



Medicines and Medical Conditions Policy

SEPTEMBER 2023

CONCORDIA MULTI ACADEMY TRUST

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1. Document Control

Amendment History

Version No.	Date	Comments
1.0	September 23	Trust policy

Review Dates

Next Review Date
September 2024

Author(s)

Name	Role
Jenni Ogden	Headteacher

Reviewer(s)

Name	Role
Moira Atkins	Trust Education Officer

Approver(s)

Name	Role
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2. Legislation and statutory responsibility

In compiling this policy, guidance has been taken from Cheshire West and Cheshire Council 'The Administration of Medicines in Educational Establishments' and advice from NHS West Cheshire Clinical Commissioning Group.

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards/Local Academy Boards to make arrangements for supporting pupils at their school with medical conditions. It is also based on the Department for Education's statutory guidance: Supporting pupils at school with medical conditions.

The purpose of this policy is to give advice to school staff in relation to the administration of medicines in school both as a matter of routine and in an emergency.

All schools within Concordia Multi Academy Trust are inclusive schools and would seek to enable all pupils to be in school wherever possible.

Our schools are 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.

Schools within our Trust 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/carers and any relevant healthcare professionals will be consulted.

The administration of medication in schools by teachers and teaching assistants is voluntary.

3. Aims

This policy aims to ensure that:

- ◁ Pupils, staff and parents understand how our schools 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 local academy board will implement this policy by:

- ◁ Making sure sufficient staff are suitably trained and have procedures in place for becoming aware of pupil's conditions
- ◁ Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- ◁ Developing and monitoring individual healthcare plans (IHPs) ensuring GDPR compliance with the SENCO and other senior leaders

4. Roles and responsibilities

The Head teacher and SENCO 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
- ◁ Take overall responsibility for the development of IHPs and risk assessments
- ◁ 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 will:

- ◁ 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

Parents will:

- ◁ Provide the school with sufficient and up-to-date information about their child's medical needs
- ◁ Be involved in the development and review of their child's IHP and may be involved in its drafting
- ◁ Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment

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.

*There is no legal duty which requires teaching staff to administer medication; this is a voluntary role. Staff who assist with any form of medication **in accordance with the procedures detailed within the LA guidance are explicitly reassured that they will be acting within the scope of their employment and that they will be indemnified.***

Exception: - Indemnity will not be given in causes of fraud, dishonesty or criminal offence.

5. Procedures for the Administration of Medication in schools

NHS West Cheshire Clinical Commissioning Group has agreed a policy in supporting self-care for minor or self-limiting conditions. The policy states that for these conditions, patients (or their parents) are encouraged to self-care and are expected to buy over-the-counter (OTC) medicines when appropriate. Therefore, GPs will not routinely prescribe these medicines.

Receiving medication in school

To help determine whether a child is well enough to attend school parents can be advised to review the NHS Choices website.

As a school, we are now permitted to administer over-the-counter (OTC) medicines when appropriate. Written permission from parents/carers MUST be obtained before administration. Examples of medicines that do not require a prescription and which parents can give permission to administer include:

- Paracetamol, ibuprofen or antihistamines - provided they are supplied in packaging with clear dosage instructions that are age appropriate for the child. These should be provided to school in a sealed container for first usage
- Moisturising / soothing preparations for minor skin conditions

All medication must be in the original container and show dosage/expiry date to be administered by a qualified first aider within school. If two prescribed medications are required, these should be in separate, clearly and appropriately labelled containers as above.

Arrangements can also be made for parents/carers to come into school to administer medication if required.

On arrival at school, all medication is to be handed to the school office and documentation completed by the parent/guardian, unless there is prior agreement with school and pupil for the pupil to carry medication (e.g. asthma inhalers) and details entered in the medication record.

Storage of Medication in school

Medication must be stored in the dedicated storage in the school office. Asthma medication is stored securely in classroom storerooms. If medication needs to be refrigerated it is kept within the office in a fridge. If the office is unattended, it must be locked to ensure medication is secure.

Once removed from the cabinet, medication should be administered immediately and never left unattended. A record of who, how much, date and time is to be recorded and **2** staff are required to sign to confirm the accuracy of the above.

6. Individual healthcare plans

The head teacher, along with the SENCO, has overall responsibility for the development of IHPs for pupils with medical conditions. Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- ◁ What needs to be done
- ◁ When
- ◁ By whom

Not all pupils with a medical condition will require an IHCP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the head teacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The LAB and Head teacher will consider the following when deciding what information to record on IHCPs:

- ◁ The medical condition: triggers, signs, symptoms and treatments
- ◁ The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- ◁ Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- ◁ The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- ◁ Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- ◁ Who in the school needs to be aware of the pupil's condition and the support required
- ◁ Arrangements for written permission from parents and the Head teacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours

- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/carer/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

7. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so. The training will be identified during the development or review of IHPs.

Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed. The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Head teacher. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

8. Documentation

Samples of documentation are included in the appendices. Verbal/telephone messages to administer medication can only be given if the parent/carer can be verified by a member of staff and this is agreed with a member of SLT. This will only be in unique situations where it would be detrimental to the pupil for them not to receive this medication, despite us not holding written permission.

Each pupil receiving medication will have the following documentation:

- Written request for school to administer medication
- Written confirmation of administration from a health practitioner – clearly labelled on medicines – for prescription medicines
- Parental/guardian written consent for medicine to be given on school trips

Administration of medication

Staff who have undertaken first aid training will administer medication whenever possible. There will be a named first aider who will be the primary person responsible for administering medication whenever possible in each class or key stage. There should be a named lead first aid qualified person who oversees the administration of medicines within the school generally.

Parents/carers must complete a written request form for a child to self-administer medication (Examples would include Insulin and or asthma medication). This would only be allowed if a child has been trained and is competent to administer her/his own medication. Any medicines taken will be recorded on the school procedures as documented above.

Emergency Medication - Inhalers

Emergency medication is subject to the same request and recording systems as non-emergency medication, with additionally signed consent and asthma plans. This type of medication will be readily available. The asthma plan must be checked annually by parents.

It is the parents'/guardians' responsibility to notify school of any change in medication or administration. Procedures in the Care Plan (sample in appendix) should identify:

- Where the medication is stored
- Who should collect it in an emergency
- Who should stay with the child
- Who will phone for an ambulance/medical support
- Contact arrangements for parents/carers
- Supervision of other pupils
- Support for pupils witnessing the event
- Recording systems

Where children are unwell and not fit to be in school, and where they are still suffering from an infection which may be passed to others, children should remain at home to be cared for and looked after. Children should not attend school within 48 hours of any incident of vomiting or diarrhoea. Further information is included within the Health and Safety policy.

Epilepsy, Anaphylaxis, Asthma and Diabetes

If a child joins the school and is diagnosed with one of the above conditions, the class teacher and a senior member of staff will arrange a meeting with the pupil and the parents to establish how the pupil's medical condition may affect their school life. This will include the implications for learning, playing and social development and out of school activities. The school will also discuss any special arrangements the pupil may require including extra support for learning and exams. With the pupil's and parents' permission, all members of school staff will be informed so that they can be vigilant at all times.

The school nurse or a specialist nurse may also be invited to attend the meeting or to attend school at another time to talk through any concerns the family or school may have and to clarify procedures and record keeping.

First Aid and Emergency Procedures

First aid for the pupil's seizure type will be included on their IHCP and all staff (including support staff) will receive basic training on what to do in the event of a seizure. The IHCP will be stored on the back of the store room door in each classroom, and the cupboard door for Wise Owls, to ensure that all staff have easy access to it and know what to do. There will also be displays around school with information on processes including staying calm, protecting from injury, not moving the child etc.

If emergency services are required, an ambulance will be requested immediately and parents will be notified straight away by a member of staff. A member of staff will accompany the child to the hospital and remain with them until the parent arrives.

Dietary Needs

To ensure that children who have severe allergies to certain foods are included in activities and events within the school curriculum our schools follow set procedures determined by the catering team. This has been updated to reflect Natasha' law in 2022:

- ☺ Parents are expected to inform school upon entry if their child has severe allergies. They will complete the necessary sections on the school admissions form. **This is then recorded on Arbor: a copy of all the pupils with medical and dietary needs is distributed to class teachers, Wise Owls staff and the school kitchen**
- ☺ If the parents wish for their child to have a school lunch they will be required by the school catering service to provide information detailing the extent of the allergy
- ☺ If any activity in school involves baking or the tasting of food, a letter is sent home to parents alerting them of the activity. The parents are encouraged to inform school if their

child cannot participate. Teachers will always check the medical needs list which holds all the information on children with medical and dietary needs

9. Unacceptable Practice:

School staff should use their discretion and judge each case individually with reference to the pupil's IHCP, but it is generally not acceptable to:

Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary

Assume that every pupil with the same condition requires the same treatment

Ignore the views of the pupil or their parents

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 IHPs

Penalise pupils 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

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. No parent should have to give up working because the school is failing to support their child's medical needs

Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child

Administer, or ask pupils to administer, medicine in school toilets