



Bridgewater Primary School Medical Policy

SUPPORTING CHILDREN WITH MEDICAL NEEDS AND MANAGING MEDICINES

Background

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools to make arrangements for supporting pupils at their schools with medical conditions. Section 100 of the Act came into force on September 1st 2014.

Paragraph 44 of the document states that Governing Bodies should ensure that the appropriate level of insurance is in place and appropriately reflects the levels of risk present. Paragraph 45 states that the insurance policies should provide liability cover relating to the administration of medicines.

This insurance provides an indemnity to governors, teachers, other employees and volunteers in respect of the administration of medicines and first aid treatment.

Information on these policies is held in the School Office.

Introduction

Our aim is to ensure that all children with medical conditions, in terms of both physical and mental health are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. We recognise that children may require on-going support, medicines or care while at school to help them manage their condition and keep themselves well.

At Bridgewater Primary School we receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils.

We recognise the social and emotional implications associated with medical conditions and will support children and families to achieve the best outcomes possible.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Some may have special educational needs (SEN) and may have a Statement, or Education, Health and care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision.

The Head teacher, governors and staff of Bridgewater Primary school wish to ensure that children with medication needs receive appropriate care and support in order to play and full and active part in their school life.

Roles and Responsibilities

The Head Teacher

The Head Teacher ensures that the school's medical policy is developed and effectively implemented with partners. That school staff are aware of the policy and understand their role in its implementation.

The Head teacher retains overall responsibility for the development of health care plans. However, the day-to-day management of healthcare plans has been delegated to the school SENDCo working in partnership with parents, Parent Link Worker, Pastoral lead and healthcare professionals and where appropriate social care professionals.

The Head teacher makes sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

The Head teacher will liaise with the SENDCo, School Office Manager and Parent Link Worker to monitor the effectiveness of medical provision. This will help identify any further training/advice needed for staff supporting children with medical conditions. It will ensure sufficient trained numbers of staff are available to implement the policy and will adapt to any new situations to promote best outcomes for children.

School Staff

The named person with responsibility for medical conditions is Julie Breakwell, School Office Manager and qualified in Paediatric First Aid. In addition, any member of school staff may be asked to provide support for pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.

School staff undertaking medical duties will receive sufficient training to undertake medical tasks and will achieve the necessary level of competency before they take on responsibility to support children with medical needs. Certificates are held in the School Office and Medical Room.

Staff should not give prescription medicines or undertake healthcare procedures without appropriate training.

Risk assessments will be carried out for school trips, residential stays and other school activities.

The School Office Manager, supported by the SLT will arrange for staff training and for ensuring that all relevant staff are made aware of the child's medical condition. Medical lists will be updated annually.

Where a child is returning to school following a period of hospital education or alternative provision school staff will work closely with parents and other partners to ensure a successful and smooth reintegration.

The School Nurse takes the lead in writing healthcare plans and will meet with parents and staff to devise and review them, providing training and advice where necessary. When a member of staff is new to a pupil group, for example due to staff absence, the school makes

sure that they are made aware of (and have access to) the Healthcare Plans of pupils in their care.

The school ensures that all staff protect pupil confidentiality.

The school will seek permission from parents to allow the Healthcare Plan to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This permission is included on the Healthcare Plan.

The school seeks permission from the pupil and parents before sharing any medical information with any other party.

Specialist health care professionals may provide advice on developing health care plans and support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

Pupils are often best placed to provide information about how their condition affects them and should be fully involved in discussions as much as possible about their medical support needs. This will include encouraging children who are competent managing their own medicines and procedures as appropriate and as reflected in their health care plans.

Parents/Carers

Parents/carers should provide the School Office Manager or Parent Link Worker with the most up to date information about their child's medical needs. Parents should work in partnership with the school and health care professionals to develop and review the health care plan. Parents should carry out any actions identified on their child's health care plan and/or medical requirements e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Parents will ensure they adhere to the following school guidelines:

- Provide complete written and signed instructions for any prescribed medication as without this the school cannot administer them
- Keep their children at home if acutely unwell or infectious for the recommended period of time
- Provide reasonable quantities of medication at a time (for example, a maximum of four weeks supply at any one time)
- Where the pupil travels on school transport with school adults, parents should ensure they have written instructions relating to any medication sent with the pupil, including medication for administration during respite care.
- Renew any medication when supplies are running low and ensure that the medication supplied is within its expiry date.
- Deliver each item of medication to the School Office in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the

following information: Pupil's Name /Name of medication /Dosage /Frequency of administration/Date of dispensing/Expiry Date

Children

Children have a responsibility to:

- treat other pupils with and without a medical condition equally
- tell their parents, teacher or nearest staff member when they are not feeling well
- let a member of staff know if another pupil is feeling unwell
- let any pupil take their medication when they need it, and ensure a member of staff is called
- treat all medication with respect
- know how to gain access to their medication in an emergency
- if mature and old enough, know how to take their own medication and to take it when they need it
- ensure a member of staff is called in an emergency situation.

Local Authority

Local authorities (for Bridgewater, this is West Northants Council) have a duty to commission school nurses and to promote cooperation between relevant partners with the view to improving the wellbeing of children. Local authorities provide advice, support and training to ensure that support specified within healthcare plans is delivered effectively.

Local authorities have a duty to make arrangements when it is clear that a child will be away from school for 15 days or more (whether consecutive or cumulative across the school year) because of health needs.

The Governing Body

The Governing body will ensure that this policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils at school with medical conditions.

The Governing body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. This includes ensuring staff have adequate training.

Training

Whole staff awareness training regarding supporting children's medical needs will be carried out as needed and regularly for those individuals involved in supporting their care. t the beginning of each term.

New members of staff and volunteers will have their awareness raised of any medical needs for the children they are working with. Understanding the school procedures are included as part of their induction package.

The school undertakes annual Epipen training and diabetes training matched to the individual child's health care plan.

Supporting Menstruation

Although the average age for girls to start having periods is 12, about nine per cent will start menstruation whilst in primary school. The earlier onset of puberty compared to previous generations is likely to be linked to better nutrition and the increase in children's weight, as it's likely that hormonal changes are triggered when they reach a certain weight. In January 2020, the Government announced that all schools in England, including primary schools, will be able to provide pupils with free period products. Bridgewater have 'opted in' to this service.

Therefore, when girls start their periods at school sanitary pads are available, should they be needed. Support and advice will be given, as appropriate, and in line with Safeguarding. If a child struggles with period pains, painkillers, such as paracetamol or ibuprofen, can be given in accordance with this policy.

Reasonable Adjustment: We are mindful that girls with additional needs/SEND may need further support to manage this part of their development. Social stories and step-by-step explanations are available and this support will be provided with sensitivity and with due regard to the understanding and cognitive maturity of each girl. Parents/carers will be contacted if there is an issue with their daughter managing menstruation.

Supporting attendance: If there is a concern that a family may not have the resources to provide the sanitary products needed for their daughter/s, they are welcome to contact the school for confidential support, as we believe that no girl should miss out her education because of a period.

Procedures for managing medicines

Medicines should only be administered in school when it would be detrimental to a child's health or attendance not to do so.

All medicines must be prescribed by a Doctor and in the original container. They must be in date, labelled with the child's name, instructions for administration, dosage and storage. The exception being insulin which still must be in date but will generally be available to schools inside an insulin pump or pen, rather than in the original container.

All medicines will be stored safely. Children and staff will know where their medicines are kept and must be able to access them immediately. Healthcare plans, medicines and equipment will accompany children on all trips.

Staff may administer a controlled drug to the child whom it has been prescribed by a Doctor. A record will be kept and instructions will be followed.

Medicines no longer required will be returned to parents to arrange for safe disposal. Sharps boxes are available in the medical room for the safe disposal of needles.

If children refuse to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicine results in an emergency, the school's emergency procedures will be followed.

Procedures for managing unprescribed medicines

In certain circumstances we will administer non-prescribed medications. Examples of the reasons for using these are:

- Allergic reactions
- Headaches, dental or period pain
- Pain caused by sprains or an injury

We keep an epi-pen and inhaler and a bottle of liquid paracetamol for use if needed.

Before administering any medication parents/carers are contacted for their permission and any oral permission is backed up by written consent, obtained by email. Any medicine administered is recorded on Medical Tracker.

