# Nene Valley Primary School Supporting Pupils with Medical Conditions.



## <u>Aims</u>

Nene Valley Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full-time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance released in April 2014 – "Supporting pupils at school with medical conditions" under a statutory duty from section 100 of the Children and Families Act 2014. The statutory duty came into force on 1st September 2014

The school will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all efforts to comply.

## **Key roles and responsibilities**

## The Local Authority (LA) is responsible for:

- 1 Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- 2 Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) are effectively delivered.
- 3 Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

#### The Governing Body of Nene Valley Primary School is responsible for:

- 1 Ensuring arrangements are in place to support pupils with medical conditions.
- 2 Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- 3 Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/national/ origin, religion or belief, sex, gender reassignment, pregnancy & maternity, disability or sexual orientation.
- 4 Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- 5 Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips/ sporting activities, remain healthy and achieve their academic potential.
- 6 Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- 7 Ensuring written records are kept of, any and all, medicines administered to pupils.
- 8 Ensuring the policy sets out procedures in place for emergency situations.
- 9 Ensuring the level of insurance in place reflects the level of risk.
- 10 Handling complaints regarding this policy as outlined in the school's Complaints Policy.

## The Headteacher is responsible for:

- 1 Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- 2 The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of Nene Valley Primary School.
- 3 Liaising with healthcare professionals regarding the training required for staff.
- 4 Identifying staff that need to be aware of a child's medical condition.
- 5 Developing Individual Healthcare Plans (IHPs) unless provided by the school nurse.
- 6 Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations.
- 7 If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays / absences and emergencies.
- 8 Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- 9 Continuous two-way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.
- 10 Ensuring confidentiality and data protection
- 11 Assigning appropriate accommodation for medical treatment/ care
- 12 Considering the purchase of a defibrillator.
- 13 Voluntarily holding 'spare' salbutamol asthma inhalers for emergency use.

## **Staff members are responsible for:**

- 1 Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help. A first-aid certificate is not sufficient.
- 2 Knowing where controlled drugs are stored and where the key is held.
- 3 Taking account of the needs of pupils with medical conditions in lessons.
- 4 Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- 5 Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.
- 6 Ensuring pupils have rapid access to items such as inhalers at all times. This is particularly the case for school trips, activities on the school field, PE and swimming etc.

#### School nurses are responsible for:

- 1 Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- 2 Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- 3 Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- 4 Liaising locally with lead clinicians on appropriate support.
- 5 Assisting the Headteacher in identifying training needs and providers of training.

## Parents and carers are responsible for:

- 1 Keeping the school informed about any new medical condition or changes to their child/children's health.
- 2 Participating in the development and regular reviews of their child's IHP.
- 3 Completing a parental consent form to administer medicine or treatment before bringing medication into school. (See Medicines section below)
- 4 Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine. Under no circumstances should medicine be sent via the child, but should be delivered for registration at the school office by the responsible adult.
- 5 Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.
- 6 Informing the school of any long-term illness, such as asthma or epilepsy, affecting their child.

## Pupils are responsible (at an age appropriate level) for:

- 1 Providing information on how their medical condition affects them.
- 2 Contributing to their IHP
- 3 Complying with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

## **Training of staff**

- a) Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.
- b) The clinical lead for each training area/session will be named on each IHP.
- c) No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and/or without being signed off as competent by relevant parties.
- d) School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

## Medical conditions register /list

- a) Schools admissions forms request information on pre-existing medical conditions. Parents have easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. Consideration could be given to seeking consent from GPs to have input into the IHP and also to share information for recording attendance.
- b) A medical conditions list or register is kept, updated and reviewed regularly by the nominated member of staff. Each class / form tutor has an overview of the list for the pupils in their care, within easy access.
- c) Supply staff and support staff should similarly have access on a need to know basis. Parents should be assured data sharing principles are adhered to.
- d) For pupils on the medical conditions list yearly transition points meetings take place in advance of transferring to enable parents, school and health professionals to prepare IHP and train staff if appropriate.

