

# **Medications and Medical Conditions Policy**

Our aim is to promote the good health of children attending Bryony School, including our Early Years classes. We aim to ensure that children with medical conditions are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

# **Responsibilities**

The Proprietor remains legally responsible and accountable for fulfilling the statutory duty to support pupils with medical conditions. In meeting this duty, responsibility for implementation of this policy is conferred to Mrs Notley. She will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.

Mrs Notley is responsible, in conjunction with parents/carers, for drawing up, implementing and keeping under review the individual healthcare plan for each pupil. Mrs Notley makes sure relevant staff are aware of these plans overseeing the preparation of risk assessments for school visits and other school activities outside of the normal timetable, for the monitoring of individual healthcare plans.

All members of staff are expected to show a commitment and awareness of children's medical conditions and the expectations of this policy. All new members of staff will be inducted into the arrangements and guidelines in this policy upon taking up their post.

Parents /Carers have the prime responsibility for their child's health and that it is their responsibility to provide the school with accurate and up to date information about their child's medical condition. If new medical supplies are needed it is the responsibility of the parents to supply medication as required.

# Long-Term Medical Needs

It is important to have sufficient information about the medical condition of any child with long-term medical needs. For children being admitted to Bryony School for the first time with good notification given, the arrangements for long term medical needs will be in place for the start of the relevant school term. In cases other cases, such as a new diagnosis or a child moving to Bryony School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We

also acknowledge that some may be more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

A Health Care Plan will be developed in partnership with parents and any health professional which sets out the detail of the medical condition and medication to be administered and will be reviewed at least once a year. For children who attend hospital appointments on a regular basis, a Health Care Plan may also be necessary.

## Short -Term Medical Needs

Many children will need to take medicines during the day at some time during their time in Bryony School, including our Early Years classes. This will usually be for a short period only, perhaps to finish a course of antibiotics. Allowing children to take medicine at school will minimise the time that they need to be absent.

## Procedure for Managing Medicine

- No child can be given prescription or non-prescription medicines without their parent's written consent<sup>1</sup>.
- Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist (EYFS 3.46, 2021)
- However as part of our 'loco parentis' role we have decided that we may administer non –prescription medication e.g. mild pain and fever relief (Calpol) with prior written consent of the parent and only when there is a health reason to do so. A child under 16 should however, never be given aspirin unless prescribed by a doctor.
- Medicines should only be brought to school when essential and it would be detrimental to a child's health if the medicine were not administered during the school 'day' (i.e. medication to be given three times a day may be allowed to be given before school, after school and then before bedtime).
- It is the parents' responsibility to provide the medication. Parents must ensure that the medication is clearly marked with the child's name, is in date, is in the original container and has printed prescriber instructions for administration, dosage and storage. The school will not accept items of medication in unlabelled and/or not original containers. The exception to this is insulin which must be in-date, but will generally be available to schools inside an insulin pen or a pump, rather than its original container
- Parents must complete a medication form (Annex A) to give signed permission for administration of medication.
- We advise parents to have administered the medicine at home for at least 24 hours before asking the school to administer medicine. This is so that any adverse

<sup>&</sup>lt;sup>1</sup> It only requires one parent to agree to or request that medicines are administered. As a matter of practicality, it is likely that this will be the parent with whom the school or setting has day-to-day contact. Where parents disagree over medical support, the disagreement must be resolved by the Courts. The school will continue to administer the medicine in line with the consent given and in accordance with the prescriber's instructions, unless and until a Court decides otherwise.

side effects are recognised by the parents/carers at home and professional health advice sought where necessary.

- Any member of staff giving medicines to a child should check:
  - the child's name
  - prescribed dose
  - expiry date
  - written instructions provided by the prescriber on the label or container.

If in doubt about administering the medicine, staff should check with the parents or a health professional before taking further action. If staff have any other concerns related to administering medicine to a particular child, the issue should be discussed with the parent, if appropriate, or with a health professional attached to the school or setting.

# Records

A record in the medications file is made each time the medication is administered. This includes the signature of the administrator of the medication and counter-signature (witness to medication being given), date, time and dosage. These records provide evidence that agreed procedures have been followed.

Parents/carers must be informed on the same day about medication that has been administered (or as soon as reasonably practicable e.g. if a child is on a residential trip). A note will be made by their teacher of medicine given (time and dose) in the child's contact book.

# Self-Administration

If children can take their medicines themselves, staff may only need to supervise for example, asthma inhalers. The Health Care Plan agreed between the parents, school and health care professionals should say whether children may carry, and administer (where appropriate), their own medicines, bearing in mind the safety of other children and medical advice from the prescriber in respect of the individual child.

## **Refusing Medicines**

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records and follow agreed procedures. The procedures may either be set out in the individual child's health care plan. Parents should be informed of the refusal as soon as possible after the missed dose and on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures should be followed.

## Storage of Medicines

The medication will be stored in accordance with the product instructions and out of reach of children as necessary. Routine medication will be kept in the school office (Infant site) or staff room (Junior site).

Medicines and devices such as asthma inhalers, blood glucose testing meters and Epipens should be readily available and not locked away. Asthma inhalers should be marked with the child's name.

We request that a child with asthma keeps an inhaler at school in addition to any spares kept in their school bag or at home. We ask that parents set out this arrangement clearly in their child's Health Care Plan.

A few medicines need to be refrigerated (e.g. penicillin). They can be kept in a refrigerator containing food but should be in an airtight container and clearly labelled. Children are not allowed access to a refrigerator holding medicines.

Medicines will be passed back to parents by a member of staff directly. The school minibus drivers will carry the medicine of any child travelling by minibus.

The School Principal will ensure that the risks to the health of others are properly controlled. This duty is set out in the Control of Substances Hazardous to Health Regulations 2002 (COSHH).

## Disposal of Medicines

School staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the disposal of needles. The school will request that sharps boxes be obtained by parents on prescription from the child's GP or paediatrician. Collection and disposal of the boxes will then be arranged with the Local Authority's environmental services. Any used Epipens will be passed to the Emergency Services upon arrival to school.

# Staff Training

Training on the administration of the prescription medication that requires technical/medical knowledge (such as an Epipen, Inhalers) will be arranged for staff to ensure that medication is administered safely.

In some cases, written instructions from the parent or on the medication container dispensed by the pharmacist may be considered sufficient. This is for the school to decide and record in the pupil's individual health care plan.<sup>2</sup>

# Hygiene and Infection Control

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment. See procedure for cleaning of bodily fluids annexed to our Health and Safety Policy.

<sup>&</sup>lt;sup>2</sup> DFE 'Supporting Pupils with a Medical Condition', December 2015

## Inclusion

We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our Sickness Exclusion Policy and safeguarding duties, we will ensure that all pupils' health is not put at unnecessary risk from, for example infectious disease. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

We endeavour to make any reasonable adjustments so that children with medical conditions have access to the curriculum (including physical education) and extracurricular activities, such as school/class trips, performances and after-school clubs. The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises. Medicines and medical devices required will be brought by staff on the trip.

We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

## Home to School Transport

Most pupils with medical needs do not require supervision on school transport, but drivers should know what to do in the case of a medical emergency.

Some pupils are at risk of severe allergic reactions. Risks will be minimised by not allowing anyone to eat on the school minibuses. No nuts are allowed in school or on school minibuses at any time.

## Emergency Procedures

Mrs Notley, the Appointed First Aider/ Business Manager, the Headteacher are usually responsible for calling emergency services to the Infants and Mrs Atkins, Head of KS2 at the Junior site.

All staff should however know how to call the emergency services. A reminder of the Emergency Services contact procedure is kept by the telephone in the School Office and the Junior Teacher's Staff room. A member of staff should always accompany a child taken to hospital by ambulance, and should stay until the parent arrives. Staff should not take children to hospital in their own car; it is safer to call an ambulance.

Health professionals are responsible for any decisions on medical treatment when parents are not available. If emergency cover is required, staff from the other school site (e.g. Infant or Junior site) will be brought over to assist. Individual health care plans should include instructions as to how to manage a child in an emergency.

## Unacceptable practice

Although staff at Bryony School should use their discretion and judge each case on its merit with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assume that every child with the same condition requires the same treatment;
- Ignore the views of the child or their parents\carers; or ignore medical evidence or opinion (although this may be challenged);
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- Penalise children 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 breaks whenever they need to in order to manage their medical condition effectively;
- Require parents/carers, or otherwise make them feel obliged to attend school to administer routine medication covered by this policy;
- Prevent children from participating, or creating unnecessary barriers to children participating in any aspect of school life, including school trips.

# **Complaints**

Should parents\carers be unhappy with any aspect of their child's care, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to a member of the Senior Leadership Team (SLT) who will, where necessary, bring concerns to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parent\carer must make a formal complaint using the Bryony School Complaints Procedure.

## Employer Responsibility

The School Principals have Employers Liability Insurance which provides cover for injury to staff acting within the scope of their employment: Employers' Liability Ecclesiastical Insurance. *(renewed 1st July annually)* 

Policy adopted by the Headteacher	September 2022
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