

THURLBEAR CE VA PRIMARY SCHOOL

GUIDANCE AND POLICY FOR SUPPORTING CHILDREN IN SCHOOL WITH MEDICAL NEEDS

This document has been written in line with the DfE Guidance document “Supporting Pupils at school with Medical Conditions – September 2015” available from their web site www.dfe.gov.uk.

Parents have the prime responsibility for their child's health and thus are responsible for making sure that their child is well enough to attend school. They are expected to keep their children at home, or make other arrangements for their care, when they are acutely unwell. However, sometimes children are well enough to be in school but still require regular prescribed medication.

1 Who can administer medication?

The administration of medication is a voluntary role for support staff, unless it is part of their contract of employment. However, as the school owes a duty of care to its pupils, staff are expected to assist a pupil in an emergency, provided they can do so without putting themselves at undue risk. Where the emergency would require a specialist medical technique for which staff have not been trained, the best assistance would be to immediately summon the ambulance service and/or the child's parent/carer, as appropriate.

Those members of staff who volunteer to assist with any form of medical procedure are acting within the scope of their employment and are therefore indemnified by Somerset County Council against any legal action, provided they act in good faith and in accordance with their training.

2 Prescribed medication in school

Medication is only permitted in school when the child's doctor deems it to be essential. No medication will be administered unless an 'Administration of Medication' form has been completed by the parents or guardians. Parents must also provide all relevant information relating to the child's medical condition if staff are to support them in school.

Thurlbear CE VA school will always do its best to administer prescribed medication at the times requested, however, it should be recognised that sometimes due to unforeseen circumstances this may not be possible. If the medication is not administered the school will inform the parents/guardians.

Eye Drops specifically for hay fever can be administered at school wherever practicable. Parents will need to sign a permission form but the school cannot guarantee application. KS2 pupils would be required to request their eye drops to be administered.

Wherever possible, pupils, even the very young, should be enabled to administer their own medication, but this should be under a level supervision appropriate to the individual child. If pupils refuse to take medication, school staff should not force them to do so, but should inform the child's parents or guardians as a matter of urgency. If

refusal to take medication could result in a medical crisis, then the parents or ambulance service should be summoned immediately, as appropriate.

Medicines should only be administered by a volunteer member of school staff who has been formally authorised to do so by the Headteacher. Where special techniques are required to administer medication, such as the use of an Epi-pen, it is essential that staff receive appropriate training and re-training and also sufficient staff should be trained to allow for periods of sickness absence etc. to be covered – currently Mrs K Carter & Mrs J Moore have received specific Epi-pen training. Records should be kept of all such staff training. Schools must also provide staff with suitable protective equipment such as disposable gloves or a sharps disposal box where this is required.

3 Dealing with Medication in School

Appropriate secure storage for medicines must be arranged and records of medicines received and administered must be kept. Schools should be aware that certain drugs such as Ritalin have a street re-sale value and so must be kept in a locked cupboard. Emergency medication should accompany the child wherever he/she may be in the school. Any other medication brought into school should not be carried around by the pupil, but handed to a member of the school office team or other appropriate person, so that it can be kept securely until required.

The parents or legal guardians must be informed that it is their responsibility to promptly inform the school of **any** changes to the medication or its administration. Parents/guardians are responsible for ensuring that all medication is in date. Parents are given a form 'Administration of Medication' to record the details of medication required. This form is kept in the office.

Schools are responsible for ensuring that medicines are both administered and stored safely on the school premises. Large quantities of medicines should not be stored, parents should be asked to bring in just the required daily dose. All medicines must be clearly labelled with the child's name. Where a pupil needs two or more prescribed medicines, each should be in their separate and appropriately labelled container.

There are a few medicines, which need to be used regularly or in an emergency, such as asthma. Children in KS1 keep their inhalers in their individual classrooms and are self-administered in the presence of an adult. KS2 children are expected to be responsible for their own inhalers. There is also a need to refrigerate some medication. These can be kept in a refrigerator containing food, but should be in a clearly labelled, container to avoid contamination from food etc. Access to a refrigerator holding medication must be restricted to members of staff.

Pupils must never take or have administered, medication which has been prescribed for another pupil. This includes the use of asthma inhalers. School will take appropriate disciplinary action if medicines are misused by, either the pupil for whom they are prescribed or other pupils. Thurlbear School has a separate Asthma Policy.

4 Non Prescribed Medication

School will not administer any non-prescribed medication, whether or not it has been authorised by the child's parent or guardian.

5 Long Term Administration of Prescribed Medication

Children with long term medical needs have the same right to be admitted to and to attend school as other children and to refuse to make "reasonable adjustments" to accommodate their needs, may be deemed to be discriminatory under the Disability Discrimination Act 1995. Such children must be enabled not only to access the curriculum, but also to fully participate in all aspects of school life. In exceptional circumstances, if the result of a risk assessment shows that the child's medical condition or likely behaviour represents a serious hazard to themselves or to others, they may be excluded from certain specific, higher risk school activities. In these circumstances, schools are strongly advised to seek advice from the school nursing team, the child's doctor or paediatrician and the LA Health & Safety advisers.

Usually pupils with long-term medical needs are able to attend school regularly and, with some support from the school, are able to safely take part in most of the day-to-day activities. Where the child has a serious chronic medical condition, it is useful to have a Health Care Plan. The purpose of such a plan is to ensure that staff have sufficient information to understand and support such a pupil and outline any emergency action which may be necessary. Health Care Plans should always be drawn up in conjunction with the parents or guardians and the School Nursing Team, Lifetime Nurse or the child's Doctor. All medical information relating to individuals is confidential and therefore, the information contained within the Health Care Plans must be treated as such. The Headteacher should agree with the pupil's parents or guardians, as to who should have access to records and other information. It is however, sometimes sensible, with the agreement of the parents, to explain the use of medication to a number of pupils in the affected child's class, so that peer group support can be given.

Where administering medication or other care needs of the pupil which involves invasive medical techniques, these techniques should only be used by staff who have been trained by medically qualified personnel.

Any restrictions on a pupil's ability to participate in physical education should be included in their individual Health Care Plan. For example, some pupils may need to take appropriate precautionary measures before or during exercise and/or be permitted to have immediate access to their medication as and when necessary. Teachers supervising sporting activities involving pupils with medical needs, need to be made fully aware of their medical conditions and what to do should any particular medical emergency arise.

Offsite visits may require the school to take additional safety measures to ensure that any necessary medication is given and to deal with any potential medical emergencies. These measures should be based on an informed risk assessment of the location and activity, carried out in conjunction with information relating to the

pupil's medical needs. Expert advice can be obtained from the pupil's Paediatrician. The Health & Safety advisers can also offer further assistance on risk assessment in these circumstances.

6 Emergency Treatment

Emergency medication including inhalers must follow the child at all times including visits to the sports field, swimming pool etc., where it can, for example, be kept in a box provided for this purpose. Where it is agreed by the parents and teachers, the inhalers should be carried by the child. All other medication should be kept securely. No emergency medication should be kept in the school except those specified for use in an emergency for an individual child.

If it is necessary to give emergency treatment, then a clear written account of the incident must be given to the parents or guardian of the child at the earliest opportunity and a copy retained in the school.

Thurlbear CE VA Primary School has sufficient trained First Aiders; either Nominated First Aiders, Appointed Persons or staff trained in emergency First Aid, who are available to deal with a medical emergency. All such training must be updated every three years to be valid. All staff should be aware of the names of the First Aiders and the school procedure to summon the emergency services.

If a pupil needs to go to hospital then their parents should be notified immediately, so that they may accompany them or meet them at the hospital. If a young child's parents cannot be contacted, then a member of the support staff would accompany them in the ambulance. Staff should not take pupils to hospital in their own cars unless instructed to do so by Ambulance Control, such as in the case of poisoning. Even in such circumstances, this can only be done if the car has insurance cover for business use and another adult accompanies the driver, otherwise staff must wait for the ambulance to arrive.

The parents' cultural and religious views should always be taken into account and respected when dealing with medical conditions and medical emergencies. However, parents should be informed that in an emergency, the school will exercise its duty of care by immediately calling the ambulance service as well as informing the parents. Once in the care of the paramedics, in the absence of the parents, all decisions on treatment will be deferred to the medical practitioners in attendance.

This policy was reviewed November 2018.

ADVICE ON MEDICAL CONDITIONS

Parents or guardians of children suffering from these conditions should be advised to seek advice from their GP or from the bodies detailed below. The following bodies can also supply information or leaflets regarding the conditions listed.

Allergy to Peanuts and
Other Nuts
Asthma & Allergy Research Unit
C/o Dept of Respiratory Medicine

Glenfield Hospital
Grobby Road
Leicester LE3 9QP

Tel: 0116 270 7557
Fax: 0116 270 9338

Asthma at school –
a guide for teachers
National Asthma Campaign
Providence House
Providence Place
London N1 0NT

Tel: 020 7226 2260
Fax: 020 7704 0740
Asthma Helpline Tel: 0845 7010203

Cystic Fibrosis and
Schools (A guide for teachers
and parents)

Cystic Fibrosis Trust
11 London Road
Bromley
Kent BR1 1BY
Tel: 020 464 7211
Fax: 020 3130472

Children with diabetes
(Guidance for teachers
and school staff)
British Diabetic Association
Diabetes UK
10 Parkway
London
NW1 7AA
Tel: 0800 585 088
Tel: 020 7424 1000
Fax: 020 7424 1001

Diabetes UK Careline Tel: 020 7424 1030 (Voice)
Tel: 020 7424 1888 (Text)

Epilepsy - Guidance for
Teachers concerning
Children who suffer
from fits
National Society for Epilepsy
The Chalfont Centre for Epilepsy

Chalfont St Peter
Gerrards Cross
Bucks SL9 0RJ
Tel: 01494 601300
UK Epilepsy Helpline 01494 601400

Guidance for HIV and
AIDS
Department for Education and Skills
Sanctuary Buildings
Great Smith Street
Westminster
London SW1P 3BT
Tel: 08700 012345

Haemophilia Haemophilia Society
385 Euston Road
London NW1 3AU
Tel: 020 7380 0600
Fax: 020 7387 8220

Haemophilia Helpline Freephone: 0800 018 6068
Sickle Cell Disease The Sickle Cell Society
54 Station Road
Harlesden
London NW10 4UA
Tel: 020 8961 7795
Fax: 020 8961 8346

Thalassaemia UK Thalassaemia Society
19 The Broadway
Southgate Circus
London N14 6PH
Tel: 0208 8820011
Fax: 0208 882 6818

Toxic Shock Syndrome TSS Information Service
24-28 Bloomsbury Way
London WC1A 2PX
Tel: 0171 4042120