



## CROSBY-ON-EDEN SCHOOL

**“Enjoying achieving; achieving enjoyment”**

# Supporting Pupils with Medical Conditions & Medicines in School

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Review responsibility	Finance & Premises
Signed (Head) <i>Ayesha Wleah</i>	Signed (CO-Chair of Governors) <i>Dr. M. Briggs</i> <i>Mr J. Ditchburn</i>



## INTRODUCTION

This policy sets out how pupils at Crosby-on-Eden Church of England Primary School with medical conditions will be properly supported so that they have access to education. It will be reviewed regularly and made readily accessible to parents, staff and, where appropriate, other adults working or volunteering in school.

## RATIONALE

Wherever possible children should be educated with their peers, regardless of short or long term needs for medication. This principle will result, from time to time, in the school agreeing to administer essential prescribed medication to pupils so that those children are able to attend school.

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

- (a) Short-term, affecting their participation in school activities which they are on a course of medication.
- (b) Long-term, potentially limiting their access to education and requiring extra care and support

## STATEMENT OF INTENT

Crosby-on-Eden School policy is based on the statutory Department for Education (DfE) guidance document ['Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England'](#), April 2014 to coincide with the application of section 100 of the Children and Families Act 2014 which came into force on 1 September 2014.

Crosby-on-Eden School is committed to ensuring parents feel confident that effective support for their child's medical condition will be provided and that their child will feel safe at school by putting in place suitable arrangements and procedures to manage their needs. We also understand that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences and our arrangements take this into account. We undertake to receive and fully consider advice from involved healthcare professionals and listen to and value the views of parents and pupils. Given that many medical conditions that require support at school affect a child's quality of life and may even be life-threatening, our focus will be on the needs of each individual child and how their medical condition impacts on their school life, be it on a long or short term basis.

Crosby on Eden CE School also appreciates that some children with medical conditions may be disabled and their needs must be met under the Equality Act 2010. Some children may also have special educational needs or disabilities (SEND) and may have a Statement of Special Educational Needs, or an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with special educational needs or disabilities (SEND), this policy should be read in conjunction with our SEND Policy and the DfE statutory guidance document ['Special Educational Needs and Disability: Code of Practice 0-25 Years'](#), July 2014.

## 1. ROLES AND RESPONSIBILITIES

**Governing Body-** Must make arrangements to support pupils with medical conditions in school. They must ensure that sufficient staff have received suitable training and are competent before they take responsibility to support children with medical conditions.

The Governing Body of Crosby on Eden CE Primary will ensure that an appropriate level of insurance is in place and reflects the level of risk presented by children with medical conditions.

**Headteacher-** Must ensure that the policy is developed and effectively implemented with partners. The Headteacher must also ensure that all staff who need to know are aware of a child's condition. Ensure sufficient trained members of staff are available to implement the policy and deliver against IHPs.

**School Staff** - Any member of school staff may be asked to support pupils with medical conditions, including the administration of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties they should take into account the needs of pupils with medical needs that they teach.

School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

**School Nurses and other Healthcare professionals** - Responsible for notifying the school when a child had been identified as having a medical condition which will require the support of the school. They may support staff on implementing a child's IHP and provide advice and liaison.

They may be able to provide advice on developing IHP and providing support for children with particular conditions (e.g. asthma, diabetes).

**Pupils** - Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

**Parents**— should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

**Providers of health services** - should co-operate with schools that are supporting children with a medical condition, including appropriate communication, liaison with school nurses and other healthcare professionals such as specialist and children's community nurses, as well as

participation in locally developed outreach and training. Health services can provide valuable support, information, advice and guidance to schools, and their staff, to support children with medical conditions at school.

## **2. PROCEDURE FOR THE NOTIFICATION THAT A PUPIL HAS A MEDICAL CONDITION**

While it is understood that school does not have to wait for a formal diagnosis before providing support to a pupil because in some cases their medical condition may be unclear or there may be a difference of opinion, judgements will still need to be made about the support to provide and they will require basis in the available evidence. This should involve some form of medical evidence and consultation with parents. Where evidence is conflicting, it is for school to present some degree of challenge in the interests of the child concerned, in order to get the right support put in place.

The Headteacher of Crosby-on-Eden CE Primary is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained
- all relevant staff are made aware of a child's condition
- supply teachers are briefed
- risk assessments for visits and activities out of the normal timetable are carried out
- individual healthcare plans are monitored (at least annually)
- transitional arrangements between schools are carried out
- if a child's needs change; the above measures are adjusted accordingly

Where children are joining Crosby on Eden CE Primary School at the start of a new academic year, these arrangements should be in place for the start of term.

Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan which details the support that child needs. If the parents, healthcare professional and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

## **3. INFORMATION**

Children with serious medical conditions will have their photo and brief description of condition, along with any other necessary information, in the staffroom as well as in the lunchtime supervisors' handbook.

Children with medical conditions which may require emergency attention, e.g. epilepsy, diabetes, will have their names and an Individual Healthcare Plan clearly accessible in their classroom, and all adults dealing with the child will have their attention drawn to this information.

All other medical conditions will be noted in the child's electronic records and this information will be provided to class teachers annually.

#### **4. INDIVIDUAL HEALTH CARE PLANS (IHCPs) – see Appendix A**

The following information should be considered when writing an individual healthcare plan:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- specific support for the pupil's educational, social and emotional needs
- the level of support needed including in emergencies
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- who in school needs to be aware of the child's condition and the support required
- arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate
- confidentiality
- what to do if a child refuses to take medicine or carry out a necessary procedure
- what to do in an emergency, who to contact and contingency arrangements
- where a child has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan

#### **5. IN AN EMERGENCY**

The child's IHCP should be the primary reference point for action to take in an emergency. It will clearly state what constitutes an emergency for that child and include immediate and follow-up action.

In a medical emergency, names of those staff who have been appropriately trained to administer emergency first aid are displayed in the staff room and in the small office.

If an ambulance is required staff must:

- outline the full condition and how it occurred
- Give details regarding the child's date of birth, address, parents' names and any known medical conditions.

Children will be accompanied to hospital by a member of staff if this is deemed appropriate. Staff cars should not be used for this purpose. Parents must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

## 6. GUIDELINES - GENERAL

It is expected that:

- Parents will inform school of any medical condition which affects their child.
- Parents will co-operate in training their children to self-administer medicine if this is appropriate, and that staff members will only be involved if this is not possible
- Medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual
- Crosby on Eden School will ensure that, where appropriate, children are involved in discussing the management and administration of their medicines and are able to access and administer their medicine if this is part of their Individual Healthcare plan (for example, an inhaler)
- School staff will liaise as necessary with Healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil
- Transitional arrangements between schools will be completed in such a way that Crosby on Eden School will ensure full disclosure of relevant medical information, Healthcare plans and support needed in good time for the child's receiving school to adequately prepare
- Individual Healthcare plans will be written, monitored and reviewed regularly and will include the views and wishes of the child and parent in addition to the advice of relevant medical professionals.

## 7. PROCESS FOR THE ADMINISTRATION OF MEDICINES IN SCHOOL – SHORT TERM MEDICAL NEEDS

Medicines should normally be administered **at home** and only taken into school when **absolutely necessary** (where it would be detrimental to the child's health, or would greatly impact on a child's school attendance, if the medicine were not taken during the school day).

The school will only accept:

- Medicines prescribed by a medical practitioner in their original container
- Medicines that are in date
- Medicines that need to be administered in **excess of 3 times per day**.
- Containers with labelling identifying the child by name and with original instructions for administration, dosage and storage.
- Hand cream prescribed by a medical practitioner in its original container

The school will not accept or administer:

- Medicines that are to be administered 3 times per day (unless the child is attending after school club and will not return home immediately after 3.35pm, or attending a residential visit)
- Piriton/Antihistamine
- Paracetamol e.g. Calpol, Ibuprofen, or aspirin

On accepting medication, the parent must sign a **'Medical Request Form'** (Appendix B) disclosing all details and giving permission for the medication to be administered by a named person (Class Teacher/First Aider). Medical Request Forms are available from the School Office. The parent will need to speak with their child's Class Teacher to confirm the time and dosage that is on the prescription.

The medicine will be kept in a locked cupboard (except where storage in a fridge is required) and only accessed by named adults, or with the permission of the Headteacher. Children must not enter either of these areas unsupervised.

When administering, the named adult must complete a record details showing the date and time and details/dosage of the medication. This must be counter-signed by another adult.

In the case of the child being allowed to administer their own medication, this must again be added to the record and counter-signed by another adult.

**Under no circumstances should a parent send a child to school with any medicines, eg throat sweets/tablets, without informing the school. These could cause a hazard to the child or to another child if found and swallowed.**

Parents are welcome to come into school to administer medicines themselves that the school refuse to administer, for reasons given above.

Medication should be collected by the parent/carer at the end of the day or on the date specified.

Children are not permitted to deliver or collect medication. Any medication must be left in the school office and delivered or collected by a parent / carer.