The decision to suggest administering a non-prescribed medication is taken on a case-by-case basis.

Staff responsibility

When it comes to medication handling and administration staff are responsible for:

- Only carrying out tasks they have been trained to.
- Keeping their knowledge up to date.
- Never carrying out tasks they are not trained in.
- Being aware of the limitation of any training they have had.
- Following school policies and procedures.
- Reporting any concerns.

Unacceptable practice

Bridgewater Primary School follows Department for Education guidelines which state schools must make explicit the following unacceptable practices:

- Preventing children from accessing their medication
- Assuming every child with the same condition requires the same treatment
- Ignoring views of the child and parent (although this may be challenged)

- Sending children with medical conditions home frequently or preventing them from staying for normal school activities, unless this is specified in the health care plans.
- If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable
- Penalising children for their attendance record if absences are related to their medical condition e.g. hospital appointments
- Preventing children from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition effectively
- Requiring parents to attend school to administer medication or to provide medical support to their child, including with toileting issues. Every effort will be made to support children with toileting and a plan will be written if needed.
- Preventing children from participating in any aspect of school life.

Complaints Procedure

Should parents or pupils 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 a complaint should be made via the school's complaint procedure. Please request a copy of this from the school office.

Healthcare Plans

Healthcare plans ensure that the focus remains on the individual child's needs and consider how their medical condition impacts on their school life. The plans provide clarity of what actions need to be taken, when they need to be carried out by and whose responsibility these actions are.

When the school is notified that a pupil has a medical condition, the SENDCo, Pastoral Leader or Parent Link Worker will meet with parents and healthcare professionals. Decisions will be made as quickly as possible regarding transition arrangements, staff training or support and these actions will be kept under review according to the needs of the individual child. All healthcare plans are reviewed annually.

This Policy will be reviewed annually.

Key People:

- Alison Harvey – Headteacher
- Mary Kay/Simon Mitchell– Chair of Governors
- Julie Breakwell – School Business Manager
- Frances Troop – Deputy Head Teacher
- Nicola Redden - SENDCo
- Parent Link Worker – Inclusion Team
- Victoria Ashby – Learning Mentor and Pastoral Care – Inclusion Team

Read in conjunction with The First Aid Policy

Appendix A: Legislation and guidance

Introduction

Local authorities, schools and governing bodies are responsible for the health and safety of pupils in their care.

Areas of legislation that directly affect a medical conditions policy are described in more detail in *Managing Medicines in Schools and Early Years Settings*. The main pieces of legislation are the Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005. These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999 and the Medicines Act 1968.

This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions policy.

Managing Medicines in Schools and Early Years Settings (2004)

This provides guidance from the DfES (now DCFS) and DH on managing medicines in schools and Early Years settings. The document includes the following chapters:

- developing medicines policies
- roles and responsibilities
- dealing with medicines safely
- drawing up a Healthcare Plan
- relevant forms.

Medical Conditions at School: A Policy Resource Pack is designed to work alongside *Managing Medicines in Schools and Early Years Settings*.

Disability Discrimination Act 1995 (DDA) and the Special Educational Needs and Disability Acts (2001 and 2005)

Many pupils with medical conditions are protected by the DDA and SENDA, even if they don't think of themselves as 'disabled'.

The Commission for Equality and Human Rights (CEHR) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the DDA and gives practical guidance on reasonable adjustments and accessibility. The CEHR offers information about who is protected by the DDA, schools' responsibilities and other specific issues.

Schools' responsibilities include:

- not to treat any pupil less favourably in any school activities without material and sustainable justification
- to make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other pupils. Examples of reasonable adjustments can be found in the DfES resource: Implementing the DDA in Schools and Early Years Settings*
- to promote disability equality in line with the guidance provided by the DCSF and CEHR through the Disability Equality Scheme.

*DfES publications are available through the DCSF.

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work Act 1974

This act places duties on employers for the health and safety of their employees and anyone else on their premises. This covers the head teacher and teachers, non-teaching staff, pupils and visitors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Misuse of Drugs Act 1971

This provides legislation on the storage and administration of controlled medication and drugs

Appendix B: Being notified a child has a medical condition

