

STANLEY PARK JUNIOR SCHOOL



Supporting Pupils at School with Medical Conditions and First Aid Policy

Mission Statement

"We believe that every child and adult matters. Working together as staff, parents and Governors, we strive to create a rich, varied and challenging curriculum that provides inspirational learning opportunities for all children as they become successful learners, confident individuals and responsible citizens with a sense of pride in themselves and their school."

Policy agreed by Governing Body:	March 2017
Next review date:	March 2019

Stanley Park Junior School is an "inclusive school" we make every effort to ensure that all pupils are included in every aspect of school life and can remain healthy and achieve their academic potential. We welcome and support children with medical conditions, both physical and mental. We will consider the needs of children with particular medical conditions on a case-by-case basis. The Children and Families Act 2014 places a duty on governing bodies to ensure that those children with medical conditions are properly supported in school, so that they can play a full and active role in school life, including school trips and physical education. In meeting this duty the governors of Stanley Park Juniors will also have full regard to the statutory guidance issued by the Secretary of State - Supporting pupils at school with medical conditions (December 2015)

We ask parents to provide information regarding medical needs on the admission of their child to the school. Parents are asked to keep the school updated regarding any changes to this information.

When a child is obviously unwell, the best place to be is at home, with an adult. A sick child will be unable to cope with schoolwork and, if the illness is infectious, will put others at risk.

Where return to school with prescribed medicines is advised, and it is not possible to administer these outside the school day then the school will supervise self-administration or may administer medication to a children, upon completion of the necessary forms by the parent. As there is no legal duty that requires school staff to administer medicines, any staff giving medication of any kind would be doing so voluntarily. They will only do so to cooperate with parents in the best interests of children with long-term or complex medical needs, on the basis that neither they, the school, nor the local education authority will be held responsible for any problems, which may result from their so doing.

The administration of medicines will be for pupils who are:-

- suffering from chronic illness or allergy, or
- recovering from a short-term illness and are undergoing or completing a course of treatment using prescribed medicines, or
- in need of a non-prescription medicine for certain known conditions (e.g: constant ear infections/fractures).

In no circumstances will prescribed medication be administered without the prior agreement of the parents or guardian. Parents are responsible for completing the appropriate authorisation forms and for keeping the school updated with any change in their child's medical requirements. No medication will be administered without prior receipt of these forms. (Appendix 2 -Form 2)

Prescription Medicines

Medicines should only be taken to school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school 'day'. We will only accept medicines that have been prescribed by a doctor, dentist, or qualified non medical prescriber (nurse, pharmacist, podiatrist, optometrist and physiotherapist). Medicines should always be provided in the original container, clearly marked with the child's name, as dispensed by a pharmacist and include the prescriber's instructions for administration. They should also be accompanied by a fully completed parental consent form (Appendix 2 - Form 2).

Non-Prescription Medicines

Non-prescription medicines are those which can readily be bought "over the counter". It is recognised that certain pupils may need to take non-prescription medicine for conditions such as dysmenorrhea (period pains). Non-prescription medicines, such as Calpol, should not be sent into

school unless the child has a recognised condition, such as tooth-ache or earache. Non-prescription medicines must be accompanied by a parental consent form (Form 2). Non-prescription medicines will only be allowed into school in their original containers which clearly state what they are and maximum dose and dose frequency.

Staff will never give a non-prescribed medicine to a child unless there is specific written permission from the parents on the appropriate form.

Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed prior to any medicine being administered. Preferably written consent via email should be sought.

NB A child under 16 will never be given aspirin unless prescribed by a doctor.

Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children, e.g. methylphenidate. Controlled drugs likely to be prescribed to children which may need to be administered in schools and other educational settings are, for example, methylphenidate and dexamfetamine for ADHD or possibly morphine/fentanyl for pain relief.

Any trained member of staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions and these guidelines. Controlled drugs need two people to witness the administration.

- A child who has been prescribed a controlled drug may legally have it in their possession to bring to school/setting. Once the controlled drug comes into a school or childcare setting it should be stored securely within a locked cabinet.
- Schools and settings should keep controlled drugs in a locked non-portable container and only named staff should have access. A record should be kept for audit and safety purposes.
- A controlled drug, as with all medicines, should be returned to the parent when no longer required to arrange for safe disposal (by returning the unwanted supply to the local pharmacy). If this is not possible, it should be returned to the dispensing pharmacist (details should be on the label).
- Misuse of a controlled drug, such as passing it to another child for use, is an offence.

Storage of Medicines

Children should know where their own medicines are stored. Medicines will be kept in a cupboard in the Office, accessible only to staff. Medicines requiring refrigeration will be kept in the Office refrigerator and clearly labelled.

Roles and Responsibilities

Governing Body:

- Ensure that there is a clear policy identifying roles and responsibilities of all those involved in supporting pupils with medical conditions.
- Ensure staff have received suitable training and are competent before taking on responsibility to support pupils with medical conditions.
- Monitor that pupils with medical conditions are supported to enable them to participate in all aspects of schools life
- Ensure written records are kept for all medicines administered to children.

Headteacher:

- Responsible for putting this policy into practice and for developing detailed procedure
- Ensure all staff who need to know are aware of child's condition
- Ensure there are sufficient number of trained staff
- Have responsibility for overseeing the development of individual health care plans.
- Ensure that we have the correct insurance
- Ensure that children who have a life threatening condition eg severe asthma, diabetes, allergies, are made known to staff and a photograph and brief description of the child's condition, as appropriate, will be put on the staffroom notice board and in the front office.
- Ensure that all parents and all staff are aware of the policy and procedures for dealing with medical needs by ensuring a copy of this policy is available from the school office on request and is also published on the school website.
- Is responsible for ensuring that she and other relevant members of staff consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.
- Ensure that risk assessments are carried out for school trips and school activities outside the normal timetable
- Monitor individuals and review individual healthcare plans to ensure this policy is being implemented effectively.
- Ensure that individual healthcare plans will define what constitutes an emergency situation and explain what to do

Parents:

- Provide medical information on admission documents prior to your child starting school.
- Should provide the school with sufficient and up-to-date information about their child's medical needs. (In some circumstances the school may require verification from the child's GP or another medical practitioner)
- Be a key partner in developing and reviewing child's individual health care plans.
- Carry out actions detailed on the health care plans e.g. provide medicines and equipment
- Ensure that they or another nominated adult are contactable at all times.
- Provide the school with the child's medicine which is in-date, labelled, provided in the original container as dispensed by a pharmacist and include written instructions for administration, dosage and storage. The parent must hand all medication to the School Office.
- Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held by the school when no longer required and/or at the end of each academic year, as appropriate
- Ensure children do not hold their own medication in school - They must be given to an adult in the school office to store. (The only exception to this would be in case of asthma inhalers, provided that the child is capable of looking after the inhaler, and the parent has signed to give permission for this.

Pupils:

- Provide information about how their condition affects them
- Be involved in discussions about how to best support their needs.

Staff:

- As there is no legal duty that requires school staff to administer medicines, any staff giving medication of any kind would be doing so voluntarily. All volunteers will be indemnified by the Council's Liability Insurance for any claims made against them provided that they have

received training, taken any necessary "Refresher Training," followed the Health Care Plan and used appropriate protective equipment.

- Treat medical information confidentially.
- Keep all medicines in the Office Cupboard and administered by a member of office staff.
- Take required medicines on a school trip and administer in accordance with written instructions given by the parent on the appropriate form.

