



Livity School
Every Learner Matters

**Supporting Pupils with
Medical Conditions
Policy**

Statement

This document is governed by DfE guidance 'Supporting Pupils at School with Medical Conditions' December 2015, with updates August 2017.

The school will properly support pupils at school with medical conditions so that they have full access to education, including school trips and physical education. The school will also put in place procedures to deal with emergency medical needs.

The school will work together with local authorities, health professionals and other support services to ensure that children with medical needs receive a full education in a supportive environment. In some cases, this will require flexibility and involve, for example, programmes of study that rely on part-time attendance at school in combination with home schooling supported by the class team. Consideration will be given to how children will be reintegrated back into school after periods of absence.

The Livity School have many pupils who are regarded as having medical needs. These needs are diverse, for some this will represent a short-term medical need; perhaps finishing a course of medication as a result of an infection, whilst other pupils have long term complex medical conditions that require medical support and medication on a long-term basis to keep them healthy and able to access education. Other pupils may need monitoring and interventions in emergency circumstances. Parents should feel confident that the school will provide effective support for their child's medical condition and that the children feel safe.

Staff have the knowledge and skills to care for medical conditions and administer medication effectively and safely. Staff receive appropriate regular training and our supported through the multi-disciplinary team. All staff are aware of what to do in a medical emergency and have access to emergency call buttons in all areas of the school.

Procedures

The following procedures are to be followed when notification is received that a pupil has a medical condition.

A parent or a health care professional informs the school that:

- a child has been newly diagnosed, or;
- is due to attend school, or;
- is due to return to school after a long-term absence or has medical needs that have changed.

- The Headteacher or the medical team co-ordinates a meeting to discuss the child's medical support needs and identifies the members of school staff who will provide support to the pupil.
- A meeting will be held to discuss and agree on the need for an individual Care Plan (CP). The meeting will include key school staff, parent, relevant healthcare professional and other medical/healthcare clinicians as appropriate (or to consider written evidence provided by them).
- A CP will be developed in partnership and the meeting will determine who will take the lead on writing it. Input from a healthcare professional must be provided.
- School staff training needs will be identified.
- Healthcare commissions or delivers appropriate training and staff are signed off as competent. A review date for the training will be agreed.
- The CP will then be implemented and circulated to all relevant staff.
- The CP will be reviewed annually or when the medical condition changes. The parent or healthcare professional will initiate the review.
- For children starting at a new school, arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.

Individual Care Plans

Not all pupils with medical needs will require a CP. The school together with the healthcare professionals and parent will agree, based on evidence, whether a healthcare plan would be inappropriate or disproportionate. If a consensus cannot be reached the Headteacher will take the final view.

The format of the CP will depend on the child's condition and the degree of support needed.

The following will be considered when deciding what information will be recorded on CPs:

- The medical condition, its triggers, signs, symptoms and treatment.
- The pupil's needs including medication and other treatments.
- The level of support needed, including in emergencies.
- Who will provide this support, their training needs, expectation of their role and confirmation of proficiency.

- Who in school needs to be aware of the child's condition and required support.
- Arrangements for written permission from parents for medication to be administered by a member of staff during school hours.
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate e.g. risk assessments.
- Where confidentiality issues are raised by the parent, the designated individuals to be entrusted with information about the child's condition and what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency care plan prepared by their lead clinician.

Confidentiality

Each pupil should be treated as an individual. Where medication will be required during the school day, parents should provide the school with the full information about their child's needs and should be encouraged to forward an GP, consultant or nursing advice to ensure the needs can be met effectively. Staff noticing deterioration in a pupil's health over time should inform the senior leadership team who will inform parents.

All school staff should treat medical information confidentially. If information is withheld from staff they should not generally be held responsible if they act incorrectly in giving medical assistance, but in otherwise good faith. It is important that the school does not disclose details of a child's condition to others without the consent of the parent. When consent is given the situation should be handled as sensitively as possible.

Roles & Responsibilities

The Governors will ensure arrangements are made to support pupils with medical conditions and that they are enabled to access the fullest possible participation in all aspects of school life. They will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

It is important that the responsibility for pupil's health and safety is clearly defined and that each person involved with pupils who have medical needs and or needs medication is aware of what is expected of them. A partnership approach with close co-operation amongst parents, health professionals and other agencies is important in providing a supportive environment for pupils with these needs to enable them to participate fully in school activities.

Notification that a pupil has health needs may initially come through their Education, Health and Care plan, from a medical practitioner or from the parents of the child. The usual process for supporting a pupil with medical needs will be by establishing an individual care plan. Care plans help to ensure that pupils with medical needs are effectively supported. These plans provide clarity about what needs to be done, when and by whom. The school recognises that different children with the same health condition may require very different support.

The Headteacher and Senior Leadership Team have responsibility for the implementation and review of the policy and will ensure that:

They liaise with other interested and relevant parties.

Information held by the school is accurate and up to date and that good communication and information sharing systems are in place.

Pupil confidentiality is respected.

