



Supporting Pupils with Medical Conditions

(Including the Administering of Medicines and First Aid Policy)

Pentland Infant and Nursery 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 form 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, carefully consider it and we make all efforts to comply.

Aims:

The Aims of this policy are:

- To define the procedure for administering prescribed medicine to children
- To define the framework for the use of medical care plans for children with a chronic condition
- To define the procedures for the emergency administration of medicine to children

Key roles and responsibilities:

a) 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.

b) The Governing Body of Pentland Nursery and Infant 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 including ,ethnicity, nationality, origin, religion or belief, gender and disability.
- 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 will be supported 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.

Named Governor- Ashraf Mulla

c) 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 Pentland Nursery and Infant School.
- 3) Liaising with healthcare professionals regarding the training required for staff.
- 4) Identifying staff who need to be aware of a child's medical condition.
- 5) Developing Individual Healthcare Plans (IHPs).
- 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.

d) 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.
- 2) Knowing where controlled drugs are stored .
- 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) Completing the necessary paperwork and ensuring clear and timely communication of children's health needs with parents and other school staff (as appropriate), for example, if a child has had more than 2 puffs of their inhaler in any one day.
- 6) Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

e) 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. Assisting the Headteacher in identifying training needs and providers of training.

f) 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.
- 4) Providing the school with the medication their child requires and keeping it up to date, including collecting leftover medicine.
- 5) Carrying out actions assigned to them in the IHP, with particular emphasis on them, or a nominated adult, being contactable at all times.

g) Children are responsible for:

- 1) Providing information on how their medical condition affects them.
- 2) Contributing to their IHP, where appropriate

Training of staff:

- 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.
- The clinical lead for each training area/session will be named on each IHP, wherever possible.
- No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition.
- School will keep a record of medical conditions supported, training undertaken and a list of staff qualified to undertake responsibilities under this policy.

Medical conditions register /list:

- Schools admissions forms requests information on pre-existing medical conditions. Parents are given an easy pathway to inform school at any point in the school year if a condition develops or is diagnosed. They are invited to contact the school office who will direct them to the Inclusion Coordinator for a full discussion and to complete any appropriate paperwork.
- A medical conditions list or register will be kept, updated and reviewed regularly by the nominated member of staff. Each class has an overview of the list for the pupils

in their care, within easy access (MEDICAL BOARD on the back of their cupboard door).

- Supply staff and support staff will similarly have access on a need to know basis. Parents should be assured data sharing principles are adhered to.
- For children on the medical conditions list, transition meetings will take place in advance of children transferring to another year group / setting to enable parents, school and health professionals to prepare IHP and train staff if appropriate.

Individual Healthcare Plans (IHPs):

- 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.
- IHPs will be easily accessible to all relevant staff, whilst preserving confidentiality. A photograph and instructions will be displayed in the staff room and the Class Medical Board for all the children requiring specialised support. The school has a centralised register of IHPs and an identified member of staff who has responsibility for this register- Mrs Mulla.
- IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- 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.
- 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 will be facilitated to ensure that the IHP identifies the support the child needs to reintegrate.

Transport arrangements:

- Where a pupil with an IHP is allocated school transport, from the Local Authority, the school will invite a member of DCC 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.
- 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.
- 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 the child's name and dose etc.

- 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:

- 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.
- In order to provide the most appropriate provision for the condition the EHN team accepts referrals where there is a medical diagnosis from a medical consultant.

Medicines:

- 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.
- 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 form.. A tear - off slip will be passed to the class teacher and headteacher so all parties are aware.
- No child will be given any prescription medicines without written parental consent except in exceptional circumstances. The school will not administer non-prescription medication to children, with or without parent's consent, except in the most exceptional circumstances.
- No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- Medicines MUST be in date, labelled, and provided in the original container (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.
- A maximum of four weeks' supply of the medication may be provided to the school at one time.
- Asthma inhalers / 'class' epi pens will be stored in the teacher's cupboard in an easily recognisable box marked MEDICINE. All other medications, including the second epi pen will be stored in the School Office. When the medicine is administered this is logged on a record of medication with the date and time of dose, and the initials of the member of staff administering the medicine. However, schools are busy places and the school cannot accept responsibility if a dose is missed. If parents wish to come into school during the day to administer medicine then they are welcome and should arrange this with the school office.
- Any medications left over at the end of the course will be returned to the child's parents.

- Written records will be kept of any medication administered to children.
- Pupils will never be prevented from accessing their medication, however, careful monitoring of medication administered will ensure that the medical needs of the children are being met.
- An Emergency salbutamol inhaler is to be kept in school.
- Pentland School cannot be held responsible for side effects that occur when medication is taken correctly.

Asthma inhalers:

If a child has asthma, the parents must complete an Asthma Information Sheet which is available in the school office. Inhalers must be clearly labelled with the child's name. Inhalers are kept in the designated place in the classroom under the supervision of the class teacher.

Allergies and Emergency Administration of Medicine:

An allergy must be notified on the school admission form. If an allergic reaction may require the use of a epi -pen then an IHP is created. All staff are trained annually in the use of epipens.

Pentland School will do everything it can to provide a school meal for children who have particular food allergies. If appropriate, a consultation meeting will be called involving, school, parents and the catering Department. A doctor's note must be provided to give full details of food allergies/ intolerances in order to cater for the child's dietary needs. Parents will need to be made aware that some of the food preparation sites cannot be guaranteed as being nut -free.

Emergency first aid:

The school has fully trained first aiders, including those with paediatric first aid training. Minor incidents are dealt with by the teaching assistants and lunch time organisers and first aid slips are sent home, when appropriate. If the accident is more serious ie a bump to the head, the school will ensure that appropriate first aid care is delivered and parents/ carers are contacted either by phone or by text. An accident slip will be given to the child to take home.

Emergencies:

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

Day trips and sporting activities:

- Clear plans should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- To comply with best practice risk assessments will be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions

Insurance:

- Teachers who undertake responsibilities within this policy will be assured by the Headteacher that they are covered by the LA/school's insurance.
- 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 Head.

Complaints:

- All complaints should be raised with the school in the first instance.
- The details of how to make a formal complaint can be found in the School Complaints Policy.

Definitions:

- a) 'Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- b) 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or shortterm condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.
- c) 'Medication' is defined as any prescribed or over the counter treatment (although as detailed, only prescribed medication will be administered unless there are exceptional circumstances).
- d) 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- e) A 'staff member' is defined as any member of staff employed at Pentland Nursery and Infant School

Supporting Pupils with Medical Conditions:

Flowchart

1. Parent or healthcare professional informs school that child has medical condition or is due to return from long term absence, or that needs have changed.
2. Headteacher or delegated SLT member co-ordinates meeting to discuss child's medical needs and identifies member of school staff who will provide support to the pupil.
3. Meeting held to discuss and agree on the need for IHP to include key school staff, child, parent and relevant healthcare professionals and other medical/health clinician as appropriate (or to consider evidence provided by them).
4. Develop IHP in partnership. Agree who leads on writing it. The input of healthcare professionals must be provided.
5. School staff training needs identified.