## **Individual Healthcare Plans (IHPs)**

- a) Where necessary an Individual Healthcare Plan (IHP) will be developed in collaboration with the pupil, parents/carers, Headteacher, Special Educational Needs Coordinator (SENCO) and medical professionals.
- b) IHPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality.
- c) IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- d) Where a pupil has an Education, Health and Care plan or special needs statement, the IHP will be linked to it or become part of it.
- e) Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

## **Transport arrangements**

- a) Where a pupil with an IHP is allocated school transport the school should invite a member of PCC Transport team who will arrange for the driver or escort to participate in the IHP meeting. A copy of the IHP will be copied to the Transport team and kept on the pupil record. The IHP must be passed to the current operator for use by the driver /escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
- b) For some medical conditions the driver/ escort will require adequate training. For pupils who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that pupil's transport.
- c) When prescribed controlled drugs need to be sent in to school, parents will be responsible for handing them over to the adult in the car in a suitable bag or container. They must be clearly labelled with name and dose etc. and fulfil all requirements of this document relating to Medicines (see below).
- d) Controlled drugs will be kept under the supervision of the adult in the car throughout the journey and handed to a school staff member on arrival. Any change in this arrangement will be reported to the Transport team for approval or appropriate action.

## **Education Health Needs (EHN) referrals**

a) All pupils of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such pupils.

#### **Medicines**

- a) Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours. Medicines that are prescribed for 3 times per day should not be taken in school hours unless there is specific medical advice from the child's GP.
- b) If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form, available from the school office.
- c) No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- d) No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.

- e) Medicines MUST be in date, labelled, and provided in the original container/packaging (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered. No unprescribed drugs will be administered without the express agreement of the headteacher or deputy headteacher.
- f) Medicines should not be taken into classrooms or cloakrooms by pupils for delivery to school. All medicines should be registered at the school office by the responsible adult (parent), and any amendments to dosage should be detailed to the school office with appropriate evident (prescription change, hospital letter etc.) Teachers and Teaching Assistants must never accept medicines directly, or accept verbal instructions; they should always be referred to the school office.
- g) Except in agreed circumstances a maximum of **four** weeks' supply of the medication may be provided to the school at one time.
- h) Controlled drugs that have been prescribed for a pupil are securely stored in a nonportable container, only named staff have access and they are easily accessible in an emergency.
- i) Medications are stored in the Medical Room.
- j) Any medications left over at the end of the course will be returned to the child's parents.
- k) Written records are kept of any medication administered to children. The date, child's name, medicine, dosage and administration will be recorded in the school log book. (Appendix 1)
- When non-prescribed medicines are administered (e.g. Paracetamol, Hay fever treatment) a signed record will be sent home to the parents stating the time and dosage. (Appendix 6) (All non-prescribed medicines have to be registered at the school office following the agreement of the headteacher/deputy headteacher.)
- m) Pupils will never be prevented from being able to access their medication through appropriate channels.
- n) Emergency salbutamol inhaler kits are kept by school, but only for use in an emergency.
- o) General posters about medical conditions (diabetes, asthma, epilepsy etc.) are visible in the medical room.
- p) Nene Valley Primary School cannot be held responsible for side effects that occur when medication is taken correctly.
- q) Staff will not force a pupil, if the pupil refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHP which will include informing parents.

## **Emergencies**

- a) Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.
- b) Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- c) If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

#### Day trips, residential visits and sporting activities

- a) Arrangements are flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- b) A separate Administration of Medicines form should be completed for any trips or residentials.

**c)** To comply with best practice risk assessments are undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits.

## **Avoiding unacceptable practice**

The following behaviour is unacceptable in Nene Valley Primary School:

- a) Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- b) Assuming that pupils with the same condition require the same treatment.
- c) Ignoring the views of the pupil and/or their parents or ignoring medical evidence or opinion.
- d) Sending pupils home frequently or preventing them from taking part in activities at school
- e) Sending the pupil to the medical room or school office alone or with an unsuitable escort if they become ill
- f) Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- g) Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues where it does not adhere to the practice described in this policy.
- h) Creating barriers to children participating in school life, including school trips.
- i) Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

#### **Insurance**

- a) Teachers who undertake responsibilities within this policy will be assured by the Headteacher that they are covered by the LA/school's insurance.
- b) Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Headteacher.

