



Supporting Pupils in School with Medical Conditions Policy

Incorporating Medicines in School

This policy will be reviewed every **2 years**, or earlier if required by legislation or new DfE guidance and presented to the Full Governing Board for adoption.

Ratified By: **Full Governing Board**

Date Ratified: 7th November 2023

Next Review Due: November 2025

Stickney Vision

At Stickney our Christian vision shapes all we do. Our inclusive church school aims to fulfil the potential of all. We work together to open minds and broaden horizons from the foundation of our shared Christian values. We pursue excellence through our inspiring and creative learning environment and we empower every member of our community to seek positive transformation in the world.

New Leake Vision

Our inclusive school aims to fulfil the potential of all. We work together to open minds and broaden horizons from the foundation of our shared values. We pursue excellence through our inspiring and creative learning environment and we empower every member of our community to seek positive transformation in the world.

Aims

- To ensure that all children with medical conditions, in terms of both physical and mental health, 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.
- To provide clear procedural guidance on storing, administering and recording of medication in school and while participating in off-site activities.

This policy sets out the steps the schools will take to ensure full access to learning and school life for all its children. It has been developed in line with the Department of Education's [Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England \(December 2015\)](#)

Section 100 of the Children and Families Act 2014 places a legal duty on governing bodies of maintained schools to make arrangements for supporting pupils at their school with medical conditions.

Policy Implementation

While the governing body retains the legal responsibility for ensuring that the schools in the federation support pupils with medical conditions in line with the statutory guidance, the Executive Headteacher has overall responsibility for;

- Ensuring that the federations policy is developed and effectively implemented with partners.
- Ensuring all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- Ensuring that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- Ensuring all staff who need to know, are aware of the child's condition.
- The development of individual healthcare plans.
- Ensuring appropriate insurance is in place for staff to support pupils.
- Contacting the Children's Health Team in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to their attention.

This policy should be read in conjunction with the federation policies;

- Child Protection and Safeguarding Policy
- Special Educational Needs Policy
- Inclusion Policy

Procedure to be followed when notification is received that a pupil has a medical condition

The school admissions form, which is completed by parents or carers before a child starts school, contains a section on medical conditions and medication. This must be completed fully by all parents to notify the school that their child has a medical condition. This information is added to the school MIS. (Integris)

When school is notified that a child has a medical condition, the school administrator informs the Executive Headteacher or Executive Deputy Headteacher/Senior Teacher. The primary parent or carer is contacted to arrange a meeting to discuss the condition (and develop an individual healthcare plan if appropriate). The meeting should take place before the child starts school if possible and can take place in person, over the phone or remotely, depending on the needs of the child and the availability of the professionals involved in the child's care.

In other cases, such as new diagnosis for a current pupil, the meeting should also be arranged as soon as possible (within two weeks).

The schools are aware that they do not have to wait for a formal diagnosis before providing support to pupils. In cases where a medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place.

Individual Healthcare Plans

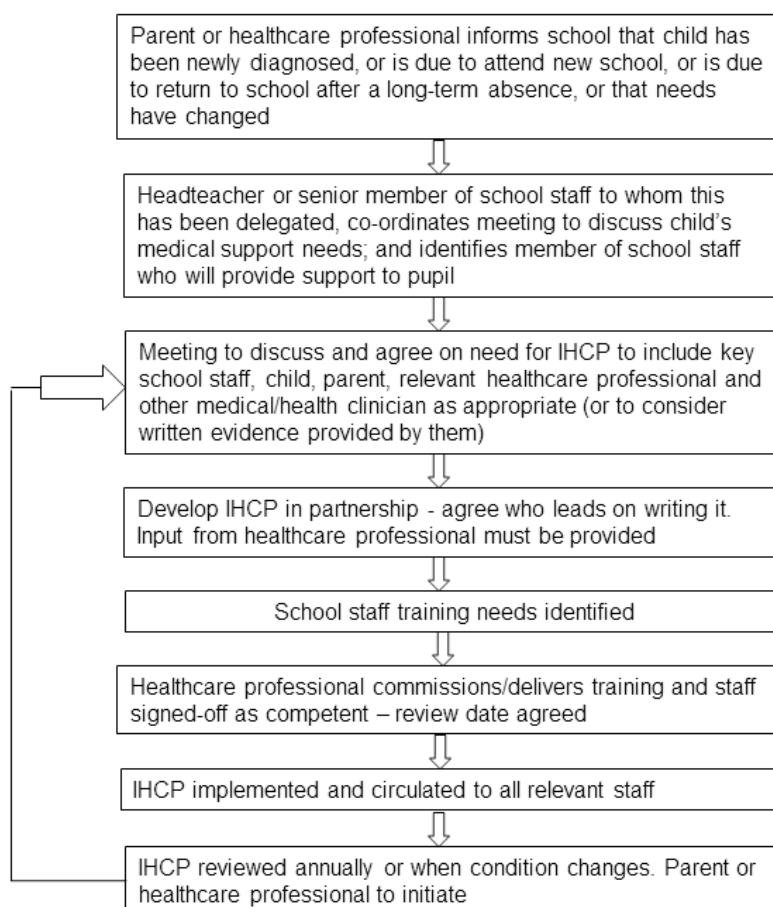
Individual healthcare plans can help to ensure that schools effectively support pupils with medical conditions. They provide clarity about what needs to be done, when and by whom.

Although the Executive Headteacher has responsibility for the development of individual healthcare plans, this role may be delegated on occasion to another senior member of school staff.

Individual healthcare plans will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex. The school is aware that not all children will require one.

The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Executive Headteacher will take a final view.

Flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan



The format of the individual healthcare plan may vary and will be specific to the individual needs of the pupil. The plan will capture the key information and actions that are required to support the child

effectively, the level of detail depending on the complexity of the child's condition and degree of support needed.

Individual healthcare plans, (and their review), may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Plans are to be drawn up in partnership between the school, parents and any relevant healthcare professional, who can best advise on the particular needs of the child.

Pupils should also be involved whenever appropriate. The aim is to capture the steps which the school needs to take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

The school administrator will keep a record of all healthcare plans and the date they were implemented, to ensure they are reviewed at least annually. They will also arrange with the relevant staff and professionals for an earlier review to take place if evidence is presented that the child's needs have changed.

Where a child has SEN but does not have an EHC plan, their special educational needs should be mentioned in their individual healthcare plan. Where the child has a special educational need identified in an EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan.

The following information is recorded on the individual healthcare plans: -

- The 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 and where this is used to manage their condition, dietary requirements and environmental issues.
- 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, etc.
- 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 should be clearly stated with appropriate arrangements for monitoring.
- Who will provide the support, any training needs, expectations of the role and confirmation of proficiency to be able to provide the necessary 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.;
- Written permission from parents and the Executive Headteacher/Head of school/Senior teacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- Any separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that the child can participate, e.g. details of this to be included on risk assessments;
- Where confidentiality issues are raised by the parent/child, only designated individuals to be entrusted with the information about the child's condition.
- What to do in an emergency, including whom to contact, and contingency arrangements.

Roles and Responsibilities

Partnership working between school staff, healthcare professionals (and where appropriate, social care professional), local authorities and parents and pupils is critical.

Parents and carers must;

- Notify the school if their child has a medical condition
- Provide the school with sufficient and up-to-date information about their child's medical needs (and medication where relevant)
- Be involved in the development and review of their child's individual healthcare plan

- Carry out any action they have agreed to as part of the implementation of their child's individual healthcare plan, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.
- Ensure that their child has the correct medication in school and that the proper procedures contained in this policy have been followed

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. There are a number of roles which work collaboratively to support pupils with medical conditions in our school.

School roles and their key responsibilities are detailed below;

Senior Leaders (including SENCo)

- Represent the school in meetings to discuss the medical needs of a pupil
- Lead in developing or review individual healthcare plans
- Liaise with relevant health professionals involved in supporting pupils with medical conditions
- Manage staff in school involved in the day-to-day support of pupils with medical conditions
- Identify staff training needs and liaise with the School Bursar to source and book training in line with identified needs.

