



THE FOREST FAMILY

Supporting Pupils with Special Medical Needs And Medicines in School policy

<http://education.staffordshire.gov.uk/School-Admin/HealthSafetyWellbeing/Health-and-Safety/Procedures/Health/Drugs-and-Medications/Drugs-and-Medications.aspx> up to date County guidance papers used to support policy and local procedures.

Rationale

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.**

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 other children. 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 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 all the relevant information necessary.

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 in line with union statements and should:

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

There are occasions when employees are required to assist pupils to self-administer and/or are administering medicines, either as part of long term therapy for a chronic health condition or as an emergency measure, e.g. allergic reactions / seizures. Any assistance or administering of medicines must be conducted in a safe and competent manner, procedures must be followed and relevant legislation complied with.

UNISON Policy UNISON's National Policy is that its members should not undertake invasive medical procedures. This document does not seek to change that policy. UNISON members however may already carry out these procedures voluntarily or may in the future carry out such procedures. If UNISON members do volunteer to carry out invasive medical procedures then the guidelines in this document should be followed to ensure members are adequately covered by the Employer's insurance cover.

NASUWT Policy There is no general contractual requirement for any teacher to administer medication to a pupil. NASUWT advises its members not to do so. Health and Safety Representatives should advise members who do nevertheless administer medication that they must be confident that they are properly trained and qualified to undertake the task. Where a member of staff chooses to administer medications on a voluntary basis, the following guidelines should always be strictly followed. Health and Safety

Expectations

It is expected that:

- Parents will inform school of any medical condition which affects their child.
- Parents will supply school with appropriately prescribed medication, where the dosage information and regime is clearly printed by a pharmacy on the container
- Parents will ensure that medicines to be given in school are in date and clearly labelled

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- Parents will co-operate in training their children to self-administer medicine if this is appropriate, and that staff members will only be involved if this is not possible
- Medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual
- Our schools will ensure that, where appropriate, children are involved in discussing the management and administration of their medicines and are able to access and administer their medicine if this is part of their Individual Healthcare plan (for example, an inhaler)
- School staff will liaise as necessary with Healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil
- Transitional arrangements between schools will be completed in such a way that Forest Family will ensure full disclosure of relevant medical information, Healthcare plans and support needed in good time for the child's receiving school to adequately prepare
- Individual Healthcare plans will be written, monitored and reviewed regularly and will include the views and wishes of the child and parent in addition to the advice of relevant medical professionals

Information

Children with serious medical conditions will have their photo and brief description of condition, along with any other necessary information, in the staffroom, Headteacher's office and classrooms as well as on their healthcare plan. Children with medical conditions which may require emergency attention, e.g. epilepsy, diabetes, tracheostomy will have their names and an Individual Healthcare Plan clearly accessible in their classroom, and all adults dealing with the child will have their attention drawn to this information. All other medical conditions will be noted from children's SIMs records and this information will be provided to class teachers annually.

In an emergency

In a medical emergency, teachers have been appropriately trained to administer emergency paediatric first aid if necessary. If possible, the school's First Aiders will be asked to attend. Staff are trained in procedures and logs to be used if an ambulance needs to be called.

Administration of medicines

Only essential medicines will be administered during the school day. These will be only those prescribed by a doctor. Parents must submit a **specific written permission slip** (see below) before any medicine is administered. Medicines to be given during the school day must be in their original container. Controlled drugs can also be administered, subject to all other conditions as described in the Policy. Essential medicines will be administered on Educational Visits, subject to the conditions above. A risk assessment may be needed before the visit takes place. Staff supervising the visit will be responsible for safe storage and administration of the medicine during the visit.

Before administering or supervising the administration of any medicine, staff must check the paperwork from parents and complete the **specific forms** (see below) checking that the medicine belongs to the child, the dosage they are giving is correct, and that written permission has been given.

Any child refusing to take medicine in school will not be made to do so, and parents will be informed about the dose being missed.

All medicines will be stored safely. Medicines needing refrigeration will be stored in:

Medical room fridge at Rangemore and Staffroom Fridge at Needwood.

Controlled drugs or prescribed medicines will be kept in the locked cabinet:

Medical room at Rangemore and The main Office at Needwood.

Access to these medicines is restricted to the key personnel.

The policy operates on the principle of an individual assessment being undertaken to establish the extent of the pupils ability to safely and effectively **self-administer their medication**. This takes into consideration their age, condition and their overall health care plan, where one exists, and procedures should be in place to outline how this must take place.

ASTHMA GUIDELINES:

Inhalers are kept in the child's classroom. Children have access to these inhalers at all times, though must inform a member of staff that they are taking a dose. All inhalers are marked with the child's name. All children with an inhaler must take them on educational visits, however short in duration.

Education:

The school has a responsibility to advise staff on practical asthma management. 999 is dialled and first aider fetched for an acute asthma attack. Pupils who appear over reliant on inhalers may have poorly controlled asthma and need to consult their doctor.

Parental Communication: A school asthma register will be maintained and updated regularly. Parents must provide school with details of dosage, equipment such as relievers, preventers and spacers. It is the parents responsibility to inform the school of details of treatment and changes as they occur. These will be recorded on the asthma record cards.

Inhalers:

There are a range including: Salbutamol, Ventolin, Salamol, Terbutaline, Intal / Cromogen, Becotide , Pulmicort , Flixotide

Access:

The school will consult with parents over whether or not inhalers are held by pupil or school. Inhalers will only be allowed in school once parents have completed the administration of medicines form. Parents will be asked to provide a labelled spare inhaler in case the regular one is lost / broken etc. Parents must advise the school of inhaler expiry dates. Inhalers are only to be used by / for the pupil for who they are prescribed.

Nebulisers:

Some children need to use an electric device called a nebuliser. In such cases, they will only be allowed following liaison with parents and the school's health adviser.

Physical Education:

Full participation remains the goal for pupils with asthmatic conditions. Pupils should take a dose of their inhaler before exercise. The inhaler should be readily accessible during the P.E. lesson. When swimming, pupils should take their inhaler with them.

Art:

Some art materials may cause difficulty for asthmatic pupils. Teachers should be aware of this.

Emergency Inhaler

Following a change in regulations, schools are now able to purchase a salbutamol inhaler without a prescription for use in emergencies when a child with asthma cannot access their own inhaler. Please ask to see the Emergency inhaler protocols.

EPI PEN GUIDELINES

Some pupils may suffer anaphylactic shock through a severe and sudden reaction to insect bites, animals, nut allergy etc. The school staff have agreed to administer epi – pen medication *in extreme circumstances* and only if they have been trained in the use of an epi – pen. All staff have epi-pen training annually. Staff understand that epi – pens are a risk free treatment and a one shot injection which can do no harm may relieve a potentially high risk medical condition. The pen (cap off) should be pushed against the child's thigh , through clothing if necessary. The pen should be held for a count of 10 seconds before being withdrawn. Ambulances must be called for a child who may require an epi-pen. Some children have antihistamines in the medical room and may be given if symptoms listed in thie health care plans are present this is a liquid medicine stored with the epi-pen. If symptoms are more severe, the epi-pen should be given immediately. An ambulance must be called immediately. Parents should be contacted after this call has been made.

Complaints

Should parents be unhappy with any aspect of their child's care at The Forest Family, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be managed. If this does not resolve the problem or allay concern, the problem should be brought to a member of the leadership team, who will, where necessary, bring concerns to the attention of the Executive Headteacher. In the unlikely event of this not resolving the issue, the parents must make a formal complaint using the Forest Family Complaints Procedure.

Trained Staff – see notices in all rooms for up to date first aid trained personnel.

It is acknowledged that employees are not health professionals. Therefore, they must receive appropriate information, instruction and, where need identified, training and support to enable them to become competent in the administration of medication. Any employee who has to assist or administer any medication in the course of their duties will receive appropriate information, instruction, and where the need is identified attend training in the completion of such tasks.

Local Procedures

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Where medication administration/assistance is required, detailed management procedures have been developed.

