



Warton Nethersole's CE Primary School

Phone: 01827 894182 Email: admin@warton.heartwoodmat.co.uk

Date Ratified by Govs: 12.05.2021

Date for Revision: May 2023

Supporting Pupils with Medical Conditions (including Administration of Medication)

Vision and Values



All of our policies are written and implemented with our Christian vision and values at the heart of all decisions made. Our vision and values have been created by the staff, governors and children with the aim of supporting and developing everyone on their personal and collective journeys at Warton Nethersole's CofE Primary School. We place high importance on our vision and our values being reflected clearly in every policy and more importantly in the application of each policy and procedure in daily school life.

Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

The named person with responsibility for implementing this policy is Susan Friend (Head Teacher)

Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school

Head Teacher Signature:

LAB Chair Signature:

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with medical conditions. It is also based on the Department for Education's statutory guidance on supporting pupils with medical conditions at school. This policy also complies with our funding agreement and articles of association.

Roles and responsibilities

The governing board (LAB)

The governing board (Local Academy Board) has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The Head Teacher

The Head Teacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Office Staff Responsibilities

-To contact prospective parents for children entering into nursery or reception to ensure that medical information in order to set up a IHP for their children before the beginning of term

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- In the case of children arriving during the year parents will be asked to fill in a IHP, where relevant, before their child starts at the school.
- To update files (digitally and printed) from information parents provide during the year
- To provide supply staff with Health and Safety advice and signpost to medical information about children.
- To update a list of children with Care Plans on the staff noticeboard
- To inform staff of any changes to Care Plans immediately by giving a notice via CPOMs and informing class teachers and medicine administrators.
- To ensure children with medication stored in First Aid cupboard know where it is located.
- When any new medication comes into the office, they should ensure the correct forms are completed by the parent and then inform class teachers and medicine administrators
- Receive and return medication to parents, ensuring parents sign for the return of medication.
- In the event of a Fire drill, office staff should collect the Critical Medicines bag & Critical Incident bag take them outside. These contain medications such as epi-pens.
- If it is safe to do so, in the event of a fire drill any locked or refrigerated medication should also be collected and taken outside to be available to pupils.

Parents

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the writing of, development and review of their child's IHP
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times
- Where a child has a diagnosed condition the parent/carer must fill out a health care plan.
- This gives the following information:
 - Details of the child's condition including triggers, signs, symptoms and treatments
 - The pupils needs including medication (dose, side effects and storage) and other treatments including time, facilities, equipment, access to food and drink and environmental issues
 - The level of support needed and where the child can self-manage the medication
 - Special requirements e.g. dietary needs, pre-activity precautions -Any side effects of the medicines
 - What constitutes an emergency
 - What action to take in an emergency
 - What not to do in an emergency
 - Who to contact in an emergency
 - The school must be informed in writing if there is any change to the prescription or support required
 - The plan will be reviewed at least once a year by the parent

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Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs. Pupils, wherever possible, will have access to their medications for self-medication quickly and easily. Red bags in every class hold essential medications such as inhalers.

School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP. Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Procedures for managing prescription medicines which need to be taken during the school or setting 'day'

- a) Only prescribed medications will be administered on site. These must all be provided with their original label, stated dosage, original packaging and leaflet.
- b) No child under 16 should be given prescription or non-prescription medicines without their parent's written consent and a completed IHP
- c) A child under 16 should never be given aspirin-containing medicine unless prescribed by a doctor
- d) Any member of staff giving medicines to a child should check:
 - Name of child
 - Name of medicine
 - Dose
 - Method of administration
 - Time/frequency of administration
 - Any side effects
 - Expiry date

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- e) If a child refuses to take medication they should not be forced to do so. Parents should be informed of the refusal on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures should be followed.
- f) Medicines that are no longer required or those which have expired are returned to the parent/carer by office staff who request a signature for each medicine returned. g) If tablets have to be split by the school, then leftover halves will be given back to the parents and not given to the child, although ideally the parent will provide half tablets when possible.
- h) There are no circumstances in which children may be administered any non-prescription medicines in the usual school day.

Procedures for managing prescription medicines which need to be taken outside of the school setting e.g. on a school trip

- a) Teachers, in consultation with the Headteacher, will seek to find reasonable adjustments that might need to be made in order to enable a child to participate fully and safely on trips.
- b) Staff supervising excursions need to always be aware of any medical needs and relevant emergency procedures. Copies of any health care plans are taken on visits in the event of the information being needed in an emergency. (This information is recorded on Class visits checklist)
- c) A member of staff trained in administering medication is on every school trip where this may be required (with the exception of self-administering asthmatics and where a teacher has epi-pen training.)