## **Complaints**

a) All complaints should be raised with the school in the first instance and in line with the School Complaints Policy and Procedure.

APPENDIX 1 - MEDICINES ADMINISTRATION RECORD FORM

APPENDIX 2 – MEDICAL FORM

**APPENDIX 3 – INDIVIDUAL HELATHCARE PLAN** 

**APPENDIX 4 - FLOWCHART** 

**APPENDIX 5 - MEDICINES ADMINISTRATION RECORD FORM (trips)** 

**APPENDIX 6 – ADMINISTRATION OF NON-PRESCRIBED MEDICINE RECORD** 

Signed: Signed

Mr. Richard Isley Mr. Nick File

Chair of Governors Acting Headteacher

Date: Autumn 2021 REVIEW DATE: Autumn 2022

## MEDICATION INFORMATION, CONSENT AND ADMINISTRATION FORM

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_		

NAME OF CHILD NAME OF PARENT/CARER

DATE OF BIRTH DAYTIME CONTACT NO.

CLASS G.P.

I consent to my child receiving the following medication in school, which will be kept in a locked medicine cabinet.

	MEDICATION DETAILS	ADMINISTRATION DETAILS - FOR USE IN SCHOOL								
MEDICATION		DATE								
WEDICATION		DOSE								
DOSAGE		TIME								
TIME		SIG.								

I expect this course of medication to be completed by ......

	MEDICATION DETAILS	ADMINISTRATION DETAILS - FOR USE IN SCHOOL							
MEDICATION		DATE							
MEDICATION		DOSE							
DOSAGE		TIME							
TIME		SIG.							

I expect this course of medication to be completed by .....

I undertake to ensure that the school has adequate supplies of this/these medications(s).

I undertake to ensure that this/these medication(s) supplied to me and prescribed by my own child's Doctor is/are correctly labelled, in date and with storage details attached and that the school will be informed of any changes.

I understand that the medication will be given by a member of staff who has received appropriate training in accordance with Local Authority code of practise.

#### **ADDITIONAL COMMENTS**

Signed ( Parent/Carer)	Date
/Volumes/data-7/Health & Safety/Medicine in school/Parental+consent+form+-++++medicine.xls	

## **APPENDIX 2**

## **INITIAL MEDICAL CONDITION REGISTRATION FORM**



Please complete this form in the event that your child has an ongoing medical condition that the school should be aware of i.e. Asthma, Diabetes etc.

3	NAME OF CHILD	D.O.B
Primar	NAME OF PARENT/	CARER
	NAME OF GP	
Medical condition s	uffered	
Any relevant details	s (i.e. symptoms)	
Does your child req	uire medication to be k	ept in school at all times? YES/NO
If yes what medicat	ion is required	
How often does you	ur child require the med	cation
If your child requires	s an asthma pump, are	they able to self administer the medicine?
Does the medicatio	n have any side effects	that the school should be aware of? YES/NO
If yes, please give of	details	
I undertake to ensi	ure that the school has	adequate supplies of this/these medications(s).
	ure that this/these medi age details attached.	cation(s) supplied to me is/are correctly labelled, in
		ven by a member of staff who has received cal Authority code of practise.
I understand that I	must notify the school	of any changes to the above information in writing.
Signed		Date
For Office use		
Childs records upda	ated on	by:
Childs teacher infor	med on	by:
Medication received	d if required on	by:
Agreed review date	: by: _	(staff member)

## **APPENDIX 3**

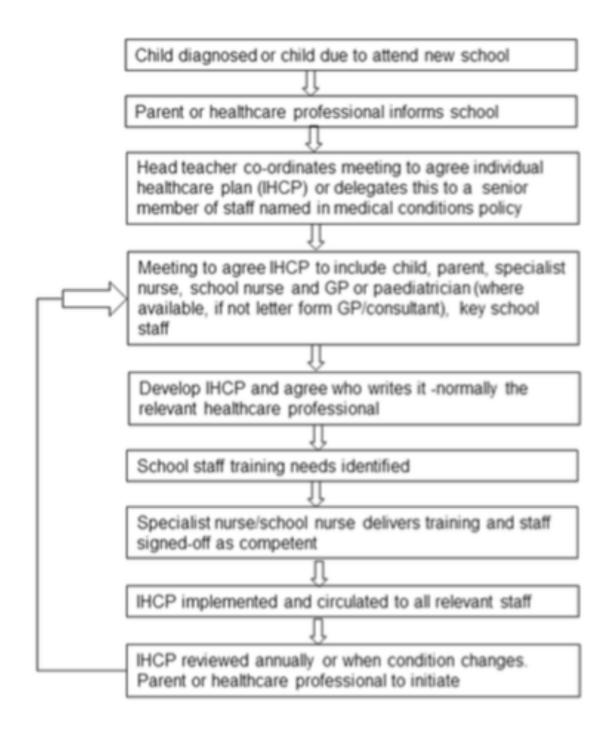
## **INDIVIDUAL HEALTHCARE PLAN (TEMPLATE)**

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	
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	

## **INDIVIDUAL HEALTHCARE PLAN (TEMPLATE)**

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
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
Form copied to

#### FLOWCHART FOR RESPONDING TO A MEDICAL CONDITION.



## **APPENDIX 5**

# MEDICATION INFORMATION, CONSENT AND ADMINISTRATION FORM (TRIPS).

NAME OF CHILD					NAME OF PARENT/CARER										
DATE OF BIRTH					DAYTIN	IE CONT	TACT NO	).							
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I consent to my	/ child	receiving the	following medication de	uring the	e school tri	p to			·····		Dates:		to		
	MEDIC	CATION DET	AILS	ADMIN	IISTRATIO	N DETAI	LS - FOR I	JSE IN SC	HOOL				_		
MEDICATION				DATE											
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	MEDIC	CATION DET	All S	ADMIN	IISTRATIO	N DETAIL	S - FOR I	ISE IN SC	HOOL						
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MEDICATION				DATE											
				DOSE						<u> </u>			+		
DOSAGE				TIME											
TIME				SIG.											
Are there any s	ide eff	ects that the	school should be aware	of?											
			has adequate supplies of		se medication	ons(s).									
			medication(s) supplied to				n date and	with storag	ge details	attached.					
			be given by a member of						_		uthority cod	de of pract	ise.		
			-												
ADDITIONAL C	OMME	NTS													
Signed ( Par	∟ ent/Ca	arer)						Date							
J (		- ,	***************************************												

## ADMINISTRATION OF NON-PRESCRIBED MEDICINE - REPORT TO PARENTS.

RECORD OF ADMINISTRATION							
(School Copy - please retain)							
NAME OF	NENE VALLEY						
SCHOOL/SETTING	PRIMARY SCHOOL						
NAME OF CHILD							
NAME AND STRENGTH							
OF MEDICINE							
EXPIRY DATE							
DATE:							
TIME:							
DOSAGE							
ADMINSITERED:							
NAME OF STAFF							
ADMINISTERING:							
SIGNATURE OF STAFF							
ADMINISTERING:							

RECORD OF ADMINISTRATION							
(Parent/Carer Copy - via class teacher)							
NAME OF NENE VALLEY							
SCHOOL/SETTING	PRIMARY SCHOOL						
NAME OF CHILD							
NAME AND STRENGTH OF MEDICINE							
EXPIRY DATE							
DATE:							
TIME:							
DOSAGE							
ADMINSITERED:							
NAME OF STAFF							
ADMINISTERING:							
SIGNATURE OF STAFF							
ADMINISTERING:							