



Medicine in School Policy

Supporting pupils with Medical Needs

Introduction

At St Martins C of E Primary School, we support the need to ensure that children with medical conditions in terms of both their physical and mental health, long or short term, will be properly supported and receive appropriate care in school.

Admissions

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.

Governors will, in line with their safeguarding duties, ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases. They therefore, do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.

Medicines should not be kept in school (with the exception of epi-pens and inhalers). Pupils who need daily administration of prescribed drugs will have them administered by their parent (where possible) in school. Where this is not possible and it would be detrimental to the child's health if the medicines were not administered during the school day, the treatment must be discussed with the Headteacher and a Health Plan established.

Purpose

The purpose of this policy is to;

- a) provide clear definitions of roles and responsibilities, and,
- b) outline procedures to be adopted for the care and well-being of all pupils.

The role of Governors

Governors must ensure the school policy identifies roles and responsibilities of all those involved in supporting medical conditions..

Governors should ensure that sufficient staff have received suitable training and are competent before they can take on responsibility to support children with medical needs.

Governors should ensure that the appropriate level of insurance is in place that appropriately reflects the level of risk. (Governors of Sandwell maintained schools should refer to the information in the 'Management of Children with Medical Needs' guidance.)

Governors should ensure that written records are kept of all medicines administered to children and that parents are informed if their child is unwell at school.

Parental Responsibilities

1. Parents should provide full information about the child's medical needs when the child joins school, or as the medical need arises.
2. Long term medical needs, should be clearly identified, and arrangements for treatment discussed with the Head Teacher. This information will be recorded on a Health Care Plan.
3. All pupils with asthma inhalers should follow the asthma policy
4. Parents should ensure that the child is well enough to attend school and refrain from sending them when they are unwell.
5. Parents should follow the agreed procedure (see procedure flowchart) in the event of their child requiring medication to be administered by the school staff, and are responsible for its safe transportation to and from the school each day.
6. Parents are responsible for the provision to school of in-date medication, e.g, inhalers to treat long term medical conditions.

Head Teacher's Responsibilities

1. The Head Teacher will ensure that all parents and staff are aware of the policy and procedures for dealing with medical needs.
2. The Head Teacher will ensure that systems for sharing information will be followed.
3. The Headteacher will ensure that all staff, who need to know, are aware of a pupils' medical needs and that sufficient staff are suitably trained to support pupils' individual medical needs, including to give support during staff absence.
4. Ensure that IHPs are in place and reviewed at least annually or when there is evidence of a change in need.

The role of staff

Any member of staff may be asked to provide support to pupils with medical conditions, including the administering of medicines.

No member of staff can be required to do so; they have the right to refuse. Although it is not part of the teacher's professional duties to administer medicines, staff should take into account the needs of the pupils with medical conditions.

School staff should ensure that they are appropriately trained and achieve the necessary level of competency before taking on the responsibility of supporting a pupil with medical needs.

Any member of staff should know what to do and respond accordingly if they become aware that a pupil with a medical condition needs help.

Responsibilities of Staff Administering Medicines

1. Staff members will have first aid training and will follow agreed procedures for recording the administration of medicines.
2. Such staff will receive training in safe administration of medicines from a health care professional.

Individual Healthcare Plans

IHPs should be drawn up in partnership between school, parents, healthcare professionals and, whenever appropriate, the child.

The IHP should detail the medical condition, its triggers, signs, symptoms and treatments.

It should also include the pupils' resulting needs including medical, educational, social and emotional.

The IHP should capture the key information and actions that are required to support the pupil effectively, including medication (dose, side effects, storage), other treatments, time, facilities, equipment, access to food and drink where this is used to manage the condition, dietary requirements and any environmental issues.

The IHP should make it clear if the pupil self manages their medication.

When a child has SEN, but not an Education, Health and Care Plan, this information should be included in the IHP. Where they have an EHC the IHP should be linked to the plan.

Procedures to be followed when a parent or healthcare professional notifies school that a pupil has a medical condition, or when there is a change of condition, or when a pupil is reintegrated:

- School designated person meets with parents to discuss the pupil's medical need/change of need.
- Arrangements are made to seek information from relevant healthcare professionals.
- IHP is drawn up within 2 weeks

Medicines on Educational Visits

We are keen to encourage children with medical needs to participate in safely managed visits. Reasonable adjustments will be made to enable children with medical needs to participate fully and safely on visits.

Health care plans for class members should be consulted at the time of organizing the visit. Class teachers and accompanying first-aiders will together be responsible for the transportation and administration of any medicines required for individual pupils.

Safe Storage of Medicines in School

Staff should only store, supervise and administer medicine that has been prescribed for an individual child and agreed with the headteacher.

Medicines should be stored strictly in accordance with product instructions and in the original container in which dispensed. Staff should ensure that the supplied container is clearly labeled with the name of the child, the name and dose of the medicine and the frequency of administration.

All emergency medicines, such as asthma inhalers and adrenaline pens, should be made readily available to children and should not be locked away.

