

St Andrews CE VC Primary School –Managing Medical Needs Policy

March 2016

This Policy is based on the Department of Education's Guidance – Supporting Pupils at school with medical conditions, February 2014

Key points

Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.

Many medical conditions are on-going and complex and have a significant impact on the child's wellbeing. Our aim is to give parents confidence that their child's medical needs are being met by the school.

The school policy is to try to accommodate requests from parents to administer medication in order to ensure the child can continue to be educated at school.

Procedure to be followed when the school is notified that a child has a medical condition.

1. Parent or health care professional informs school of child's medical condition.
2. Headteacher or designated staff member coordinates a meeting to develop an Individual Health care plan (IHCP).
3. The meeting should include a staff member, parent and school nursing team/health care professional if necessary.
4. IHCP is developed.
5. Training needs of staff identified and training from the school nurse delivered and relevant staff signed off. All staff involved in managing a child with a long term medical condition should have received suitable training.
6. IHCP is circulated to necessary staff and implemented.
7. The IHCP should be reviewed yearly or more frequently should the condition change. The expectation is that it will be for parents to confirm changes in writing to the school and the school will alter the plan to reflect this information.

Individual Healthcare plans

These enable the school to provide support to a child with medical needs.

They provide clarity about what is needed to be done, when and by whom. They are especially helpful for children with long term and complex medical needs. The level of detail will depend on the complexity of the medical condition. Not all cases will need one.

They should be developed in the context of assessing and managing the risks to the child's education, social and physical wellbeing, and to minimise disruption.

Plans should include the following information:

- The medical condition, its symptoms, signs, severity and triggers.
- The pupils resulting needs, including medication, its storage, dose, administration instructions (see below for administration of medication).
- Specific support for the child's educational, social and emotional needs, the level of support and who will provide it.
- The roles and responsibilities of all involved should be clearly identified.

Children's role in managing medical conditions

After discussion with parents, children who are competent to do so, should be encouraged to manage their own medical conditions, treatment and procedures.

Children should have easy access to their medication with supervision of administration by an adult.

Managing medicine on school premises

Medication will only be administered in school where it would be detrimental to a child's health not to do so.

No medication will be administered to a child without their parent's written consent.

Prescription medication **only** will be administered.

Only in exceptional circumstances will non prescribed medication be allowed.

Parents will be asked to complete a “request to administer medication” form and no medication will be given unless this is done.

The form should clearly state the child's name, the name of the medication, the dosage, the frequency and the storage instructions. The medication itself must also contain this information, be clearly labelled and in the original packaging.

The medication should be stored safely and the child should know who holds the key to this storage facility. Medication such as asthma inhalers, blood glucose monitors and insulin should not be locked away.

School trips/camps

In the case of emergency short term medication, parents are asked to sign an undertaking giving approval for their child to go on the trip/camp, confirming that their child is fit enough, and advising of any particular needs of that pupil. Again written permission for administration of medication should be provided.

With parental permission staff will administer named paracetamol if required on a calibrated spoon.

Assessment of request

Following receipt of a “request to administer medication” form, the headteacher or designated staff member will discuss with the staff the nature of the request and whether or not they are willing to administer it. They will identify whether staff are competent to do so. Staff are deemed competent to administer medication orally, but must receive appropriate training in any medical techniques required.

Record keeping

Written records should be kept of all medicines administered to children. These are kept in the log book in the staff room.

All medicines administered should be counter checked and signed by another member of staff.

Emergency Procedures

Where a child has an Individual Health Care Plan, actions to be taken in an emergency situation should be clearly defined.

All relevant staff should be made aware of what constitutes an emergency situation and what action should be taken.

Should the child need to attend hospital, staff should stay with the child until the ambulance arrives and accompany the child to the hospital unless the parent has themselves arrived.