

To be read in reference to the DFE documentation '*Supporting pupils at school with medical conditions*' (2017) and also the school policy for supporting pupils with medical conditions. Information is also provided on all health and safety notice boards.

The Governors and staff of Normanton All Saints CE (A) Infant School wish to ensure that pupils with medical needs receive care and support. Legal advice states that it is a matter for the **headteacher's discretion** whether or not to administer medicines to pupils. We are a caring staff and recognise that from time to time pupils do have additional medical needs. We also acknowledge that pupils may need to take medication during the school day. Some children with medical needs are protected from discrimination under the Equality Act 2010.

Under the DFE guidance '*Supporting pupils at school with medical conditions*' (2017) school procedures for managing medicines on school premises will reflect the following details:

- medicines should **only** be administered at school when it would be detrimental to a child's health or school attendance not to do so
- no child under 16 should be given prescription or non-prescription medicines without their parent's written consent - except in an emergency
- a child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken.
- where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- schools should only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container
- all medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips
- when no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps
- a child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held
- school staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school
- non-prescribed Calpol medication can be administered by trained and designated staff where there is written parental consent and administration is agreed by the Headteacher or designated senior member of staff. This will be administered in line with dosage guidelines. This will ensure that children

experiencing mild discomfort, such as headaches, minor pain or a rise in temperature, can receive timely relief while at school without the need for parents to leave work or children to be sent home unnecessarily.

The school's policy and procedure for the administration of medicine is as follows:

Short term medication

The DFE documentation '*Supporting pupils at school with medical conditions*' (2017) states that where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

If this cannot be arranged and if medication must be provided during the school day, staff will administer medication approved by the Headteacher. Staff can administer most types of short term medications that have been prescribed by a doctor, for example antibiotics, provided the parent has completed the ***Administering Medication Form*** to request us to do so on their behalf. This form is available from the school office or from the school website.

Administering Medication Form

No medication will be administered at school unless parental written and signed permission has been given. Parents will be expected to complete the administering medication form prior to the first day of administering the medicine within school. Completed administering medication forms will need to be sent to the school office alongside medication which needs to be brought and collected from the school office. Parents will need to provide signed parental consent for the medicine to be administered and parents will be expected to provide information including the name of medication, the reason for this, the dosage and expiry date and also the time which the medication was last administered at home.

The school will keep a record log of all medicines administered to individual children, stating what, how and how much was administered, when and by whom.

Further information for parents and responsibilities

No medication will be administered at school unless written and signed permission by the parent has been given. Prescribed medication should always be provided by parents in the original container or as dispensed by a pharmacist and include the prescriber's instructions for the administration. Medication will only be prescribed in line with what has been stated on the prescribed label/ medical letter. The label should clearly state: the child's name, prescribed dose, expiry date and duration the medication should be administered for. Any change in a prescription should be supported by new directions on the package of the medication or by a letter from a medical profession. Medication should be in date and it is not the school's responsibility to notify parents if the medication date has expired. Any out of date medication should be collected by the parent. Parents will be responsible for ensuring there is an adequate supply of medication for their child whilst at school.

Administering Calpol

Calpol can only be administered in school if parental written consent has been obtained before administration. In such circumstances, Calpol will only be administered by a designated and trained member of school staff and will be given with the Headteacher/ designated senior leader's agreement. Non-prescribed Calpol will be purchased, stored and provided by the school in its original packaging. Parents will be informed on the day a dose is given (and the time this was given) and this will only be given with confirmation when the last dose was taken at home/ before school setting and within the age-appropriate dosage. Calpol will only be given where parents have confirmed that their child has had Calpol before with no adverse reaction. Calpol will not be given for more than 3 consecutive days without medical advice. If there are questions/ concerns with regards to the frequency that Calpol may be needed then medical advice will be sought for repeated use.

It will be under the headteacher's discretion as to whether to administer un-prescribed medication such as Calpol within the school.

Staff will not be able to administer the following:

- Any medication that has not been prescribed or agreed (written agreement) by a doctor (unless this is calpol, which is approved in this policy) will not be administered. Other non-prescribed medication will only

be agreed when written consent has been obtained from a doctor and when it would be detrimental to a child's health. This will be written into a health care plan for the child.

- Medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions (secondary dispensed). Alteration to the label is not acceptable. Any alteration to dosage must be accompanied by written instructions provided by the prescriber.
- Eye drops; injections; any 'timed' medication or specialist treatment without training and advice from the medical profession which would result in serious consequences to a pupil if staff were to forget to administer the dose at a precise time of day. Specialist treatment or medication will be written into an individual health care plan for a child.
- Medicines must not forcibly be given. This includes the crushing of tablets etc. into food or drinks in order to deceive. Where children and young people refuse to take medication that is essential to their health, a multi-disciplinary meeting must be held which must include the children and young person (where appropriate), the G.P or medical professional, parents/persons with parental responsibility to decide how to proceed.
- Packets of medicated sweets are unsuitable for pupils to have at school as we are unable to monitor if these are being eaten at the correct time intervals and could cause a choking risk.

