



*The caring path to achievement,  
reflecting the values of Christ.*

Headteacher – Mrs Diane Bate  
Chair of Governors – Cllr J Bell

# Medical Conditions Policy

Adopted Spring Term 2017

Signed: *J Bell* .....(Chair)

Signed: *Diane Bate* .....(Headteacher)

## Policy Statement

The District C E Primary is an inclusive community that aims to support and welcome pupils with medical conditions.

We aim to provide all pupils with all medical conditions the same opportunities as others at school.

The school ensures that all staff understand their duty of care to children and young people in the event of an emergency.

The school understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.

The school understands the importance of medication being taken as prescribed.

### **This policy runs in conjunction with and takes regard of**

**‘Supporting pupils at school with medical conditions’  
DFE document December 2015**

**‘Joint protocol for supporting pupils at school  
with medical needs’  
October 2014**

## **The District ensures that the whole school environment is inclusive and favourable to pupils with medical conditions**

School is committed to provide a physical environment that is accessible to pupils with medical conditions.

School ensures that 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.

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, breakfast club, school productions, after school clubs and residential visits.

School ensures all classroom teachers; PE teachers and sports coaches make appropriate adjustments to sport, games, and other activities to make physical activities accessible to all pupils.

School ensures all pupils have the appropriate medication or food with them during physical activity and that pupils take when needed.

## **Guidance on administering medication in school**

- Medicines should only be administered in school when essential and only be accepted if a doctor, dentist or pharmacist prescriber has prescribed them.
- Medicines should always be provided in the original container and include the prescriber's instructions for administration and dosage.
- School should **never** accept medicines that have not been prescribed to the child, this includes over the counter medicine.
- No child should be given medicine without their parent's written consent.
- Parents must complete a **Parental Agreement form giving** school permission to administer the medicine on their behalf. Included in this form:
  - Name of child
  - Name of medicine
  - Dose
  - Method of administration
  - Time/frequency of administration
  - Any side effects
  - Expiry date
- A member of staff will then be responsible for administering the medicine, witnessed by another member of staff.
- A record of medicine administration, and by whom must be recorded on the **Record of medicines administered form-two members of staff must be present and sign.**
- Staff take on the voluntary role of administering medication and are aware, that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication.

## **Storage of medicines**

- Medication is stored in a fridge in the staffroom and only accessed by staff.
- Each medicine must be clearly labelled with child's name and contain the **Parental Agreement form for Administration of Medicines**.
- The **Record of medicines administrated form** file must be completed at time of administration.
- The First Aid officer will check regularly the expiry dates and disposes of medicines no longer in date, by returning to parents or using the Chemist disposal of drugs service.
- Emergency medicine, e.g. Nut allergy/Epipen packs are stored in the main office.
- A Health Care Plan, if applicable must be kept with its emergency pack.
- **Parental Agreement forms** are retained in file for full academic year.

## **Guidance for self-administration of medication in school**

All use of medication defined as a controlled drug, even if the pupil can administer the medication themselves, is done under the supervision of a member of staff.

- As with other medication parents must complete a **Parental Agreement form** for their child to have any form of medication in school.
- Relievers (blue inhalers) need to be available to the child as and when needed.
- Young children will need support and supervision when using inhaler devices and stored by adult in an easy to access area.
- Older children are allowed to carry them with them.
- A copy of a child's Management Plan should be made available to school by the parent.
- A record of inhaler usage will be kept for each child, this will be completed and remain with child's inhaler.

## **Guidance for managing Asthma**

- If school staff are assisting children with their inhalers, a consent form from parent/carer should be in place. Individual care plans need only be in place if children have severe asthma, which may result in a medical emergency.
- Inhalers MUST be readily available when children need them. Pupils of year 3 and above should be encouraged to carry their own inhalers. If the pupil is too young or immature to take responsibility for their inhaler, it should be stored in a readily accessible safe place.
- It would be considered helpful if parent/carer could supply a spare inhaler for children who carry their own inhalers. This could be stored safely at school in case the original inhaler is accidentally left at home or the child loses it whilst at school. This inhaler must have an expiry date beyond the end of the school year.
- All inhalers should be labeled with the child's name.
- Some children, particularly the younger ones, may use a spacer device with their inhaler; this also needs to be labeled with their name. The spacer device needs to be sent home at least once a term for cleaning.
- School staff will attend regular update training provided by the Health authority
- Parent/carer should be responsible for renewing out of date and empty inhalers.
- Parent/carer should be informed if a child is using the inhaler excessively.
- Physical activity will benefit pupils with asthma, but they may need to use their inhaler 10 minutes before exertion. The inhaler MUST be available during PE and games. If pupils are unwell they should not be forced to participate
- If pupils are going on offsite visits, inhalers MUST still be accessible.
- It is good practice for school staff to have a clear out of any inhalers at least on an annual basis. Out of date inhalers, and inhalers no longer needed must be returned to parent/carer.
- Asthma can be triggered by substances found in school e.g. animal fur, glues and chemicals. Care should be taken to ensure that any pupil who reacts to these are advised not to have contact with a substance they have an allergic reaction to.

## **Guidance for Administration of EpiPen by School Staff**

Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. It usually occurs within seconds or minutes of exposure to certain foods or other substances, but may happen after a few hours.

