

Managing Medicines and First Aid Policy

Supporting Children with Medical Needs

This Policy should be read in conjunction with the Thomas Keble Safeguarding (Child Protection) Policy

Introduction

Thomas Keble School has adopted this policy as an “appropriate authority” as defined in Section 100 of the Children and Families Act 2014. This Policy recognises that children with medical needs have the same rights of admission to a school as other children.

Most children will at some time have short-term medical needs, e.g. taking a course of antibiotics or after an injury. Other children have long-term needs to keep them well.

Some children with medical needs will have legal protection under the Equality Act 2010, SEN Code of Practice or Educational Health Care (EHC) Plan as appropriate. This makes it illegal to deny access to education and associated services.

Aims

- I. To meet the medical needs of all children, while attending Thomas Keble School, through consultation with health and social care professionals, pupils and parents.
- II. Pupils at school with medical conditions are properly supported so that they have full access to education, including school trips and physical education.
- III. To manage medical needs in a manner to achieve the confidence of both child and parent.
- IV. To engage child and parent in the process of managing medicines and meeting medical needs.
- V. To minimise risk to other children and staff.

Strategies

Individual Health Care Plans

- a) The main purpose of an IHCP is to identify the level of support that is needed at school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school can provide and receive.
- b) In order to keep our student medical records up-to-date we ask parents to provide us with an Individual Health Care Plan if their child has a condition that requires them to need any specialist treatment or if they need to keep medicines or equipment in school.
- c) Individual Health Care Plans will be stored securely in the medical room plus a copy in the student's file and they will be reviewed on an annual basis.
- d) The requirements stipulated by the IHCP will be implemented as secured by this policy.

Intimate Care Plans (as identified in an EHCP)

The School is committed to providing personal care that has been recognised as an assessed need and indicated in the care plan, in ways that:

- a) Maintain the dignity of the individual.
 - b) Are sensitive to their individual needs and preferences.
 - c) Maximise safety and comfort.
 - d) Protect against intrusion and abuse.
 - e) Respect the pupil's right to give or withdraw their consent or for their legal guardian to do so as deemed appropriate
- f) Encourage the individual to care for themselves as much as they are able.

These principles of care also apply to the activities known as 'Clinical Tasks' which require additional training by either the health professional who is delegating the task, or school-arranged training. Staff can refuse to perform a task if they do not feel competent to undertake it and they must have received training before undertaking any of the tasks detailed in the care plan.

Medical Room/First Aid

- a) The school operates a Medical Room. All children who report illness while at school should report to reception in the first instance. If they are deemed by first-aid staff to be unable to return to lessons they will be cared for here until the end of school or a parent/guardian collects them. A parent should not be contacted to collect a child without referral to Head of Year or SMT in all but exceptional circumstances.
- b) If a child suffers from frequent or acute pain the parents should be encouraged to refer the matter to the child's G.P.
- c) All such pupils will be recorded in a medical book, with appropriate details. SMT and Heads of Year will be advised by email if any pupil is sent to hospital or if there are any other concerns/incidents.
- d) Staff supervising the medical room will encourage children who can to return to class as soon as possible or engage in appropriate learning while there, if they are capable of doing so.
- e) The school maintains a small team of qualified "first-aid trained" staff. They will administer First Aid within the scope of their training when called upon to do so. Parents will be informed of all such instances on the same day. If the problem is beyond the expertise/equipment available then referrals will be made to medical experts (hospitals etc.). Parents will be informed as a matter of urgency once this decision has been made.
- f) An on-line record of incidents is sent to Gloucestershire County Council as necessary.

Managing medicines on school premises

- a) Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- b) No child under 16 will 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.
- c) All non-prescribed medicines administered will be recorded and parents informed, by the appropriate member of the First Aid team, or Head of Year, if appropriate.