Healthcare plans

Pupils with medical conditions all have an individual healthcare plan which is developed with parents and identifies and documents the range of support required by the pupil. This plan is reviewed at regular intervals (at least annually) and following any changes in circumstances. The details within the plan is communicated to employees and other relevant persons.

Control of Substance Hazardous to Health (COSHH) Assessments

Local medication policy guidelines have been established, implemented and monitored with county policy which means there is no requirement to complete COSHH Assessments for medication products, as these arrangements will ensure its safe storage, handling, administration and disposal.

Incident Reporting

Procedures are in place for the reporting of adverse reactions or errors in administration of medication.

Staff report:-

- a. The facts of the incident,
- b. Persons involved,
- c. Reason for the incident,
- d. Details of any ill health or injuries sustained and if this is the case an accident/incident report form is completed and forwarded to the Health, Safety and Wellbeing Service,
- e. Witness Statement.
- f. Details of persons informed (Parents/Carers, Pharmacist, GP, NHS Direct, Governing bodies CQC/OFSTED),
- g. Corrective and Remedial action taken.
- h. Outcome of investigation by senior manager.

Staff Medication

Any medicines brought into school by the staff e.g. headache tablets, inhalers for personal use should be stored in the medical room where it is 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.

Monitoring and review

Policy and local procedures are reviewed by governors annually to ensure they are up to date, reflect current best practice and are working effectively.

Supporting Documents

- a. HR G10 –Medication Guidance for Adults (formerly Social Care and Health)
- b. HR G11 –Medication Guidance for Children and Young People
- c. Supporting pupils at school with medical conditions 2014.

Legislative Framework

1. Health and Safety at Work Act 1974
2. Control of Substances Hazardous to Health Regulations 2003
3. Health and Safety (Miscellaneous Amendment) Regulations 2002
4. Management of Health and Safety at Work Regulations 1999
5. Children and Families Act 2014
6. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
7. Hazardous Waste Regulations 2005
8. Medicines Act 1968
9. Misuse of Drugs Act 1971
10. Human Rights Act 1998
11. Data Protection Act 1998



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**PARENTAL REQUEST FOR THE ADMINISTRATION OF PRESCRIBED
MEDICATION INCLUDING ASTHMA AND EPI PEN**

Please note, where a child has a health care plan which includes non-prescribed piriton as an administered medicine to prevent a severe allergic reaction, this does not have to be prescribed but the following form must be completed and a bottle kept on site.

Surname:		Forename:	
Teacher:		Home telephone:	
Home address:		Parents mobile telephone:	
Post code:		D.O.B: Age:	
Year group:		Gender: M/F	
GPs Name			
Comments/Special Instructions (Respecting cultural, religious or communication needs)			

THE MEDICINE

Name of medication	Duration of course	Dosage prescribed	Date prescribed	Times to be administered / supervised administration.

PARENTS

I clearly understand and accept that:

- The above medicine must be delivered to the school personally
- Staff can choose whether or not they are prepared to be involved and school will risk assess whether my child can self-administer or secure a member of staffs training in order to administer effectively.

Signed by Person with parental responsibility



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 'Administering' or supervising self administered medicines
One form for one 'course' of prescribed medicine.

STOP! READ BEFORE PROCEEDING

- Is this a prescribed medicine. If not, then please do not continue.**
- Has a consent form been completed by parents?**
- Do you have the information you need to complete the section about the medicine? If not, then please do not continue.**
- Is the medicine prescribed for the child in question? If not, then please do not continue.**
- Is the medicine in date? If not, then please do not continue.**
- Do you feel you need training to administer or supervise the child administering this medicine? If you do, then please do not continue.**

Surname:		Forename:	
Teacher:		Home telephone:	
Home address:		Parents mobile telephone:	
Post code:		D.O.B: Age:	
Year group:		Gender: M/F	
GPs Name			
Comments/Special Instructions (Respecting cultural, religious or communication needs)			

THE MEDICINE

Name of medication	Duration of course	Dosage prescribed	Date prescribed	Times to be administered / supervised administration.

RECORD OF ADMINISTERING OR SUPERVISING THE ADMINISTRATION OF THIS MEDICINE.

Date	Time	Dose	Signature