

# REDBOURN JUNIOR SCHOOL MEDICAL CONDITIONS POLICY and MANAGING MEDICINES IN SCHOOL

	TABLE OF CONTENTS	
Section	Title	Page
1	Review Record	1
2	Purpose of Policy	2
3	Arrangements for Monitoring and Review	2
4	Policy	
	Part 1: Pupils with Medical Conditions	3
	Part 2: Managing Medicines in School	6
Appendix 1	Pupil Health Care Plan	9
Appendix 2	Parental agreement for school to administer prescribed medicine/Record of medicine administered	11
Appendix 3	Parental agreement for another adult / non-staff member to administer medication to their child	13

### **REVIEW RECORD**

Name of Policy	Date of Review (term and year)	
Medical Conditions and Managing Medicines in School		
Staff Responsible for Review (e.g. Headteacher, Subject Leader)	Date discussed at Staff Meeting	
Headteacher/Inclusion Manager		
Date adoption recorded in governing body minutes	Date of Next Scheduled Review	
	2015/16	

#### MASTER COPY OF POLICY KEPT IN POLICIES FOLDER IN HEADTEACHER'S OFFICE

RECORD OF AMENDMENTS					
Page/Clause Amended	Brief details of changes since last review				
	Incorporation of Medical Conditions Policy (principally Part 1)				
Page 2	New section on Communication				
Pages 3 and 5	Medicines to be returned at end of academic year (previously end of term). NB Controlled drugs to be returned termly				

#### **PURPOSE**

Redbourn Junior School is an inclusive community and understands that it has a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enroll in the future.

This school aims to include all pupils with medical conditions in all school activities and ensure that parents of pupils with medical conditions feel secure in the care their children receive at this school.

The governors of Redbourn Junior School desire to enable regular attendance by all pupils and, to this end, aim to support any child who has chronic medical needs or requires on-going medication during the school day. At some time during their time in school, other children will need to take medicines during the day for a short period only, perhaps to finish a course of antibiotics; to allow children to do this will minimise the time that they need to be absent.

This policy sets out the framework for inclusion of children with medical conditions and also the formal systems and procedures in respect of administering medicines at Redbourn Junior School, how the school will keep medicines safe and how it will protect other pupils from the misuse of potentially harmful substances.

#### Links with other policies

This policy links with the school Accessibility Plan and the governing body's policies on Health and Safety, Offsite Visits, Child Protection, Drug Education and Drug Incident policies and Equality. This policy has due regard to the six elements outlined in the Disability Discrimination Act.

#### Communication

Parents are informed and regularly reminded about the medical conditions policy by: including the policy statement in the school's prospectus and signposting access to the policy; when their child is enrolled as a new pupil; in the school newsletter periodically and via the school's website.

All staff at this school are aware of the most common serious medical conditions at this school. Training is refreshed for all staff at least once a year. Action for staff to take in an emergency for the common serious conditions at this school is displayed in the medical rooms and on the Health and Safety noticeboard.

Section 3

#### ARRANGEMENTS FOR MONITORING AND REVIEW

This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

The school reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to this school's policy and procedures are implemented after each review.

The governor with responsibility for Health and Safety is responsible for monitoring the implementation of this policy.

This policy shall be reviewed at least once every four years in accordance with the Governing Body Year Planner.

Next scheduled date for review: 2015/16

#### PART 1: MEDICAL CONDITIONS POLICY

This policy has been drawn up with reference to the Medical Conditions at School Resource Pack.

This school ensures that the whole school environment is inclusive and favorable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities

#### **Physical environment**

Redbourn Junior School is committed to providing a physical environment that is accessible to pupils with medical conditions. The commitment to an accessible physical environment includes out-of-school visits. The school recognises that this sometimes means changing activities or locations.

#### Social interactions

This school ensures the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

This school ensures the needs of pupils with medical conditions are adequately considered to ensure they have full access to extended school activities such as school discos, school productions, school clubs and residential visits.

All staff at this school are aware of the potential social problems that pupils with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.

Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of medical conditions amongst pupils and to help create a positive social environment.

#### **Exercise and physical activity**

Redbourn Junior School understands the importance of all pupils taking part in sports, games and activities and ensures PE teaching makes appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.

All teachers are aware of the potential triggers for pupils' medical conditions when exercising and how to minimize these triggers.

Pupils with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

#### **Education and learning**

Redbourn Junior School ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

This school ensures that lessons about common medical conditions are incorporated into PSHE lessons and other parts of the curriculum.

Year 6 pupils receive emergency 'Save a Life' training so they know what to do in the event of a medical emergency.

#### **Residential visits**

Risk assessments are carried out by this school prior to any out-of-school visit and medical conditions are considered during this process. Factors this school considers include: how all pupils will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

#### Section 4.1

This school understands that there may be additional medication, equipment or other factors to consider when planning residential visits. This school considers additional medication and facilities that are normally available at school.

#### Triggers, training and risk assessment

Staff are aware of the common triggers that can make medical conditions worse or can bring on an emergency.

The school is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.

Written information about how to avoid common triggers for medical conditions is displayed on the Health and Safety notice board

All staff are given training on anaphylaxis and administration of Epipen/Jext Pen. Staff with responsibility for children with particular medical conditions receive appropriate training.

This school uses Healthcare Plans to identify the needs of children with medical conditions.

Full health and safety risk assessments are carried out on all out-of-school activities before they are approved, including work experience placements and residential visits, taking into account the needs of pupils with medical conditions.

#### PART 2: POLICY ON MANAGING MEDICINES IN SCHOOL

#### Scope

This policy applies to the administration both of prescribed medicines, including controlled drugs, and also of non-prescription medicines during the school day or at other times when children are in school care, for example on School Journey.

This policy has been drawn up with reference to the joint DfES/DoH document *Managing Medicines in Schools and Early Years Settings* (1448-2005DCL-EN) and more detailed guidance can be found in that publication which is kept in the Headteacher's office.

#### **Policy**

The policy of the governing body of Redbourn Junior School is that parents should be responsible for the administration of medicines to their children wherever possible. This document sets out the circumstances in which essential medication may be given within school. Please note that there is no legal duty that requires schools and staff to administer medication; this is a voluntary role. The 'duty of care' extends to administering medication only in exceptional circumstances.

#### **Essential Medication**

For children with chronic conditions requiring the administration of medication and for children for whom emergency medicines are held, a Health Care Plan must be completed (see Appendix 1) and signed by the parent and the Headteacher on behalf of Redbourn Junior School. Care Plans should be reviewed annually. Where specific training is required on the administration of medication (e.g. adrenaline via Epipen or Jext pen, rectal valium etc.), this will be provided. Staff should not administer such medicines until they have been trained to do so.

In exceptional circumstances, where it would be detrimental to a child's health if prescribed medicine were not administered during the school day (eg asthma inhalers, insulin) the parent/guardian is required to complete a Parental Agreement Form (see Appendix 2). Verbal instructions shall not be accepted. The Headteacher (or Deputy in his absence) must also sign this agreement to administer medicine before any medicine can be accepted by the school.

However, it should be noted that, where possible, regular medication be prescribed in dose frequencies which enable it to be taken outside of school hours. E.g. medicines that need to be taken three times a day can be managed at home. Parents should be encouraged to ask the prescriber about this in order that medication can be given within the home as far as is reasonably possible. If a dose or application of prescribed medication is required during the school day, parents will be asked to come to the School Office at the appropriate time to administer the medicine to their child in the first instance and then take it away with them. If the parents are unable to come to the school, they may authorise another adult to come to school on their behalf to administer medication, and will need to give their written consent to the school office in order for any such medication to be given to their child (See Appendix 3). No child in the school will be given any medicines without their parents' written consent.

The school shall only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber, pharmacist prescriber, or homeopath. Medicines should always be provided in the original container as dispensed by a pharmacist/Homeopath and include the prescriber's instructions for administration. The school shall not accept medicines that have been taken out of the container in which originally dispensed nor make changes to dosages on parental instructions.

The following guidelines will apply:

- 1. Medicines shall always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.
- 2. Schools will not accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.
- 3. A written record shall be kept of the administration.
- 4. Large volumes of medication shall not be stored. Unused medication shall be returned to Parents/Guardians at the end of the academic year.
- 5. All emergency medicines (asthma inhalers, epi-pens etc.) should be readily available and not locked away. These are kept in the medical cupboard in the school office.
- 6. Where controlled drugs are prescribed, these will be kept under suitable locked storage and arrangements made for it to be readily accessible when required.
- 7. Children will be told where their medicines are stored and who to ask for appropriate access to them.
- 8. If the medication must be kept refrigerated proper arrangements shall be implemented to ensure that it is both secure and available whenever required.
- 9. Names and photographs of children for whom emergency medication is held shall be displayed on the Health and Safety noticeboard
- 10. Under no circumstances will medicines be kept in first-aid boxes

Medication should be brought into the school by an adult (**not by the child**) and handed personally to a member of the School Office Team (ie either the School Secretary or Admin Assistant) and must be provided in an original container labelled clearly with:

- Child's name, date of birth
- Name and strength of medication
- · Written instructions provided by the prescriber, including dosage
- Expiry date
- Dispensing date.

It is the responsibility of the parent to ensure there is sufficient medication and that the medication is in date.

#### **Controlled Drugs**

Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act. Therefore it is imperative that controlled drugs are strictly managed between the school and parents. Ideally controlled drugs are only brought in on a daily basis by parents, but certainly no more than a week's supply and the amount of medication handed over to the school should always be recorded.

Controlled drugs shall be stored in a locked non portable container in the School Secretary's Office and access shall be restricted to The School Secretary and Admin Assistant, The Headteacher and The Senior Midday Supervisor. Each time the drug is administered it must be recorded, including if the child refused to take it. If pupils refuse to take medication, school staff should not force them to do so. The school should inform the child's parents as a matter of urgency. The person administering the controlled drug should monitor that the drug has been taken. Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

Any unused medication should be recorded as being returned back to the parent at the end of each term. If this is not possible it should be returned to the dispensing pharmacist. It should **not** be thrown away.

#### Over the counter medicines

Consent for the administration of non-prescription medicines will not normally be given. This includes such products as Calpol, Nurofen, Paracetamol, Aspirin etc. A child under 16 should never be given medicine containing aspirin, unless prescribed by a doctor. Staff will not administer painkillers to pupils within school. If parents wish to administer non-prescription medication themselves during school hours, they will be asked to come to the School Office at the appropriate time to administer the medicine to their child and then take it away with them. If the parents are unable to come to the school, they may authorise another adult to come to school on their behalf to administer medication, and will need to give written consent to the school office in order for any such medication to be given to their child. (See Appendix 3). No child in the school will be given any medicines without their parents' written consent.

The only circumstance in which staff may administer non-prescription medication is when with a child on School Journey and only then with signed parental /guardian consent. In this event, it will only be given in accordance with the same procedures as for prescribed medication, with specific written instructions from the parent and Appendix 2 completed. As for prescribed medicines, the school shall not accept medicines that have been taken out of the container in which originally dispensed nor make changes to dosages on parental instructions. The container must be clearly labelled with child's name, dose and time of administration.

#### Staff role and responsibility

There is no legal or contractual duty on staff to administer medicine or supervise a child taking it, except in the case of certain support staff who may have specific duties to provide medical assistance as part of their contract. No member of staff can be directed to administer medicine to a child if they are unwilling although it should be remembered that a general duty of care applies, which in exceptional circumstances could extend to administering medicine and/or taking action in an emergency.

It is good practice to support and encourage children, who are able, to take responsibility to manage their own medicines and, if children can take their medicines themselves, staff should only supervise.

Staff administering medicine should do so in accordance with the prescriber's instructions. When administering medicines, on each occasion staff should

- refer to written instruction received by school
- check prescribed dose
- check expiry date
- check prescribed frequency of medication
- · measure out prescribed dose and check the child's name
- complete and sign record (Appendix 2) when child has taken or has been given medicine or to note that the medicine was refused.

If there is uncertainty, the medicine should not be given and staff should check with the child's parents/guardians/carers or doctor.