A few medicines need to be refrigerated. They can be kept in a refrigerator containing food but should be in an airtight container and clearly labelled.

2019

Review due Aut 22

Procedure for the Administration of Medicines in School (long term arrangements)

Child has long term medical need requiring the administration of medicine to avoid a detrimental effect on the child's health.

Parents complete Health Care Plan and copies are retained in Pupil Information file, and Medicine Administration file.

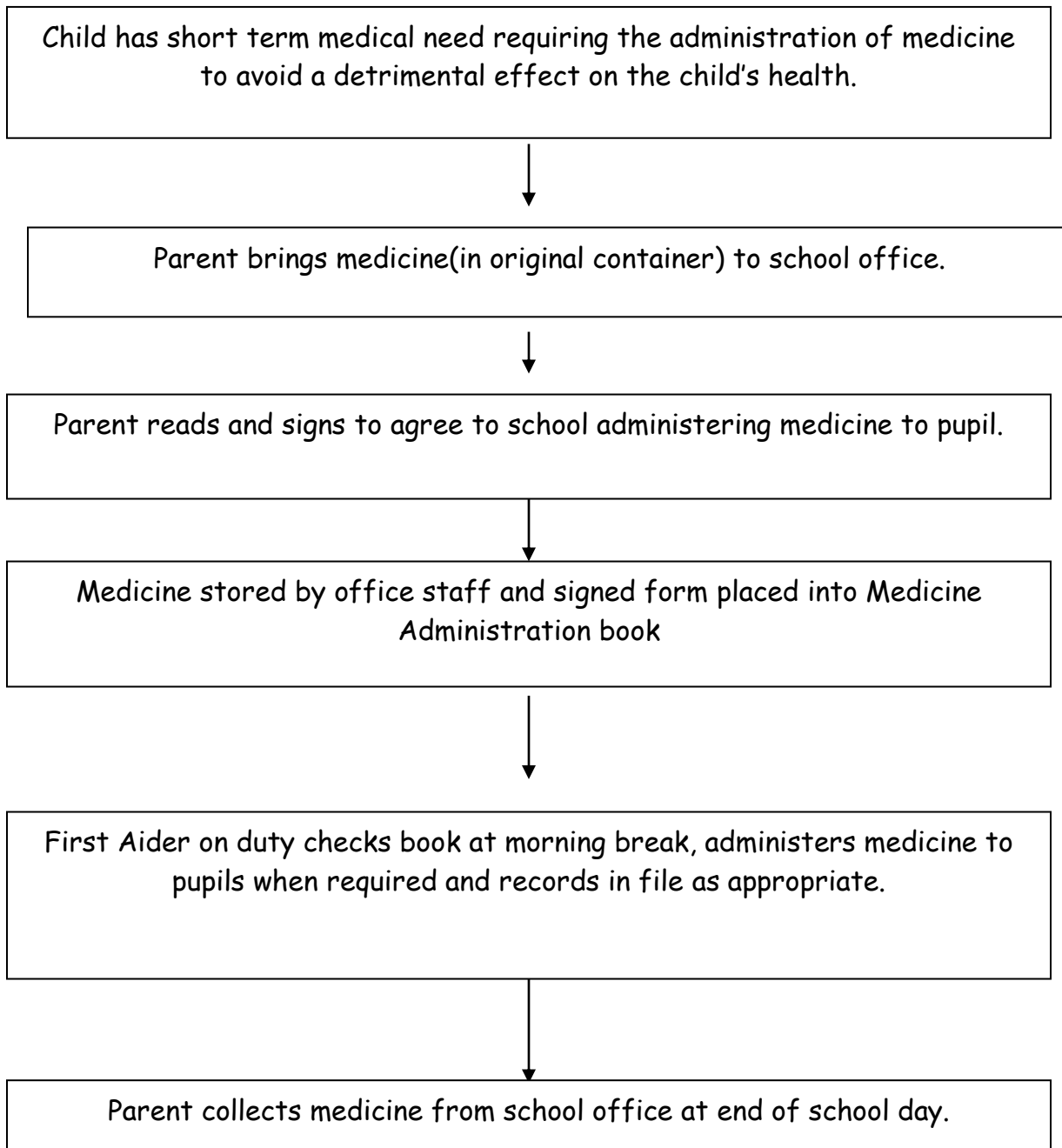
Parents provide sufficient in-date medication as appropriate to condition, and complete . **Parental signature is required** to agree to school administering relevant medicine.

When medicine is administered, this is recorded.
Administration of inhalers is not recorded in the Medicine Administration

Medical information should be reviewed at start of new academic year, and parents ensure that staff are kept up to date with the pupil's medical condition.

Inhalers for asthma should be kept in the classroom, or within easy access for pupil use. Emergency inhaler use can only be used where written parental consent has been obtained.

**Procedure for the Administration of Medicines in School
(short term arrangements for Parents who cannot come to school to
administer)**





Record of
Administration of
Medication

Pupil name.....

Academic Year.....

Name of Medication.....

Expiry date.....

