

Roehampton Church School



Managing Children with Medical Conditions and Medicines in School

All staff, governors, parents/carers and members of Roehampton Church School will be made aware of and have access to this policy.

Introduction

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. The governing body of Roehampton Church School will ensure that these arrangements fulfil their statutory duties and follow guidance outline in 'Supporting pupils at school with medical conditions' April 2014'.

Staff do not have a statutory duty to give medicines or medical treatment. However medicines will be administered to enable the inclusion of pupils with long-term medical needs, promote regular attendance and minimise the impact on a pupil's ability to learn. In an emergency all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

Organisation

The governing body will develop policies and procedures to ensure the medical needs of pupils at Roehampton Church School are managed appropriately. They will be supported with the implementation of these arrangements by Head teacher and school staff.

The leads for the management of medicines at Roehampton Church School **Margery Douse** and Linda Larkin and Zoe Keep. In their duties staff will be guided by their training, this policy and related procedures.

Implementation monitoring and review

All staff, governors, parents/carers and members of the community of Roehampton Church School will be made aware of and have access to this policy. This policy will be reviewed bi-annually and its implementation reviewed as part of the Governors Curriculum and Personnel committee's business.

Prescription Medicines

Medicine should only be brought to school when it is essential to administer it during the school day. In the vast majority of cases, doses of medicine can be arranged around the school day thus avoiding the need for medicine in school. Antibiotics for example are usually taken three times a day, so can be given with breakfast, on getting home from school and then at bedtime. Occasionally a GP may prescribe that a medicine has to be taken during the school day. Parents may call into the school and administer medicine to their child, or they may request that a family member or friend comes to school to administer the medicine if it is to be administered four times a day.

Inhalers

Inhalers are kept in the school office in the medical cabinet or in the medical cabinet in the top site. If the child leaves the school premises, on a trip or visit, the inhaler is taken by the adult in charge or the First Aider.

It is the parent's responsibility to ensure the medication is within the 'use by' date and replaced when necessary.

Epi-pens

Each child should have 2 have two Epi-pens which are kept in the medical cabinet in the office or again in the medical cabinet in the top site. Epi-pens are stored with a photo of the child on the outside. The majority of adults in school have received training by the school nurse to enable them to administer the epi-pen in emergencies. This training is updated every year. The triggers that may cause any form of episode that would warrant intervention with the epi-pen must be shared with all the relevant staff and these then publicised to all staff in the school who may have to administer the epi-pen in an emergency.

Non-prescription Medicines

In general Non-prescription medicines are **not** administered at school and pupils should not bring them to school for self-administration. Only non-prescription travel sickness medication, anti-histamine and paracetamol will be administered by staff on **very rare** occasions when there is no other way of the parent or carer administering the medication in a timely manner. Medication must be suitable for the pupil's age, supplied by the parent (not the school) and in its original packaging, with manufacturer's instructions.

Sunscreen is not a medicine and children are welcome to use this on sunny days to protect against sunburn. However the sunscreen should be clearly labelled with the child's name and children must self-administer. Emollient creams for eczema can be self-administered. Staff are not permitted to apply any cream.

Mild Allergic Reaction

Every effort will be made by the school to identify and reduce the potential hazards/ triggers that can cause an allergic reaction to pupils diagnosed with anaphylaxis within the school population. Antihistamine will be administered for mild reactions as detailed above.

Severe Allergic Reaction

An adrenaline auto injector should be used immediately in a severe reaction (see Pupils Individual Health Care Plan for details). If in doubt about the severity of an allergy reaction, administer the adrenaline auto injector and call an ambulance immediately

Hay fever - Piriton for the treatment of hay fever, parents should administer antihistamine before the pupil starts school, it is not necessary for schools to administer antihistamine for the treatment of hay fever.

Controlled Drugs

The school does not deem a pupil prescribed a controlled drug (as defined by the Misuse of Drugs Act 1971) as competent to carry the medication themselves. Controlled drugs (such as any drug that helps with the symptoms of attention hyperactivity disorders) will be stored securely in a non-portable container and only named staff will have access. Controlled drugs for emergency use must also be easily accessible. The administration of a controlled drug will be witnessed by a second member of staff and records kept. In addition to the records required for the administration of any

medication, a record will be kept of any doses used and the amount of controlled drug held in school.

Pupils with Long-term or Complex Medical Needs

Parents or carers should provide the head teacher or senior leadership with sufficient information about their child's medical condition and treatment or special care needed at school. Arrangements can then be made, if practically possible between the parents, head teacher, school nurse, First Aiders and other relevant health professionals to ensure that the pupil's medical needs are managed well during their time in school. For pupils with significant needs, arrangements will be documented in an Individual Healthcare Plan (IHP) or Educational Health and Care plan (EHC). These plans will be reviewed by the school annually or following a significant change in a pupil's medical condition.

Admissions

When the school is notified of the admission of a pupil with medical needs the Class Teacher and the Lead for Managing Medicines will complete an assessment of the support required. This might include the development of an IHP and additional staff training. The school will endeavour to put arrangements in place to support that pupil if this is practically possible. However the school may decide (based on risk assessment) to delay the admission of a pupil until sufficient arrangements can be put in place if possible.

Impaired mobility

Providing the approval of the GP or consultant has been given there is no reason why children wearing plaster casts or using crutches should not attend school. Safeguards and restrictions will be necessary on PE, practical work or playtimes to protect the child or others. A risk assessment will need to be completed before the child returns to school. This will usually be completed within 24 hours of notification of the impaired mobility.

Pupils taking their own medication

For certain long-term medical conditions, it is important for children to learn how to self administer their medication, however if there is another practical way for the medication to be given to the child without bringing it into school this will be encouraged. If however it is necessary for a child to self-medicate in the school day this will always be supervised by a member of staff.

Staff Training

The school will ensure that the staff who administer medicine to control specific chronic conditions are trained to administer those specific medicines, for example, Anaphylaxis (epipens). Training in the administration of these specific medicines is arranged via the school nurse. A record of training must be maintained to show the date of training for each member of staff and when repeat or refresher training is required. See 'Staff training record – Supporting pupils with medical conditions'

Storage and Access to Medicines

All medicines apart from emergency medicines (inhalers, epi-pens etc) are kept in a locked cupboard. Medicines are always stored in the original pharmacist's container. In the event that a pupil requires an emergency medication that must be locked away, staff will be fully briefed on the procedures for obtaining the medication in an emergency.

Emergency medicines such as inhalers and epi-pens are kept in the medical cabinets in the school office and in the key stage1 medical cabinets, in a clearly identified container. Staff must ensure that access to emergency medication is readily available at all times i.e. during outside PE lessons and educational visits.

Medicines that require refrigeration are kept in the Staffroom, clearly labelled in an airtight container.

Record Keeping

For legal reasons records of all medicines administered are kept at the school until the pupil reaches the age of 24. This includes medicines administered by staff during all educational visits. A parent or guardian will be informed if their child has been unwell during the school day.

Emergency Procedures

In a medical emergency, first aid is given by the school's trained first aiders, an ambulance is called and parents/carers are notified. Should an emergency situation occur to a pupil who has an IHP, the emergency procedures detailed on the plan are followed, and a copy of the IHP is given to the ambulance crew. Instructions for calling an ambulance are displayed prominently by the telephone in the school office.

Medicines on Educational Visits

Staff will administer prescription medicines to pupils with long-term conditions when required during residential educational visits. Parents should ensure they complete a consent form and supply a sufficient supply of medication in its pharmacist's container. If specific training is required to service the child's condition this will be arranged in consultation with the parent / carer and the relevant health professional.

Pupils with long-term medical needs shall be included in educational visits as far as this is reasonably practicable. School staff will discuss any issues with parents and/or health professionals in suitable time so that extra measures (if appropriate) can be put in place for the visit.

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known and copies of care plans will be taken by the responsible person.

Complaints

Issues arising from the medical treatment of a pupil whilst in school should in the first instance be directed to the Headteacher. If the issue cannot easily be resolved the head teacher will inform the governing body to seek resolution.

Approved by the Governing Board
At their meeting on _____ 2017

Signed (Chair of Governors)

Committee Chair: Peter Anthony
Review date May 2019

Appendix

Template A Individual Healthcare Plan (IHP)

Template B Parental agreement for setting to administer medicine'

Template C Record of medicine administered to an individual child'

Template D Record of medicines administered to all children - Supporting pupils with medical conditions'

Template E Staff training record – Supporting pupils with medical conditions'

Template F Contacting Emergency Services

Template G Model letter to parents re IHCP

Template H Individual Protocol for a pupil using antihistamine (eg Piriton)

Template I Individual Protocol for a pupil under the age of 10 using paracetamol

Template A:
Individual healthcare plan (IHCP)



Name of		
		school/setting
Child's name		
		Group/class/form
Date of birth		
Child's		address
Medical		diagnosis or condition
Date		
Review date		

Family Contact Information

Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
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/selfadministered with/without supervision

Daily care requirements

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

Arrangements for school visits/trips etc

Other information

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

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

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

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Expiry date

Dosage and method

Timing

Special precautions/other instructions

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

Self-administration – y/n

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 child

Address

I understand that I must deliver the medicine personally to

[agreed member of staff]

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) _____

Date _____

**Template C:
of medicine administered to
child**

**Record
an individual**

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			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

C: Record of medicine administered to an individual child (Continued)

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Date			
Time given			
Dose given			
Controlled drug stock			
Name of member of staff			
Staff initials			
Witnessed by			

Responsible, Caring and Secure, preparing you for your future

Template E:

Staff training record – administration of medicines

Name of school/setting	
Name	
Type of training received	
Date of training completed	
Training provided by	
Refresher/update training date	
Profession and title	
I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].	

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Template F: Contacting emergency services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. telephone number

School telephone

2. your location as follows [insert school/setting address]

S
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o
l
a
c
c
r
e
s
s

3. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code

Postcode

4. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient

Best entrance is:

5. your name
6. provide the exact location of the patient within the school setting
7. provide the name of the child and a brief description of their symptoms
8. put a completed copy of this form by the phone

Template G: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

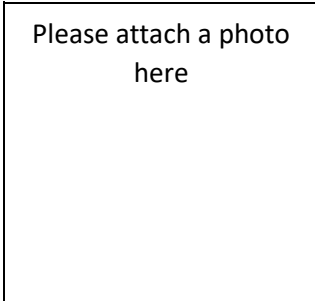
Yours sincerely

Template H Individual Protocol for a pupil using antihistamine (eg Piriton)

**Individual Protocol for.....using Antihistamine (eg Piriton) (based on model WSCC
Protocol dated August 2011**

Name:

Date of Birth:
Class:
School:
Nature of Allergy:



Contact Information

Family Contact 1

Name:
Relationship:
Phone Numbers:
Home: Home: Work: Work:
Mobile:

Family

Contact 2

Name:
Relationship:
Phone Numbers:
Mobile:

GP

Name:
Phone No:
Address:

Clinic/ Hospital Contact

Name:
Phone No:
Address:

MEDICATION - Antihistamine

Name on Antihistamine & Expiry date:
.....

It is the parents responsibility to ensure the Antihistamine has not expired

Dosage & Method: **As prescribed on the container.**

- **It is the schools responsibility to ensure this care plan is reviewed with the parents**
- **It is the parent's duty to inform the school of any changes in condition or treatment.**

Agreed by: School Representative.....Date.....

I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education.

Parent..... Date.....

Individual protocol for.....using Antihistamine (eg Piriton)

Symptoms may include:

- ☐ Itchy skin
- ☐ Sneezing, itchy eyes, watery eyes, facial swelling (does not include lips/mouth)
- ☐ Rash anywhere on body

Inform parent/guardian to collect

.....

from school

Stay Calm

Reassure

.....

Give Antihistamine
Delegated person responsible to administer antihistamine, as per instructions on prescribed bottle

Observe patient and monitor symptoms

If symptoms progress and there is any difficulty in swallowing/speaking /breathing/ cold and clammy

Dial 999

A = Airway
B = Breathing
C = Circulation

If child is prescribed an adrenaline auto injector administer it - follow instructions on protocol

If symptoms progress Dial 999 - Telephone for an ambulance

You need to say: "I have a child in anaphylactic shock". **Give school details:**

Give details: Child's name has a severe allergy and what has happened.

DO NOT PUT THE PHONE DOWN UNTIL YOU ARE SURE ALL THE NECESSARY INFORMATION HAS BEEN GIVEN

Someone to wait by the school gate to direct the ambulance staff straight to the child.

Template I Individual Protocol for a pupil under the age of 10 using paracetamol

Individual Protocol for a pupil under the age of 10 using paracetamol Based on the WSCC model Protocol dated August 2015

<u>Reviewed daily</u>	<u>Day 1</u>	<u>Day 2</u>	<u>Day 3</u>	<u>Day 4</u>	<u>Day 5</u>
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<u>Date</u>					
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Name of pupil:

Date of Birth:

Class:

School:



Family Contact 1

Name:

Relationship:

Tel: Home:

Tel: Work:

Tel: Mobile:

Family Contact 2

Name:

Relationship:

Tel: Home:

Tel: Work:

Tel: Mobile:

Contact details for the GP/Consultant /Dentist/Nurse Practitioner/School Nurse who has recommended on demand pain relief

Name:

Surgery/Hospital/Clinic:

Phone No:

Address:

Condition requiring pain-relief:.....

MEDICATION – Standard paracetamol suitable for children supplied by the parent as tablet/liquid (delete as appropriate) **NB. Paracetamol combined with other medication cannot be administered**

Name of medication:.....

Expiry Date:.....

NB: It is the parents responsibility to ensure the Paracetamol has not expired

Dosage & Method: As prescribed on the container appropriate for the age and weight of the pupil. Medication will be administered following the protocol detailed overleaf. Only 1 dose can be administered at school for a maximum of 1 week and this requirement will be reviewed daily by the school in conjunction with the parent/guardian.

Emergency procedures – if the pupil develops a rash or swelling this might be a sign of an allergic reaction or if it is suspected that the child has taken too much paracetamol in a 24 hour period call 999 and then contact the parents.

Protocol for the administration of paracetamol ☑ If paracetamol is administered at any time during the school day parents will be informed of the time of administration and dosage.

- The school will keep records of the administration of paracetamol as for prescribed medication.
- Pupils must not bring paracetamol (or other types of painkillers) to school for self-administration.

Does your child have any of the following

Liver problems	Long term dehydration
Kidney problems	Epilepsy
Long term malnutrition	

If so, paracetamol must be used with caution

Do not administer if the pupil is also taking any of the following drugs:

- Metoclopramide (relieves sickness and indigestion)
- Carbamazepine (treats a number of conditions including epilepsy)
- Phenobarbital or phenytoin (used to control seizures)
- Lixisenatide – used to treat type 2 diabetes)
- Imatinib – used to treat leukaemia
- Other drugs containing paracetamol

Failure to inform the school of this vital information is placing your child at risk

Record of administration of paracetamol

Day	1	2	3	4	5
Dose					
Time					
Additional parental consent gained(time)					

Agreed by: School Representative.....Date.....

I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education.

I confirm that I have administered paracetamol in the past to my child without adverse reaction. I am aware that I will be informed by the school in writing when medication has been administered via a form in the child's book bag.

I am aware that my child can only have 4 doses of paracetamol in any 24 hour period.

Agreed by: Parent.....Date.....