

Policy for Pupils with a Health Condition and the administration of medicine.

Pupils with a Health Condition or needing medicines to be administered

Pupils at school with medical conditions will be properly supported so that they have full access to education, including school trips and physical education. Trinity Federation ensures that arrangements are in place in schools to support pupils at school with medical conditions. and ensures that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.

Trinity Federation will ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. We understand that parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school, because pupils with long-term and complex medical conditions may require ongoing support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important to the Trinity Federation that parents feel confident that the schools will provide effective support for their child's medical condition and that pupils feel safe. In making decisions about the support they provide, schools will establish relationships with relevant local health services to help them. The schools will receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils. In addition to the educational impacts, social and emotional implications associated with medical conditions will be taken into account. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems can affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school would be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), will be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing. Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case Trinity Federation

governing body will comply with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the Special educational needs and disability (SEND) code of practice. The Special educational needs and disability code of practice explains the duties of local authorities, health bodies, schools and colleges to provide for those with special educational needs under part 3 of the Children and Families Act 2014. For pupils who have medical conditions that require EHC plans, compliance with the SEND code of practice will ensure compliance with this guidance with respect to those children.

Pupils with a health condition will be supported by a member of staff who will have received the appropriate training. This will be arranged and monitored by the head teachers Glynis Yates and Jayne Grundy. All relevant staff (including supply/temporary cover)will be made aware of the child's condition and cover arrangements will be in case of staff absence or staff turnover to ensure someone is always available. Risk assessments for school visits, holidays, and other school activities outside the normal timetable will take place in accordance with our visits policy.

An individual care plan (Template A) will need to be drawn up for each child who has any significant health condition not mentioned in this document which might impact on their education or care. Model letter for inviting parents to contribute to individual health care plan development (template G). Where possible suitable transition arrangements will take place so that staff working at the different settings can liaise to make the transition and training as suitable as possible.

Roles and responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Trinity Federation's ability to provide effective support will depend to an appreciable extent on working co-operatively with other agencies. Partnership working between school staff, healthcare professionals (and, where appropriate, social care professionals), local authorities, and parents and pupils will be critical.

The governing body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. They will ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Headteachers will ensure that this policy is effectively implemented with partners

- ensuring that all staff are aware of the policy
- ensuring all staff who need to know are aware of the child's condition.

- ensuring sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- individual healthcare plans are developed where needed.
- appropriate insurance to support pupils is in place.
- contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

Parents will provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and will be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They need carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They will be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

School staff Trinity Federation will involve and ask advice from school nurses, other health care professionals, the local authority, clinical commissioning groups and providers of health services where necessary

Cultural and Religious requirements

Britain is a multi-cultural and multi-faith society. Care will be taken to respond sensitively to individuals and not to make assumptions because of their ethnicity or religion. Young people and their carers will be asked about any cultural or religious needs relating to the taking of medication or any prohibitions that apply.

All information on relating to the cultural or religious requirements of a child or young person will be kept accurate and up to date as this may have an impact on how they wish to receive care.

This information will be recorded as part of an individual healthcare plan (if one is required) or in the child's personal records.

Short term medical needs

For most pupils the need to take medication (or be given it) at school will be for a short period only, and to allow pupils to do this will minimise the time they will need to be off school. Parents/guardians are welcome to come to the school to administer medication. It is helpful if, where possible, medication can be prescribed in dose frequencies which enable it to be taken outside school hours. Medication should

only be brought to school when absolutely essential and the 'parental request for administering medicines in school' (Appendix 1) form must be completed.

In all cases the following must take place.

1. Administering medication

1. No pupil should be given medication without his or her parent/guardian's written consent. Any member of staff giving medicine to a pupil should check:
 - The pupils name
 - Written instructions provided by parents or doctor
 - Prescribed dose
 - Expiry date

If in any doubt about the procedures the member of staff should check with the parents or a health professional before taking further action. Staff should complete and sign the medicine record form on the reverse of the school medicine record each time they give medication to a pupil.

2. Refusing Medicines

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and follow agreed procedures. The procedures to follow in this situation may be set out in the procedures or local arrangements or in an individual child's health care plan. Parents should be informed of the refusal as soon as practicable.

If a refusal to take medicines results in an emergency, the school or setting's emergency procedures should be followed.

3. Record keeping

Parents/guardians are responsible for supplying information about medicines that their child needs to take at school and for letting the school know of any changes to the prescription or the support needed.

The 'parental request for administering medicines in school' form provides a standard format for providing written details.

A record of medicines to be given to pupils is kept (see Appendix 2) and is signed by the parent and the member of staff once the medicine has been administered.

4. The administration of medicine in Trinity Federation

Whenever it is possible parents or guardians should administer any medicine. Please note that medicine which is prescribed three times a day can be effectively delivered out of school hours.

