

**Bow Community Primary School
Policy for supporting students with Medical Conditions and
Administration of Medicines**



Approved by: **FGB** Date: **19.09.2023**

Last reviewed on: Autumn 2023

Next review due by: Autumn 2024

Purpose

**Bow Community Primary School
Policy for supporting students with Medical Conditions and
Administration of Medicines**

- 1.1 This policy is written in accordance with the guidelines for supporting students with medical conditions in schools, which came into effect on 1st September 2014.
- 1.2 This policy sets in place a protocol so that students with medical difficulties can still access and enjoy the same opportunities at Bow Community Primary School as other students.
- 1.3 We acknowledge that these medical conditions may be short or long term, minor or significant and could affect the quality of life of the individual and could also be life threatening.
- 1.4 The implementation of this policy will take into account the needs of individual cases and how these conditions may impact upon school life. Our intentions are to give parents and carers confidence that we have systems in place to address these needs and work in partnership with them.
- 1.5 This policy is in addition to our safeguarding duties. This policy should be viewed in conjunction with the school’s special educational needs policy and other policies which support the wellbeing of our students.
- 1.6 We are also mindful that this policy should not place other students at risk. We will be reviewing this policy and the systems in place annually or as new medical needs arise.

1. General Guidelines

- 2.1 When school is notified that a child has a medical condition, procedures are put in place to cover any transitional arrangements between school and arrangements for any staff training or support. In cases where a pupil’s medical condition is unclear, or where there is a difference of opinion, judgements will need to be made about what support can be provided based on the available evidence.
- 2.2 A medical list of pupils who have medical or allergy needs, taken directly from SIMS.net, is emailed out to each class teacher in the autumn term, once data has been collected.

Criteria for supporting a student with a medical condition:

- A medical professional has diagnosed / identified /acknowledged a medical condition.
- This condition may be short or long term.
- ___The condition may be physical, sensory or medical, including involving mental health.

<p>Universal Support (support open to all students with a medical difficulty that has not been formally diagnosed or recognised)</p>	<ul style="list-style-type: none"> ● Buddy systems ● Seating plan ● Personal Mentoring ● Discussion / meeting with Class Teacher ● Access to a public health nurse
<p>Adjustment Support – support for students with a diagnosed condition, which is deemed to be short or medium term and not of a life threatening nature.</p>	<ul style="list-style-type: none"> ● All of the above + ● Short term support in conjunction with the class teacher and class support ● Individual Health Care Plan (IHCP) ● Small adjustments to the academic programme; such as seating/equipment / adjustments to trips and activities ● Involvement of medical team and outside agencies ● Use of Devon Assessment Framework ● Access to the Medical, Physical and Sensory Support Team
<p>Intensive Support Serious / long term / complex medical needs which have a</p>	<ul style="list-style-type: none"> ● All of the above + ● Regular liaison about condition with named Physical, Medical, Sensory team

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<p>sustained and significant impact upon the student's experience of school</p>	<ul style="list-style-type: none"> ● Regular liaison and review with parent / carer ● Termly meetings to plan adjustments to the programme needed ● Regular monitoring within school to adjust for the student ● Regular liaison with the class teachers to adapt the curriculum / logistics of the lesson ● Significant adjustments to academic programme ● Involvement of outside agencies and the medical team ● Individual Healthcare Plan (IHCP) in place and reviewed termly
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Implementation of this Policy

Supporting a child with a medical condition during school hours is not the sole responsibility for one person. School will work in Partnership with healthcare professionals, Local Authorities, parents and pupils.

Roles and Responsibilities –

The Governors will be responsible for the overall policy herewith.

The Headteacher will ensure that:

- The school's policy is developed and effectively implemented with partners
- All staff are aware of the policy and understand their role in its implementation
- There are sufficiently trained numbers of staff available to implement the policy and deliver the requirements against all **Individual Healthcare Plan (IHCP)** including contingency and emergency situations

School Staff may be asked to:

- Provide support to children with medical conditions
- Administer medicines to children (although they cannot be compelled to do so)

Other key staff will be responsible for certain areas of the policy:

- Class teacher – for day to day implementation
- SENDCO - for Individual Health Care Plans (IHCP) or Devon Assessment Framework (DAF)

School Nurse is responsible for

- Notifying the school when a child has been identified as having a medical condition which will require support in school
- Liaising with lead clinicians locally on appropriate support for the child and associated staff training needs
- Providing advice and liaising with staff on the implementation of a child's IHCP

Children

- will be fully involved in discussions about their medical support needs and contribute, and comply with, their IHCP as appropriate

Parents

- Will provide the school with sufficient and up-to-date information about their child's medical needs
- Will be involved in the development and review of their child's IHCP
- Will provide medicines and equipment
- Will ensure they, or another nominated adult, are contactable at all times

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

- 1) Parents inform the School of a new medical condition.
- 2) The information is passed to the Headteacher for liaison with the Class Teacher and SENDCo. A program of adaptation / support for the student will be developed and this will then be liaised to the parents/carers.

Communication of the policy

All information received from parents/carers regarding a medical condition will be notified to staff to inform them as they go about their day-to-day duties: teachers, TAs and MTAs.

Staff will be made aware of students who have life threatening conditions during regular team meetings, after an appropriate discussion with parents.

The **Individual** Health Care Plan (IHCP) will be developed as required. These will be reviewed each year and parents/carers will have the opportunity to update the information at this time or via the review meetings for more significant cases.

Individual Health Care Plans –

Upon the notification of a medical condition the school will contact the school nurse to determine if an IHCP may be necessary to support the medical needs in school.

The IHCP will detail:

- The condition (its symptoms and triggers)
- The students resulting needs
- The medication needed (and written permission if administering in school)
- Support for the student's academic progress
- The level and type of support needed
- Who will provide this support and for how long
- Any training needed
- Key people involved in the case
- Detail of adjustments needed for school trips/activities
- What to do in an emergency

They will be reviewed annually or sooner if the medical needs change.

Staff Training and Support

- The relevant healthcare professional will normally lead on identifying and agreeing with the school, the type and level of training required and how this can be obtained
- School may wish to choose to arrange training and ensure this remains up to date
- Training will be sufficient to ensure that staff are competent and have confidence in their ability to support the medical needs of children. This includes an understanding of the specific medical condition that they are being asked to deal with, their implications and preventative measures. A record of the staff training will be kept (see Appendix B).
- Staff may choose to give prescription medications – they have the right to withdraw from administering any medication
- Staff are required, when administering prescription only drugs, to complete and sign the form entitled 'Record of Medicine Administered to an Individual Young Person'

The Child's role in managing their own medical needs

- The governing body will ensure that arrangements are made for children who are competent, to manage their own health needs and medicines. This should be reflected in the IHCP
- Children will be able to access their medicines for self-medication, quickly and easily. Some children may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff should help to administer medicines and manage procedures for them

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- If a child refuses to take medicine, or engage in a necessary procedure, staff will NOT force them to do so. Parents will be informed when the medication has not been administered, or a procedure has not been carried out.

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
- The school will administer prescription medicines and parent's written consent is needed for this. Forms are available from the office (see Parental Agreement to Administer prescription and non-prescription medicine)
- The school will not administer any non-prescribed medicines such as cough medicines or take responsibility for their use within school time. The school will allow parents to come into school and administer medicines personally
- *The school will administer, in exceptional circumstances, over the counter pain relief, such as Calpol, and a parent's written consent is required for this* (see Parental Agreement to Administer prescription and non-prescription medicine)
- School will only accept medicines that are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage (the exception to this is insulin, which must still be in date but may be available inside an insulin pen or a pump, rather than in its original container)
- All medicines will be stored safely. Upper Key Stage 2 children will be informed where their medicines are and are able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children either in their classrooms (in the locked medical box) or in the School Office (consideration of this will be taken when off school premises e.g. school trips and detailed in the risk assessment)
- School will keep controlled drugs that have been prescribed for a pupil securely stored and only named staff will have access. Controlled drugs will be easily accessible in an emergency. A record will be kept of any dosage used and the amount of the controlled drug held in school
- School staff may administer a controlled drug for whom it has been prescribed in accordance with the prescriber's instructions. School will keep a record of all medicines administered to individual children stating what, how and how much was administered, when and by whom. Any side effects will be noted
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharp boxes will always be used for the disposal of needles and other sharps

