MEDICAL POLICY

Capel St. Mary CEVC Primary School
The Street, Capel St Mary, Ipswich, Suffolk IP9 2EG

Tel: 01473 310386

E:mail ad.capelstmary.p@talk21.com
Website: www.capel-st-mary.suffolk.sch.uk

Care
Achieve
Persevere
Enjoy
Learn

Suffolk County Council

This School is committed to Safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share that commitment."

At Capel St Mary CEVC Primary School we take the well-being and welfare of the children seriously and we work hard to ensure children stay safe and well. Parents and carers are asked to support the school with this policy, which aims to protect all our children. Please do not send children to school if they are unwell.

This policy defines the role of school staff and parents when dealing with the administration of medicines on a temporary or long term basis.

Administration of non-prescription medication

School office staff will only administer non-prescription medication if this has been requested by a doctor. The parent will need to have completed the required form "Request for School to Administer Medication" which can be requested from the school office or downloaded from the school's website. It is expected that parents will collect any medication provided when it is no longer required.

Administration of prescription medication

School office staff will endeavour to administer prescribed medication provided by the parent on completion of the required form. Medication should be collected at the end of each day.

If medicines are prescribed up to 3 times a day, the expectation is that parents or carers will give these medicines outside of school hours.

If medicines are prescribed 4 times a day, the school strongly encourages parents or carers to make arrangements to come into school to administer these medicines themselves. Parents and carers will definitely be required to administer the first 24 hour dose of any new prescription, e.g. antibiotics.

Please consider whether your child is well enough to be at school if they require medicine 4 times a day.

If the school agrees to assist parents and carers to administer a medicine to their child, on a temporary basis, the medicine must be provided in its original container and must have been dispensed by a pharmacist and must have a label showing the full name of the child, date of birth and dosage instructions.

Asthma Inhalers and Epipen

It is the responsibility of parents to ensure that their child has the necessary inhaler/spacer in school when needed and that it is in date. School office staff and classroom based staff will support children with asthma inhalers as necessary. Inhalers will be kept in the child's classroom in a labelled box.

The School also has an in date reliever inhaler which is kept in the office. If any child has an asthma attack without an inhaler being present, staff will contact the parents to ask if they are happy for us to administer the inhaler. Only children who have a diagnosed condition

will be able to access this facility. If such a child is having an attack, has a recognised condition and the school is unable to contact the parent then the inhaler will be given under the direction of the Headteacher or their representative.

Epipens are kept in the child's classroom and in the school office first aid cabinet in a labelled box.

Parents will ensure that if their child needs an epipen for the treatment of allergic reactions then equipment will be provided to the school in a named bag and be reviewed from time to time to ensure it is in date. A member of the office staff reviews all medical equipment at the end of the summer term.

School staff will receive training in the use of epipens.

Self Management

Children are encouraged to take responsibility for their own medicine from an early age. A good example of this is children using their own asthma reliever. Parents/carers must still complete a medicine record form, noting that the child will self-administer and sign the form. The school will store the medicine in a labelled box in the classroom or as necessary.

Refusing Medicine

When a child refuses medicine, the parent or carer will be informed the same day.

Record Keeping

All medicine administered to children during the school day will be overseen by a member of staff who will initial the record. (Record of Medication Administered in School - Appendix A) The record is kept in the school office. If medication is administered frequently by other staff members, this may be recorded and kept in the pupil's classroom.

Storage and disposal of medicine

The school will store medicine in a first aid cabinet or fridge, as necessary.

Emergency treatment and administration of medication

The school will call for medical assistance and the parent or named emergency contact will be notified. The Governing Body will support any member of staff who assists with medicine in a reasonable good faith attempt to prevent or manage an emergency situation, regardless of outcome.

If assistance is required for any child whether there is a healthcare plan in place or not then another child may be sent to the school office to call for staff to attend the emergency. If the child has a healthcare plan then staff should follow the instructions it contains.