Procedures for managing prescription medicines which need to be taken outside of the school 'day' e.g. while on school camp

- a) No child under 16 should be given prescription or non-prescription medicines without their parent's written consent. However, in case of emergency, an anti-histamine e.g. Piriton Junior and pain relief e.g. Calpol will be taken to camp by staff and administered under verbal consent from a parent. Two members of staff should receive the verbal consent in order for it to be administered.
- b) There may be a very small number of cases where a prescription is not necessary and not a good use of a doctor's time. This might include for example, travel sickness tablets. In these exceptional cases, staff may administer the non-prescription medication upon completion of the appropriate paperwork (see appendices). Staff must ensure that the paperwork and the medication is suitable for the age of the child, in date and administered in line with the guidance and dosage on the packaging.

Policy on children carrying and taking their medication themselves

Health professionals may assess, with parents and children, that it is an appropriate time for a child to make a transition towards self-managing their medication. In such cases, a parent will need to update and re-sign their child's care plan. School leaders will need to ensure that this does not impose a risk to the child or others in school.

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Record keeping and communication

a) IHPS (Appendix 2) are kept in Administration of Medication file for any child with a long or short term medical need.

b) After any medicine is administered to any child a record is kept (see Appendix 4) on the form in the AM file and is signed by two members of staff. When a child is able to self-administer (e.g. cream), a self-administration sheet is signed by the member of staff overseeing the procedure. This is attached to the pupil's care plan. This procedure is normally carried out at the office.

Asthma inhalers are stored in classrooms and individual administration of inhaler forms are in red bags to be checked and signed by the member of staff overseeing the administration.

Storage of children's medicines

- Drugs are kept in a locked non-portable container and all staff have access to this in case of emergency. Epi-Pens (if required) are kept in the office for immediate access in case of emergency.
- Medicines are stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which dispensed.
- Children know where their own medicines are stored.
- All emergency medicines, such as asthma inhalers, are readily available to children via the school office.
- A few medicines may need to be refrigerated. They are kept in a refrigerator in an airtight container and clearly labelled.

Storage of staff medicines

Any staff requiring medicines should keep them in a locked cupboard in the classroom or staff cloakroom and must be out of the reach of children at all times. The office should be informed of the time it is brought in, where it is kept and the time when medication is taken home.

If medication is required over a longer period, a care plan needs to be filled in and discussed with the Headteacher. Together they will agree who else, if required, needs to access to this information.

Unacceptable Practice

Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
 - assume that every child with the same condition requires the same treatment;
 - ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
 - send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
 - if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
 - penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;

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- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues on a long term basis. No parent should have to give up working because the school is failing to support their child's medical needs
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

Emergency procedures

- Wherever possible, parents should transport children to hospital.
- When an ambulance is called, a member of staff will always accompany a child taken to hospital by ambulance, and will stay until the parent arrives.
- Children must not be taken to hospital in a staff members car. In an emergency an ambulance must be called.

School's policy on assisting children with long-term or complex needs

The school will do everything possible to work with children, parents and Health professionals to support children with long-term or complex needs to enable them to have access to a full range of learning opportunities.

Liability and Indemnity

The school will seek advice regarding any changes to their insurance in the case of individual pupils who may require specifically trained staff to administer medication. In such cases a risk assessment will be carried out involving all relevant staff, parents and the child (if appropriate).

Complaints

Any parental complaint with regards to the implementing of this policy will be addressed through the procedures set out in the School Complaints Policy.

Policy Framework

This policy to be read in conjunction with First Aid Policy/ Child Protection Policy
If any issues are brought to the attention of an adult in the context of this policy that raises concerns for a child's safety or well-being these should be recorded and reported to the headteacher immediately.