Concerns or Complaints

Should parents be dissatisfied with the support provided to pupils with medical conditions, they should discuss their concern in the first instance with the Headteacher. If for whatever reason this does not resolve the issue, they may make a complaint as set out in the school's Complaint Policy

Procedure for Administration of Medicines in Schools

Written Instructions

All medicines that are to be administered in school must be accompanied by written instructions from the parent and/or the GP. (Appendix 2 - Form 2) Each time there is a variation in the pattern of dosage, a new form should be completed and it should be accompanied by written confirmation from a medical practitioner to confirm the variation, unless it is a completely new prescription at the end of an existing prescription.

Any member of staff giving medicines to a child will check:

- the child's name;
- prescribed dose
- expiry date
- written instructions provided by the prescriber on the label or container.

If in doubt about any procedure staff will not administer the medicines but check with the parents or a health professional before taking further action. If staff have any other concerns related to administering medicine to a particular child, the issue will be discussed with the parent.

We shall keep written records each time medicines are given. Form 3 (appendix 3) will be used for this purpose. Good records help demonstrate that staff have exercised a duty of care. The school will, in this circumstance, be storing the medicines and all the points on the storage of medicines will be adhered to.

Administration of medicines by a member of staff

Where staff are willing voluntarily to administer medication, the names of the volunteer staff will be kept up to date, and provisions for cover during periods of absence will be made. To avoid the risk of double dosing in schools, Office staff should administer medication and as an extra precaution staff who administer medication must routinely consult the record form before any medication is given.

All staff who participate in administering medication will receive appropriate information and training for specified treatments in accordance with the code of practice. In most instances, this will not involve more than would be expected of a parent or adult who gives medicine to a child. Training will be through the School Health Service, who will liaise as appropriate with those doctors responsible for the management and prescription of treatment, particularly in complex cases.

. Other trained staff who may be required, e.g. First Aider may be summoned as appropriate. The Headteacher will keep a record of all relevant and approved training received by staff.

Each person who administers medication must:

- receive a copy of these guidelines and code of practice;
- read the written instructions/parental consent form for each child prior to supervising or administering medicines, and check the details on the parental consent form against those on the label of the medication;
- confirm the dosage/frequency on each occasion and consult the medicine record form (Appendix 2) to ensure there will be no double dosing;
- be aware of symptoms which may require emergency action, e.g. those listed on an individual treatment plan where one exists;
- know the emergency action plan and ways of summoning help/assistance from the emergency services;
- check that the medication belongs to the named pupil and is within the expiry date;
- record on the medication record form (Appendix 3) all administration of medicines as soon as they are given to each individual;
- understand and take appropriate hygiene precautions to minimise the risk of cross-contamination;
- ensure that all medicines are returned for safe storage;
- ensure that they have received appropriate training/information. Where this training has not been given, the employee must not undertake administration of Medicines and must ensure that the Headteacher is aware of this lack of training/information.

Supervision of children taking their own medicines

Where the Headteacher or staff are willing to be involved voluntarily, the Headteacher is responsible for ensuring that as a minimum safeguard self-administration of medicines that are safely stored is supervised by an adult. This involves ensuring:

- access to the medication at appropriate times. Where schools supervise self administration appropriate measures will be taken to ensure the medicine is appropriately stored to prevent any unsupervised self-administration of the medicine, as per the guidance on the storage;
- the medication belongs to the named pupil and it is within the expiry date; a record is kept in the appropriate form in Appendix 3 noting that the session was supervised but clearly indicating that medication was self-administered by the pupil

Long Term/Complex Medical Conditions

If a child has a long term or complex medical condition, the school nurse will meet with the child's parents/carers to discuss how the school can meet the child's needs and an Individual Health Care Plan will be set up (see Appendix 1) Such conditions may include allergies where the administration of an epi-pen is necessary. This will be done in conjunction with parents and may also include the school nurse and / or the child's medical carers and, in some cases, the child. It will set out in detail the measures needed to support the pupil in school. The school may also cross-reference support, if appropriate through a statement of Special Educational Needs.

Medication will only be administered under the conditions set out above, once appropriate staff have received the necessary training. Parents must provide details, in writing, of the frequency and dosage of the medication.

All individual health care plans will be circulated to Office staff and kept in a special file in the school office and on the

Children who have an allergy will wear a red band in school to help kitchen staff identify who they are and ensure they do not eat anything that would cause them harm.

Asthma Inhalers

Children who suffer from asthma may bring their inhalers to school. Inhalers are stored in the Reception where they can be accessed by pupils.

Record Keeping

The date, name and class of the child, the type and dose of the medicine and the time of administration of the medicine, will be recorded in the Record Book together with the initials of the administrator which is located in the school office. We do not keep records of children administering their inhalers.

We keep records of children who are given first aid in the Office - this is recorded in the medical book in the front office.

School Trips

Children with medical needs will be encouraged to participate in school trips, where safety permits. Risk assessments are carried out for all trips as detailed within the Health and Safety and School Journeys policies. These ensure that staff supervising trips are aware of any medical needs and relevant emergency procedures. Arrangements for taking medication must be known and a member of staff must be responsible for ensuring that all medication that could be required is taken on the trip.

P.E. and Sporting Activities

Most children with medical conditions can participate in the P.E. curriculum and such activity is generally beneficial. Some pupils may need to take precautionary measures before or during exercise and/or be allowed immediate access to their medication if necessary. Teachers supervising such activities should be aware of relevant medical conditions as detailed in the Medical List and emergency procedures.

Residential Visits

Where children are staying away from home on a residential visit organised by the school, parents will be asked to sign a form giving permission for mild medication such as paracetamol to be administered by staff if deemed necessary. Other medicines will require a separate form to be completed (this is given out prior to departure). All medicines are handed to the member of staff responsible for the child during their trip away.

First Aid

In the event of an accident occurring on the school site the following procedures should be adopted. Midday Supervisors are able to deal with minor mishaps in the playground, and have a supply of plasters and wipes with them. For any more serious injury, or for a cut or graze which can't be cleaned outside, the child should be taken by another pupil if not deemed serious or the Midday

Supervisor to Reception for first aid treatment. A record of all First Aid treatment administered in the office should be kept in the medical book in the main office.

In more serious cases, if the child is not able to move without assistance **do not attempt to move them.**

Find out the name and class of the child and send for help from the school office - who will arrange for a member of staff with first aid training to assist. (A list of staff with current First Aid Certificates is held in Reception and displayed about the school).

(The following procedures may be carried out by the Reception staff)

First aid having been rendered if appropriate, the Head or Deputy Head should be consulted if further treatment is thought necessary. It may be considered appropriate to contact the parent and suggest that they collect the child and seek further medical advice regarding the injury. This is particularly appropriate with any injuries affecting the head. Children who have a head injury are given a sticker to wear, stating that they have had a bump to the head, and handed a letter to give to their parents (see appendix 4). Parents are always called when there has been a bump to the head.

In case of serious injury an ambulance should be called.

The parent should be contacted immediately afterwards, advising of the imminent removal to hospital and asking them to come to school or go directly to the hospital. If there is likely to be any delay in the parent getting there, advise them to phone the hospital in order to authorise any treatment thought necessary. An adult from the school should accompany the casualty if the parent is not available and wait at the hospital until the parent arrives. The parental consent form should be taken from the child's personal folder.

Advise the Head, if she hasn't already been involved, and all staff concerned of the action taken.

In all cases of accident and injury the Medical Book in the office should be completed by the member of staff who dealt with the injury. If the injury is serious or the child is taken to hospital (either by the school or by the parent) then a formal record is made in the Accident Form which is stored electronically on the O Drive. A copy of this is sent to the Local Authority Health and Safety Department who decide whether or not the incident should be referred to the Health and Safety Executive.

