

# St James' C.E. Primary School

Part of the Diocese of Chelmsford Vine Schools Trust



## Managing Medicines in School Policy

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This issue	Oct 2017	
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## **Managing Medicines in School Policy**

### **Aims**

1. To support pupils with medical conditions to ensure that they can access and enjoy the same opportunities at school as any other child.
2. To ensure that the focus is on the individual child and how their medical condition impacts on their school life.
3. To ensure that the school provides effective support for medical conditions in school so that the child has high levels of self-confidence and self-care skills.
4. For staff to be properly trained to support medical needs.
5. To always involve pupil/parents/carers/other professionals in planning and decision making whenever possible.
6. The Admissions Policy will be applied fairly to all pupils and arrangements will be made to the best of the school's ability, prior to admission to meet the medical needs of the child.
7. Safeguarding Duties. The Governing Body will ensure that no pupil's health will be put at risk from, for example infectious diseases.
8. The Governors will monitor this policy and ensure that policies, procedures and systems are properly implemented.

### **Outcomes**

- That pupils with medical needs will access and enjoy the same opportunities as other children wherever possible.
- That pupils with medical needs will achieve their potential.
- That individual needs are always taken into account.
- That pupils with medical needs have/develop high self-esteem and good self-care skills.
- Pupils with medical needs have the same admission arrangements applied and opportunity to be admitted to the school as other pupils.
- That all children's health and safety is paramount at all times.
- That the Governing Body is aware of, and undertakes its duties in regard to pupils with medical needs.

### **Systems/Strategies**

- The Head Teacher/Governors/Inclusion Manager will ensure that sufficient staff are suitably trained.
- Relevant staff will be made aware of the child's condition.
- Cover arrangements will be made wherever possible to ensure that someone is always available to support the child.
- Supply teachers will always be briefed
- Risk Assessments will be undertaken for all school visits, holidays, and other activities within and outside of the normal timetable.
- Individual Healthcare plans will be monitored as appropriate

- Transition arrangement will be made on entry to the school and on transfer to the next school.
- The child's needs will be constantly monitored and amended.
- Every effort will be made to make transitional arrangements within two weeks of transfer to a new school.
- Where necessary, a healthcare plan will be drawn up in consultation with the child and family, school, healthcare professionals using DFE Templates May 2014.
- The Inclusion Manager will be the Lead Professional supported by Welfare staff at the school.
- The governors will make arrangements to support children with medical conditions in school and ensure that school policy is clear and implemented.
- The Head Teacher will ensure that the school policy is developed and effectively implemented with partners.
- School staff may be asked to provide support for pupils with medical conditions, including the administering of medications -although they cannot be required to do so.
- Sufficient training and support will be provided for staff to support pupils with medical needs.
- School Nurses are responsible for notifying the school when a child has been identified as having a medical condition. They liaise with lead clinicians for appropriate support for the child and staff training needs.
- Other healthcare professionals-GPs and Paediatricians should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- Pupils should where possible/appropriate be involved in discussions about their healthcare plan.
- Local professionals can provide support for managing conditions in school-e.g. asthma/diabetes.
- The Local Authority are commissioners of school nurses for the school and have a duty to promote cooperation between relevant partners for the well-being of the child. They have a statutory duty to make arrangements when the child will be away from school for 15 days or more-consecutively or cumulative.
- Providers of health services should cooperate with and support schools that are supporting a child with a medical condition.
- Clinical Commissioning Groups should ensure that commissioning is responsive to the child's needs and that health services co-operate with schools supporting children with medical needs.
- OFSTED are briefed to consider the quality of teaching and progress of children with medical needs.

### **Managing Medicines in School**

- The governing body will ensure that the school's policy is clear to all.
- Medicine will only be administered when it would be detrimental to a child's health or school attendance not to do so.

- No child under 16 will be given prescription or non-prescription medicines without their parent's written consent-except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents.
- No child at the school will be given medication including aspirin.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- The school will only accept medicines that are in-date, labelled and in the original container prescribed from chemist with instructions for administration, dosage and storage.
- Medicines will be stored safely.
- Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will be available to children-not locked away.
- Controlled drugs will be stored securely. Named staff will have access.
- When no longer required, medicines will be returned to parents for safe disposal.
- Records will be kept of medication administered.

### **Emergency Procedures**

- Health care plans will be followed
- If a child needs to be taken to hospital they will be accompanied by two members of school staff until the parent arrives and a copy of contact and care plan will be taken.

### **Day trips/residential visits/sporting activities**

- Every effort will be made to encourage and enable children with medical needs to participate safely in all of the above activities.
- Parents/carers must work closely with and support the school to enable these activities to take place – if in-date medication is not provided for the child's trip, the child may not be able to participate in the above activities, as this cannot be done safely.

### **It is the parent's responsibility to:**

- **Provide the school with up to date information about their child's needs. (Care plan's need to be updated at least yearly, and amended if changes occur throughout the school year).**
- **Provide medicines which are in-date, labelled and in the original container prescribed from chemist with instructions for administration, dosage and storage.**
- **To keep a record of medicines in school, ensure that the medicine is in-date and replace when expiry date is near.**

Further information can be found in 'Supporting pupils at school with medical conditions' (Sept 2015)

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf)

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