



Managing Medications and Medical Conditions Policy

Introduction

Please read in conjunction with the full DfE guidance document provided to schools: '**Supporting Pupils at School with Medical Conditions**' (Dec 2015).

The Governing Body has developed this policy to provide a suitably supportive environment for children with medical conditions so that they can access and enjoy the same opportunities at school as any other child. Many of the medical conditions that require support at school will affect quality of life. The focus is on the needs of each individual child and how their medical condition impacts their school life. Close cooperation between Trinity All Saints CE Primary School, parents/carers, health professionals, and other agencies is actively promoted to meet these needs. As administering medicines is a voluntary role, the school will always endeavour to meet these needs but may, on occasion, be unable to do so.

Legislation:

- The Medicines Act 1968 specifies the way that medicines are prescribed, supplied, and administered within the UK and places restrictions on dealings with medicinal products, including their administration.
- Under the Misuse of Drugs Act 1971 and associated Regulations the supply, administration, possession, and storage of certain drugs are controlled. Schools may have a child who has been prescribed a controlled drug.
- Health and Safety at Work Act 1974 - includes procedures for supporting children with medical needs.
- The Children's Act 1989 – safeguards and promotes child welfare.
- Section 3 of the Children Act 1989 confers a duty on a person with the care of a child (who does not have parental responsibility for the child) to do all that is reasonable in all the circumstances for the purposes of safeguarding or promoting the welfare of the child.
- Education (School Premises) Regs. 1999 – requires that there is a room in every school appropriate for medical purposes (containing a basin and near to the toilet).
- Disability Discrimination Act (DDA) – includes a list of conditions which are disabilities by definition.
- Section 10 of the Children Act 2004 provides that the local authority must make arrangements to promote cooperation between the authority and relevant partners (including the governing body of a maintained school, the proprietor of an academy, clinical commissioning groups, and the NHS Commissioning Board) with a view to improving the wellbeing of children, including their physical and mental health, protection from harm and neglect, and education. Relevant partners are under a duty to cooperate in the making of these arrangements.
- Governing Bodies' duties towards disabled children and adults are included in the Equality Act 2010, and the key elements are as follows:
 - They must not discriminate against, harass or victimise disabled children and young people
 - They must make reasonable adjustments to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers.
 - This duty is anticipatory: adjustments must be planned and put in place in advance, to prevent that disadvantage

Underlying 'givens':

1. A member of staff is in loco parentis and must treat and take care of the pupil as a careful parent would.
2. Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
3. No child will be given medicines without their parent's written consent; there are forms in the school office to complete.
4. School will aim to provide a supportive environment for children with medical conditions so that they can access and enjoy the same opportunities at school as any other child.
5. No member of staff should feel compelled to be responsible for the administration of medication. Those involved should be volunteers.
6. Responsibility for a child's health is with the parent/carer. They are responsible for making sure that the child is well enough to attend school.
7. The teacher/relevant support staff working with a child with medical needs in class should understand the nature of the condition and their specific needs.
8. No child under 16 will be given aspirin or ibuprofen unless prescribed.

Actions when a medical condition is short-term:

- Medicines should only be taken to school when essential and it would be to the detriment of the child if they were not taken during school hours.
- The parent should request an alternative dose from the GP where possible, to avoid medication needing to be administered at school.
- Where clinically possible, medicines such as antihistamines, for allergies such as hay fever, and travel sickness tablets, should be given at home as a one-a-day dose.
- Medications are to be provided for school in the original container as dispensed at the pharmacy and with the instructions clearly displayed on a label. They must also be clearly marked with the child's name. The school will not accept medication that has been removed from the original container.
- ***The school will not make changes to prescribed dosages, regardless of parental instruction.***
- An abbreviated health care plan will be drawn up on the medication consent form (Appendix 1 Side B) and medication will only be given with prior written agreement.
- **Non-prescription medicines/over-the-counter medicines** will not be administered except in exceptional circumstances, which must be discussed in advance. These include cough sweets, cough medicines, painkillers, and skin creams (this list is not exhaustive). If a parent/carer considers non-prescription medication to be a requirement for their child they should contact the school directly, for their request to be considered. Parental consent must then be given in writing.

Actions when a medical condition is long-term:

- A full healthcare plan will be drawn up for a child with long-term medical needs (Appendix 4). This will be completed in conjunction with the appropriate healthcare professionals and parents/carers. Input should be sought from all relevant parties.
- The plan will identify the medical condition, daily care requirement, emergency action to be taken when action should be taken, the name of people who will be involved (and a reserve), and list any necessary follow-up care.
- The content of the plan is confidential and sensitive; consent should be given by the parent/guardian in order that it can be disseminated to those in school who need to know.

Records:

- The school will record the details of any pupil with medical requirements and confirm the existence of a health care plan or (in the case of a shorter-term condition) an abbreviated form of the health care plan.
- The agreement of the parent/carer will be obtained in relation to the health care plan, they will sign it and be given a copy of it.
- Any changes made will need a further signed agreement from the parent/carer.
- A record will be kept of all staff training including the use of EpiPens and general first aid.
- A record is to be maintained on the medication form of which member of staff has administered medication.
- The records are scanned and saved on Arbor MIS.

Administration of medication:

- Prior to its administration medication should be checked for the child's name, instructions from parent and GP, prescribed dose, and expiry date.
- Medication will not be administered if there is any uncertainty if there is insufficient information available or if the staff member is not trained to do so for specific kinds of medication (e.g., EpiPens, epilepsy medicine, and heart medication - this list is not exhaustive). In these circumstances, further clarification will be sought and the parent/guardian will be contacted.
- The record will be updated after administration including the time/date, dose, and any problems.
- Similarly, the record will be updated if the medication is not administered providing the time/date and reasons why and the parent/carer will be contacted.
- All records will be signed by the staff member involved.
- No person will be compelled to administer medication and if necessary alternative arrangements will be implemented by the Headteacher and this will be with reference to the local health trust.