## 8. MANAGING MEDICINES

- Emergency treatment medication including inhalers must follow the child at all times. Inhalers and other emergency treatment medication must follow the child to the sports field/swimming

pool etc. Where it is agreed by the parents and teachers inhalers will be carried by the child. All other medicines (except inhalers) should be kept securely.

- If there is any difficulty about the use of medicines, including injections or inhalers, the school nurse should be contacted for advice.
- Staff asked to handle hazardous material e.g. “sharps” should request specific information regarding disposal.
- Procedures, including catheterisation and tube feeding, can only be carried out by trained staff. A care plan must detail all aspects of the procedure. A copy to be maintained in the child’s central file.
- Medication should be collected by the parent/carer at the end of the day or on the date specified.
- Children are not permitted to deliver or collect medication. Any medication must be left in the school office and delivered or collected by a parent / carer.
- Children who have asthma which is managed by the use of inhalers; these are kept in the child’s classroom for ease of access.

## 9. RECORD KEEPING

- All Medical Request Forms are kept in a locked cupboard in the School Office.
- The person who administers the medication signs the record to indicate the time that they have administered the medication to the child and the witness signs the form to say that they have witnessed the medication being administered.
- An individual care plan is completed for long term medical needs.
- Practices to ensure confidentiality of information will be maintained in all medical/health matters.

## 10. ADMINISTERING MEDICATION OUT OF SCHOOL – *day trips, residential visits, sporting activities*

Through development of the IHCP staff will be made aware of how a child’s medical condition might impact on their participation in educational visits or sporting activities. Every effort will be made to ensure there is enough flexibility in arrangements so that all children can participate according to their abilities and with any reasonable adjustments. This may include reasonable adjustment of the activities offered to all children i.e. changing a less accessible venue for one that is more so, but can still achieve the same educational aims and objectives. A pupil will only be excluded from an activity if the Head teacher considers, based on the evidence, that no reasonable adjustment can make it safe for them or evidence from a clinician such as a GP states that an activity is not possible for that child.

A risk assessment for an educational visit may need to especially consider planning arrangements and controls required in order to support a pupil with a medical condition. The IHCP will be used alongside usual school risk assessments to ensure arrangements are adequate. This may also require consultation with parents and pupils and advice from a relevant healthcare professional.

Inhalers should be taken out to P.E. sessions and on school visits. Staff will supervise the use of the inhaler and seek further advice if treatment appears to be ineffective. When required in school, Epipens will be kept in the medical room and also taken out on school visits.

Approved medication for a child (with all forms completed and filed) is taken by the adult in charge of the party who will assume responsibility for its administration and safe keeping. This responsibility may be delegated if appropriate to the first aider with the party.

## 11. HOME TO SCHOOL TRANSPORT

While it is the responsibility of the LA to ensure pupil safety on statutory home to school transport the LA may find it helpful to be aware of the contents of a pupil's IHCP that school has prepared.

The LA *must* know if a pupil travels on home to school transport and has a life-threatening condition and carries emergency medication so that they can develop an appropriate transport healthcare plan. School undertakes to appropriately share IHCP information with the LA for this purpose and will make this clear to parents in the development meeting.

## 12. UNACCEPTABLE PRACTICE

While it is essential that all staff act in accordance with their training, in any given situation they should be confident in using their discretion and judging each case on its merits with reference to a child's IHCP. It is not however, generally acceptable practice at this school to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion, (although staff will be supported to appropriately challenge this where they have genuine concerns);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children 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 child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

### **13. COMPLAINTS**

Should parents be unhappy with any aspect of their child's care at Crosby-on-Eden CE Primary, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be managed. If this does not resolve the problem or allay concern, the problem should be brought to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parents may then make a formal complaint using the Crosby-on-Eden CE Complaints Procedure.

## Process for Developing an Individual Healthcare Plan (IHCP)

A parent or healthcare professional informs school that a child with a medical condition:

- has been newly diagnosed; or,
- has had a change in their health needs; or,
- is due to attend this school as a new pupil; or,
- is due to return to this school after a long term absence.



The Head teacher coordinates a meeting to discuss the child's medical support needs and identifies member(s) of school staff who will provide support to the pupil.



A meeting takes place to discuss and agree on the need for an IHCP to include key school staff, the child, parents, relevant healthcare professionals and other medical/health clinicians as appropriate (or to consider written evidence provided by them).



After agreeing who leads on writing it, an IHCP is developed in partnership. Input from a healthcare professional must be provided at this stage.



School staff training needs are identified.