An EpiPen is a preloaded pen device, which contains a single measured dose of adrenaline (also known as epinephrine) for administration in cases of severe allergic reaction. An EpiPen is safe, and even if given inadvertently it will not do any harm. It is not possible to give too large a dose from one device used correctly in accordance with the care plan.

School staff will attend regular training provided by the Health service.

- There should be an individual care plan and Consent Form, in place for each child. These should be readily available. These will be kept in the child's care pack.
- The EpiPen should be readily accessible for use in an emergency. It should be kept in the original named box. Expiry dates should be checked regularly and parents have responsibility to replace it as necessary.
- The use of the EpiPen must be recorded on the child's care plan, with time, date and full signature of the person who administered the EpiPen.
- Once the EpiPen is administered, a 999 call must be made immediately. If two people are present, the 999 call should be made at the same time of administering the EpiPen. The used EpiPen must be given to the ambulance personnel. It is the parent/carer responsibility to renew the EpiPen before the child returns to school.
- The EpiPen must be taken if the child leaves the school site. The child must be accompanied by an adult, who has been trained to administer the EpiPen.

## **Guidelines for Managing Hypoglycemia (Hypo or low blood Sugar ) in pupils who have Diabetes**

To prevent a hypo

- There should be a care plan and consent form in place. It will be completed at the training sessions in conjunction with staff and parent/carer.

Staff should be familiar with pupil's individual symptoms of a "hypo". This will be recorded in the care plan.

- Pupils must be allowed to eat regularly during the day. This may include eating snacks during class time or prior to exercise. Meals should not be unduly delayed due to extra curricular activities at lunchtimes.
- Off site activities e.g. visits, overnight stays, will require additional planning and liaison with parent/carer.

To treat a hypo

- If a meal or snack is missed, or after strenuous activity or sometimes even for no apparent reason, the pupil may experience a "hypo". Symptoms may include sweating, pale skin, confusion and slurred speech.
- Treatment for a "hypo" might be different for each child, but will be either dextrose tablets, or sugary drink, or Glucogel/Hypostop (dextrose gel), as per care plan.

Whichever treatment is used, it should be readily available and not locked away. Many children will carry the treatment with them.

Parent/carer should be informed of a hypo where staff have issued treatment in accordance with care plan.

If Glucogel/Hypostop has been provided

- The Consent Form should be available.
- Glucogel/Hypostop is squeezed into the side of the mouth and rubbed into the gums, where it will be absorbed by the bloodstream.
- The use of Glucogel/Hypostop must be recorded on the child's care plan with time, date and full signature of the person who administered it.

It is the parent/carer responsibility to renew the Hypostop/Glucogel when it has been used.

**Refer to Insulin pump –operational procedures:  
'Joint protocol for supporting pupils at school with medical needs'.**

## **School Trips and Visits**

Medication required during a school trip should be carried by the pupil, if this is normal practice. If not, then a trained member of staff or the parent/carer should be present, either of whom can carry and administer the medication as necessary. Parent/carer must complete a Consent Form if their child requires any medication whilst on a school trip or visit.

## **Staff awareness and training**

All staff know what action to take in the event of a medical emergency, this includes:

- How to contact the emergency services and what information to give.
- Who to contact within school.

There are 3 staff with full **First Aid at Work Certificates**

There are 6 staff with **Paediatric First Aid Certificates**

There are 7 Staff with **Emergency First Aid Certificates**

These certificates are updated under the guidelines.

Staff attend appropriate training from health professional for more specific medical conditions

- Anaphylactic shock
- Diabetes
- Asthma
- Epilepsy

## **Confidentiality**

The Head and staff should always treat medical information confidentially. The head should agree with the child where appropriate, or otherwise the parent, who else should have access to records and other information about a child. If information is withheld from staff they should not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

Supply and temp staff are informed of children with Medical needs.

Documents related to this Policy

- **'Supporting pupils at school with medical conditions' DFE document Dec 2015**
- **'Joint protocol for supporting pupils at school with medical needs' Oct 2014**

**The medicine logs will be monitored by the resources committee of the governing body at least once a term. All logs for inspection will be anonymised.**

**Title of Policy:** *Medicine policy*  
**Department:** *Whole School*  
**Responsible Officer:** *Gemma Holcroft*  
**Date Completed:** *January 2017*  
**Date Review Required:** *January 2020 (or sooner if legislation changes)*

*Aims: Please identify the main aims of the policy, decision or function?*

**We aim to provide all pupils with medical conditions and needs the same opportunities as other children within school.**

*Impact upon different sections of the School / Community / Staff Groups: **It is essential that policies, decisions, practices and programmes promote equality of opportunity and good relations within the community, and do not leave the School vulnerable to discrimination claims***

<b>Equality Strand</b>	<b>Issue</b>	<b>How will this be taken into account?</b>
General Issues	Absence	There will be flexibility in attendance arrangements to meet the needs of children who have medical needs and conditions.
	Privacy	All staff will be informed of medical needs and conditions, whilst still ensuring the child's privacy and dignity.
	Consent	To enable parents and carers to exercise choice around medicine, which may be linked to their religion, culture or belief .
Age	Administration	Support is in place for those children who are too young to manage their own medicine.
Disability	Administration	Support is in place for those children who are unable to manage their own medicine.
Carers	Responsibility	Ensure that carers are the legal guardian and are authorised to sign for administration of medicines.
Religion or Belief	Customs and beliefs.	Respect the rights of all religions when requests to administer medicine