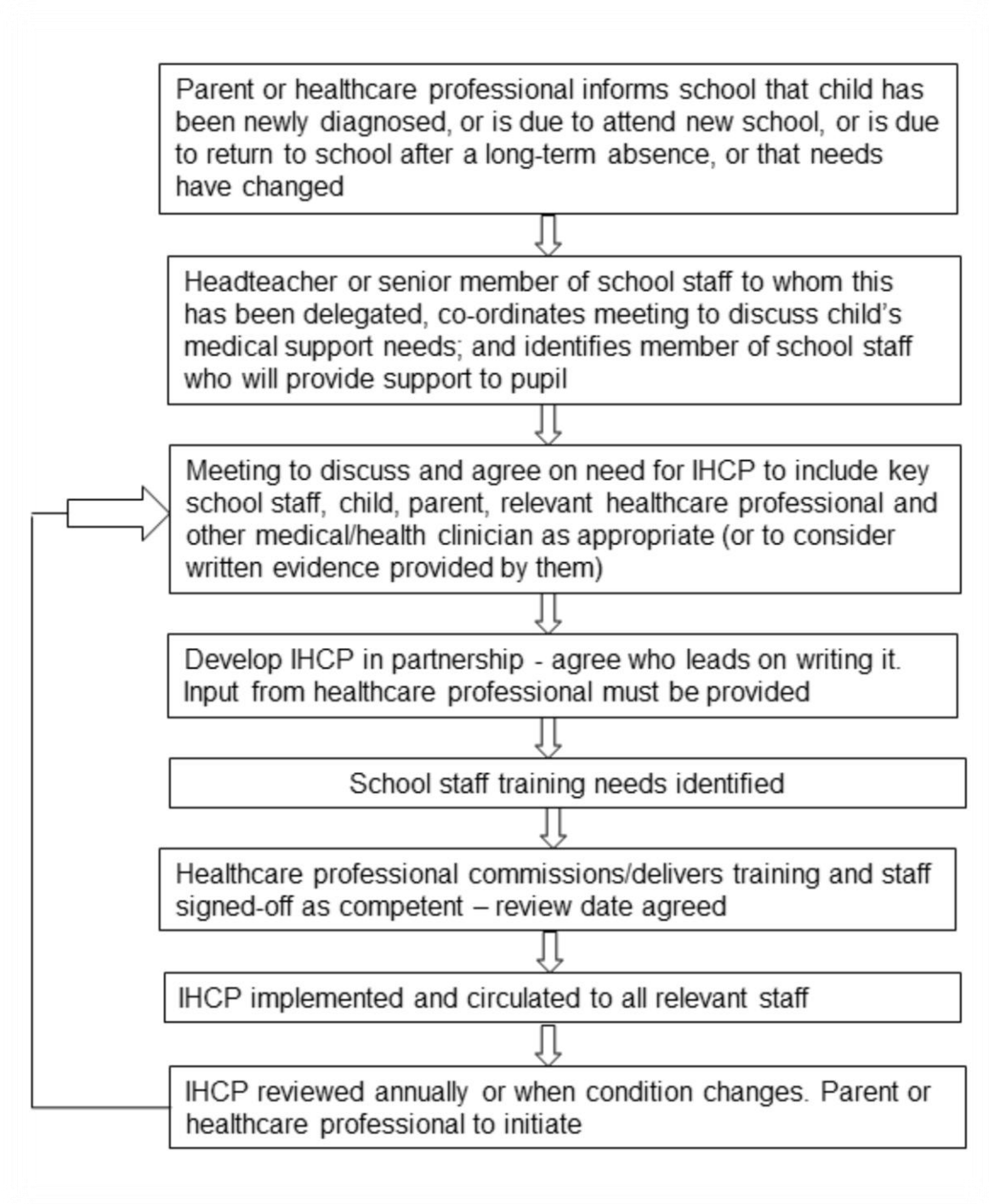
Communication of medical needs to all staff and supply staff

Teaching staff are able to view pupil's medical and dietary needs on the School's Management Information System (Arbor) which is also used for electronic registration. Supply teachers are directed to the pink medical folder kept in the staff room so that they are aware of medical or dietary needs.

The information recorded on the record is based on information provided by the parent when completing the admission form or school's data sheet. It is the parents' responsibility to ensure that the school is told of any changes to the information provided as soon as possible. Alternatively, parents are able to update their child's details on the management information system.

Longer term and more complex needs

Where the school receives notification that a pupil has a medical condition then the Headteacher shall implement the following procedure.



Information to be considered for inclusion on IHCP ("Individual Health Care Plan")

- the medical condition, its triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues eg crowded corridors, travel time between lessons;

- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- the level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, eg risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Roles and Responsibilities

Governing Body

The Governing Body will make arrangements to ensure that all children with medical conditions in school are supported and that a policy for supporting these pupils is developed and implemented. The Governing body will ensure through the Governors responsible for Health and Safety that the policy is reviewed annually and that procedures set out therein are monitored.

Headteacher

In conjunction with the Governing body the Headteacher will ensure that this policy is developed and implemented effectively with partners. They should ensure that all staff are informed as appropriate and that the required training is given. They should also ensure that staff involved are insured and know that they are insured to support the pupil's needs.

School Staff

Any member of staff may be asked to administer medication or support a child's medical needs but they cannot be required to do so. Teaching staff should take into account the needs of pupils with medical conditions that they teach. All school staff should have received training and achieve the necessary level of competence before taking on responsibility for a child with medical needs and all staff should know what to do and how to respond when they become aware that a pupil with a medical condition needs help.

Any children with a medical condition will have their photograph and medical condition/needs inserted ~~into the front of their class register,~~ in the pink medical folder in the staff room so any members of staff or supply teachers ~~in their class~~ are aware of any medical requirements. ~~A folder is also kept in the staff room so that all members of staff are aware.~~ Children's details are under a cover for GDPR purposes.

School Nursing Teams

The school nurse will notify the school when a pupil has been identified with a medical need and provide advice on those needs. They are also able to provide a valuable liaison between health professionals.

Other Healthcare professionals including GPs etc.

The school will notify the school nursing team (if appropriate) when a pupil is identified with a medical condition. Other professionals may provide support and advice on developing Healthcare plans and specialist teams may be able to provide support for children with particular conditions eg asthma. diabetes or epilepsy.

Pupils

If appropriate for the pupil's age and understanding, they ~~The pupil~~ should be fully involved with discussions about their medical condition.

Parents

Parents should provide the school with sufficient and up to date information about their child's needs. Parents should be fully involved in the development of Healthcare plans and the support their child receives at school. They should ensure that they or another nominated adult are contactable by the school at any time.

Staff training and support

All staff asked to support a pupil with a medical need will receive appropriate training as identified in the pupil's Individual Healthcare Plan. This may be arranged by the school or by lead healthcare professionals with specialist knowledge.

Staff must not give prescription medication or undertake healthcare procedures without appropriate training.

In most cases, other than the most complex or severe written instructions from the parent, using a "Request for School to Administer Medication" form as necessary or those on the medication container dispensed by the pharmacist may be considered sufficient although it is for the school to decide having regard to each situation as it arises and having regard to any relevant healthcare plan.

A first aid certificate is not sufficient. Healthcare professionals can provide confirmation of the proficiency of staff in a medical procedure or providing medication.
Whole staff training will be provided as necessary and all staff will be informed by the Headteacher of the contents of this policy and their role in implementing it.

The advice of parents should be sought but family members should not be the only source of training for staff.

Managing their own medical needs

The pupil will be encouraged with the knowledge and agreement of the parents to manage their own health needs as far as it is practicable. If possible they will carry medication and equipment with them. If a child refuses to take medication or carry out a necessary procedure then staff should seek assistance from the parents immediately.

Managing medicines on school premises

The following procedures should be followed:

- 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 exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality. Schools should set out the circumstances in which non-prescription medicines may be administered.

- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, eg for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed.

- 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 that 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. Where relevant, they should know who holds the key to the storage facility. 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, eg on school trips.

- 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 in school.

- 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.

- 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.

Use of Electronic Devices to Support Children with Medical Conditions

Where a child has a condition, such as Diabetes, a smart watch or phone with an app maybe supplied to the child to help them manage their levels. Where this happens, agreement must be sought by the parent prior to these devices being used. As far as practicably possible features on these devices such as making calls and taking photographs should be disabled.

If a child with such a device abuses this situation the school reserves the right to discuss future treatment options with the parent.

Day trips, Residential visits and sporting activities

Every effort will be made in consultation with parents and healthcare professionals to allow any pupil with medical needs to participate fully in school trips and sporting activities. A risk assessment will be carried out to take account of any reasonable adjustments that may be needed.

Complaints

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Policy reviewed: June 2025
Next Review date: June 2027

APPENDIX 1

Record of Medication administered in School

Date	Name	Time	Medication	Dose	Reaction	Print Name	Signed