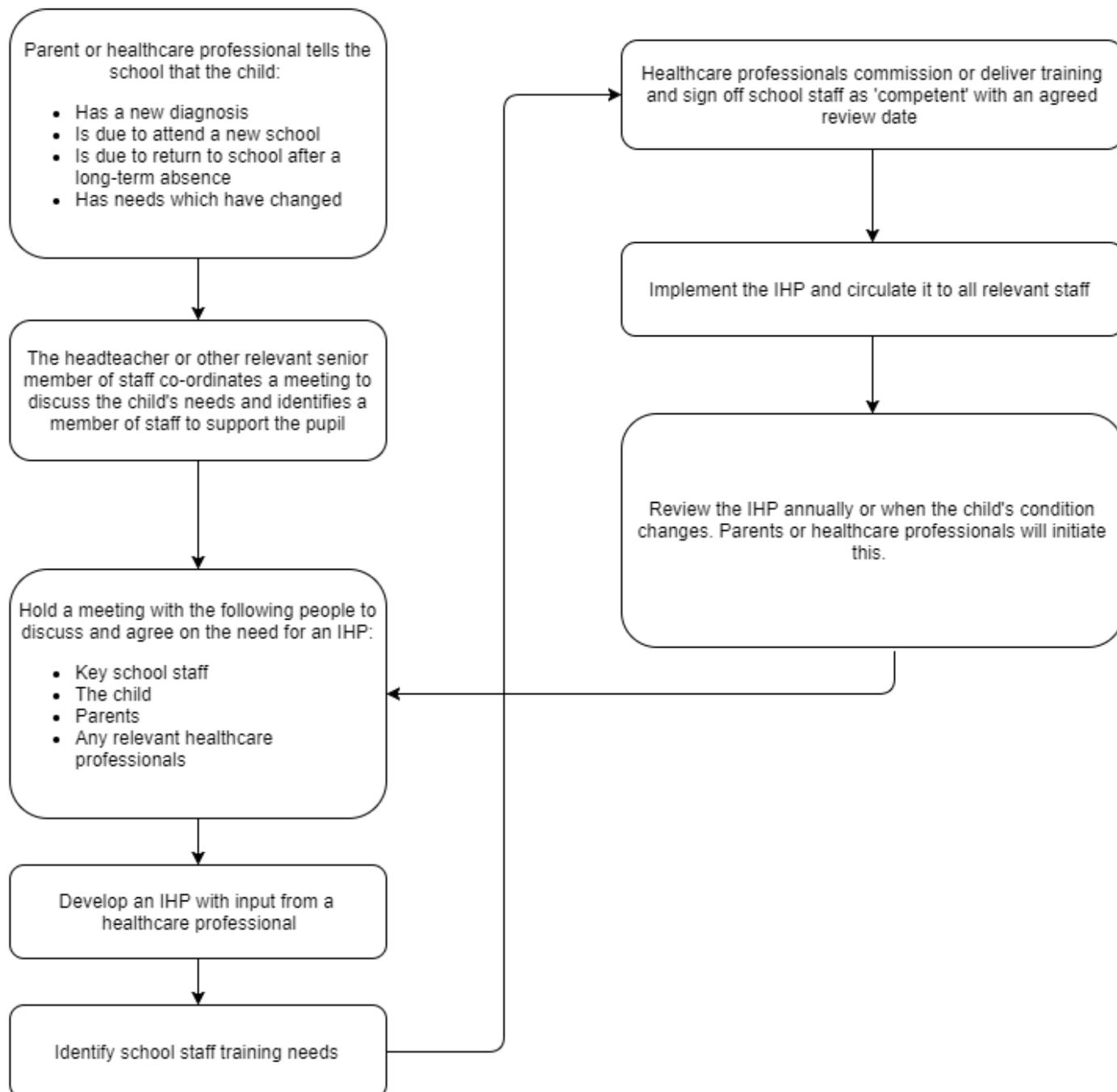
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Appendix 1 – The process for an IHP





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Appendix 2 – IHP

WN - Individual Health Care Plan

About your Child	
Child's name	
Class	Year
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Medical Contacts	
Clinic/Hospital Contact	
Clinic/Hospital Contact Phone no.	
G.P. Name	
G.P. Phone no.	

Medical Needs

Description of need/condition:

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Symptoms / Triggers/ Signs:	
Treatments:	
Any other information e.g. facilities, equipment or devices, environmental issues:	
Name of Medication:	
Dose Required:	
When to be taken:	
Type of Medication e.g. cream, pill, syrup:	
Administration Details e.g. to be administered by staff, self-administered, supervision required:	
Any other information e.g. side effects:	
Please note that medication will only be administered alongside an administration of medication consent form.	
Daily care requirements e.g. access to additional facilities, dietary requirements, continence issues etc.	
Specific support for the pupil's educational, social and emotional needs	
Arrangements for school visits/trips etc	
Other information- Is there anything additional that we need to know?	

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Emergency Needs	
Describe what constitutes an emergency, and the action to take if this occurs.	What is an emergency?
	What action should be taken?
Please outline anything that SHOULD NOT be done in an emergency.	
Who should we contact in an emergency situation? Please give name, address and all contact telephone numbers.	
Is there a contingency contact? Please give name, address and all contact telephone numbers.	
At what point should they be contacted?	
For WN Staff to complete:	
Who is responsible for providing support in school?	
Who is responsible in an emergency (<i>state if different for off-site activities</i>)?	
Plan developed with...	
Staff training needed/undertaken – who, what, when?	
Form copied for classroom and added onto care plan summary?	

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Appendix 3- Administration of Medication Consent Form

WN will not give your child any medication unless you complete and sign this form. Only prescribed medication presented with its original prescription label with the child's name on it, stated dosage, original packaging and leaflet will be administered. (The only exception to this is insulin, which must be in date, but is generally provided inside an insulin pen or pump rather than its original container.)

Date of Consent		Date for Review	
Name of child		Date of Birth	
Class		Year	
Medicine			
Name/type of medicine <i>(as described on the container)</i>			
Expiry Date			
Dosage and method			
Timing			
Special precautions/other instructions			
Are there any side effects that the school/setting needs to know about?			
Self-administration- yes or no. Please provide any additional information if the pupil is to self-administer.			
Procedures to be taken in an emergency			
Contact Details			
Name			
Daytime telephone no.			
Relationship to child			
Address			
I understand that I must deliver the medicine personally to the school office and have read the school's Supporting pupils with Medical Conditions / Administration of Medication Policy in order to understand my responsibilities. The information above is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with their 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.			
Name			
Signed			

Please ensure that the record of Medicine Administered is signed by staff and parent

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Appendix 4- Record of Medication

Record of Medicine Administered to an individual child

Name of child	
Date medicine provided by parent	
Class	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	
Name and Signature of Staff Member	
Name and Signature of Parent	

Date		Date	
Time Medication Given		Time Medication Given	
Dose Given		Dose Given	
Name of Staff Member		Name of Staff Member	
Staff Signature		Staff Signature	
Second Staff Member		Second Staff Member	
Second Staff Signature		Second Staff Signature	

Head Teacher Signature:

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Date		Date	
Time Medication Given		Time Medication Given	
Dose Given		Dose Given	
Name of Staff Member		Name of Staff Member	
Staff Signature		Staff Signature	
Second Staff Member		Second Staff Member	
Second Staff Signature		Second Staff Signature	

Date		Date	
Time Medication Given		Time Medication Given	
Dose Given		Dose Given	
Name of Staff Member		Name of Staff Member	
Staff Signature		Staff Signature	
Second Staff Member		Second Staff Member	
Second Staff Signature		Second Staff Signature	

Date		Date	
Time Medication Given		Time Medication Given	
Dose Given		Dose Given	
Name of Staff Member		Name of Staff Member	
Staff Signature		Staff Signature	
Second Staff Member		Second Staff Member	
Second Staff Signature		Second Staff Signature	

Head Teacher Signature:  LAB Chair Signature:  Date: 15.05.2021



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Appendix 5- Staff Training Record

Administration of Medication

Name of Staff Member	
Role in School	
Type of Training Received	
Date of Training Completed	
Training Provided by (Company and Name of Trainer)	

I confirm that I have received the training detailed above and am competent to carry out any necessary administration of medication at WN.

Staff Signature _____

Date _____

Review Date _____

Name of Staff Member	
Role in School	
Type of Training Received	
Date of Training Completed	
Training Provided by (Company and Name of Trainer)	

I confirm that I have received the training detailed above and am competent to carry out any necessary administration of medication at WN.

Staff Signature _____

Date _____

Review Date _____

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Appendix 6- Contacting Emergency Services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. your telephone number WN - (01827) 894182
2. your name
3. your location **Warton Nethersole's C of E Primary School**
Maypole Road
Warton
Tamworth
Staffordshire
B79 0HP
4. state what the postcode is – **B79 0HP**
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient

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Appendix 7 - Model Letter inviting Parents to contribute to health care plans

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Head Teacher Signature:

LAB Chair Signature:

Date: 15.05.2021



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Appendix 8 -Administration of Inhaler

Name of Child	Date	Time	Inhaler checked	Number of Puffs	Overseen by Staff Member

Signed by Head Teacher:

Signed by Chair:

Date:

