




Supporting Children with Medical Needs
Policy; incorporating medicine
administration and homely remedies

THE
C  **MPASS**
PARTNERSHIP OF SCHOOLS

Introduction

This policy has been drawn up in accordance with the Department for Education guidance: Managing medicines in schools.

Most pupils will, at some time, have a medical condition that may affect their participation in school activities. For many this will be short-term: perhaps finishing a course of medication. Other pupils have a medical condition that, if not properly managed, could limit their access to education. Such pupils are regarded as having medical needs. Children with complex medical needs are able to attend school regularly and, with support from the school, can take part in all school activities. However, school staff must take extra care in planning activities to make sure that these pupils, and others, are not put at risk.

Rationale

The Compass Trust is an inclusive community that aims to support and welcome pupils with medical conditions. We provide all pupils with all medical conditions the same opportunities as others at school.

All staff understand their duty of care to children and young people in the event of an emergency and that staff are well supported and feel confident in knowing what to do in an emergency. We are aware that some medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood. We understand the importance of medication being taken as prescribed. We are committed to ensuring that staff understand the medical conditions that affect children that they are working with and the common medical conditions that affect children across the school. There is a significant commitment to ensuring that staff receive training on the impact that medical conditions can have on pupils and how to manage these.

We are an inclusive community that aims to support and welcome children with medical conditions.

- Wherever possible children with medical conditions are encouraged to take control of their condition in the way which is most appropriate to them and their learning needs. When children are reliant on adults to have their medical needs met, relationships are trusting and the child feels secure.
- We aim to include all pupils with medical conditions in all school activities.
- Parents of pupils with medical conditions feel secure in the care their children receive.
- The medical conditions policy is understood and supported by the whole school and local health community.

This policy has been drawn up in consultation with a wide range of local key stakeholders within both the school and health settings

We consulted on the development of this medical condition policy with a range of key stakeholders within both the school and health settings. We recognise the importance of providing feedback to those involved in planning for and actively managing the medical needs of children in the school and are committed to working with all stakeholders to continue to develop this area in accordance with the changing needs of our children. This policy will be accessible to parents and staff.

Training

- Staff understand their duty of care to pupils in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.

- There are clear procedures in place for all children in the event of an emergency. These measures include:
 - A whole school procedure in the event of paramedics being called to school which includes systems for the admin and premises teams and clear roles for all those involved
 - First Aiders on site who will manage emergencies in the first instance
 - Clear protocols for emergencies for individual children which are stored with the school team, with emergency medicines and in pupil files
 - Staff trained appropriately to manage emergency situations when offsite
 - Annual training for staff who may administer emergency medications
 - Individual risk assessments for every child which highlight any potential emergency situations and control measures
 - Debriefing meetings as necessary
 - Systems for supporting families when their children are taken to hospital
 - Systems to ensure that relevant documents including healthcare plans and personal passports are sent to hospital with a child as a matter of course

- If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the pupil knows.

- In some situations, where an ambulance is not deemed necessary and as the result of consultation between the school team, SLT and parents, alternative arrangements can be put in place in the best interests of the child. These may include taking the child home with a member of staff who knows them well or taking the child to the local hospital day clinic.

- All staff are aware of the most common medical conditions and needs at the school. Annual generic training is provided as a matter of course for large groups of staff in asthma, anaphalaxis and epilepsy.

- Staff are fully conversant with the medical needs of individuals in their class and how to manage these. Core training is refreshed for all staff at least once a year. The school differentiates between new training and renewal training, providing more detail and opportunities for supervised practice when training is new.

Prescribed medication

- Is any medication prescribed by a medical professional.
- The prescription label must be visible on the packaging
- The medicine administration form must be completed by parents, clearly stating dosage
- Non-emergency medication will only be given in school where it is not possible to give the prescribed dosage outside of the school day.

Non-Prescription over the counter medicines (Homely Remedies)

We are mindful that GP's will not prescribe medication that is available over the counter e.g. hay fever medicines, eye drops, pain killers. The medicines and healthcare products regulatory agency (MHRA) classifies non prescription medicines as 'over the counter' because they are

considered safe and appropriate to be used without prescription when recommended by a pharmacy.

- The medicine administration form must be completed by parents, clearly stating dosage
- Where it is not possible for medication timings to be stipulated e.g. Hay fever medication, we will contact parents prior to administering the medication

Administration of medication at school

- All pupils at this school with medical conditions have easy access to their emergency medication.
- If parents and health specialists determine they are able to start taking responsibility for their condition children are encouraged to administer their own asthma pumps with appropriate levels of supervision.
- School adults carry pupils' emergency medication with them during any off- site or residential visits and the child is supervised by that adult. In school, emergency medicines are stored in a secure but easily accessible location where there is a clear monitoring and signing out system in place.
- Children are comfortable and secure with the arrangements for a familiar member of staff (and the reserve member of staff) to assist in helping them take their emergency medication safely.

Administration – Prescribed medication

All use of medication, is carried out under the supervision of appropriately trained and named members of staff. The school understands the importance of medication being taken as prescribed or detailed by the parent in the case of over the counter medication. Staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication unless they have been specifically contracted to do so. All members of staff administering medication have stated that they are willing to do so.

- Training is given to all staff members who agree to administer medication to pupils, where specific training is needed. The RPA provides indemnity. All school staff administering medication will do so with a second adult assisting.
- Parents at this school understand that if their child's medication changes, is discontinued, or the dose or administration method changes, they should notify the school immediately
- Prior to any medication being administered, dates will always be checked. No out of date medication will be administered. Staff will also check the 'once opened use by' dates.
- If a pupil refuses their medication, staff record this, and parents are informed as soon as possible.
- Staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information and training as a matter of course at the beginning of the school year about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed. This is documented in individual/trip risk assessments. Children always have competent members of staff accompanying them during offsite visits.
- If a trained member of staff, who is usually responsible for administering medication, is not available the school makes alternative arrangements to provide the service from within the

staff holding the relevant competencies. There are an adequate number of trained staff in each class to allow for staff absence to be covered.

- All use of medication defined as a controlled drug, is carried out under the supervision of appropriately trained and named members of staff and is recorded in the Controlled Drug Recording Book. The location and quantity of controlled medication is checked and logged in book regularly. It is logged whenever the medication leaves and enters the school e.g., during a school trip.

Storage of medication in school

Safe storage – emergency medication

- All pupils at this school with medical conditions are aware of and have easy access to their emergency medication.
- School staff carry emergency medication with them during any off-site or residential visits. In school emergency medicines are stored in a secure but easily accessible location where there is a clear monitoring and signing out system in place.
- Staff know exactly where emergency medications are at all times.

Safe storage – general

- All controlled drugs are stored securely in a locked space that is known and accessible to staff, and only named staff have access, even if pupils normally administer the medication themselves. Medication is labelled and is stored alongside drug recording sheets.
- The expiry dates for all medication stored at school are checked routinely as part of administration routines.
- The identified member of staff, along with the parents of pupils with medical conditions, ensures that all emergency and non-emergency medication brought into school is clearly labelled with the pupil's name, the name and dose of the medication and the frequency of dose.
- Medication is stored in accordance with instructions, paying particular note to temperature.
- Some medication for pupils at this school may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled.
- All medication is sent home with pupils at the end of the school year. Medication is not stored in summer holidays.
- It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year and that new supplies are sent to school in a timely way. School staff are responsible for informing parents in good time when supplies are running out.

Safe disposal

All out of date medication is sent home.

Record keeping

Enrolment

New parents are asked if their child has any health conditions or health issues as part of the new starter pack, which is filled out when they join the school. Subsequently, home visits or planned visits with the School team will allow fuller discussion and detail and these take place as a matter of course when a child has medical needs.

Existing Pupils

The School team update their records of health conditions, medicines and permissions for all children annually and as a matter of course.

