



**Bellenden Primary School**  
**Supporting Children With Medical Policy**

The staff of Bellenden Primary School wish to ensure that pupils with medical needs receive proper care and support at school. The Head and Deputy Headteacher will accept responsibility in principle for members of the school's staff giving and supervising pupils taking prescribed medication during the school day, where those members of staff have volunteered to do so. Any parent requesting the administration of medication will be given a copy of the school's policy.

Medication will only be accepted in school if it has been prescribed by a doctor and Bellenden Primary will inform the school's nurse of any pupil who has been prescribed a controlled medication e.g. methylphenidate (Ritalin, Equasym, Concerta). Controlled drugs are subject to the prescription requirements of Drug Regulations. The prescribing doctor is responsible for informing the patient or family of the patient when a drug belongs to this group. They are most unlikely to be prescribed to children at school except methylphenidate (Ritalin, Wquasym, Concerta).

Medication will not be accepted anywhere in school without the complete written and signed instructions from a parent.

Only reasonable quantities (no more than one week's supply) of medication should be supplied to the school or Foundation Stage Setting by a responsible person and this should be recorded in the Medication Administration Records File.

Each item of medication must be delivered in its original container and handed directly to the Headteacher, Deputy Headteacher, Class Teacher or School office.

Each item of medication must be clearly labelled with the following information:

- \_ Pupil's name
- \_ Name of Medication
- \_ Dosage
- \_ Frequency of Dosage
- \_ Date(s) of dispensing
- \_ Storage Requirements (if important)
- \_ Expiry date (if available)
- \_ Possible Side Effects

The school will not accept items of medication which are in unlabelled containers.

Unless otherwise indicated, all medication to be administered in school will be kept in a designated, clearly identified cupboard or refrigerator.

The school will provide parents with details of when medication has or has not been administered to their child.

Where it is appropriate to do so, pupils will be encouraged to administer their own medication under staff supervision. Parents will be asked to confirm in writing if they wish for their child to carry their medication with them in school.

It is the responsibility of parents to notify the school if there is a change in medication, a change in dosage requirements, or the discontinuation of the pupil's need for medication.

Staff who volunteer to assist in the administration of medication will receive all necessary training where appropriate through arrangements made with the relevant Service Health Provider.

All staff understand and are trained in the school's general emergency procedures.

The school will make every effort to continue the administration of medication to a pupil whilst on school trips away from the school premises, even if additional arrangements might be required. Separate, formally agreed arrangements are acceptable on education visits that involve an overnight stay. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed.

## **Procedures for the Administration of Prescribed Medication**

### **Step 1**

Parents will inform the Head / Deputy Headteacher in writing of any medication required to be taken by their child whilst on the school premises, whether or not the school has agreed to administer the medication.

If the parents wish the school to administer or oversee the administration of the medication 'in loco parentis', they should complete:

### **FORM SCEMED 1 – REQUEST FOR SCHOOL TO ADMINISTER PRESCRIBED MEDICATION**

### **Step 2**

Following the submission of FORM SCEMED 1, the parents will then receive a copy of:

### **FORM SCEMED 2 – CONFIRMATION OF THE HEADTEACHER'S AGREEMENT TO ADMINISTER PRESCRIBED MEDICATION**

Prescribed medication cannot be administered at school until parents are in receipt of this form.

### **Step 3**

Medication will be stored in a secure location within the school (cabinet in the meeting room or on the FS Corridor). The medication will be administered or a member of staff will oversee the self-administration of the prescribed medicine according to the instructions given on FORM SCEMED

A daily record of each dose given will be kept on FORM SCEMED 3 to avoid under/overdose. Details of daily dosage will also be recorded on the Home / School Dosage Card.

Under **no circumstances** will verbal information from either parent or pupil will not be acted upon. In complex cases, parents will be asked to visit the school during the day to administer the medicine in person.

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### **INJECTIONS**

With the exception of auto-injectors and agreed as part of a Health Care Plan, under **no circumstances** should any member of staff administer an injection.

In an emergency, and in accordance with the information given in both the DfES guidance and in JSP 342, an adrenaline injection such as an EpiPen can be administered for anaphylaxis by suitably trained staff.

Where a child requires insulin during the course of the school day, it is the responsibility of the parent, in conjunction with an agreed Health Care Plan to determine how this support takes place.

### **Parental Considerations for the Administration of Prescribed Medication in School**

Whenever possible, parents are asked to encourage doctors to prescribe medication in 'dose frequencies' which enable the medicine to be taken outside school hours.

Pharmacists should be asked to provide medication in separate containers (i.e. one for school use only) or it might be necessary for parents to request a separate prescription from the Doctor for medicines to be used in school.

### **The Administration of Non-Prescription Medication**

**Under no circumstances** will any member of staff administer non-prescription medicine also known as general sale medicine.

If parents wish for their child to receive non-prescription medicine during the school day, then they will have to visit the school at an appropriate time to administer the medicine in person.

If a child has regular symptoms that may benefit from the administration of analgesics, the school will contact the parents to ensure that a regular supply of prescribed medication is available in school and that the appropriate FROM SCEMED 1 is completed.

### **Storage and Administration of Medicine**

At school, all medication, other than asthma inhalers, should be stored in a designated, clearly identifiable cabinet or refrigerator. This should be accessible to all staff members but inaccessible to pupils.

Controlled drugs such as Ritalin must be kept in a locked non-portable container to which only named staff should have access.

Medicines must be kept away from first aid boxes and a duplicate key to the medicine store must be available in case of emergencies.

Medicines which need to be refrigerated will not be stored in the same refrigerator used for the storage of food.

Medicines for external use should be kept separate from those for internal use.

Medicine should have been dispensed within the last three months and the school must maintain records of all medicines received and returned to parents.

Up to date contact telephone numbers for parents must be kept by the school so that they can be contacted at any time. Any changes in personal details must be passed on to the school immediately.

Any surplus medicines will be handed back to parents at the end of a course of treatment.

Asthma inhalers and Epi-Pens and any other medication needed in an emergency will be kept in the child's classroom (but out of reach of pupils). Staff will be notified of the location of emergency medicines via the medical needs board situated in the staff room.

### **School Trips**

It may be necessary to administer medication to pupils whilst on school trips. In general, pupils with medical needs will not be excluded from school trips unless there are sound medical or health and safety reasons.

Before taking children off the school premises, the member of staff in charge will check that any medication or equipment that needs to accompany pupils is safely packed.

For the administration of prescribed medication on a day trip, staff will follow the parental instructions given on FORM SCEMED 1.

In more complex cases, and where Health Care Plans are in operation, the Group Leader will have familiarised themselves with the details contained within their plan. Where appropriate, emergency contact details (especially for children with a Health Care Plan) must accompany each member of staff on each visit away from school.

Wherever possible but especially in Key Stage 2 (Years 3 – 6), asthma inhalers will remain the responsibility of the pupil. The member of staff in charge of the trip will check to ensure that asthma inhalers are being carried by those who need them before leaving school.

### **Residential Trips**

Once again, in general, pupils with medical needs will not be excluded from school trips unless there are sound medical or health and safety reasons.

During the Parents' Information Evening, parents will be asked to complete all the necessary paperwork stating any medical needs for their child.

The administration of both prescribed and non-prescribed medication during the course of a residential trip will be controlled by the parents completing FORM SCMED 1.

Responsibility for the collection and administration of all medicines on a residential trip will be given to a named member of staff accompanying the trip.

A separate meeting will be held with families of pupils whose medical needs are subject to an individual Health Care Plan. Where necessary, external health care professionals will also be invited to this meeting to ensure that the child's medical needs can be met by the teaching staff during the residential trip.

Wherever possible but especially in Key Stage 2 (Years 3 – 6), asthma inhalers will remain the responsibility of the pupil. The member of staff in charge of the trip will check to ensure that asthma inhalers are being carried by those who need them before leaving school. During the Parents' Information Evening, parents will be asked to provide a spare asthma inhaler which will be kept by the member of staff responsible for medicines during the course of the residential.

### **Emergency Procedures**

In extreme emergencies e.g. an anaphylactic reaction or diabetic coma, certain medicines can be administered or supplied without the direction of a medical practitioner for the purpose of saving life.

All staff will be made aware of how to contact persons trained to administer medication in an emergency.

Where possible, all staff will be trained (and will have given their permission) to administer emergency medicine for the purpose of saving life.

Emergency medicines will be kept in the child's classroom but out of reach of pupils. Staff will be notified of the location of emergency medicines via the medical needs board situated in the staff room.

Emergency medicines named in individual Health Care Plans will always be readily available.

All staff will be aware of how to contact the emergency services using the proforma SCMED 8 and they will have access to information about the child's condition.

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All staff will be aware of how to contact the emergency services using the proforma SCMED 8 and they will have access to information about the child's condition.

