

# Supporting Pupils with Medical Conditions and the administration of Medicines

Ratified by Governors: 7 September 2022 Next Review Date: September 2023 Member of Staff responsible: Paula Nicholas

#### SUPPORTING PUPILS WITH MEDICAL CONDITIONS AND THE ADMINISTRATION OF MEDICINES

#### 1. Introduction

- 1.1 The Governing Body and staff of **Bush Hill Park Primary School** wish to ensure that pupils with medical conditions and/or short or long-term medication needs are not excluded but receive appropriate care and support. The Headteacher will accept responsibility in principle for members of staff giving or supervising pupils taking prescribed medication or need support due to their medical conditions during the day where those members of staff have volunteered to do so.
- 1.2 Bush Hill Park Primary School's Welfare Officer is responsible for supporting pupils with medical conditions and/or a requirement for the administration of medicines.

This Policy is to be read in conjunction with the following documents:

• Supporting Pupils at School with Medical Conditions DfE December 2015.

#### 2. Parents' and Carers' Responsibility

- 2.1 Please note that parents and carers should keep their children at home if acutely unwell or infectious.
- 2.2 Parents and Carers are responsible for providing the Headteacher with comprehensive information regarding their child's condition and/or medication requirements. It is the responsibility of parents and carers to notify us of any changes.
- 2.3 Prescribed medication will not be accepted in school without complete written and signed instructions from a parent or carer.
- 2.4 Only reasonable quantities of medication should be supplied to the school for the administration by staff (for example, a maximum of four weeks supply at any one time).
- 2.5 Where the pupil travels on school transport with passenger assistants, parents should ensure they have written instructions relating to any medication sent with the pupil, including medication for administration/self-administration during respite care.
- 2.6 It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
- 2.7 For staff administration each item of medication must be delivered to the Headteacher or Welfare Officer, in normal circumstances by the parent, in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the following information:
  - Pupil's Name
  - Name of medication
  - Dosage
  - Frequency of administration
  - Date of dispensing
  - Storage requirements (if important)
  - Expiry date

#### 3. Responsibility of School

- 3.1 Staff will not give a non-prescribed medicine to a pupil unless there is specific prior written permission from the parent or carer.
- 3.2 The school will not accept items of medication in unlabelled containers.
- 3.3 Medication will be kept in a secure place, out of the reach of pupils. Unless otherwise indicated all medication to be administered in school will be kept in a locked medicine cabinet.

- 3.4 The school will keep records, which they will have available for parents.
- 3.5 If the pupil refuses to take their medication, staff will not force them to do so, and will inform the parent or carer of the refusal, as a matter of urgency, on the same day.
- 3.6 In this situation the medication record should note the refusal and the parental contact made.
- 3.7 If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.
- 3.8 The school will not make changes to dosages on verbal parental instructions, unless caring for a diabetic child where a correction dose of insulin must be given. The guidance on a correction dose, must be provided in an Individual Healthcare Plan (IHCP), by the Paediatric Diabetes Nursing Team.
- 3.9 Staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.
- 3.10 For each pupil with a long-term or complex medical condition, the Headteacher, will ensure that an IHCP is drawn up, in conjunction with the pupil's parents and appropriate health professionals.
- 3.11 Some pupils with a medical condition will also require the administration of medicines. The Headteacher will therefore ensure that all appropriate consent forms are completed and appropriate review periods set.
- 3.12 The school will make every effort to liaise with a school nursing service to ensure that pupils with medical conditions are supported.
- 3.13 Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in school.
- 3.14 Staff who assist in the administration of medication will be able to receive appropriate training/guidance through arrangements made with the School Nursing Service.
- 3.15 The school will make every effort to continue the administration of medication whilst on trips away from the premises, even if additional arrangements might be required. 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.
- 3.16 All staff will be made aware of the procedures to be followed in the event of an emergency.
- 3.17 Records of medicines administered are entered on the school data base.
- 3.18 Detailed Individual HealthCare Plans are located in the Medical Room and summary sheets are kept in the staffroom and individual class records.
- 3.19 In the case of a child being in immediate danger, the school may decide to administer non-prescription medicines e.g. paracetamol to reduce fever. In this case the parent or carer will be contacted before and/or permission sought from the Headteacher.

