication

Form 3 - Principal agreement to administer medicine

Form 4 - Record of medicines administered to all children

Form 5 - Record of medicine administered to an individual child

1. INTRODUCTION

- 1.1 This document outlines St. Chad's Catholic Primary School's policy on managing medication in schools and the procedures to be adopted to support individual pupils with medical needs. The school complies with the Equality Act (2010), and Local Authority advice and adopts the DfE document Supporting Pupils at School with Medical Conditions (December 2015) as its framework.
- 1.2 The aims of the policy are to ensure that:
- Pupils with medical conditions participate as fully as possible in all aspects of school life.
 - St. Chad's Catholic Primary School is a safe environment for all pupils.
 - Parents, staff and members of the Academy Committee are aware of their respective roles and all receive appropriate support.

2 FIRST AID AND ADMINISTERING MEDICATION

- 2.1 Any member of staff is expected to carry out any obvious first aid or common sense action to save a child in an emergency.
- 2.2 More information on First Aid in the school can be found in the school's First Aid policy.
- 2.3 All staff should be familiar with normal hygiene procedures and precautions for avoiding infections. Staff should have access to disposable gloves.
- 2.4 There is no legal duty which requires school staff to administer medication; this is a voluntary role. Teachers and other school staff may choose to undertake this duty as long as they receive appropriate training to enable them to do so.

3 RESPONSIBILITY FOR PUPILS WITH MEDICAL NEEDS

- 3.1 Parents (In this document the term 'parent' also encompasses carer.)
- Parents have prime responsibility for their child's health and should keep pupils at home when they are acutely unwell.
 - A child's medical condition can impact upon academic progress and other aspects of school life. Parents are encouraged to let staff know about any medical needs before a child starts school, or when a pupil develops a condition.
 - Parents should provide the Principal with sufficient information about their child's medical condition, treatment and care.
 - Any request for the staff to administer long term prescribed medication must be confirmed in writing with explicit instructions about dosage.
 - Parents should, jointly with the Principal, reach agreement on the school's role in helping with their child's medical needs.
 - A child's medical condition is taken into consideration when producing PEEPSs and making Risk assessments.
- 3.2 **THE ACADEMY COMMITTEE**
- The Academy Committee has the responsibility for developing the school's policies to support pupils with medical needs.
 - The Academy Committee wishes to take account of the views of parents and staff and welcomes comments.
- 3.3 **THE PRINCIPAL**
- The Principal is responsible for implementing this policy.
 - The Principal is required to obtain consent before staff give pupils help with medical needs.
 - The Principal should ensure that staff receive proper support and training where

necessary.

- The Principal is responsible for ensuring that *all* staff who may be responsible for pupils (e.g. supply teachers) have the necessary knowledge and training to support a child with medical needs.
- If alerted by staff over the deterioration in a pupil's health over time, the Principal should inform the pupil's parents.
- For a child with medical needs, the Principal will need to agree with parents what support can be provided.
- The Principal is encouraged to seek advice, as necessary, from the school nurse, the child's GP, other medical advisers and the Local Authority Physical Impairment and Medical Inclusion Service (PIMIS) team.
- The Principal should ensure that there is insurance cover for staff who provide specific medical support.
- The Principal should ensure the safe and suitable storage of medications – see section 9.

3.4 **TEACHERS AND OTHER SCHOOL STAFF**

- Teachers who have pupils with medical needs in their class should understand the condition and know when and where the pupil may need extra attention.
- Staff should be aware of the likelihood of an emergency arising and what action to take if one occurs.
- Staff noticing a deterioration in a pupil's health over time should inform the Principal.
- Staff should follow the school procedures on administering or supervising medication.

Supply staff or sports coaches must be made aware of the contents of a child's Care Plan and which member of staff to seek further assistance or advice if necessary.

4. **SHORT TERM MEDICAL NEEDS**

- 4.1 Medication should only be taken at school when absolutely necessary. Parents should ask the prescribing doctor about providing medication, for example antibiotics, in dose frequencies which enable it to be taken outside school hours.

5. **LONG TERM OR MORE COMPLICATED MEDICAL CONDITIONS**

- 5.1 Parents of children with long term or more complicated medical conditions should inform the Principal and, where appropriate, a written Health Care Plan will be drawn up involving the parents and relevant health care professionals. Care Plans are protected, but accessible to staff.
- 5.2 Parents are responsible for letting the school know of any changes to their child's treatment. This must be accompanied by a letter from a medical professional. A health plan should be reviewed at least annually with the School Health Advisor.

6. COMMON CONDITIONS

ASTHMA

- 6.1 The health care plan will, where necessary, cover the pupil's use of inhalers, taking account of individual circumstances.
- 6.2 In principle, the school policy on inhalers is:
- It is good practice to allow children to take charge of and use their inhaler from an early age.
 - Pupils who are able to use their inhalers themselves should usually be allowed to carry them with them.
 - If a child is too immature to take personal responsibility for their inhaler, staff should make sure it is stored in a safe but readily accessible place.
 - All inhalers should be marked by the parents with the pupil's name.
 - Inhalers should be available during sports and school trips.
 - Parents should provide the school with spare reliever inhalers in case the inhaler is left at home or runs out. Spare inhalers must be clearly labelled by the parents with the pupil's name and stored safely.

EPILEPSY

- 6.3 The school will seek to positively support pupil's with epilepsy and ensure that staff are suitably trained to
- understand likely triggers so that action can be taken to minimise exposure to them.
 - understand a seizure and the appropriate action to take if one occurs.
- 6.4 Staff may understandably be concerned about administering intimate or invasive treatment which is sometimes prescribed for pupils who experience tonic clonic seizures. Such concerns would be taken seriously. Further advice would be sought from medical professionals and others before the staff volunteered for this role.

DIABETES

- 6.5 A child with diabetes should have a Health Care Plan that addresses their needs
- 6.6 The school will make special provision to ensure that the child has access to snacks and/or fast acting sugar as appropriate.
Staff will receive training from specialist nursing staff to support children in testing their blood sugar and administering insulin injections.
No member of staff will have to assist in injections unless they volunteer and receive appropriate training and support from an appropriate health professional.

ANAPHYLAXIS (Extreme allergic reaction requiring urgent medical treatment)

- 6.7 Parents should inform the Principal if their child is diagnosed with a severe allergy. A Health Care Plan will outline the procedures to be put in place so that risks are minimised and swift action can be taken in an emergency.
- 6.8 Where possible efforts will be made to minimise the risk of the child coming into contact with the allergen but parents need to aware it is not always possible to guarantee no contact.
- 6.9 In the most severe cases a pupil may be prescribed with a device for injecting adrenaline (Epipen). Staff who volunteer to give or supervise the administration of this medication must receive training from an appropriate health professional.

7. CONFIDENTIALITY

- 7.1 The Principal will discuss issues of confidentiality with parents. They should jointly reach agreement before passing on information about the pupil's health to other school

staff, relevant adults, or pupils. Information passed on should be on a “need to know” basis.

8. SELF ADMINISTRATION OF MEDICATION

8.1 The school encourages pupils to manage their own medication where possible. If pupils are capable of administering their medication themselves, staff need only supervise the process. Where relevant, this will be arranged as part of the agreement between the Principal and parents and the parents will provide written confirmation that they have requested this.

9. STORING MEDICATION

9.1 The Principal is responsible for ensuring that medicines are stored safely and are only accessible to those for whom they are prescribed

9.2 All written plans for administration of medication must address how the child can safely access their medication. Pupils should know where their own medication is stored and how to access it.

9.3 Medicines are kept in a secure place not accessible to pupils.

9.4 Where this is impractical (because a pupil requires ready access to the medication, e.g. an asthma inhaler) the parent must request in writing that the pupil carry their own medication.

9.5 The school does not wish to store large volumes of medication. Where possible the parent should provide the required dose each day or as agreed with the Principal.

9.6 Parents are responsible for handing over any medication personally to the designated member of staff, as agreed with the Principal.

9.7 Medicines brought into school should be the original container labelled with:

- the name of the pupil
- the name and dose of the drug and the frequency of administration

9.8 Where a pupil needs two or more prescribed medicines each should be in a separate container.

9.9 Some medicines need to be refrigerated. Medicines can be kept in a refrigerator in the staffroom, but must be in an airtight container clearly labelled.

9.10 All staff should know how to access any medication that a pupil may need in an emergency

9.11 School staff should not dispose of medicines. Parents are responsible for the disposal of date expired medicines. At the end of each term parents should collect any medicines held at the school, and arrange for their proper disposal, where appropriate.

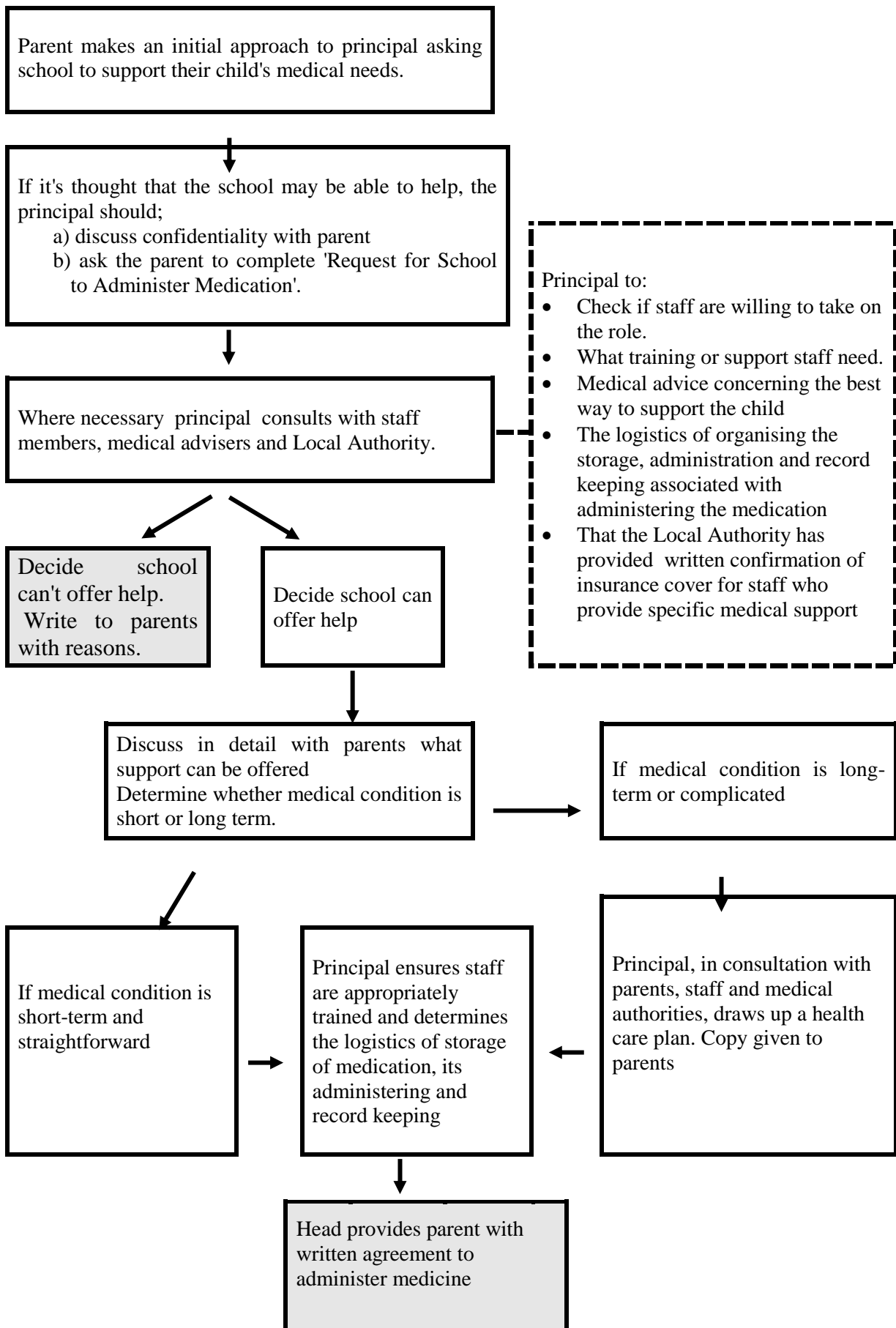
10. EMERGENCY PROCEDURES

10.1 All staff should know how to call the emergency services.

10.2 In a medical emergency an ambulance will be called.

10.3 Any pupil taken to hospital will be accompanied by a member of staff who should remain until the pupil's parent arrives

11. PROCEDURE FOR AGREEING TO SUPPORT A PUPIL WITH MEDICAL NEEDS



12. PROCEDURE FOR ADMINISTERING OR SUPERVISING THE ADMINISTRATION OF MEDICATION

The staff member responsible for giving/supervising the medication should be accompanied by another adult (where necessary).



The adult / both adults should check;

- the pupil's name
- that the parent has made a written request for the medication to be given.
- the details on any Health Care Plan
- the details on the written agreement
- what action is to be taken.
- the prescribed dose.
- the expiry date of the medication



If the pupil refuses to take the medication, staff should not force them to do so. The pupil's parents should be informed as a matter of urgency. If necessary, the school should call the emergency services.



Once the medication is administered a record should be made on 'Record Of Medication Administered To All Pupils'.
The adult / both adults should sign.



A record of the administration of the medication should also be entered in the child's individual records.



If a non-prescription medicine has been administered, the staff member should arrange for the parents to be notified, in writing, on the day the dose is given.