### **Health Care Plans**

Where a child's medical needs go beyond the normal practice of completing SCMED 1, the Headteacher / Deputy Headteacher will convene a meeting to agree a Health Care Plan. Parents, the pupil and professionals from the school's health team will be invited to attend this meeting.

Responsibility for drawing up a Health Care Plan rests with the Headteacher in consultation with the SENCO.

The Health Care Plan will be child specific and detail:

- \_ Procedures to be followed in an emergency
- \_ Medication (full drug name and dosage instructions)
- \_ Day to day care – food management and information about blood sugar levels etc

\_ Consent and Agreement by:

- Parents / Carers
- The appropriate Health Care Professional
- The Headteacher or nominated representative such as the SENCO
- The child (if appropriate)

Health Care Plans will be recorded using the form SCMED 6

Following the completion of the Health Care Plan, the named Health Care Professional may be asked to raise awareness of the condition to school staff.

If associated training is required to support a child with specific medical needs, then the parents hold responsibility until such time as that training has been delivered in school.

### **Absence as a Result of a Medical Condition**

cases where pupils are absent for periods of less than 15 working days, parents will follow the normal arrangements for informing the school. If the length of period of absence can be anticipated, then it may be appropriate for the Class Teacher to provide the pupil with a pack of work to do at home.

Where an absence exceeds 15 working days, the school will inform the Area Education Officer and the AEO SEN. In these cases, parents will need to provide the school with a letter from a medical practitioner containing details of the medical condition or intervention and information about the estimated period of absence.

In cases where a child will be absent from school for a period in excess of 15 working days or where a child will miss school as a result of recurrent or regular treatment, then special education provision will be provided for the pupil in order to ensure continuity of education.

The school, with the parent's co-operation, will maintain contact with the pupil who is unable to attend in order to monitor progress.

In cases of extended absence, regular review meetings will be held to ensure that the educational provision provided is best matched to the child's needs.

### **Confidentiality**

Staff will not disclose details about a pupil's medical condition without the consent of the parents and, where appropriate, the pupil.

Where parents, or the pupil, decide not to disclose details of medical conditions, they will be asked to indicate certain aspects of school activity that should not be undertaken such as Design and Technology or Physical Education.

Whether and how much members of the school community should know about a pupil's medical condition is not a matter for the school to decide. However, depending on the circumstances, the school may feel that they cannot safeguard a pupil without sharing information and may wish to add this disclaimer to any agreed Health Care Plan.

In some cases, and with the support of the parents and pupil, staff will raise awareness of a pupil's medical condition with the rest of the class as this can be helpful both educationally and emotionally.

On occasions the school might decide to call on a health care professional to speak to the children about a child's medical condition. However, permission will be sought from both the pupil and parents before a meeting of this kind takes place.

If at any time a member of staff has concerns over the safety or welfare of a pupil, then the normal safeguarding procedures would take effect.

### **Liability**

Whilst there are risks when administering medication, with suitable and sufficient training, these should be minimal in comparison with the risk to the pupil if medication is either delayed or not given in a life-threatening situation.

Liability, should anything go wrong, will only arise where there has been negligence i.e. failure to exercise reasonable care. In such cases it would be the employer who would be vicariously liable for any claim arising out of negligence of an employee.

The MoD will accept liability to pay compensation for any injury or damage property resulting from SCE staff undertaking activities as part of their official duties.

In order to qualify as 'part of their official duties', the activities must be authorised by the member of staff's line management and the staff member(s) must be suitably trained, experienced and supervised.

### **Duty of Care**

When administering medication, there is a legal requirement to exercise reasonable care to avoid injury.

Staff who administer or oversee the administration of medication would be considered to be discharging their duty of care 'in loco parentis' i.e. the degree of care exercised as that undertaken by the average careful parent in the same circumstances.

Provided the administration of medication is controlled, for instance by following the guidelines of this policy and the parental instructions given in FORMS SCEMED 1, the risk of injury will be minimised and the member of staff administering medication may therefore be considered to have exercised reasonable care.

### **Training**

All staff likely to come into contact with a pupil who has a medical condition and who may require urgent medical attention will receive sufficient information and / or awareness training to enable them to recognise symptoms of the condition and take appropriate action in the event of an emergency.

All staff will receive training on the use of epi-pens and awareness training relating to asthma and diabetes. However, staff are not obliged to administer epi-pen auto-injections. A school register is kept with the names of staff who have volunteered to administer emergency medication via an epipen or hypo-start gel.

Relevant training given by members of the school's health team is arranged every twelve months or on a more frequent basis when the need arises.

Date: June, 2016  
Review Date: July, 2017