Record keeping

- Written records will be kept of all medicines administered to children (see Record of Medicines Administered form).
- Parents will be informed if their child has been unwell in school

Emergency procedures

- Where a child has an IHCP this will clearly define what constitutes an emergency and explain what to do including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other children in the school should know what to do in general terms such as informing a teacher immediately if they think help is needed (see emergency plan)
- If a child needs to be taken to hospital, staff should stay with the child until the parent arrives or accompany a child to hospital in an ambulance
- When local emergency services are called staff will give precise details of which entrance to use (See Appendix D)

Day trips, residential visits and sporting activities

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- The Governing body will ensure that arrangements are clear and unambiguous about the need to actively support children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so
- School will make arrangements for the inclusion of children in such activities with any adjustments as required unless evidence from a clinician states that this is not possible
- A risk assessment will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included (refer to guidance on school trips)
- On residential visits, staff may be called upon to administer a travel sickness pill for a child, so that they can complete the return journey to school, free from the worry of being travelsick. The travel sickness tablet must be given to the class teacher in a clear plastic bag that has been labelled with the young person’s name and the name and dose of the tablet that the teacher or adult will be administering
- Parents are required to complete the form entitled ‘Parental Agreement for School to Administer Medicine’, so that school has permission to give the tablet. Staff will need to sign the Record of Medicine Administered to an Individual Young Person form, to show that the travel sickness tablet has been administered

Points for consideration

- School does not assume that every child with the same condition requires the same treatment
- School will not send children with medical conditions home frequently, or prevent them from staying for normal school activities, unless this is specified in their IHCP
- If a child becomes ill, they will not be sent to the school office unaccompanied
- School takes into consideration hospital appointments when monitoring attendance
- School does not prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- School will not require parents, or make them feel obliged, to attend school to administer medication or provide medical support to their child, including toileting issues (see Intimate Care Policy)
- No parent will have to give up working because the school is failing to support their child’s medical needs
- School will not prevent children from participating in any aspect of school life, including school trips, by requiring parents to accompany

Liability and Indemnity

- School has an Insurance Policy that provides liability cover relating to the administration of medication
- Any parents of pupils dissatisfied with the support provided should discuss their concerns directly with the school. If this cannot be resolved parents may make a formal complaint via the schools complaints procedure to the Governing Body
- The Head teacher will have overall responsibility that this Policy is implemented and that risk assessments for school visits are undertaken
- The SENDCo, Business Manager, Administrator and School First Aider will ensure that sufficient staff are suitably trained, cover arrangements are in place, supply teachers are briefed and IHCP’s are monitored

Date of Change	What Changes were made to the Policy
March 2019	Amendments made to general guidelines and managing medicines on the school premises. The consent form and the record of

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	medicines administered forms have been updated – using templates from OSHENS.
July 2020	No changes made to the policy
January 2022	No changes made to the policy, other than to adjust typos and amend school nurse to public health nurse
March 2023	Slight changes to the consistence of reference to Individual Healthcare Plan (IHCP)
October 2023	Consideration for non-prescribed medication Managing medicines on school premises <ul style="list-style-type: none"> • <i>The school will administer, in exceptional circumstances, over the counter pain relief, such as Calpol, and a parent’s written consent is required for this (see Parental Agreement to Administer prescription and non-prescription medicine)</i>

Appendix A

Model process for developing individual healthcare plans

Head teacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child’s medical support needs; identifies member of school staff who will provide support to pupil



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Meeting to discuss and agree the need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)

□

Develop IHCP in partnership - agree who leads on writing it.
Input from healthcare professional must be provided

□

School staff training needs identified

□

Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed

□

IHCP implemented and circulated to all relevant staff

□

IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate.



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Bow Community Primary School: Individual Healthcare Plan

Name of school/setting	
Child's name	
Class	
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

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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

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Appendix B

Staff Training Record Sheet – Administration of Medicines

Name	
Type of training received	
Date training completed	
Training Provided by	
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 (suggested review date).

Trainers signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

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Appendix C

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. School telephone number – 01363 82319
2. Your name
3. School location – Bow Community Primary School, Station Road, Bow, EX17 6HU Devon.
4. State the School postcode –EX17 6HU
5. Provide the exact location of the patient within the school setting
6. Provide the name and age of the child and a brief description of their symptoms