Safety Management

Where the school agrees to administer medicines, it has a duty to ensure that the risks to the health of others are properly controlled. Where the school has agreed to store medication the supplied container should be clearly marked with the name of the pupil, the dose of the drug and the frequency of administration.

Medicines other than Asthma inhalers should be securely stored in Reception and only accessed by a responsible person. Asthma inhalers should be accessible to children.

A written record of administration of all medication, other than asthma inhalers, must be kept in the school office.

All staff should be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other bodily fluids and disposing of dressings or equipment.

All staff should be aware of how to call the Emergency Services and should know which staff are First Aid trained in the event of need.

TRAINING

- Awareness Training: Every year in September all staff will be made aware of all the children in the school who have an Individual Healthcare Plan and how to best support them,
- All staff to receive training on Asthma and how to administer an Epi-Pen annually.
- Depending on the nature of the medical conditions of pupils in school each year, relevant training will be provided e.g. epilepsy, diabetes. To ensure that staff are well equipped to support the pupils at SPJS. The school has a group of Administrative and Support staff who have completed First Aid at work Training and have certificates which have to be renewed every three years. This list is clearly displayed in Reception and the Staff Room.
- Where the school has accepted responsibility for the administration of invasive or intimate medication or assistance, training will be provided, to staff volunteers, by the School Health Service. Ideally, this training will take place before the child starts school or as soon as possible thereafter. Volunteers who undergo training will receive a certificate acknowledging their competence to undertake such medical assistance.
- Administration of medication or medical assistance will not be given until such training is satisfactorily completed.

Equal Opportunities & Inclusion

This policy should be implemented in line with the school's statement on SEN and Inclusion policy. It also complies with the SEND Code of practice 20165 and the Equality Act 2010.

APPENDIX 1 - Individual Health Care Plan

This will be provided by the School Nurse

APPENDIX 2 - FORM 2 - PARENTAL REQUEST FOR SCHOOL TO ADMINISTER MEDICATION

AT SPJS we will not give your child medicine unless you complete and sign this form. We have a policy to administer medicine, and staff volunteer to do this. For full details please read our policy on supporting pupils at school with medical conditions policy which can be found on our website.

Note: Medicines must be in the original container as dispensed by the pharmacy. I know I must deliver the medicine personally to a member of SPJS office staff

Child's Name		Class:
Name/Type of Medicine		
Medicine Prescribed by	Dr	
Date dispensed		
Expiry date		
Medical Condition or illness		
Dosage and method		
Time to be taken		
Any other instructions		
Are there any side effects we should know of?		
Self-administration	Yes or No (please circle)	
Name of Parent/Guardian:		
Relationship to Pupil:		
Daytime telephone number:		

- The above information is, to be the best of my knowledge, accurate at the time of writing and I give consent to School administering medicine in accordance with the School policy.
- I will inform the School immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.
- I accept that this is a service that the School is not obliged to undertake. I understand that I must notify the School of any changes in writing. Whereas I accept all reasonable care will be taken, I absolve the Staff and Governors at SPJS and Sutton Local authority of responsibility of any maladministration.

Parent's Signature _____ Date _____

FOR OFFICE USE ONLY

I acknowledge receipt of the above medicine.

Office Staff Signature _____ Date _____

			Yes	No	
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APPENDIX 4 - NOTOFICATION OF BUMPED HEAD

NOTIFICATION OF HEAD INJURY

Dear Parent/Guardian

Date:

I am sorry to have to advise you that _____ received a bump on the head whilst today at school.

Description of the accident:

A member of staff trained in first aid, assessed your child. Although no problems were seen at the time, we request that you observe your child for the next 48hours for any of the following:

- Abnormal drowsiness
- Disorientation
- Fever
- Repeated vomiting
- Severe headache
- Difficulty in walking or seeing
- Fits or fainting
- Off colour for more than 24 hours.

Contact your family doctor or the nearest accident and emergency department if you notice any of the above symptoms.

Yours sincerely
Administration Staff