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However if this is not possible the school must insist that parents or guardians agree and sign their consent to the following

1. Completed 'Permission for school to administer medicine' form.
2. The note must give a clear indication of dosage and timing
3. The medicine must be brought into school by the parent or guardian
4. Medicines must be clearly labelled with the contents, owners name and dosage.
5. Parents accept that, whilst the school will always act in the best interests of your child all responsibility for the administration of medicines lies with the parent and not with the school

5. Receipt of Medicines by the school or setting

Medicines must always be provided in the original container **as originally dispensed** by the pharmacist. This should be clearly marked with the young person's name, date of dispensing, the name of medication and the name of the pharmacy who supplied it, and include the prescriber's instructions for administration

The label on the container supplied by the pharmacist must not be altered under any circumstances.

All medicines brought in to be administered by the setting, must be recorded in the pupil's notes. The record must show:

- Young Person for whom medication is prescribed or purchased.
- Date of receipt.
- Name and strength of the medicine.
- Quantity received (if applicable).
- The dosage required to be administered
- The time of the required dose
- Expiry date of medicines and any special warnings or precautions mentioned on the label.
- Signature of the employees receiving the medicines

Where consent from parents and carers is also being sought at the same time the record should also include:

- Signature of the parent or carer.

6. "As Required" Medication (PRN) eg inhalers for Asthma , epi pens

Instructions such as "when required" or "as necessary" must be discouraged, but when they appear on prescribed medication, advice from Parents/Carers and GPs with a knowledge of the young person should be documented in an "As required (PRN) Protocol (Appendix 3)

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The protocol will identify any signs, symptoms and advice and will outline the necessity for administration of the medication when the young person is unable to do so. A signed record must be kept of all advice and decisions made using HSF34.

PRN medication must be dispensed with a standard label with the "as required" medication details. This alerts the person administering the medication that the preparation is PRN. The decision on whether the PRN medication is needed must be based on the individual's PRN protocol. Staff administering medicines should have received the appropriate training (template E).

Parents/carers should be informed if medicine has been administered with details (Template C)

7. Self-Management of medication

It is good practice to support and encourage children, who are able, to take responsibility for managing their own medicines from a relatively early age and schools and other settings should encourage this.

Older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent or setting staff.

The age at which children are ready to take care of, and be responsible for, their own medicines, varies. There is no set age when this transition should be made, and there may be circumstances where it is not appropriate for a child of any age to self-manage. Where this is agreed it must be added to the Parental Consent Form. Health professionals need to assess, with parents and children, the appropriate time to make this transition.

If children can take their medicines themselves, staff may still be required to supervise and suitable storage arrangements must still be provided (see medication requiring storage by refrigeration at 8 below).

8. Medication requiring storage by refrigeration

In settings where low quantities are administered, medicines may be stored in a domestic fridge located in a staff only area. To avoid contamination with foodstuffs being stored in the same area, the medicines must be stored separately within a locked container labelled "medicines - authorised access only".

In the event that medicines are stored outside the required range usually between 2-8°C, staff should contact the dispensing pharmacist for advice. The refrigerator should be cleaned and defrosted regularly.

9. Holidays, Outings and Educational Visits

Where required, Staff will take charge of the medicines and return the remainder on return to the setting or to parents/carers as appropriate.

Where a young person is self-medicating this should continue whilst on holiday or educational visit, but consideration must be given to the locations, activities and the storage of the medicines to ensure that they

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are kept safe and secure for the young person. Tamper evident, lockable containers for medication should be employed for use by the educational establishment. All patient records and information relating to the medicines should be maintained.

10. Allergic Reactions

Some children and young people are at risk of severe allergic reactions. Settings must plan to reduce the likelihood of the risk of allergic reactions by ensuring that service users/children do not come into contact with the material or foodstuffs which may cause a reaction. For example; where allergies are known to be food related risks can be minimised by not allowing anyone to eat on vehicles.

Where it is necessary, escorts should have basic first aid training and should be trained in the use of an adrenaline pen for emergencies where appropriate. **These pens must only be used for those children for whom they are prescribed.**

11. Specialist Medication Activities (this includes invasive treatments)

A wide range of specialist medication activities may at times be required in the school or setting. These activities are best carried out by medical professionals whenever possible.

12. Management of Errors/Incidents in Administration of Medicines

In the event that medication has been administered incorrectly, the following procedure is to be implemented:

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- Ensure the safety of the young person. Normal first aid procedures must be followed which will include checking pulse and respiration.
- Telephone for an ambulance if the child's condition is a cause for concern. (Template F)
- Notify the Manager/Person in Charge.
- Contact the young person's Parents/Carers as soon as practicable.
- Contact the young person's GP/Pharmacist for advice if necessary. (Out of hours contact NHS Direct).
- Document any immediate adverse reactions and record the incident in the young person's file/Care Plan using the Medication Incident Report Form HSF36.
- The Settings Manager must complete the Medication Incident Report Form HSF 36 and, if injury results, the County Council Accident Investigation Report HSF40.
- The Setting Manager must commence an immediate investigation about the incident, inform the the Strategic Health and Safety Team, and, where applicable inform any relevant regulatory body. Statements should be taken from both staff and young persons if they are self-medicating.
- The medication administration record should reflect the error.
- Young person's parent/carer/guardian should be informed formally in writing.
- Also the PCT incident policy MUST be completed to protect any member of the nursing staff – if they are involved at any level with a medication related incident.