Healthcare professional(s) commission/deliver training and school staff are signed off by the trainer as competent – a review date is agreed.



The IHCP is implemented and circulated to relevant staff.



The IHCP is reviewed annually or when a condition changes – to be initiated by a parent or a healthcare professional.



## Individual Healthcare Plan (IHCP)

<b>School/Setting:</b>				<b>PHOTO</b>
<b>Name of Child:</b>				
<b>Date of Birth:</b>				
<b>Address of Child:</b>				
<b>Gender:</b>	MALE / FEMALE	<b>Class/Form:</b>		
<b>Date:</b>		<b>Review Date:</b>		
<b>Who is responsible for providing support in school?</b>				
<b>Medical Diagnosis or Condition</b>				
<b>EMERGENCY CONTACT INFORMATION</b>				
<b>Family Contact 1</b>			<b>Family Contact 2</b>	
<b>Name:</b>			<b>Name:</b>	
<b>Relationship to Child:</b>			<b>Relationship to Child:</b>	
<b>Work Tel. No:</b>			<b>Work Tel. No:</b>	
<b>Home Tel. No:</b>			<b>Home Tel. No:</b>	
<b>Mobile Tel. No:</b>			<b>Mobile Tel. No:</b>	
<b>Clinic or Hospital Contact</b>			<b>GP Contact</b>	
<b>Name:</b>			<b>Name:</b>	
<b>Contact No:</b>			<b>Contact No:</b>	
<b>Describe the child's medical needs</b> (e.g. details of any symptoms, triggers, signs, treatments, facilities, equipment/devices, environmental issues etc.)				

<p><b>Medication details</b> (e.g. name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision, whether carried by the child and how carried etc.)</p>
<p><b>Agreed procedure in the event that medicine or procedures are refused by the child</b></p>
<p><b>Daily care requirements</b> (e.g. before sports activities, at lunchtime etc.)</p>
<p><b>Specific support in place for any educational, social and emotional needs</b> (include re-integration and any partnership working following absences e.g. Local Authority hospital/home tuition services etc. and sensitive management of re-integration after serious or embarrassing incidents at school.</p>
<p><b>Arrangements for educational visits or other activities outside the normal timetable</b></p>
<p><b>Other Information</b></p>
<p><b>Describe what constitutes an emergency and the action to take if this occurs</b></p>
<p><b>Describe any follow-up care required</b></p>
<p><b>Who is responsible in an emergency?</b> (Please state if different for different activities e.g. off-site etc.):</p>
<p><b>Staff training needs identified or already undertaken</b> (e.g. names of staff trained, what training they have received and when, along with any plans to train others and when)</p>
<p><b>Plan developed with</b> (e.g. the child, named parents, staff, healthcare professionals and any others)</p>
<p><b>Form copied to</b> (Please state who holds copies of this information and where):</p>



**CROSBY-ON-EDEN C OF E PRIMARY SCHOOL**

ACADEMY STATUS

Crosby-on-Eden, CARLISLE, CA6 4QN, Tel No: 01228 212080

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.

**DETAILS OF PUPIL:**

SURNAME: \_\_\_\_\_ FORENAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ CLASS: \_\_\_\_\_

**MEDICATION:**

CONDITION OF ILLNESS: \_\_\_\_\_

NAME/TYPE OF MEDICATION (as described on the container): \_\_\_\_\_

DOSAGE/TIMING: \_\_\_\_\_

ADDITIONAL INFORMATION (eg side effects, special precautions, etc): \_\_\_\_\_  
\_\_\_\_\_**CONTACT DETAILS:**

NAME: \_\_\_\_\_ RELATIONSHIP TO PUPIL: \_\_\_\_\_

DAYTIME TELEPHONE NO: \_\_\_\_\_

I understand that I must deliver the medicine personally to (agreed member of staff) and accept that this is a service which the school is not obliged to undertake. I will not hold any member of staff responsible for any action that may result from the administration/non-administration of the medication.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Relationship to pupil: \_\_\_\_\_

## ADMINISTRATION OF MEDICATION IN CROSBY ON EDEN PRIMARY SCHOOL

**INDIVIDUAL PUPIL RECORD FORM**

Name of Pupil: \_\_\_\_\_ Class/Year Group: \_\_\_\_\_

This form should be used to:

- Record medication administered by school staff
- Record medication administered by parents/other carers in school (continuous long-term medication only)
- Record medication that has not been administered. The reason for non-administration should be entered in the 'any reaction' box and the parent or carer should be informed

Date	Time	Medication Name	Dose	Any Reaction	Signature	Print Name