Sutton Veny CofE Primary School Supporting Children with Medical Needs Policy



Together, through **friendship**, in **peace** and with **courage**, we reach for the stars.

Colossians 3:12: 'clothe yourselves with compassion, kindness, humility, gentleness and patience.'

Introduction

At Sutton Veny C of E Primary School, we want the very best for every child and we provide an environment where children are safe, happy, thrive and succeed. We are an inclusive community that aims to support pupils with medical conditions thus providing all pupils with the same opportunities.

The aim of this policy is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in our school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

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 governing bodies <u>must</u> 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 policy should be read in conjunction with the Special educational needs and disability (SEND) code of practice.

The guidance for this policy is taken from the DfE Statutory Guidance for Governing Bodies- Supporting pupils at school with medical conditions and guidance from the Local Authority (2019).

Community Consultation

The school consult on the development of the Medical Condition Policy with a wide-range of stakeholders identified below:

- Head teacher
- Medical Needs Coordinator (MENDCO)
- School Staff
- Local healthcare professionals
- Governors
- The local Authority
- Parents
- Pupils

Mrs Hazel Bell is currently the Medical Needs Coordinator (MENDCO) and she is responsible for coordinating the provision of children with medical needs across the school. Mrs Bell can be contacted via email or telephone:

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Individual Health Care Plans (IHCPs) and Risk Assessments

Children in our care who require administration of medication or procedures will need an individual health care plan (IHCP). Plans are initiated by the school but drawn up in partnership with, the child, their parents and the healthcare professional, to ensure the necessary support is put into place. Alongside the IHCP is a risk assessment that is drawn up with the guidance of the healthcare professionals. These need to be in place prior to starting the school. The flow chart (see appendices 1) needs to be followed if a child in our care requires the administering of medicines or a procedure.

- IHCPs are kept with the medication in their own individual containers in the school office with the child's name and photo on. Due to the care of an individual some IHCPs need to be with the pupil.
- They are reviewed annually by the school nursing team and made aware of the timeline by the MENDCO
- Information on the IHCP is checked for it to be accurate and up to date
- Permission is granted from the parents before medical information is shared with another party
- Permission is given for the IHCP to be given to emergency services if needed during or after the school day if the child is on a trip

The Health Care Needs Risk Assessment will identify:

- Any risk around the health care need for the child
- Any risk around the health care need for the others, including children, staff and visitors
- Control measures to manage the risks i.e resources and environmental considerations
- Training needs and who will need to be trained. It will also explain the support that is needed for the child's health care needs to be safely managed in the setting

Record-keeping

The following forms are used to inform the school about any medical conditions and the administering of any medicines.

- Enrolment forms- any health conditions will be highlighted and be made aware of which then goes onto the medical needs register and SIMS. This is in term one or when a new pupil joins our school
- Healthcare plans (IHCP). A care plan may be in place from a previous school or a new one may need to be written once the child's needs have been assessed.
- Risk Assessments these will be attached to the IHCP
- Form 1 this form is used when there is a request from parents for medicines to be administered- see appendix 1
- Form 2 this form is used as a log for staff members to fill out when any medicine is administered see appendix 2

The office and all teaching staff will have blank copies of both **forms 1 and 2** if a parent requests one (see appendices).

Staff awareness and training

Any member of our staff community providing support to one of our children, who requires medication at school, will receive suitable training which has been noted from the joint writing of the Individual Health Care Plan (IHCP). Alongside the staff who work with the individual child on a daily basis and who are willing to complete the training, other (extra) staff members will also complete the training to prepare for emergencies. It is not compulsory for a staff member to complete specific training and it is therefore important that staff share this information if this is the case.

The School nursing team will deliver any required training. If in an exceptional occasion, the training is provided by the parent, written consent is required from the hospital or medical professional to show that this is the case. The school will keep an accurate record of staff members who have completed any medical training in the MENDCO File.

First Aid

Staff are trained in emergency Paediatric First Aid and can respond to a medical emergency giving immediate help to casualties with common injuries or illnesses or those arising from specific hazards within school. Staff are also trained with the qualification – First Aid at Work. When necessary, ensure that an ambulance or other professional medical help is needed.

General Emergency Procedures

All new staff are inducted into the emergency procedures of our school; For children with an IHCP, all relevant staff, working with those individual children, will be aware of emergency symptoms and procedures. If a child needs to be taken to hospital, a senior member of staff, as directed by the headteacher, should either stay with the child until the parent/carer arrives or accompany them to hospital by ambulance. Any documentation needs to go with the pupil. This may include the IHCP and form 2 if medicines have been administered.

Storing medicines at School

All children at our school need written parental consent for prescription or non-prescription medicines to be administered. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

All medicines that are accepted, via the school office, need to be: in date, labelled in the original container as dispensed by the pharmacist and include instructions for administering, the dosage with the correct measuring spoon/syringe and how it needs to be stored. The exception to this is insulin as it will be in a pen or an insulin pump. Along with the medicine, there will also be the completed form 1 (gaining parental consent) which needs to stay with the medicine at all times. A photocopy will also need to be made for the MENDCO file.

All medicines need to be stored safely and so that they are accessible. Depending on the type of medication, will depend on how it is stored within school.

- Certain forms of medication are required, by law, to be locked away. This is in the office.
- Epi-Pens will be stored in the school office and the classroom of the child with the allergy
- The spare Salbutamol Inhaler will be stored, in a cupboard, in the office
- Some medication, like insulin for example, will be stored securely in the fridge and in a locked cupboard in the office.

The MENDCO will keep a list of all the medication stored in the school and inform staff of where this is kept and stored

Inhalers –named with the child's photo in a sealed bag

- children in KS1 in the first aid cupboard out of reach
- children in KS2 in drawers (labelled medication) in each classroom

Other medicines, where a request has been made for it to be administered, will need to be stored centrally in the office, either in the cupboard or in the fridge if required.

Administering Medication at School

Administering medication at school enables our pupils to fully participate in all aspects of school life. Children requiring medication will be given it only by a staff member who has received training in that particular

condition thus enabling staff to feel confident and competent at administering the medicine. Training is carried out by the school nursing team.

All children at our school with medical conditions have easy access to their medication. If a child refuses medication, their parents are informed immediately.

Where necessary, two trained members of staff can support each other in the administering of the medication. It is very important to not feel isolated in these situations. Personal protection needs to be worn: gloves and aprons to safeguard the staff member giving the medicines.

A written record should be kept of the administration of all medicines to pupils using form 2 (see appendices). This needs to be kept with the parental consent form along with the medicine. Ideally this will be printed on the reverse of form 1 so they are kept together and not separated. All elements of **form 2** need to be filled out. For medicines that are kept in school during term-time due to an IHCP, **form 2** needs to be readily available to fill out if any medication is given to a child. Once the period of medication has been completed, any records need to be given to the MENDCO.

Standard Practice

- 1. Check that the Parent/Carer to complete a Medicine Administration request form available from the office (form 1)
- 2. Check the child's name on the form and the medicine.
- 3. Check the prescribed dose.
- 4. Check the expiry date.
- 5. Check the prescribed frequency of the medicine.
- 6. Measure out the prescribed dose (parents should provide measuring spoons/syringes). If the child is old enough, they can measure the medicine.
- 7. Administer the medicine.
- 8. Complete and sign the Administration of Medicine record sheet when the child has taken the medicine (form 2)
- 9. If uncertain, DO NOT give check first with parents or doctor.
- 10. If a child refuses medication, record and inform parents as soon as possible.

Emergency use of Inhalers at School

From 1st October 2014 (Guidance on the use of emergency salbutamol inhalers in schools) schools are allowed to use an emergency salbutamol inhaler, without a prescription, for use in emergencies. The emergency salbutamol inhaler should only be used by children, for whom parental written consent for use of the emergency inhaler has been given.

The emergency inhaler can be used if:

- the pupil has been diagnosed with asthma and prescribed an inhaler
- the pupil has been prescribed an inhaler as reliever medication
- the pupil's prescribed inhaler is not available

Residential Trips and School Visits

Every child is valued and cared for and so any child with a medical condition has the right to engage in residential and school trips, participating according to their abilities and on some occasions with reasonable adjustments. As part of the risk assessment for an off-site visit, planning arrangements will take into consideration all the steps needed to ensure that pupils with medical conditions are included.

Discussions with parents will be paramount as to how to best manage the medical condition if their child is on a residential trip.

Full parental consent will be required for trained staff members to administer medication in the evening and/or the morning as required.

Medicine needs to be signed in an out of the school premises. A form for this will be in the school office (see appendices). If the medicine is not able to go back into the office after a late return from a school trip, then the parents will take responsibility for this and it will need to be bought back to school the next day.

Safe Disposal of medicines

When no longer required, medicines should be returned to the parent for safe disposal. This may also include inhalers that are not in date and need replacing. It is the responsibility of the parents to ensure that medicine is in date. Medicines will be checked during terms two and four by a member of staff (Ros Boath).

Sharp boxes are used for the safe disposal of needles and other sharps and kept inside a box with a lid. All medicines, when they are required no more, need to be off the school premises within five days.

Below are the roles and responsibilities of all stakeholders in our school.

Head teacher

The Headteacher of Sutton Veny C of E primary school has a responsibility to:

- ensure all stakeholders are aware of the policy and that it is in line with the statutory and local guidance
- ensure that the policy is put into action
- monitor and evaluate the policy annually in term 1 of the academic year with input from all stakeholders
- report back to stakeholders when changes are made
- ensure that every aspect of the policy is maintained
- ensure that all staff are sufficiently trained and assess training and development for the needs of all staff for them to be met
- ensure that the correct insurance is provided

 ensure that new staff members are shown the medical conditions policy as part of their induction process

MENDCO

The MENDCO at the school has a responsibility to:

- attend any relevant training
- monitor staff training and identify staff training needs annually
- create and communicate clear school policy, systems and procedures with all staff
- monitor IHCP's and delivery of these
- check that the information is up to date and accurate
- ensure that all information held by the school regarding pupils with medical conditions is accurate
- check that medical needs for new pupils are put into place
- ensure that all supply and cover staff know the medical conditions policy
- ensure cover staff are aware of children with medical needs whilst maintaining confidentiality
- liaise with healthcare professionals and services regarding the medical needs of pupils
- Work closely with the parents and carers of children with medical needs

School Staff:

All School staff have a responsibility to:

- be aware of the pupil's condition and locate trained staff in an emergency
- be aware of the potential triggers, signs and symptoms of common medical conditions and to know what to do in an emergency
- understand the school's medical policy
- be aware of medical needs of the children in our school and those with an IHCP
- administer prescribed medicine if the correct training has been carried out
- be aware of the possible emotional impact the medical condition has on the child
- provide support to children with medical needs
- ensure that all children are included in the daily timetable
- ensure their own safety by wearing the correct equipment
- communicate if personal protective equipment is low
- know where medicine is stored for individual pupils
- check form 1 and then administer medicine
- fill out form 2 if medicine is administered
- return medication to the office once it is administered
- be aware that children with medical conditions may have special educational needs
- understand that a child's learning may be affected and extra help, care and support may be necessary
- support a child to catch up if they have missed a period of time at school

Teaching Staff:

All teaching staff have a responsibility to:

- collaborate with the planning of the IHCP
- develop and maintain positive relationships with parents and carers of children with medical needs
- have forms 1 and 2 available in class files
- administer medicines where necessary
- follow the school's policy for meeting medical needs, including completing all relevant paperwork
- inform parents if their child has been unwell
- · communicate to cover staff those children on an IHCP and their medical needs
- carry out risk assessments for school trips and residential visits
- ensure that any medication such as inhalers/epi-pens are taken on the trip
- ensure that all pupils who carry their own medicine for a school trip has it with them
- return medication to the parent of the child when it is no longer required in school
- return medication at the end of the school year so that it is not kept in school
- use opportunities such as PSHE through social stories to raise awareness of medical conditions amongst the children to create a positive social environment based on understanding

Health Care Professionals:

Specialist healthcare professionals caring for pupils who attend our school have a responsibility to:

- plan and support the writing and the procedure of the IHCP
- check and clear the risk assessment for the medical need
- deliver necessary training
- work alongside the school, parents and carers by providing advice and support

Parents:

All parents/carers have a responsibility to:

- tell the school if their child has a medical condition
- inform the school about the medication their child requires during school hours
- agree on the procedures of the IHCP
- nominate an adult who is contactable at all times
- provide any changes to their child's condition
- provide medication that is labelled, in-date with the correct dosage
- provide up-to- date information about their child's needs
- tell the school if there is any change to the medication
- inform the school if there has been a medical emergency and record this on the IHCP
- ensure that their child's medication is within expiry date
- ensure that their child has regular reviews about their condition with their healthcare professional
- support their child's learning if a period of school is missed
- keep their children at home if they are unwell

Pupils:

Pupils at our school have the responsibility to:

- be encouraged to take control of their own medication where appropriate using trained staff as support
- know where to gain access to their medication in an emergency
- ensure a member of staff is called in a medical emergency
- tell staff, their parents if they are not feeling well
- explain if needed the effect the medical condition has on them
- be sensitive to the needs of all pupils and those with medical conditions
- know what constitutes an emergency and to respond sensitively to this

Governors:

According to the DfE guidance (2014), all Governors at our school have a responsibility to:

- ensure that the school's policy sets out the necessary procedures to be followed
- ensure that the policy is reviewed annually with all stakeholders
- review IHCPs annually. If there is a change to the condition of the child then the IHCPs should be developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption.
- Understand what is done in an emergency situation
- ensure that arrangements are in place to support pupils with medical conditions. In doing so they
 should ensure that such children can access and enjoy the same opportunities at school as any other
 child.
- to take into account that many of the medical conditions that require support at school will affect
 quality of life and may be life-threatening. Some will be more obvious than others. The governing body
 will therefore ensure that the focus is on the needs of each individual child and how their medical
 condition impacts on their school life.
- ensure that their arrangements give parents and pupils confidence in the school's ability to provide
 effective support for medical conditions in school. The arrangements should show an understanding of
 how medical conditions impact on a child's ability to learn, as well as increase their confidence and
 promote self-care.
- ensure that staff are properly trained to provide the support that pupils need. They will also need to
 ensure staff are competent before they take on responsibility to support children with medical

- conditions. They should also 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.
- ensure that there is an effective partnership when working with different agencies and that it is not the sole responsibility of one person
- ensure that children with medical conditions are entitled to a full education and have the same rights
 of admission to school as other children. This means that no child with a medical condition should be
 denied admission or prevented from taking up a place in school because arrangements for their medical
 condition have not been made.
- ensure that the arrangements they set up include details on how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation (The MENDCO).
- ensure that the school's policy sets out the procedures to be followed whenever a school is notified that a pupil has a medical condition (see flowchart for an Individual Health Care Plan (IHCP). 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 the school mid-term, every effort will be made to ensure that arrangements are put in place, ideally within 2 weeks.
- The governing body will ensure that plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed.
- Should parents be dissatisfied with the support provided, they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Our school considers it unacceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- prevent children from accessing or participating in school life, such as school trips, or preventing any barriers to their learning
- assume that every child with the same condition requires the same treatment
- prevent children from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- ignore the views of the child or the parent; or ignore medical evidence or opinion, (although this may be challenged).
- penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- make parents feel obliged to attend school to administer medicines or provide medical support, this includes toileting issues

Staff indemnity

Wiltshire Council fully indemnifies its staff against claims for alleged negligence providing they are acting within the scope of their employment. The administration of medicines falls within this definition so staff can be reassured about the protection their employer provides. The indemnity would cover consequences that might arise where an incorrect dose is inadvertently given or where administration is overlooked. It also covers the administration of emergency medication when given according to an individual child's protocol. In practice, indemnity means that the Council and not the individual employee will meet any costs of damages arising should a claim for alleged negligence be successful. In practice, it is very rare for school staff to be sued for negligence and any action is usually between the parent and employer.

Consistency of Policies

This policy should be read alongside the following other school policies:

- SEND
- Learning Outside the Classroom
- First Aid

Policy Review

Our schools Medical Condition Policy is reviewed, evaluated and updated annually in line with the school's policy review cycle.

In evaluating the policy, the school seeks feedback on the effectiveness and acceptability of the Medical Conditions policy with a wide range of key stakeholders who have been outlined in the policy.

Approved by:	Hazel Bell and Curriculum and Pupil Welfare Committee	Date: 19/11/24	
Last reviewed on:	November 2024		
Next review due by:	November 2026		

Appendix 1

ADMINISTRATION OF MEDICINES

FORM OF PARENTAL/GUARDIAN CONS	SENT (FORM 1) - STRICTLY CONFIDENTIAL
Child's Name:	Year/Class:
Address:	
Date of Birth:	
Home Tel No:	Work Tel No:
GP Surgery	GP's Tel No:
Condition/Illness:	
that I must deliver the medicine pe pharmacy and accept that this is a so school/setting immediately, in writin medication required or if the medicat	
Name (print): Relationship:	
Signed:	Date:

Name of Medicine	Dose	Prescribed	Frequency &Times	Date of Completion	
		by Medical Practitioner (yes or no)	for Administration	of Course (if known)	
А					
В					
С					
D					
E					
Special Instructions/Precautions/Side Effects:					
Emergency Action:					
Other prescribed medicines	s child takes at hor	me:			

Appendix 2	
RECORD OF PRESCRIBED/ NON-PR	ESCRIBED MEDICINES GIVEN TO CHILD IN SCHOOL (Form 2)
Child's Name:	Date of Birth:
Year/Class:	
STRICTLY C	ONFIDENTIAL

Date	Time	Name of Medicine Given	Dose	Any Reactions	Name and Signature	Signature of staff witnessing invasive treatment