# Preparing an Individual Healthcare Plan (IHCP)

Ensure your IHCP template includes:       Current situation yes       task in development       completed delegated to         NB: You should ensure that plans are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed. They should be developed with the pupil's best interests in mind and ensure that the school assesses and manages risks to the pupil's education, health and social well-being and minimises disruption         The individual pupil's medical condition, its:       Image: the school assesses and manages risks to the pupil's education (dose, side- effects and storage)         • treatments       Image: the school assesses and storage)         • other treatments, time, facilities, equipment, testing,       Image: the school assesses and manages risks to the pupil's education (dose, side- effects and storage)         • other treatments, time, facilities, equipment, testing,       Image: the school and drink where this is used to manage their condition,         • dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons       Image: the school and and emovinonal needs – for example:         • how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons,       Image: the school and drink where the school as upport in catching up with
NB: You should ensure that plans are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed. They should be developed with the pupil's best interests in mind and ensure that the school assesses and manages risks to the pupil's education, health and social well-being and minimises disruption         The individual pupil's medical condition, its: <ul> <li>triggers,</li> <li>signs,</li> <li>symptoms and</li> <li>treatments</li> <li>The pupil's resulting needs, including:</li> <li>medication (dose, side-effects and storage)</li> <li>other treatments,</li> <li>time,</li> <li>facilities,</li> <li>equipment,</li> <li>testing,</li> <li>access to food and drink where this is used to manage their condition,</li> <li>dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons</li> </ul> <li>Specific support for the pupil's educational, social and emotional needs – for example:</li> <li>how absences will be managed,</li> <li>requirements for extra time to complete exams,</li> <li>use of rest periods or additional support in catching up with</li>
presented that the pupil's needs have changed. They should be developed with the pupil's best interests in mind and ensure that the school assesses and manages risks to the pupil's education, health and social well-being and minimises disruption The individual pupil's medical condition, its: • triggers, • signs, • symptoms and • treatments The pupil's resulting needs, including: • medication (dose, side- effects and storage) • other treatments, • time, • facilities, • equipment, • testing, • access to food and drink where this is used to manage their condition, • dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons Specific support for the pupil's educational, social and emotional needs – for example: • how absences will be managed, • requirements for extra time to complete exams, • use of rest periods or additional support in catching up with
medical condition, its:         triggers,         signs,         symptoms and         treatments         The pupil's resulting needs, including:         medication (dose, side-effects and storage)         other treatments,         time,         facilities,         equipment,         testing,         access to food and drink where this is used to manage their condition,         condition,         dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons         Specific support for the pupil's educational, social and emotional needs – for example:         how absences will be managed,         requirements for extra time to complete exams,         use of rest periods or additional support in catching up with
counselling sessions

	<u> </u>		
The level of support			
needed, (some pupils			
will be able to take			
responsibility for their own health needs).			
Where a pupil is self-			
managing their			
medication, this should			
be clearly stated with			
appropriate			
arrangements for			
monitoring.			
The staff who will provide			
this support – while			
identifying:			
<ul> <li>their training needs</li> </ul>			
<ul> <li>expectations of their</li> </ul>			
role and confirmation of			
<ul> <li>proficiency to provide</li> </ul>			
support for pupils'			
medical condition from			
a healthcare			
professional			
<ul> <li>cover arrangements for</li> </ul>			
when they are			
unavailable			
Who in the school			
needs to be aware of			
the pupil's condition			
and the support			
required			
Consent procedures:			
arrangements for			
written permission from			
parents and the			
headteacher for			
medication to be			
administered by a			
member of staff,			
or self-administered by			
the pupil during school			
hours			
NB: suggested			
templates are provided			
later in this document	$\left  \right $		
That separate			
arrangements or			
for school trips or other			
school activities			
outside of the normal			
school timetable that			
will ensure that pupils			
can participate.			
oan participat <del>e</del> .		l	

Сс	onfidentiality		
•	How will the parent/pupil know who they can go to if they need to raise confidentiality issues?		
•	Does the plan confirm what to do in an emergency, including whom to contact, and contingency arrangements?		



# Appendix 2 Individual healthcare plan

Name of school/setting	Bush Hill Park Primary School
Pupil's name	
Group/class/form	
Date of birth	
Pupils address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Relationship to pupil	
Name	
Relationship to pupil	
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 the pupil'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, contraindications, 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



## Parental agreement for school to administer medicine

The school will not give your child medicine unless you complete and sign this form in line with our school policy. A copy of the policy can be obtained from the School Office or on our website.

Date completed:	Completed by:
Date for review:	To be initiated by:
Name of school	
Name of pupil	
Date of birth	
Group/class/form	
Medical condition or illness	
Does the pupil require or already have an IHCP	Yes No
Medicine	
Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Length of course	
Date of dispensing	
Storage instructions	
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	
Name and phone number of G.P:	

#### NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details of Parent/Carer:	
Name	
Daytime telephone no.	
Relationship to pupil	
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 staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature (s): \_\_\_\_\_

Date:\_\_\_\_\_

Print Name: \_\_\_\_\_



## Parental agreement for pupil to self-administer medicine

The school will not allow your child to self-administer medicine unless you complete and sign this form in line with school policy.

Date completed:	Completed by:
Date for review:	To be initiated by:
Name of school	
Name of pupil	
Date of birth	
Group/class/form	
Medical condition or illness	
Does the pupil require or already have an IHCP	Yes No
Self-administered Medicine	
Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Length of course	
Date of dispensing	
Storage instructions	
Special precautions/other instructions	
Are there any side effects that the school needs to know about?	
Requires consent to carry around with them	
Does the self-medication need to be administered with a member of staff present	
Procedures to take in an emergency	
Name and phone number of G.P:	

#### NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details of Parent/Carer:	
Name	
Daytime telephone no.	
Relationship to pupil	
Address	
I understand that I am requesting that my child self-administers their own medication	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent for my child to self-administer their medication.

#### **Delete as required:**

- 1. I will inform the school immediately, in writing, if there is (a) any change in dosage or frequency of the medication or (b) if the medicine is stopped and my child no longer needs to self-administer.
- 2. This is a short course of medication but I will inform the school in writing, (a) if there is any change in dosage or frequency of the medication or (b) if the medicine has to be continued after:

Date: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## Staff training record – administration of medicines

Name of school	
Staff member's name	
Type of training received	
Date of training completed	
Review/training up-date	
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 [date required].

Trainer's signature:

Date: \_\_\_\_\_

I confirm that I have received the training detailed above.

Staff signature:

Suggested review date: \_\_\_\_\_

## **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. your telephone number 020 8366 0521
- 2. your name
- 3. your location as follows: Bush Hill Park Primary School, Main Avenue, Enfield
- 4. state what the postcode is EN1 1DS
- 5. provide the exact location of the patient within the school setting
- 6. provide the name of the pupil and a brief description of their symptoms
- 7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
- 8. put a completed copy of this form by the phone

#### **Local Contacts**

#### Council's Insurance Service:

Contact: Kay Osborne Insurance Manager Tel: 020 8379 3003 Email: insurance@enfield.gov.uk

#### **Health Services**

#### **Community Paediatric Services:**

Some children with medical needs receive dedicated support from specialist nurses or community children's nurses, for instance a children's oncology nurse. These nurses often work as part of a NHS Trust or PCT and work closely with the primary health care team – general description – what happens in Enfield. They can provide advice on the medical needs of an individual child, particularly when a medical condition has just been diagnosed and the child is adjusting to new routines.