13. Medicines for a staff members own use

An employee may need to bring medicine into school /setting for their own use. All staff have a responsibility to ensure that these medicines are kept securely and that young people will not have access to them, e.g. locked desk drawer or staff room.

Adequate safeguards must be taken by employees, who are responsible for their own personal supplies, to ensure that such medicines are not issued to any other employee, individual or young person

14. Equal Opportunities Statement

The County Council are fully committed to ensuring equality in the delivery of this guidance to all young people, regardless of their gender, ethnicity, sexuality and ability.

This document has been prepared in consultation with representatives from all service and school settings from within the Children, Young People and Families Directorate.

15. Complaints

Complaints concerning the support provided to pupils with medical conditions will be dealt with according to the Trinity Federation complaints procedure

APPENDIX 1

Parental Request for the Administration of Medicines in School

TO BE COMPLETED BY THE PARENT/GUARDIAN OF ANY CHILD REQUESTING DRUGS TO BE ADMINISTERED UNDER THE SUPERVISION OF SCHOOL STAFF OR WHERE A CHILD IS BRINGING MEDICINE INTO SCHOOL WHICH THEY WILL SELF ADMINISTER

If you need help to complete this form, please contact the school. Please complete in BLOCK letters.

Name of child: _____ Date of Birth: _____

Address: _____ School: _____

Doctor's Name: _____

NON PRESCRIBED MEDICINES

Name of Medicine to be given and any special storage instructions	When? e.g., Lunchtime? After food? When wheezy? Before exercise?	How much e.g., half a Teaspoon? 1 tablet? 2 drops?	Route e.g., by mouth or in each ear

PRESCRIBED MEDICINES

The Doctor has prescribed (as follows) for my child:

Name of Drug or Medicine to be given and any special storage instructions	When? e.g., Lunchtime? After food? When wheezy? Before exercise?	How much e.g., half a Teaspoon? 1 tablet? 2 drops?	Route e.g., by mouth or in each ear

(Child's Name): _____

Can administer his/her own medication*/requires supervision to administer his/her own medicine*/requires assistance in administering his/her own medicine*

I request that the treatment be given in accordance with the above information by a named member of the school staff who has received all necessary training. I understand that it may be necessary for this treatment to be carried out during educational visits and other out of school activities, as well as on the school premises.

I undertake to supply the school with the drugs and medicines in the original duplicate labelled containers, provided by the Dispensing Chemist.

I accept that whilst my child is in the care of the school, the school staff stand in the position of the parent and that the school staff may, therefore, need to arrange any medical aid considered necessary in an emergency, but will be told of any such action as soon as possible.

I can be contacted at the following address/telephone during school hours.

Name: _____ Signed: _____

Contact Address: _____ Date: _____

Contact Tel No: _____

* Delete that which does not apply

THIS FORM SHOULD BE SECURELY FILED AWAY WITH THE PUPILS NOTES IN THE SCHOOL OFFICE WHEN THE MEDICATION IS COMPLETED OR CHANGED

SCHOOL MEDICINE RECORD

Child's Name:	
Class/Tutor Group:	
Name of Medicine:	
How much to give (i.e. dose)	
When to be given	
Any other instructions (include details of inhalers, if any)	
Telephone numbers of parent or adult contact	
Parent's signature obtained via Parental consent form	

**IF MORE THAN ONE MEDICINE IS TO BE GIVEN,
A SEPARATE FORM SHOULD BE**

ADDITIONAL COMMENTS:

SCHOOL MEDICINE RECORD

TO BE COMPLETED BY STAFF WHEN MEDICINE IS GIVEN TO A PUPIL

Name of child.....

DATE	Type of medicine	Quantity given	Time given	Signature of person administering medicine	Print name of person administering medicine

Appendix 3 - Protocol For The Administration Of Prescribed PRN Medication

PRN medication must only be administered by an employee who has received relevant training.

PRN medication must only be administered in strict accordance with the following protocol.

Service User/Pupil		Date of Birth	
Address			

<u>GP</u>	
<u>Address</u>	
<i>Prescribed PRN Medication</i>	
Dosage	
Conditions under which the use of PRN medication is recommended	
Any known triggers	
Any warning signs	

Time expected for the medication to take effect	
Action required if effect does not occur as expected	

<u>GP</u>		Parent /Carer	
Name		Name	
Signature		Signature	

On each occasion PRN Medication is administered, this should be clearly recorded on the school administration of medicine record

Template A: individual healthcare plan

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

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

Template C: record of medicine administered to an individual child

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Template E: staff training record – administration of medicines

Name of school/setting

Name

Type of training received

Date of 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 [name of member of staff].

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date

Template F: 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
2. your name
3. your location as follows [insert school/setting address]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child 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

Template G: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely