

No: 25

THE THOMAS AVELING SCHOOL
POLICY
for
MEDICINES IN SCHOOLS

September 2014
Ratified by FGB
Updated Dec 2015

The Thomas Aveling School

Policy No: 25

MEDICAL CONDITIONS POLICY SUPPORTING STUDENTS WITH SPECIAL MEDICAL NEEDS (INCLUDING MEDICINES IN SCHOOL)

September 2014
Ratified by FGB:
Updated Dec 15
To be reviewed Sept 16

The Thomas Aveling School

Medical Conditions Policy SUPPORTING PUPILS WITH SPECIAL MEDICAL NEEDS

Definition:

Pupils' medical needs may be broadly summarised as being of two types:

- (a) Short-term affecting their participation in school activities for which they are on a course of medication.
- (b) Long-term potentially limiting their access to education and requiring extra care and support (deemed **special medical needs**).

Rationale:

LAs and schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. **Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.** However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine. The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information. The school will take advice and guidance from Department of Education's Statutory guidance for Governing Bodies of maintained schools and academies in England, dated April 2014, and the Local Authority, and will encourage self-administration of medication when possible. Contact details for our School Nurse can be obtained from the School Student Services Officer and a copy of this Policy will be made available to parents by request and published on the school website.

Aims:

The school aims to:

- assist parents in providing medical care for their children;
- educate staff, including supply, temporary and volunteer staff, and children in respect of special medical needs;
- arrange training for staff, including supply, temporary and volunteer staff, to support individual pupils;
- liaise as necessary with medical services in support of the individual pupil;
- ensure access to full education if possible.
- monitor and keep appropriate records.

Entitlement:

The school accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils.

The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

- to choose whether or not they are prepared to be involved;
- to receive appropriate training;
- to work to clear guidelines;
- to have concerns about legal liability;
- to bring to the attention of management any concern or matter relating to supporting pupils with medical needs.

Expectations:

It is expected that:

- parents will be encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative;

- where parents have asked the school to administer the medication for their child they must ask the pharmacist to supply any such medication to be dispensed in a separate container, containing only the quantity required for school use. The prescription and dosage regime should be typed or printed clearly on the outside. Whenever clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours. When this is not possible, the school will only administer medicines in which the dosage is required no less than 3 or 4 times a day. The name of the pharmacist should be visible. Any medications not presented properly will not be accepted by school staff. Pupils should not bring in their own medicine. This should be brought into school by the parent.
- that employees will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately.
- the school will liaise with the School Health Service for advice about a pupil's special medical needs, and will seek support from the relevant practitioners where necessary and in the interests of the pupil.
- Any medicines brought into school by the staff e.g. headache tablets, inhalers for personal use should be stored in an appropriate place and kept out of the reach of the pupils. Any staff medicine is the responsibility of the individual concerned and not the school.

Policy into Practice:

There is a need for proper documentation at all stages when considering the issue of support for pupils with medical needs in school.

Day to day implementation of the Policy:

The Headteacher for the Governing Body will oversee the following effective implementation of the Policy.

Mr Rayner will be the senior member of staff responsible for ensuring that sufficient staff are suitably trained. All relevant staff, including supply and temporary staff, will be made aware of the child's condition and cover arrangements will be clearly in place in case of staff absence or staff turnover to ensure someone is always available. Risk Assessments will be made in respect of school visits, holidays and other school activities outside the normal timetable.

When the school is notified that a pupil has a medical condition:

- Arrangements will be put in place in time for the relevant school term in cases of children starting at a new school.
- For a new diagnosis, or for children moving school mid-term, arrangements will be put in place ideally within a two week period.

Individual Healthcare Plans:

In the case of disabled children with a medical condition, the school will comply with their duties as outlined in the Equality Act 2010. In the case of children with special educational needs with a medical condition, the school will comply with their duties as outlined in the SEN Code of Practice.

An Individual Healthcare Plan (IHP) will be easily accessible to all who need them while preserving confidentiality. The school personnel with overall responsibility for the development of IHPs will be the appropriate Special Educational Needs Co-ordinator in conjunction with Mrs Stratford, Student Services Manager and appointed First-Aider. IHPs and their review may be initiated and drawn up in partnership and consultation with the parent by a member of school staff or healthcare professional involved in providing care for the child, involving the pupil where appropriate. The Headteacher will take a final view if a consensus cannot be reached. The level of detail with the IHP will depend on the complexity of the pupil's individual condition and degree of support needed and will contain key information and actions required to support the pupil effectively. This should also include what action is required in the case of an emergency. Pupils and staff should be made aware of emergency support procedures where appropriate. If a student requires hospitalisation, a member of staff will remain with the student until a parent/carer arrives. This will be also be the standard procedure for any child within the school who requires emergency hospital treatment. An IHP will be reviewed at least annually or when needs change. The Local Authority, who may be responsible for home school transport, will be kept informed in cases of children with an IHP.

Administration of Medication:

- Medicines will only be administered when it would be detrimental to the child's health or school attendance not to do so.
- No child under 16 will be given Prescription or non-prescription medicines without their parents' written consent, except in exceptional circumstances where medication has been prescribed to the child without the parents' knowledge, and only when every effort has been made to encourage the child or young person to involve the parents/carers whilst respecting their right of confidentiality. Non-prescription medication will not be administered to any child under 16 without their parent's prior, written consent.
- Medications containing Aspirin will never be given to a child unless they have been prescribed by a Doctor.
- The school will only accept prescribed medication that is in-date, labelled and in the original container as dispensed by the pharmacist and includes instructions for administration, dosage and storage. The exception to this is Insulin which must still be in-date but available for school inside an insulin pen or pump as opposed to the original container.
- Medication will be stored safely and students should know where their medication is at all times, including the key person to ask in order to facilitate immediate access. Asthma inhalers, blood glucose equipment and adrenalin pens, should be readily available and not locked away, particularly on school trips etc.

- Controlled drugs will be kept in a secure store and be readily accessible by the named member of staff.
- The school will keep a record of all medication administered to individual students, including how much was administered, when, and by whom. Any side effects noted should also be logged.
- When no longer needed, medication should be returned to parents/carers for safe disposal.
- Sharp boxes should always be used for disposal of needles.

Liability and Indemnity:

The school will have appropriate insurance arrangements to cover staff who provide support to pupils with medical conditions and will ensure any necessary training as may be required by the insurers. The policy will be accessible to staff providing such support.

Complaints:

Should parents/carers be dissatisfied with the support provided to pupils with medical conditions, they should in the first instances discuss their concerns directly with the Headteacher. If they remain dissatisfied or the issue fails to be resolved, they may make a formal complaint via the School's Complaints Policy.

December 2015