School Administrator

- Check admissions forms for notification of medical conditions
- Accurately maintain the records for all pupils in school with medical conditions
- Ensure relevant displays of medical information around school are maintained with up-to-date information
- To liaise with the School Bursar on the booking of appropriate training for staff.
- Arrange meetings with parents and other professionals (when appropriate) to develop and review individual healthcare plans
- Support teaching staff to conduct risk assessments for school visits etc

Class Teachers

- Work with the SLT to inform the development and review of healthcare plans for children in their class.
- Familiarise themselves and acts upon individual healthcare plans for children in the class.
- Know the medication requirements for children in their class and facilitate appropriate access to medication.
- Consider children's individual needs (including information on their individual healthcare plan, where relevant) when risk-assessing planned activities for the class.
- Take responsibility for the safe keeping of emergency medication required for their Children in their classrooms.
- Ensure accurate record keeping of administered medication for their class.
- Ensure parents are informed when medication has been administered to a child in their class during the school day.

Appointed Support Staff

- Administer medication and treatment in line with current training
- Conduct appropriate checks before administering medication
- Accurately record medication administered in school – obtaining a counter-signature

Staff training and support

The schools are committed to ensuring that staff are trained so that they are confident and competent in supporting children with medical conditions. Suitable training is identified during the development and/or review of individual healthcare plans.

Any member of school staff providing specific support to a pupil with medical needs must have received suitable training.

The [ULH Specialist Nurse Trainers](#) provide training and support to staff who are involved in supporting pupils with medical conditions in school. The nursing team lead on identifying and agreeing with the school the type and level of training required.

Staff must not give medication or undertake healthcare procedures without appropriate training.

Due to the fact that many children in school have Asthma and/or an epinephrine auto-injector (e.g. EpiPen) all staff in school receive regular training as required with training delivered by the specialist nurses on;

- Asthma
- Anaphylaxis

Other whole-staff training sessions are arranged for medical conditions where a child in the school has a diagnosis. Recent examples of this type of awareness training include Epilepsy and Type 1 Diabetes.

Where a child has severe or complex medical needs (requiring additional specific support or treatment in school), the specialist nurse trainers deliver specific training to the relevant staff responsible for their care. To ensure appropriate cover is possible in the event of staff absence, the schools will ensure that additional staff receive this specialist training wherever possible.

The nursing team can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

The school is committed to working with other professionals in supporting pupils with medical conditions including occupational therapists, physiotherapists and paediatricians.

The child's role in managing their own medical needs

The school is aware that after discussion with parents, children who are competent should be encouraged to take responsibility for managing their own medicines and procedures. This is reflected within individual healthcare plans.

Any child who can take their medicines themselves is encouraged to do so, with appropriate supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them.

If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered. If the child vomits or has diarrhoea soon after receiving medication, parents must be contacted so that they can seek further medical advice.

Managing medicines on school premises

Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours. **Only in exceptional circumstances will non-prescribed medicines be administered in school, wherever possible the dosage must be administered outside the school day.**

No child will ever be given prescription or non-prescription medicines without their parent's written consent. Therefore, **parents must complete the required school forms as a record of their consent.**

Regardless of the type of medication, parents must make arrangements for an adult to hand the medicine in at the school office and collect it when it is no longer required, or where the medication is part of an ongoing treatment (e.g. antibiotics). Under no circumstances should medication be given to the child to bring into school themselves. Equally, children will not be permitted to collect medication to take home.

Children will never be given medication containing aspirin unless prescribed by a doctor.

Where parents give consent for a child to receive a non-prescribed medication, the parent must report to school when the last dose was taken. School staff will check the maximum dosages and time of last dose before administering this medication. Parents will be informed of any doses given in school including the time of administration.

Our schools will only accept prescribed medicines if they are in-date, labelled and provided in the original container as dispensed by a pharmacist and includes instructions for administration, dosage and storage. The only exception to this is insulin, which is usually inside a pen or pump, rather than its original container.

Our school will only accept non-prescribed medicines if they are in-date, labelled and provided in the original container with the appropriate patient information leaflet (which includes instructions for administration, dosage and storage).

Parents must notify the school immediately (in writing) of any changes or alternation to a prescription requiring adjustment to be made to any previous arrangement about medicines for their child.

When no longer required, medicines are returned to the parent to arrange safe disposal. Where needles or other sharps are used in school, sharps boxes are always used for their safe disposal.

Storage of Medication

All medicines in school are stored safely and appropriately depending on the type of medication and whether it is required in an emergency or upon exacerbation of a medical condition.

Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available and not locked away. They are stored in the class' green medical box. These medicines and devices will move around school with the child, including outside for PE and during an evacuation of the building during a fire drill.

Other medicines are kept securely in the School Office at Stickney and in the School Office at New Leake in either the locked fridge or a locked cupboard depending on the storage instructions for the medication.

Controlled drugs, which includes medication to treat ADHD, are stored in a separate lockable wall-mounted locker in the School Office at Stickney and a separate wall-mounted locker in the School Office at New Leake with only named staff having access.

Administering Medication

Due to the requirement that staff undertake appropriate training before administering medication, and the fact that members of staff cannot be directed by school to administer medication, unfortunately the school cannot guarantee that medicines will always be able to be administered in school. In these rare instances, parents will be informed and asked to make alternative arrangements, which may include them coming into school to administer medication to their child.

Staff administering medicines in school will always do so in accordance with the prescriber's instructions.

Staff administering medicines will always ensure that a second adult is present to double check (and counter-sign) that the correct dose is being administered to the correct child at the correct time in line with the prescriber's instructions for prescribed medication. Before administering non-prescribed medication in line with parent's instructions and consent, staff members must refer to the medicines instructions for use and patient information leaflet to ensure that the dose and medication is appropriate, taking into account the last recorded dose given to the child (which may be a dose given at home).

Record Keeping

Written records are kept of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. A record is made of both the administering staff member and the member of staff who has carried out the checks.

Any side effects of the medication to be administered at school are noted in school.

Record sheets for asthma medicines which are kept in the classroom are kept in class medical files along with the medication.

Record sheets for medicines stored in school are kept in the school office at Stickney and in the school office at New Leake.

Emergency Procedures

As part of general risk management processes, the school has arrangement in place for dealing with emergencies for school activities (in school and off-site). The school has at least one designated first aider, a number of staff are also paediatric first-aid trained and most staff have received emergency first aid at work training.

Where a child has an individual healthcare plan, this must clearly define what constitutes a medical emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures.

Class teachers and support staff working with the pupils will be familiar with the details of these and will ensure the correct procedures are followed if an incident were to occur.

Other pupils in school know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

Day trips, residential visits and sporting activities

Class teachers are aware of children's medical conditions and how it will impact on the child's participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. The school will make arrangements for the

inclusion of pupils in such activities with any adjustments required unless evidence from a clinician such as a GP states that this is not possible.

The school will consider what reasonable adjustments they might need to make to enable children with medical needs to participate fully and safely on visits. A risk assessment will be carried out as part of the planning arrangements to take account of any steps needed to ensure that pupils with medical conditions are included. This requires consultation with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

When an off-site activity is planned, the class teacher is responsible for ensuring suitable arrangements for the safe storage of medicines, carrying records and IHCPs and assessing the risks associated with the activity (with particular regard for pupils with medical conditions).

All off-site activities will be evaluated in terms of proximity and accessibility to emergency services and any implications for those with medical conditions, before approval will be granted by the Executive Headteacher and Governing Body.

Unacceptable practice

Although school staff will use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, all staff are aware that it is unacceptable 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 this may be challenged)

- Send children with medical conditions home frequently for reasons associated with their medical condition 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. (However, evidence of the reason for absence, such as an appointment letter, would need to be supplied to school in support the absence).
- 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.
- 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.

Liability and indemnity

As both schools are maintained schools, the federation is insured through Lincolnshire County Council and therefore the appropriate level of insurance is in place and appropriately reflects the level of risk.

Complaints

Should parents or pupils be dissatisfied with the support provided, they should discuss their concerns directly with the school.

If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.



THE STICKNEY & NEW LEAKE
PRIMARY SCHOOLS FEDERATION



PARENTAL AGREEMENT FOR SCHOOL TO ADMINISTER MEDICINE

The school staff will not give any medication unless this form is completed and signed.

Dear Headteacher

I request and authorise that my child:

Name: _____ Date of Birth: _____

be given the following medication/gives themselves the following medication

Medical Condition/illness _____

Date Dispensed _____ Expiry Date _____

Name of medicine as described on the container: _____

Dosage and method _____

Timing and special precautions _____

Self-Administration YES/NO

This medication has been prescribed for my child by:

Name of GP: _____, whom you may contact for verification.

Procedures to take in an Emergency _____

Name: _____

Relationship to child: _____

Address: _____

Phone No: _____

I understand that I must deliver the medicine personally to the school office and accept this is a service that the school is not obliged to undertake.