- d) A child under 16 will never be given medicine containing aspirin or ibuprofen 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. Parents will be informed.
- e) Paracetamol will be limited to a single dose per day, never issued before 11.00 a.m.
- f) Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- g) Thomas Keble School will 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.
- h) All medicines will be stored safely. All pupils will be made aware of where their medicines are at all times and be able to access them immediately. Where relevant, they will be told 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.
- i) Asthma inhalers – Thomas Keble may choose to hold asthma inhalers for emergency use the application of which will comply with the guidance given in ‘Guidance on the use of emergency salbutamol inhalers in schools’.
- j) 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. The school will 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 will be kept of any doses used and the amount of the controlled drug held in school.
- k) 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. 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.
- l) When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps.

Long-Term Medical needs

- a) Parents are expected to keep the school fully informed of all long-term medical needs which might impact on the school day or learning.
- b) When appropriate the school will develop a written healthcare plan for such children, involving the parents, health professionals and the school “first-aid” team. The relevant Head of Year will co-ordinate the production of that plan.
- c) Children with long-term medical needs should be encouraged to take responsibility for their own medicine, under the supervision of staff. This should be clearly stated in the plan.

Refusing Medicines

- a) If a child refuses a medicine, staff should not force them to take it, but should record this and inform parents.

Educational Visits

- a) Staff must take into account pupils' known medical needs when planning any off-site activity.
- b) If additional safety measures are required then these should be built into the planning, at the earliest possible stage. A copy of any healthcare plans should be taken on visits.
- c) If staff are concerned about whether they can provide for a child's safety or the safety of other children on a visit, they should confer with SMT line-managers. Parental views and medical advice will be sought to resolve the issues.

Sporting Activities

- a) Most children with medical conditions can participate in P.E. lessons and extra-curricular sport, in a manner appropriate to their own abilities.
- b) Some children may need to take precautionary measures before or during exercise and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Implementation

- a) The overall responsibility for policy implementation lies with the Headteacher with regular review of the policy and implementation being undertaken by designated staff in consultation with the Governing Body.
- b) The Governing Body will ensure that sufficient staff are suitably trained, that all relevant staff are made aware of the child's condition and that cover arrangements and staff briefings will be undertaken to ensure an appropriate staff member is always available.
- c) Thomas Keble will engage with other relevant schools to cover any transitional arrangements of any child with medical needs.
- d) A full copy of the Guidance "Supporting Pupils at School with Medical Conditions (April 2014 DFE)" is available for any parent, pupil or member of staff to refer to. A copy is held in the Medical Room by Jean Buxton, member of staff responsible for medicines.
- e) The First Aid team - staff training provided by The Red Cross.
 - Jean Buxton
 - Juliette Camilleri
 - Sarah Davies
 - Kate Jaggard
 - Caitlin Jesson
 - Guy O'Malley
 - Annie Parfitt
- f) The school will follow the statutory requirements for First Aid and provide suitably trained First Aid staff as above.
- g) The school will use all the forms included in the guidance as standard aids to efficient administration of this policy, or develop its own to achieve the same goals.

- h) The Headteacher will write to all parents to inform them of the policy, summarising all key issues in terms of their responsibilities, on an annual basis. The Headteacher's Newsletter will remind all parents of essential information on a termly basis.
- i) Detailed practical advice from the guidance on Asthma, Epilepsy, Diabetes and Anaphylaxis will be made available to all staff. Other information will be filed in the Medical Room for staff to access.
- j) Heads of Year will receive guidance on the creation of an Individual Healthcare Plan.

Appendices

Template A: Individual Healthcare Plan

Template B: Parental agreement for setting to administer medicine

Template C: Record of medicine administered to an individual child

Template D: Record of medicine administered to all children

Template E: Contacting emergency services

Template F: Model letter inviting parents to contribute to Individual Healthcare Plan development

Template A - Individual Healthcare Plan

| | |
|--------------------------------|---------------------|
| Name of school/setting | Thomas Keble School |
| Child's name | |
| Group/class/form | |
| Date of birth | |
| Child's address | |
| Medical diagnosis or condition | |
| Date | |
| Review date | |

Family Contact Information

| | |
|-----------------------|--|
| Name | |
| Phone no. (work) | |
| (home) | |
| (mobile) | |
| Name | |
| Relationship to child | |
| Phone no. (work) | |
| (home) | |
| (mobile) | |

Clinic/Hospital Contact

| | |
|-----------|--|
| Name | |
| Phone no. | |

G.P.

| | |
|-----------|--|
| Name | |
| Phone no. | |

| | |
|--|--|
| Who is responsible for providing support in school | |
|--|--|

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

| |
|--|
| |
|--|

[Empty box]

Daily care requirements

[Empty box]

Specific support for the pupil's educational, social and emotional needs

[Empty box]

Arrangements for school visits/trips etc.