The training and development needs of the staff are met.

Ensure all medication arriving and leaving school is recorded.

Ensure all medication is kept in a secure place, out of reach of pupils and at the appropriate temperature.

Inform parents if there are any issues with their child's health or with administration of medications.

Work with the parents and the school nursing team to ensure all health care plans/guidance is in place for each child.

Only allow the administration of medication when parents have given permission and completed the relevant consent forms.

Only administer a non-prescribed medicine to a child when there is specific prior written permission from the parents.

Only administer non-prescription medications and any products containing paracetamol; after telephoning parents/carers to ensure no other product containing paracetamol has been given or may have been given to prevent an overdose.

Ensure the school has sufficient first aiders trained to support emergencies.

Ensure the school has sufficient staff trained to administer rescue medications.

School staff have a duty of care and basic training in meeting health needs and what to do in emergency situations, some staff are trained by the school nursing team to a higher degree to enable them to manage pupil's specific medical needs and to administer medications.

All staff have responsibility to

Be aware of and understand the school's medical conditions and administration of medications policy.

Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.

Know which pupils in their care have a medical condition and be familiar with the content of the pupil's care plan.

Respond in emergency situations.

Maintain effective communication with parents, including informing them if their child has been unwell at school.

Ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in and understand the impact a medical condition may have on a pupil and make any reasonable adjustments to accommodate this.

Staff meeting medical and medication needs will:

Only do so when trained and signed off as competent and confident by the school nursing team.

Only do so with an appropriate care plan/medicine administration record sheet/entrail feeding chart is in place which details the procedures to follow.

Maintain good hygiene practices – hand washing and the use of disposable gloves as appropriate.

Inform a member of the leadership team if there are any issues.

Request the support of the school nurse as appropriate.

Dispose of any sharps in a sharps box – which is disposed of with medical waste.

Medicines and feeds should be administered by named individual members of trained school staff and must be witnessed by a second trained member of staff and recorded that it has been given. Medication givers have a checklist to follow prior to giving medications and written consent is gained from parents before a MARS chart is created.

The School Nurse

The School Nurse will work with the school to keep an overview of any pupils whose medical needs impact on their learning, they will advise staff working directly with them and ensure appropriate strategies are put in place to support them.

The School Nurse will be involved in the healthcare planning for pupils with medical needs as appropriate. This may include:

Informing the school of pupil's in need of a care plan.

Initiating care plans as relevant.

Contributing to care plans and their review.

Help in providing regular training for school staff in managing the most common medical conditions in school as well as specific training such as administering Epi—pens.

Advise on training for less common conditions, including providing information about where the school can access other specialist training.

Collating relevant health information to support the pupil, family and school to inform the care plan.

Supporting pupils and parents as appropriate.

Maintaining and ensuring others maintain robust records relating to pupils with medical conditions.

The care plans are individual to each pupil but all contain the following information,

- Pupil's name, date of birth, home address and parents contact numbers.

- Pupil's diagnosis
- Details of health professionals involved.
- Details of the pupil's health needs
- Interventions required (if any)
- What to do in emergency situations
- Any medications taken.

Care plans are updated as required and this will be led by health professionals.

Staff Training and Support

Any member of school staff providing support to a pupil with medical needs will have received suitable training.

Examples of training received are

- Allergic reactions and anaphylaxis
- Asthma
- Gastronomy and naso-gastric feeding
- Epilepsy
- VP Shunt

The relevant healthcare professional will normally lead on identifying the type and level of training required. The training will be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions.

School staff will not give medication or undertake healthcare procedures without appropriate training.

All school staff will be made aware of the school's policy for supporting pupils with medical conditions, and their role in implementing that policy.

All staff will be made of aware and have access to their pupil's care plans.

Administration of Medications

Wherever possible medicines should be taken outside school hours. Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

No child will be given prescription or non-prescription medicines without their parent's written consent.

The school will only accept medicines that are unopened, in-date, labelled and provided in the original container as bought/dispensed by a pharmacist (except

insulin which may be in a pen or pump) and include instructions for administration, dosage and storage.

All medicines will be safely stored in the class lockable medication cabinet or in the locked medication fridge.

The school will keep a record of all medicines administered to individual children stating what, how and how much was administered, when and by whom.

When no longer required medicines will be returned to parents to arrange for safe disposal.

Staff will be regularly trained in the administration of medication, both emergency and regular medications. All medical training is delivered through Ocean2Sky, a training platform run by the Guys and St Thomas' hospital trust. This is then supported by the Nursing team as needed.

Emergency Procedures

Each individual care plan 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.

If a child is taken to hospital, a member of school staff will stay with the child until the parent arrives.

Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children.

Any member of staff may administer a controlled drug to the pupil for whom it has been prescribed, provided they have received appropriate training. Staff administering medicine should do so in accordance with the prescriber's instructions.

It is permissible for schools and settings to look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed.

Controlled drugs should be kept in a locked non-portable container and only named staff should have access. A record should be kept for audit and safety purposes.

A controlled drug, as with all medicines, should be returned to the parent when no longer required to arrange safe disposal.

Parents

Parents/those with parental responsibility are responsible for keeping school informed about their child's medical condition in order for school to meet their needs and keep their child safe and to provide the school with information and medical equipment when required. Parents are also responsible for the administration of medicines. The dosage of many medications can be arranged to permit medicine to be given to children before or after school, not during school wherever possible.

Parents are responsible for

Providing the school with the original written medical evidence about their child's medical condition and treatment or special care needed at school.

Ensuring any changes in medication administration or medical condition are notified promptly.

Making sure that their child is well enough to attend school. A child's own doctor is the person best able to advise whether the child is fit to be in school and it is for parents to seek and obtain such advice as necessary.

Reaching agreement with the Headteacher and health team on the school's role in helping with their child's medication and medical care needs.

Providing school with signed written instructions detailing any medication dose and time of administration.

To renew the medication when supplies are running low and to ensure medication supplied is within its expiry date. Medication should be sent in a **labelled container as originally dispensed**. Each item of medication must be clearly labelled with the pharmacy label of prescribed containing:

- Pupil's name
- Name of medication
- Dosage
- Frequency of administration
- Date of dispensing
- Storage requirements (if important)
- Expiry date

The school will not accept items of medication without appropriate labelling.

School will inform escorts on home to school transport that there is medication in a child's bag in order for them to keep all pupils safe.

Medications that are date expired or no longer required will be returned immediately to the parent to transfer to a community pharmacist for safe disposal.

Day Trips, Residential Visits and Sporting Activities

Pupils with medical conditions will be actively supported to participate in school trips and visits, or in sporting activities.

School will consider what reasonable adjustments may be required to enable children with medical needs to participate fully and safely on trips and visits. This will be considered as part of the activity risk assessment to take account of any steps needed to ensure that pupils with medical conditions are included.

Complaints

If parents are dissatisfied with the support provided by the school to pupils with medical conditions, they should discuss their concerns directly with the school. If the issue remains unresolved, they may make a formal complaint via the school's complaint procedure. A copy of the school's Complaints policy can be found on the school website or a copy can be provided upon request.

Appendix 1

Check List for School Staff Administering Medication

- ✓ Medication brought to school by an adult
- ✓ The parent will be asked to complete the medication consent form.
- ✓ Staff member to check medication is in original packaging, unopened and with instructions leaflet included.
- ✓ Staff member to check consent form against label.
- ✓ Once the staff member is satisfied with medication and instructions, staff member to annotate permissions form to state medication is being held by school.
- ✓ Medication to be stored as appropriate.
- ✓ Reminder to be set up to administer the medication at the correct time, including making class teacher/lunch time supervisor aware of time/reason and of any possible side effects to look out for once medication has been administered.
- ✓ At the appropriate time administer the medication in line with instructions completed on the school MARS charts.
- ✓ Only once medication has been properly administered, complete the MARS chart noting anything not in line with instructions e.g. if taken late, if spat out.
- ✓ Return medication to safe storage.
- ✓ Return the form to the medication folder.
- ✓ Inform staff that the medication has been taken.
- ✓ Arrange for the parent to be informed if medication not taken in line with instructions.

Appendix 2

A Guide for Parents Requesting School to Administer Medication

- ✓ Wherever possible medicines should be taken outside school hours. Medications will only be administered in school where it would be detrimental to your child's health not to do so.
- ✓ Where possible medication should be prescribed in dose frequencies to enable it to be taken outside of school hours. You should request this when speaking to your doctor or pharmacist.
- ✓ No child will be given prescription or non-prescription medicines without their parent's written consent.
- ✓ No child under 16 will be given medicine containing aspirin unless prescribed by a doctor.
- ✓ All medications brought into school must be in the original container including the box and any instruction leaflet (to check for side effects). Where a tablet is from a pop-out pack, the full pack should be brought into school on the first occasion. Staff may request to photocopy any boxes/packages as required.
- ✓ Where a child is on long term prescription medication the school will require written confirmation from a GP/paediatrician of the dose, medication and purpose (this will not inhibit the medication being given in the short term).
- ✓ The school will administer non-prescribed medication in particular situations. However, current advice to schools states non-prescribed medication should ideally be obtained from a pharmacy and must be labelled by the pharmacist on both the bottle and packaging.
- ✓ When obtaining non-prescribed medication from the pharmacist, you will be asked why the child needs the medication, about any other medication your child might be taking, be warned of side effects and told about the correct dosage and frequency required.
- ✓ Medication must be brought to school and collected by an adult. A member of staff will log the medicine in and out. At the end of the course all medication must be collected and disposed of appropriately.
- ✓ You will be asked to complete a permissions form giving full details about administering the medication (this information should correspond with pharmacy label).

- ✓ A log will be kept by school detailing when medication has been given. If the time differs from that prescribed or there are any side effects, we will advise you immediately.

Approved by The Governing Body on 10.7.24

To be reviewed annually