Parents are welcome to come to school to administer medication to their child if they would prefer to do so.

Long term medication

With regard to pupils with long term medical needs school should ensure that they have sufficient information about the medical condition. We may need to seek advice from outside agencies for example school nursing and will need to be trained in how to appropriately administer certain medications for example the use of an EpiPen for pupils who have severe allergic reaction to certain triggers. The school's 'supporting pupils with medical conditions' policy provides a clear process for developing individual healthcare plans. A Health Care Plan may clarify for staff, parents and the child the help that can be provided.

Pupils who need to take long term medication for example inhalers to relieve asthma will be supervised by staff provided the parent has completed the **Administering Medication Form** to request this. Medication for other medical conditions may be administered by school staff after discussion with parents and/ or medical professionals.

Parents are welcome to come to school to administer medication to their child if they would prefer to do so.

Individual healthcare plans (see supporting pupils with medical conditions policy)

Some pupils may require their own individual healthcare plan. This will be written alongside external agencies such as school nursing to support pupils with long term, complex medical conditions whilst at school.

Medication needed at school Towards the end of an illness, a child may be well enough to return to school but may still have to take the remaining course of treatment e.g. finish their antibiotic medicine. If the dose has to be taken during school hours, we must follow school guidelines for administering medication.

Administering medication at nursery

Nursery staff **do not** administer medication for children who are attending the part-time session times (for example morning only or afternoon only children). This does not include asthma care or specialist medical care (which is understood and agreed by the Headteacher) as a result of training from the medical profession and where this is stated on an individual health care plan written alongside external professionals and the school SENCO. For children who are accessing the extended nursery hours this policy will be applied and adhered to.

Asthma Pupils who need to use an inhaler must have a spare one that they can keep at school at all times. This is to avoid confusion or forgetting to bring it to school. Pupils will administer their own medication whenever possible. A member of staff will supervise them and record this in their asthma care book. See separate asthma care flyer for further details. Parents of pupils with asthma will be required to complete the school administering medication form. An emergency salbutamol inhaler will be only used without a prescription for use in emergencies. Where an emergency inhaler has been used (in guidance with the DOH Use of emergency salbutamol inhalers in schools, 2015) this will be recorded and parents/ carers will be informed. Inhalers will be stored in the classroom to ensure they are accessible.

Returning to school When children are at home recovering from illness, they appear to be fit and ready to come back. Parents are asked to remember that the school day is very long for children who are not fully recovered so not to send their child back to school too soon. The school has a 48 hour policy in place for illness such as sickness and diarrhoea to prevent spread and infection.

Safeguarding (please see Safeguarding Policies and Health and Safety Policies for further details)

Child Protection Through their day-to-day contact with pupils and direct work with families, education staff have a crucial role to play in noticing indicators of possible abuse or neglect. Where it appears to a member of staff that a child may have been abused, the school is required, as part of local child protection procedures, to report their concerns to social services immediately. The Headteacher (and the Deputy Headteacher in her absence) is the designated teacher responsible for child protection. The Chair of Governors is the designated governor responsible for child protection and the Vice Chair of Governors is the school's safeguarding governor.

Data Protection Act 1998 School collects data in order to meet its statutory responsibilities for the provision of education to children in accordance with the requirements of the Education Act 1996 and The School Standards and Framework Act 1998. Some of this data will be shared with Wakefield Metropolitan District Council and may be shared with other agencies that are involved in the health and welfare of school children. Please be aware that personal data is also covered by the Data Protection Act 1998 whereby you as an individual may be liable if you disclose personal data inappropriately. Please see the school's Data Protection policy.

Safe recruitment and selection of staff. This school is committed to safeguarding and promoting the welfare of children and expects all staff and volunteers to share this commitment. All posts are exempt from the Rehabilitation of Offenders Act, therefore all convictions must be declared. Providing false information is an offence. Appointed staff, governors, regular volunteers and trainees have identity, qualification and criminal records bureau checks and have been successfully cleared to work with children.

Inclusion The policy will be applied to all pupils. We welcome our general responsibilities under the Disability Equality Duty by promoting equal opportunities, eliminating discrimination and improving access to learning for disabled people. In order to comply with the requirements of the DDA 2006 we will make reasonable adjustments to ensure all stakeholders understand and can follow this policy. We will actively seek to remove any barriers to learning and participation that may hinder or exclude individuals or groups of pupils.

Monitoring and review

This policy is monitored by the Headteacher, who reports to governors about the effectiveness of the policy on request. It will be reviewed appropriate to new legislation or to the needs of the school.