Refusal to take medicine:

No pupil will be forced to take medication. If the child refuses to take medication a record will be made and the parent/carer will be contacted directly and immediately. If the parent cannot be contacted medical advice will be obtained.

Pupils with medical conditions will be included on school trips and in sporting activities; however relevant staff involved will be made aware of the medical conditions and emergency procedures in order to ensure the safety of the child. The necessary risk assessments will be completed and changes to arrangements made in order to make sure that the activity is fully inclusive.

Medication will be available, carried in a suitable container, and under the control of a member of staff.

Storage of medicines:

All medicines will be stored appropriately and safely. Medicines will generally be secure in a locked cabinet. Some medicines are stored in a separate refrigerator out of sight and bounds of children.

Emergency medications such as inhalers and adrenalin injectors e.g., EpiPens, will be made readily available and not locked away in case of emergency. Children and the adults responsible for them should know where their medicine is at all times and be able to access them immediately.

The school will not dispose of medicines and will return unused medication (including empty packets/bottles and out-of-date items) to the parent/carer.

Associated Policies:

First Aid
Intimate Care
SEND

Updated: November 2023

Review: November 2026

Signed: (Headteacher)

Signed: (On Behalf of Governors)

Trinity All Saints CE Primary School

SHORT TERM MEDICATION IN SCHOOL

CHILD'S SURNAME:		CHILD'S FIRST NAME:	
DOB:		CLASS:	

MEDICATION	
Name/Type of medication:	
Date dispensed:	
How long will your child be taking this medication?	
Dosage & method:	
Time of doses:	
Side effects:	
Procedure to take in an emergency:	
Details of Doctor Issuing Medication:	
Location to be kept (e.g., in the fridge):	

CHECKLIST	
Medication labelled?	YES / NO
Bag or Container labelled?	YES / NO
Special Instructions? (Please note)	YES / NO

ADMINISTRATION OF MEDICINE	
Pupil can self-administer medication	<input type="checkbox"/>
Pupil requires staff assistance with medication	<input type="checkbox"/>

Trinity All Saints CE Primary School

LONG-TERM MEDICATION IN SCHOOL

CHILD'S SURNAME:		CHILD'S FIRST NAME:	
DOB:		CLASS:	
MEDICAL CONDITION/ILLNESS:			

MEDICATION	
Name/Type of medication:	
Date dispensed:	
How long will your child be taking this medication?	
Dosage & method:	
Time of doses:	
Side effects:	
Procedure to take in an emergency:	
Details of Doctor Issuing Medication:	
Location to be kept (e.g., in the fridge):	

CHECKLIST	
Medication labelled?	YES / NO
Bag or Container labelled?	YES / NO
Special Instructions? (Please note)	YES / NO

ADMINISTRATION OF MEDICINE	
Pupil can self-administer medication	<input type="checkbox"/>
Pupil requires staff assistance with medication	<input type="checkbox"/>

Trinity All Saints CE Primary School



MEDICATION KEPT IN CLASSROOMS
(INCLUDING ASTHMA & SELF-ADMINISTRATION)

CHILD'S SURNAME:		CHILD'S FIRST NAME:	
DOB:		CLASS:	

MEDICATION KEPT IN SCHOOL*

NB: Only medication prescribed by a GP can be administered in school. This must be clearly labelled with the original prescription label, and be handed to a member of staff.

Reason for Medication:	<input type="checkbox"/> Asthma <input type="checkbox"/> Allergy / Anaphylaxis <input type="checkbox"/> Other:	<i>(Has an Asthma Wheeze Management Plan / Allergy Care Plan been provided?)</i> <input type="checkbox"/>
Name & Strength:		
Dosage & frequency:		
Details of Doctor Issuing Medication:		
Expiry Date:		
Location to be kept (e.g., in the fridge):		

**** It is the responsibility of the parent to ensure any medication in school is within its expiry date.***

CHECKLIST

Medication labelled?	YES / NO
Bag or Container labelled?	YES / NO
Special Instructions? (Please note)	YES / NO

ADMINISTRATION OF MEDICINE

Pupil can self-administer medication	<input type="checkbox"/>
Pupil requires staff assistance with medication	<input type="checkbox"/>

Additional Information / Training Requirements:

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Signed (Parent/Carer):		Date:	
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Trinity All Saints CE Primary School

INDIVIDUAL HEALTHCARE PLAN

Child Details	
Name of school/setting:	
Child's name:	
Class:	
Date of Birth:	
Child's address:	
Medical diagnosis or condition:	
Date:	
Review date:	
Family Contact Information	
Name:	
Relationship to child:	
Phone no. (work):	
(home):	
(mobile):	
Name:	
Relationship to child:	
Phone no. (work):	
(home):	
(mobile):	
Clinic/Hospital Contact Information	
Name:	
Phone no:	
GP Contact Information	
Name:	
Phone no:	
Support in School	
Who is responsible for providing support in school?	

Appendix 4: Template A: Individual Healthcare Plan (Side B)

<p>Describe medical needs and give details of the child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues, etc.</p>	
<p>Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision</p>	
<p>Daily care requirements</p>	
<p>Specific support for the pupil's educational, social, and emotional needs</p>	
<p>Arrangements for school visits/trips etc</p>	
<p>Other information</p>	
<p>Describe what constitutes an emergency, and the action to take if this occurs</p>	
<p>Who is responsible in an emergency (<i>state if different for off-site activities</i>)</p>	
<p>Name of persons plan developed with</p>	
<p>Staff training needed/undertaken – who, what, when</p>	
<p>Form copied to</p>	