

THRELKELD C of E PRIMARY SCHOOL

SUPPORTING CHILDREN WITH MEDICAL CONDITIONS IN SCHOOLS POLICY

Aim

To ensure that all children with medical conditions (both physical and mental) are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Statement

This policy relates to pupils who have a recognised medical condition, which will last longer than 15 days and will require the pupil to have an Individual Health Care Plan (IHCP).

All staff at Threlkeld understand the medical conditions that affect pupils at this school. Staff receive training on the impact medical conditions can have on pupils.

This school understands that certain medical conditions are serious and potentially life threatening, particularly if poorly managed or misunderstood.

This school understands the importance of medication and care being taken as directed by healthcare professionals and parents.

Threlkeld school will make sure all staff understand their duty of care to children in the event of an emergency and that all staff feel confident in knowing what to do in an emergency.

The named member of school staff responsible for this medical conditions policy and its implementation is: [Katharine Horder](#)

Identification of Medical Condition.

Threlkeld school will work with parents and medical professionals to ensure we have the specific protocols in place within two weeks of a child starting school. This may take the form of:

- Information sharing.
- Developing specific care plans.
- Organising training.
- Re-organising classroom facilities.

The school will also regularly send out medical questionnaires to parents to ensure all records are up to date. These will be sent annually unless it becomes clear that the child's needs have changed in which case it will be sent out before the annual review.

Individual Health Care Plans (IHCP)

The main purpose of an IHCP is to identify the level of support that is needed at school/centre for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school/centre can provide and receive. These plans will be reviewed annually, or more frequently at the request of parents/carers or the school/centre, or as required if it becomes clear that the child's needs have changed.

An IHCP will include:

- Details of the child's medical condition – its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues (e.g. crowded corridors, travel time between activities);
- Specific support for the pupil's educational, social and emotional needs – for example how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the child's condition and the support required;
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- 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 (e.g. risk assessments).
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition;
- What to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

A copy will be given to parents/carers, class teachers/childcare practitioners and a copy will be retained in the medical needs file in the office and the child's individual file. The general medical information sheet given to all staff will indicate that the child has an IHCP.

All trained staff will ensure they are aware of the protocols and procedures for specific pupils in school through attending training provided and reading care plans devised for individual pupils.

Roles and Responsibility

The **Governing Body** will ensure that Threlkeld school has clear systems in place, in relation to school life.

Parents/carers are responsible for ensuring that their child is well enough to attend school.

Parents/carers must provide the Headteacher with sufficient information about their child's medical condition and support and care required at school.

Parents/carers and the **Headteacher** must reach an agreement on the school's role and responsibility for support for the child.

In the event of legal action over an allegation of negligence, it is the *employer* rather than the *employee* who is likely to be held responsible. The need for accurate records in such cases is crucial. Therefore thorough and accurate record-keeping systems have been drawn up, to be maintained by staff involved in supporting pupils with medical needs (see appendices).

The **Headteacher** will ensure that staff who are willing or for whom care of pupils with medical needs falls within their job role should receive appropriate training to assist them with the role of supporting pupils with medical needs.

The **Headteacher** will ensure that all parents are informed of the school's policy and procedures for medical needs. It will be put on the school's website.

In order to support pupils with a medical condition, **school staff** will be given the following information which will also be on the child's IHCP:

- The nature of the condition.
- When the child may need extra attention.
- Where the pupils may need extra attention.
- The likelihood of an emergency.
- The action to take in the event of an emergency.

School Visits

Every effort will be made to ensure that children with medical needs have the opportunity to participate in school trips, as long as the safety of the child concerned and that of other pupils is not compromised by their inclusion.

When preparing risk assessments staff will consider any reasonable adjustments they might make to enable a child with medical needs to participate fully and safely on visits.

Additional safety measures may be taken for outside visits and it may be that an additional staff member, a parent/carer or other volunteer might be needed to accompany a particular child.

Arrangements for taking any medicines will be planned.

A copy of IHCP will be taken on trips and visits in the event of information being needed in an emergency.

Support for Staff

Staff will be given specific training according to the medical condition of a child. Where staff need to administer prescription medicines, appropriate and specific training will be given.

Managing Medicines

- There is no legal duty which requires school staff to administer medication. This is a voluntary role. Any member of staff who agrees to accept responsibility for administering prescribed medication to a pupil will receive proper training and guidance, and will also be informed of potential side effects and what to do if they occur.
- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child will be given prescription or non-prescription medicines without their parents' written consent (except in exceptional circumstances where the medicine has been

prescribed to the child without the knowledge of the parents. In such cases, every effort will be made to involve their parents while respecting their right to confidentiality).