Health Care Plans

- The school uses a medical alert handbook to record important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the medical alert booklet if required.
- A member of the school team will contact parents to discuss their child's needs. Parents will complete a consent form for the child to be added to the medical alert handbook.
- In the case of a child having a complex medical condition not outlined in the medical alert handbook a referral to the school nursing team will be made and an individual care plan will be drawn up.

Recording of pupils medical needs

- The School team holds a centralised register of pupils with medical needs on Bromcom
- For children with individual care plans, the school nursing team will contact parents annually and if changes are required will share these with the school.
- Every pupil with a Healthcare Plan at this school has their plan discussed and reviewed at least once a year.
- medical alert book are kept in a secure central location at school. Apart from the central copy, a copy of pupils' Healthcare Plans in pupil files. These copies are updated at the same time as the central copy. The school ensures that all staff protect pupil confidentiality.

Consent to administer medicines

- If a pupil requires regular prescribed or non-prescribed medication at school, parents are asked to provide consent on their child's Healthcare Plan or complete a medication consent form giving the pupil or staff permission to administer medication on a regular/daily basis, if required. Short courses of medication are recorded on drugs sheets and in medical notes.
- All parents of pupils with a medical condition who may require medication in an emergency are asked to provide consent for staff to administer medication.
- If a pupil requires regular/daily help in administering their medication then the school outlines the school's agreement to administer this medication on the pupil's Healthcare Plan. The school and parents keep a copy of this agreement.

- Where relevant, parents of pupils with medical conditions are asked at the start of the school year on the Healthcare Plan if they and their child's healthcare professional believe the child is able to manage, carry and administer their own medication.

Residential visits

- Parents are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication and feeds not normally taken during school hours.
- All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Healthcare Plan, emergency protocols and other details.
- All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent which gives staff permission to administer medication at night or in the morning if required.

Other record keeping

- The school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the administering staff members, pupil, dose, date and time are recorded. These records are on drugs charts and routinely monitored by the School team. These are stored securely with the medicines.
- Staff are also expected to monitor and record any other significant medical events.
- The school holds training for:
 - Groups or individuals who practice medical competencies
 - This may relate to groups or individual children
 - Training may be provided by the School team or community School team

Equal opportunities

Physical Environment

- The school is committed to providing a physical environment that is accessible to pupils with medical conditions. The school's commitment to an accessible physical environment includes out-of-school visits and this is taken into consideration as a routine part of planning for any off site visit.

Social Interaction

- The 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 extended school activities
- 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.

Exercise and Physical Activity

- The school understands the importance of all pupils taking part in sports, games and physical activities.
- This school ensures all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for pupils' medical conditions.
- The school ensures that children are never forced to take part in an activity if they feel unwell. Teachers and sports coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities.
- The school ensures all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.
- The school ensures all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these potential triggers.

Education and Learning

- If a pupil is missing a lot of time at school, they have limited concentration or they are frequently tired. The school understands that this may be due to their medical condition and will work with parents and the school nurse to improve the situation where possible. This may involve supporting rapid access to services that can help.
- When families are in crisis because of a child's medical condition, when children are acutely unwell or when children are hospitalized for extended periods of time, the school will put into place measures to ensure that children and families are well supported by the school and that close communication is maintained

Roles and responsibilities in maintaining an effective medical conditions policy

- We work in partnership with all interested and relevant parties including the school's local governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.
- The following roles and responsibilities are used for the medical needs policy at this school. These roles are understood and communicated regularly.

Trustees have the responsibility to:

- Ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips.
- Ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions.
- Ensure that the medical needs policy is effectively monitored and evaluated.
- Provide indemnity for those staff who administer medicines to pupils with medical conditions.

The Headteacher/Head of School has a responsibility to:

- Maintain an exemplary standard of collaborative working with the School team.

- Ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks.
- Liaise between interested parties including pupils, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, school nurses, parents, governors, the school health service, the local authority transport service, and local emergency care services.
- Ensure the policy is put into action, with good communication of the policy to all.
- Ensure every aspect of the policy is maintained.
- Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place
- Ensure pupil confidentiality.
- Assess the training and development needs of staff and arrange for them to be met.
- Ensure all supply teachers and new staff know this policy.
- Monitor and review the policy at least once a year
- Update the policy at least once a year according to review recommendations and recent local and national guidance and legislation.
- Report back to all key stakeholders about implementation of the medical conditions policy.

All staff at this school have a responsibility to:

- Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.
- Understand this policy.
- Know which pupils in their care have a medical condition and be familiar with the content of the medical alert handbook and individual health care plans.
- Allow all pupils to have immediate access to their emergency medication.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- Ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom.
- Be aware of pupils with medical conditions who may be experiencing bullying or need extra social support.
- Understand the common medical conditions and the impact it can have on pupils.
- Ensure no pupil with medical conditions is excluded from activities they wish to take part in
- Ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.
- Be aware that medical conditions can affect a pupil's readiness for learning.
- Refer concerns to the School leaders in a timely way.

The school nursing team has a responsibility to:

- Coordinate the completion of individual healthcare plans as requested
- Liaise with other professionals as necessary.
- Maintain an exemplary standard of collaborative working with the school.
- Be available to offer advice and support via a helpline or referral.

First aiders have a responsibility to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards within the school.
- When necessary ensure that an ambulance or other professional medical help is called.

Parents/Carers have a responsibility to:

- Tell the school if their child has a medical condition.
- Inform the school about the medication their child requires during school hours.
- Inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities.
- Tell the school about any changes to their child's medication, what they take, when, and how much.
- Inform the school of any changes to their child's condition.
- Ensure their child's medication and medical devices are labelled with their child's full name.
- Update the school regarding information from appointments.
- Ensure that their child's medication is within expiry dates.
- Keep their child at home if they are not well enough to attend school.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional as required
- Ensure a medicine administration consent form is correctly completed prior to requesting any medication administration unless already stated in their individual healthcare plan.

Legislation and Guidance

Introduction

Local authorities, schools and governing bodies are responsible for the health and safety of pupils in their care.

Areas of legislation that directly affect a medical conditions policy are described in more detail in *Managing Medicines in Schools and Early Years Settings*. The main pieces of legislation are the Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005. These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999 and the Medicines Act 1968.

This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions policy.

Managing Medicines in Schools and Early Years Settings (2004)

This provides guidance from the department for education on managing medicines in schools and early years settings.

Medical Conditions at School: A Policy Resource Pack is designed to work alongside *Managing Medicines in Schools and Early Years Settings*.

Disability Discrimination Act 1995 (DDA) and the Special Educational Needs and Disability Acts (2001 and 2005)

Many pupils with medical conditions are protected by the DDA and SENDA, even if they don't think of themselves as 'disabled'.

The Commission for Equality and Human Rights (CEHR) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the DDA and gives practical guidance on reasonable adjustments and accessibility. The CEHR offers information about who is protected by the DDA, schools' responsibilities and other specific issues.

Schools' responsibilities include:

- not to treat any pupil less favourably in any school activities without material and sustainable justification
- to make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other pupils. Examples of reasonable adjustments can be found in the DfES resource: Implementing the DDA in Schools and Early Years Settings
- to promote disability equality in line with the guidance provided by the DCSF and CEHR through the Disability Equality Scheme.

The Education Act 1996

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

The Care Standards Act 2000

This act covers residential special schools and responsibilities for schools in handling medicines.

Health and Safety at Work Act 1974

This act places duties on employers for the health and safety of their employees and anyone else on their premises. This covers the head teacher and teachers, non-teaching staff, pupils and visitors.

Management of Health and Safety at Work Regulations 1999

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

Medicines Act 1968

This act specifies the way that medicines are prescribed, supplied and administered.

Consent for the administration of medicine



The school will not give your child medicine unless you complete and sign this form, and the Head Teacher has agreed that school staff can administer the medication.

Details of Pupil

Forename(s):

Surname:

Condition or illness:

Medication

Name/type of medication (as described on the container):

.....