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and inform parents 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.

#### Return/Disposal of medicines

Medication should be returned to the child's parent(s) at the end of each term or whenever:

- The course of treatment is complete;
- Labels become detached or unreadable (NB: Special care should be taken to ensure that the medication is returned to the appropriate parent);
- Instructions are changed;
- The expiry date has been reached;
- · Children are due to transfer to a new school.

It is the parent's responsibility to replace medication which has been used or expired.

#### Children carrying their own medicine

Children may not carry their own medication with the sole exception of inhalers for asthma, as necessary. Children may carry throat sweets and take them with the permission of their class teacher. Parents should not send their child with more sweets than are necessary for one day.

#### School trips, visits and sporting events

Medication required during a school trip should be only be carried by the pupil if this is the normal practice. For all other medicines, either the parent (who must have a current CRB disclosure in order to accompany the visit) should be present or a staff member who is willing to take responsibility for the medicine and administer the dose. In the latter case, the staff member should sign the school record to say that the medication has been removed from the school premises and should sign the record on return to confirm that the medication was given. Unless the medication is covered by an existing consent, parent(s) must complete a Request Form if their child requires any medication whilst on a school trip or visit.

It is essential to inform all staff members involved with sporting activities or extra-curricular activities of the need for medication for specific pupils, and what to do should a medical emergency occur.



### Redbourn Junior School Pupil Health Care Plan

Child's nar	neClass
Date of bir	th
Child's add	dress
Medical dia	agnosis or condition
Date	
Review da	te
Family Co	entact Information
Parent/Gua	ardian's Name
Phone no.	(work)
	(home)
	(mobile)
Parent/Gua	ardian's Name
Phone no.	(work)
	(home)
	(mobile)
Clinic/Hos	spital Contact
Name	
Phone no.	
G.P.	
Name	
Phone no.	

# Appendix 1 Describe medical needs and give details of child's symptoms Daily care requirements (e.g. before sport/at lunchtime) ..... Describe what constitutes an emergency for the child, and the action to take if this Follow up care ..... Who is responsible in an emergency (state if different for off-site activities) ..... ..... Form copied to .....



### Redbourn Junior School Parental agreement for school to administer prescribed medicine

The school will not give your child medicine diffess you complete and sign this form.
Child's nameClass
Name and strength of medicine
Date dispensed Expiry date
Number of tablets/quantity given to school
Dosage (i.e. how much to given)
Timing (i.e. when to be given)
Any other instructions (i.e. how many days to be given)
Daytime phone no. of parent or adult contact
Name and phone no. of GP
Agreed review date
I accept that this is a service that the school is not obliged to undertake.
The above information is, to 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.
Parent/ Guardian Signature
Print nameDate
<b>Headteacher's Authority:</b> I agree that the above medication can be administered within school hours as detailed above and will be supervised by
(Name and post held in school)
SignedDate



## Redbourn Junior School Record of medicine administered to an individual child

[This page to be printed on reverse of *Parental agreement for school to administer prescribed medicine*]

Name of m	nember of staff receiv	ving medicine	
Staff signature			
Signature of parent			
Check that details of medic	ine, dosage and freque	ncy of dose agree with Pa	arental Agreement
Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			
Date	/ /	/ /	/ /
Time given			
Dose given			
Name of member of staff			
Staff initials			



# Redbourn Junior School Parental agreement for another adult / non-staff member to administer medication to their child

If a dose or application of medication is required during the school day, parents will be asked to come to the School Office at the appropriate time to administer the medicine to their child and then take the medicine away with them. If the parents are unable to come to the school, they may authorise another adult to come to school on their behalf to administer medication, and will need to complete this form in order for any such medication to be given to their child. No child in the school will be given any medicines without their parents' written consent.

I give authority to
Child's nameClass
Date(s) and times when medicine to be given
Daytime phone no. of parent
Daytime phone no. of delegated person
Parent/ Guardian's Signature
Print name
Date

Disclaimer: The school takes no responsibility for checking any medication given by the delegated adult named above. The school's only duty is to confirm the identity of the person administering the medication.