#### Contact: Helen Tanyan Paediatric Therapies Cedar House St.Michael's Gater Drive Enfield EN2 0JB Tel: 020 8 702 6213 Email: Helen.tanyan@nhs.net

#### **School Nurses:**

School nurses are qualified public health nurses, who work in partnership with schools, parents and healthcare professionals to provide health promotion and protection for school aged children. The school nurse can advise, or will know where help can be sought on many health matters. Enfield School Nursing Service is accessible through self-referral from children or families, referral from education staff, social services, LAC Nurse Specialist, Child Protection Named Nurse, medical colleagues and Health Visitors

Contact: Belinda Danso-Langley Interim Divisional Manager 0-19 Universal Children's Service Cedar House, St Michaels Enfield, Middlesex EN2 0JB Tel: 020 8 702 4298 Mobile: 07944 265 687 Mon-Wed 8-6pm Thurs 8-2pm / Alternate Fridays 8-2pm Email: Belinda.danso-langley@nhs.net Ruth Davis School Nursing/Health Visitors Telephone: 07929 744625 <u>Ruth.davison@nhs.net</u> NMH Trust Civic Centre

Silver Street EN1 3XA

## Local Community Health Centres:

Bowes Road Clinic	269 Bowes Road, Enfield, N11 1BD
Evergreen Health Centre	1 Smythe Close, Edmonton, N9 0TW
Forest Primary Care Centre,	308A Hertford Road, Edmonton, N9 7HD
Highlands Health Centre,	3 Florey Square, Winchmore Hill, N21 1UJ
Moorfield Road Health Centre	Moorfield Road, Enfield, EN3 5PS
St Michael's Primary Care Centre	Gater Drive, Enfield, EN2 0JB

## School Health and Safety:

Contact: Paul Bishop Schools Health and Safety Manager Tel: 020 8 132 2576 Department Number: 020 8379 2332 Email: paul.bishop@enfield.gov.uk

## Joint Service for Disabled Children:

The Joint Service for Disabled Children is an important partnership developed by Enfield's Children's Trust, to support and promote opportunities for all disabled children and their families in Enfield. The Joint Service includes:

- Enfield Community Services
- The Early Intervention Support Service (EISS)
- Cheviots Specialist Children's Disability Centre/Service.

cheviots@enfield.gov.uk 020 8 363 4047

#### **Environmental Health:**

Address: PO Box 57 Civic Centre Silver Street Enfield EN1 3XH Tel: 020 8379 1000

## **National Contacts:**

Allergy UK	The Anaphylaxis Campaign
Allergy Help Line: (01322) 619898	Helpline: (01252) 542029
Website: www.allergyuk.org	Websites: www.anaphylaxis.org.uk
in obolicit <u>in the long year or g</u>	in oberioon in the analytic in
Asthma UK	SHINE
Adviceline: 0800 121 6244	Tel: Tel: 01733 555988
Website: www.asthma.org.uk	Website: http://www.shinecharity.org.uk/
Council for Disabled Children	Contact a Family
Tel: 0207 843 1900	Helpline: 0808 808 3555
Website:	Website: www.cafamily.org.uk
http://www.councilfordisabledchildren.org.	
<u>uk/</u>	
Cystic Fibrosis Trust	Diabetes UK
Tel: 0300 373 1000	Careline: 0345 123 2399
Website: www.cftrust.org.uk	Website: www.diabetes.org.uk
Public Health England	Department for Education
https://www.gov.uk/government/organisati	Website:
ons/public-health-england	https://www.gov.uk/government/organisations/de
	partment-for-education
Epilepsy Action	Equalities and Human Rights Commission
Freephone Helpline: 0808 800 5050	EHRC
Website: www.epilepsy.org.uk	helpline: 0808 800 0082
	Website: www.equalityhumanrights.com
Health and Safety Executive (HSE)	
Website: www.hse.gov.uk	
Hyperactive Children's Support Group	Mencap
Tel: (01243) 539966	Telephone: 0300 333 1111
Website: www.hacsg.org.uk	Website: www.mencap.org.uk
National Eczema Society	Psoriasis Association
Helpline: 0800 089 1122	Tel: 0845 676 0076
Website: www.eczema.org	Website: www.psoriasis-association.org.uk/
masono. <u>mmmsozomatory</u>	
British Thyroid Foundation	Sickle Cell Society
www.btf-thyroid.org	http://sicklecellsociety.org/
NHS Choices http://www.nhs.uk/Pages/HomePage.aspx	