Quantity provided

For how long your child will take this medication:

Date dispensed or started (if applicable):

Once opened used by date (if applicable):

Full directions for use:

Dosage and method:

Time to be administered: Self-administration: Yes/No

Procedures to take in an emergency:

.....

Contact details:

Name: Daytime telephone:

I give permission for the school to administer the above medication. I understand that I must deliver and collect the medicine personally to the school office.

Name: Signature:

Relationship to the child: Date:

Name and signature of staff member responsible for administering medicine:

.....

Appendix 3

Controlled Drug Recording Book

It is essential that the location and quantity (stock balance) of any controlled medication on school premises is checked and logged in the Controlled Drug Recording book. All other medicine consent/administration processes must continue and are not replaced by the book.

This is the NHS list of controlled drugs. [Controlled drugs list - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

The Controlled Drug Recording book must be stored in a secure location, close to the controlled medication.

At _____ (school name) it is stored _____

The Headteacher has assigned the following staff member/s to record in the Controlled Drug Recording Book and has demonstrated how to do this:

Staff member's name	Date of demonstration	Signature of staff member	Signature of Headteacher

Of the above named staff members, the person who will take overall responsibility for the book and who will complete regular checks to ensure it is being completed correctly is:

Notes on completing entries into the Controlled Drug Recording Book

1. You must log whenever the medication is moved from its main location e.g., during any educational visit/swimming etc and whenever there are any changes to the stock level – either because a child has taken some or a parent has brought more into school.
2. Here is an example of how to make an entry where a child takes a controlled medication in school every day.

CONTROLLED DRUG - NAME: Lisdexamfetamine ~~FORM:~~

child's BRAND NAME: John Smith STRENGTH: 30mg

Date	Name and address of person/supplier from whom obtained	Quantity obtained (from supplier parent)	Current balance in stock	Name of patient (healthcare professional's name and address if collecting)	Identity proven (if required) Yes/No Batch Number	Amount supplied Expiry Date	Given/ disposed by (signature) Location	Witnessed by (signature) initials of 2 people	Balance left in stock
22/11/23		20	20		X 03521036	02/2023	main school office	JK RT	19
23/11/23		"	19		"	"	"	JK RT	18
24/11/23		"	18		"	"	"	JK RT	17

3. Here is an example of how to make an entry where a controlled medication has been taken swimming with the child and returned unused.

CONTROLLED DRUG - NAME: Midazolam (Buccal) ~~FORM:~~

child's BRAND NAME: Joe Bloggs STRENGTH: 5mg

Date	Name and address of person/supplier from whom obtained	Quantity obtained (from supplier parent)	Current balance in stock	Name of patient (healthcare professional's name and address if collecting)	Identity proven (if required) Yes/No Batch Number	Amount supplied Expiry Date	Given/ disposed by (signature) Location	Witnessed by (signature) initials of 2 people	Balance left in stock
01/12/23		4 pre-filled	4		X 6575820	12/24	Taken Swimming	JK TW	0
01/12/23		4 pre-filled	0		X 6575820	12/24	checked in class	JK TW	4

4. The signature box should always have two signatures.
5. Keep a list of children's names on the first page of the book and note the page numbers that relate to them to create an index
6. When a child leaves the school, put a line through their name on the first page of the book and continue using the book

Monitoring, evaluation and review

This policy is regularly reviewed evaluated and updated

- This policy is reviewed, evaluated and updated every year in line with the school's policy review timeline or earlier if guidance changes.
- New Department for Education and Department of Health guidance is actively sought and fed into the review.

The Board of Trustees will assess the implementation and effectiveness of this policy. The policy will be promoted and implemented throughout all Trust schools.

This Policy will be reviewed by the Board of Trustees on a two-yearly cycle.

Adherence to the policy will be monitored by the school's local committee.

Policy adopted:	Autumn 2023
Other related policies	Inclusion Equalities School journey Asthma Epilepsy Intimate care First Aid
Next Review:	Autumn 2025