I understand that I must notify the school of any changes in writing.

I have confirmed that it is necessary to give this medicine during the school day.

The medication must be clearly labelled indicating the contents, dosage and child's full name.

Signed: _____ (Parent/Guardian) Date: _____

Signed: _____ (Senior leader) Date: _____

Quantity	Date	Time	Dose	Staff name	Staff signature	Staff name	Staff signature	Quantity remaining

Medication Given to Pupils in School - continuation.

Child's Name	D.O.B	Class	Drug name		Strength mg/mcg	Date dispensed		
Parent name	Staff name		Directions for administration		Expiry date	Quantity		
			MUST copy exact directions from dispensary label. Include specific time of dose agreed with parent (if relevant), in line with dispensary directions.			MUST count to confirm exact quantity unless packaging is factory-sealed		
Parent signature	Staff signature				Lott no.			
Quantity before administration	Details of administration of medication							
	Date	Time	Dose	Staff name	Staff signature	Staff name	Staff signature	Quantity remaining

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INDIVIDUAL HEALTH CARE PLAN		
photo	Child's Name	
	Date of Birth	
	Address	
	Telephone	
	Class Teacher	
	Medical Condition	Individual Health Care Plan- General

Information about your child's medication and known triggers...

Condition of illness:
Name of any medication:
Procedures to be taken in an emergency:
Name of Doctor:
Emergency Telephone Number (if different from above):
Please keep us informed of <u>any changes</u> to this plan.
Form completed (date):
Name of Parent/Carer:
Signature of Parent/Carer
Any other information you think we may need:

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Photo	INDIVIDUAL HEALTH CARE PLAN	
	Child's Name	
	Date of Birth	
	Medical Condition	Allergic Reactions

Information about your child's medication and known triggers...

What triggers an attack (if known):
Your child's usual treatment:
How and when it is used:
Signs and Symptoms of an attack:
Name of Doctor:
Emergency Telephone Number:
Please keep us informed of <u>any changes</u> to this plan.
Form completed (date):
Signature of Parent/Carer
Any other information you think we may need:

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Photo	INDIVIDUAL HEALTH CARE PLAN	
	Child's Name	
	Date of Birth	
	Medical Condition	Anaphylaxis

Information about your child's medication and known triggers...

Signs & Symptoms of a "Reaction".
What triggers a "Reaction?"
Your child's usual treatment:
Name of Doctor:
Emergency Telephone Number:
Please keep us informed of <u>any changes</u> to this plan.
Form completed (date):
Signature of Parent/Carer
Any other information you think we may need:

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INDIVIDUAL HEALTH CARE PLAN		
Photo	Child's Name	
	Date of Birth	
	Medical Condition	Epilepsy

Information about your child's medication and known triggers...

What triggers a seizure? (if known):
Signs & Symptoms of a seizure:
Your child's usual treatment:
Name of Doctor:
Emergency Telephone Number:
Please keep us informed of <u>any changes</u> to this plan.
Form completed (date):
Signature of Parent/Carer
Any other information you think we may need:

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INDIVIDUAL HEALTH CARE PLAN	
Photo	Child's Name
	Date of Birth
	Medical Condition
	Asthma

Information about your child's medication and known triggers...

Preventer
Taken regularly to avoid flare ups
Name of medication: <small>(including strength)</small>
Dosage:
When it is administered? <small>(e.g. morning and night)</small>
Reliever
Taken in the event of a flare up
Name of medication: <small>(including strength)</small>
Dosage:
When it is administered? <small>(e.g. morning and night)</small>

Is your child able to administer their medication themselves? <small>(under the supervision of an adult?)</small>	
Yes	No
If no, do you consent to a member of staff administering the medication?	
Yes	No

Known Triggers			
Things that make their asthma worse			
Cold weather		Being unwell	
Hot weather		Flower Pollen	
Cut grass		Tree Pollen	
Dust Mites		Exercise	
Animals		Excitement	
Moulds			
Any other known triggers:			

Signs and Symptoms of an attack:	
Does your child use a flow meter? At home	Yes/No
Does your child use a flow meter? At Doctors	Yes/No
Name of Doctor:	
Emergency Telephone Number:	

Please keep us informed of any changes made to this plan.

Signature of Parent/Guardian:	
Date:	
Any other information you think we may need:	