[Empty box]

Other information

[Empty box]

Describe what constitutes an emergency, and the action to take if this occurs

[Empty box]

Who is responsible in an emergency (*state if different for off-site activities*)

[Empty box]

Plan developed with

[Empty box]

Staff training needed/undertaken – who, what, when

[Empty box]

Form copied to

[Empty box]

Template B - Parental agreement for setting to administer medicine

(Please note a separate form MUST be completed for each medicine to be administered)

Staff at Thomas Keble School will not give your child medicine unless you complete and sign this form.

| | |
|------------------------------------|---------------------|
| Date for review to be initiated by | |
| Name of school/setting | Thomas Keble School |
| Name of child | |
| Date of birth | |
| Group/class/form | |
| Medical condition or illness | |

Medicine

| | |
|---|--|
| Name/type of medicine <i>(as described on the container)</i> | |
| Expiry date | |
| Dosage and method | |
| Timing | |
| Special precautions/other instructions | |
| Are there any side effects that the school/setting needs to know about? | |
| Self-administration – y/n | |
| Procedures to take in an emergency | |

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

| | |
|---|--------------------------|
| Name | |
| Daytime telephone no. | |
| Relationship to child | |
| Address | |
| I understand that I must deliver the medicine personally to | [agreed member of staff] |

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Template C - Record of medicine administered to an individual child

| | |
|----------------------------------|---------------------|
| Name of school/setting | Thomas Keble School |
| Name of child | |
| Date medicine provided by parent | |
| Group/class/form | |
| Quantity received | |
| Name and strength of medicine | |
| Expiry date | |
| Quantity returned | |
| Dose and frequency of medicine | |

Staff signature _____

Signature of parent _____

| | | | |
|-------------------------|--|--|--|
| Date | | | |
| Time given | | | |
| Dose given | | | |
| Name of member of staff | | | |
| Staff initials | | | |

| | | | |
|-------------------------|--|--|--|
| Date | | | |
| Time given | | | |
| Dose given | | | |
| Name of member of staff | | | |
| Staff initials | | | |

C: Record of medicine administered to an individual child (Continued)

| | | | |
|-------------------------|--|--|--|
| Date | | | |
| Time given | | | |
| Dose given | | | |
| Name of member of staff | | | |
| Staff initials | | | |

| | | | |
|-------------------------|--|--|--|
| Date | | | |
| Time given | | | |
| Dose given | | | |
| Name of member of staff | | | |
| Staff initials | | | |

| | | | |
|-------------------------|--|--|--|
| Date | | | |
| Time given | | | |
| Dose given | | | |
| Name of member of staff | | | |
| Staff initials | | | |

| | | | |
|-------------------------|--|--|--|
| Date | | | |
| Time given | | | |
| Dose given | | | |
| Name of member of staff | | | |
| Staff initials | | | |

Template D - Record of medicine administered to all children

Name of school/setting Thomas Keble School

| Date | Child's name | Time | Name of medicine | Dose given | Any reactions | Signature of staff | Print name |
|------|--------------|------|------------------|------------|---------------|--------------------|------------|
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Template E - Contacting emergency services

Request an ambulance - dial 9112, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. Your telephone number – 01452 770301
2. Your name
3. Your location as follows: Thomas Keble School, Eastcombe, Stroud, Gloucestershire,
4. State what the postcode is – GL6 7DY
5. Provide the exact location of the patient within the school setting
6. Provide the name of the child and a brief description of their symptoms
7. Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. Put a completed copy of this form by the phone

Template F – Letter to Parent/Carer

Dear Parent / Carer

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an Individual Healthcare Plan to be prepared, setting out what support each pupil needs and how this will be provided. Individual Healthcare Plans are developed in partnership with the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely