



Supporting children with medical needs and administration of medicines in school

Date of next review: _____ October 2024 _____

Signed: _____ *Ed Currie* _____ Date:
_____ 7.10.23 _____

Printed: _____ Ed Currie _____

Chair of Governors

Signed: _____ *Andrew Rudkin* _____ Date:
_____ 7.10.23 _____

Printed: _____ Andrew Rudkin _____

(HEAD TEACHER)

Policy Statement

This is a whole school policy and applies to all members of Lyndhurst School.

The aim of this policy is to ensure that all pupils 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.

Pupils with long term and complex medical conditions may require on-going support, medicines or care. They may require monitoring and interventions in emergency circumstances. A child's health needs may change over time in ways that cannot always be predicted, sometimes resulting in extended absences. Consideration will need to be given as to how children are re integrated into school after long periods of absence.

Associated Documents and Policies

- Health and Safety Policy
- Early Years Policy Being Healthy
- First Aid Policy
- *DfE Guidance* Supporting pupils at school with medical conditions (December 2015)



Responsibilities

Governors

The Governors are responsible for making sure that arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions is developed and implemented.

Headmaster

The Headmaster has overall responsibility for ensuring:

- staff are aware of the school's policy for supporting pupils with medical conditions
- Individual Healthcare Plans are implemented when appropriate
- all staff who need to know, are aware of a child's condition.
- there are sufficient trained staff available to implement the policy and deliver Individual Health Care Plans, including in contingency and emergency situations.
- liaison with appropriate medical services is maintained when appropriate.

School Staff

- Should take account of the needs of pupils with medical conditions, inside and outside the classroom.
- May be asked to provide support to pupils with medical conditions but cannot be required to do so.
- Should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility for supporting a pupil with a medical condition.
- Should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- Should be including in meetings when they provide support for a pupil.

Pupils

- Pupils with medical conditions should be fully involved and contribute as much as possible to their Healthcare Plans
- Pupils with medical conditions should comply with their Healthcare Plans
- Other pupils need to be sensitive to the needs of pupils with medical conditions.

Health and Safety Manager (HSM)

The HSM is responsible for:

- Putting appropriate arrangements in place in consultation with the School First Aider
- Arranging regular reports from the person appointed to oversee the taking of medication by pupils and/or administration of medicines to pupils;
- Ensuring the suitability of the procedures;



- Ensuring adequate inspection and review of this policy and the procedures is in place, including after any incidents involving pupils with medical conditions or the administration of medicines;
- Implementing a system for keeping staff up to date with information and names of pupils who need access to medication;
- Ensuring annually that all staff know how to call for help in an emergency; and
- Reporting on progress to the headmaster;

School First Aid Lead

The School named First Aid Lead is responsible for:

- Collating information provided by parents;
- Administering all prescribed medication;
- Administering any non-prescription medication;
- Ensuring safe storage;
- Providing school staff with guidance and training for staff and volunteers on medical conditions and how they may affect the education of individual pupils; and
- Reporting regularly to the (HEAD and HEALTH AND SAFETY MANAGER).

Involved together with parents/guardians and medical advisers in the formulation of individual health care plans.

Involved in providing health information as part of an assessment for an EHC plan and may be involved in delivering some of the provision, as specified in an EHC plan, to achieve defined health outcomes.

The FAL in conjunction with the local NHS trust and the Headmaster will be involved in advising/providing support for staff training on medical issues.

In the absence of a FAL, the Headmaster is responsible for trained staff giving prescribed medication during the school day.

Wherever possible children will be allowed to carry their own medicines and devices or should be able to access them quickly and easily. Children who take medicines themselves or manage procedures may require supervision. If a child refuses to take medicines or carry out procedures staff should not force them to do so but follow the procedure agreed on the IHCP.

Parents

- Should provide the school with up-to-date information about their child's medical needs
- Should be involved in the development and review of their child's Individual Healthcare Plan



- Should carry out any action agreed as part of the plan.

Procedure for when notification is received that a pupil had a medical condition

1. School, healthcare professional and parent decide whether an Individual Healthcare Plan (IHCP) is appropriate (refer to flowchart Appendix 1)
2. Where an IHCP is needed arrange meeting with parents and other healthcare professional to write Individual Healthcare Plan (Appendix 2) in partnership. (Where there is no formal diagnosis a judgement should be made in consultation with parents and healthcare professionals about what support is needed).
3. The IHCP is stored on the child's record in the school's data management system.
4. As part of the IHCP staff training needs are identified. The Headmaster ensures that sufficient staff are suitably trained to implement Healthcare Plan.
5. Ensure all relevant staff are aware of the child's condition (usually during start of academic year meeting and then during induction for new staff).
6. Put in place cover arrangements in case of staff absence, if the child requires a specific adult to support with their medical needs.
7. Brief cover teachers.
8. Write necessary risk assessments for example for school trips.
9. Where necessary parents complete agreement for school to administer medicine.
10. Put in place procedures for recording administration of medicines
11. Set date for review of Healthcare Plan (annual review unless condition changes).
Where pupils are new to the school these arrangements should be in place by the start of the school term. Where there is a new diagnosis or a child has moved mid-term then arrangements should be in place within 2 weeks of notification.

Individual Healthcare Plans should

- Be developed with the child's best interests in mind
- Clearly state roles and responsibilities
- Capture key information and actions to support children effectively
- Be drawn up in partnership between the school, parents and healthcare professionals
- Be reviewed at least annually

Managing medicines on school premises

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- Detailed information will be included in a child's IHCP.
- Where possible medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- No child under 16 should be given prescription or non-prescription medicines without their parent's written consent.
- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.