- A child will not be given medicine containing aspirin unless prescribed by a doctor. Medication (eg for pain relief) will not be administered without first checking maximum dosages and when the previous dose was taken. Parents will be informed.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- Threlkeld School will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will be accepted inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely. Children will know where their medicines are at all times and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children and not locked away. This is particularly important to consider when outside of school premises (eg on school trips).
- A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements will be put in place if this children are in possession of their own drugs. Otherwise, Threlkeld school will keep controlled drugs that have been prescribed for a pupil securely and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record will be kept of any doses used and the amount of the controlled drug held in school.
- School staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions. Threlkeld School will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps.

In an Emergency

The teacher responsible will refer to the child's IHCP in order to respond effectively to an emergency situation.

If a child is taken to hospital, a member of staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance, as long as the other children in the teacher's care are also looked after.

All pupils at Threlkeld School are made aware that they should inform a teacher immediately if they think that help is needed.

Unacceptable Practice

Threlkeld School staff will use their discretion and judge each case on its merits, however, the school recognises that it is not generally acceptable practice 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.
- Send children with medical conditions home frequently or prevent them from staying for normal school activities including lunch.
- Penalise children for their attendance record if their absences are related to their medical condition (eg 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.
- Prevent or create unnecessary barriers to children participating in any aspect of school life, including school trips, (eg requiring parents to accompany the child).

Written records

Written records will be kept of all medicines administered to children. Please see Appendices.

Insurance

Threlkeld School will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

- Cover liability relating to the administration of medication.
- Possibly individual cover for any health care procedures.
- Comply with requirements of the insurance policy (such as the need for staff to be trained).

Complaints

Should parents be dissatisfied with the support provided to their child they should discuss their concerns directly with the school. If for whatever reason this doesn't resolve the issue, they may make a formal complaint via the Threlkeld School's complaints procedure. Making a complaint to the Department for Education should only happen after other routes have been followed.

Other Contacts

Other bodies which may be accessed or contacted in relation to the support of pupils with medical needs are:

- The Local Authority
- The Health Authority
- The School Health Service (usually through the School Nurse).
- The Child's General Practitioner
- The Community Paediatrician
- The Community Service Pharmacist.

Agreed by Governors
Review date

October 2014
October 2016

APPENDIX A: Parental Consent Form for school to administer medicines

Dear (please complete as necessary)

The school/setting will not give your child medicine unless you complete and sign this form. The Headteacher must also agree to permit and support any school staff who might volunteer to administer the medication with the appropriate training/instruction.

Date by which review to be initiated	
Name of school/setting	
Name of pupil	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
For how long will your child take this medication?	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration?	YES/NO (please indicate)
Procedures to take in an emergency	

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

Contact details

Name

Daytime telephone no.

Relationship to pupil

Address

[agreed member of staff]

I understand that I must deliver the medicine personally to

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.

Signature(s) _____ Name of signatory (CAPS)_____

Relationship to pupil _____ Date _____

APPENDIX B: Individual Healthcare/Treatment Plan

Pupil's name:		PHOTO
Date of birth:	Class/form:	
Pupil's home address:		
Description of medical diagnosis or condition:		
Date:	Review date:	

Family contact information

Family contact (1)	Family contact (2)
Name:	Name:
Phone no. (work):	Phone no. (work):
Phone no. (home):	Phone no. (home):
Mobile no.	Mobile no.
Relationship to pupil:	Relationship to pupil:

Clinic/hospital contact	G.P.
Name:	Name:
Phone no.	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 (e.g. before sport/at lunchtime):

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

Arrangements for school visits/trips etc.:

Other information:

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

Who is responsible in an emergency (state if different on off-site activities)?

Plan developed with:

Staff training needed/undertaken – who, what, when?

Form copied to (please list all who hold a copy of this agreed plan):

APPENDIX C: Parental Consent Form for pupils carrying their own medication

Dear (please complete as necessary)

You must complete and sign this form to seek permission from the school to enable your child to carry and/or administer their own medication.

I request that my child (detailed below) carries their medication with them to use as prescribed or when necessary. I agree to inform the school in writing if I wish to withdraw this request, and I will complete a new form if the information changes.

Date by which review to be initiated

Name of school/setting

Name of pupil

Date of birth

Group/class/form

Medical condition or illness

Medicine

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

Expiry date

Dosage and method

Timing

For how long will your child
carry/administer this medication?

Special precautions/other instructions

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

Can your child self-administer?

YES/NO (please indicate)

Procedures to take in an emergency
(i.e. where school staff/medical
intervention will be required)

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

Contact details

Name

Daytime telephone no.

Relationship to pupil

Address

The above information is, to the best of my knowledge, accurate at the time of writing. 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.

Signature(s) _____ Name of signatory (CAPS) _____

Relationship to pupil _____ Date _____

APPENDIX D: Administration of Medication record form

Name of school/setting	
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

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