- The school will only accept prescribed medicines that are in date, labelled, in the original container as dispensed by the pharmacist and include instructions for administration, dosage and storage.
- All medicines should be stored safely.
- Children should know where their medicines are at all times and be able to access them immediately.
- Special arrangements will be put in place when a child has been prescribed a controlled drug.
- The school will keep a record of all medicines administered to individual children.
- Parents are given guidance regarding medicines in school when their child starts school.

Returning to School After a Period of Hospital Education or Home Tutoring etc.

Lyndhurst School will work with the family and healthcare professionals to ensure that the child receives the support they need to reintegrate effectively.

Lyndhurst School works in partnership with all relevant parties including the pupil (where appropriate), parent, school's Governing Body, all school staff, catering staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

Storage of Medicine and Equipment

Lyndhurst School will ensure that all staff understand what constitutes an emergency for an individual child and will make sure that emergency medication/equipment is readily available wherever the child is in the school and on off-site activities and is not locked away.

Lyndhurst School will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately.

This school will store medication that is in date and labelled in its original container where possible, in accordance with its instructions. The exception to this is insulin, which must be in date and will generally be supplied in an insulin injector pen or a pump.

Pupils may carry their emergency medication with them if they wish, or if this is appropriate, or they should know exactly where to access it.



Pupils can carry controlled drugs if they are competent, otherwise this school will keep controlled drugs stored securely, but accessibly, with only named staff having access. Staff at this school can administer a controlled drug to a pupil once they have had specialist training.

Parents are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of each term.

Lyndhurst School disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

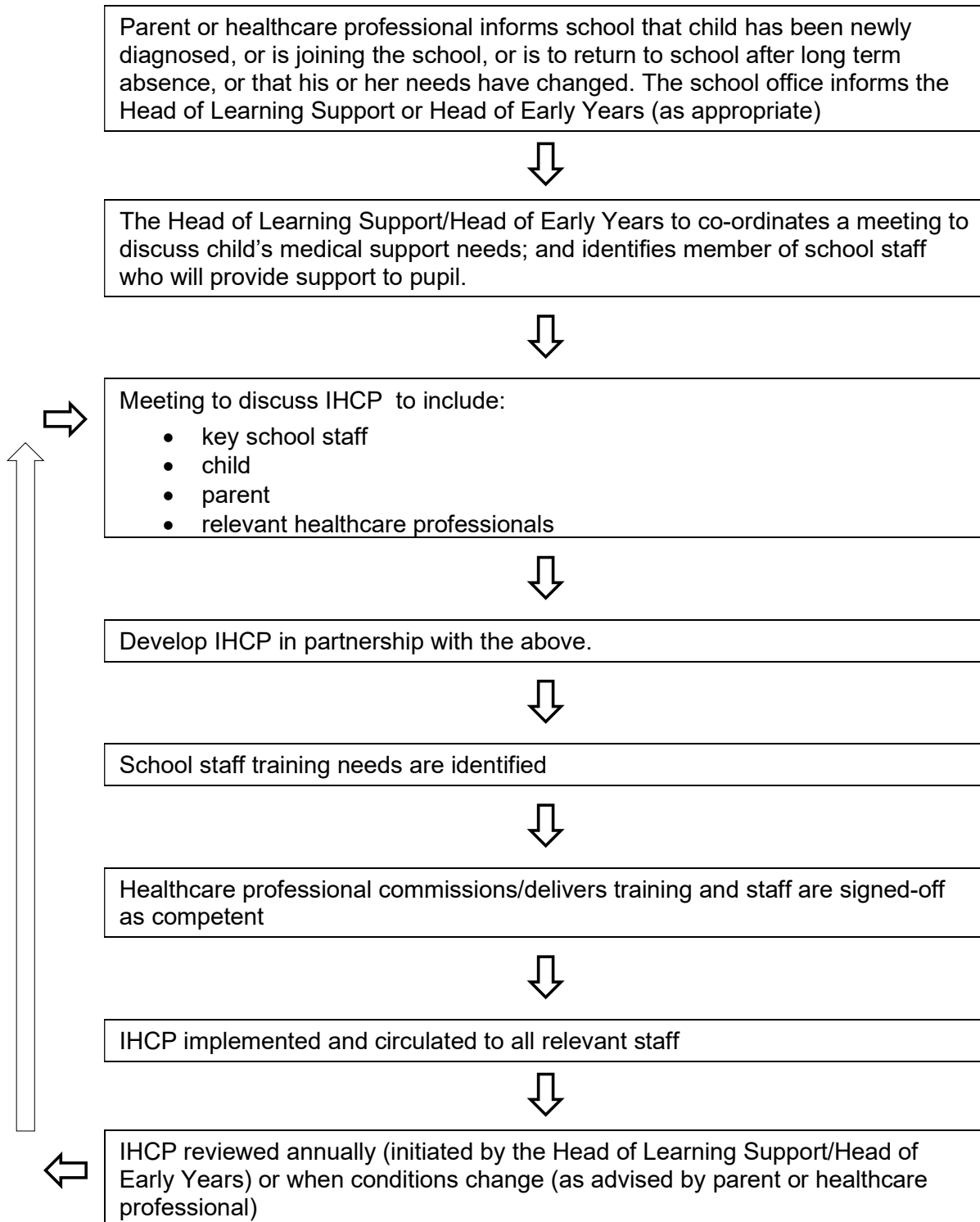
Record Keeping

Lyndhurst School will keep an up-to date record of:

- Any medication administered and by whom;
- Training undertaken;
- Individual Health Care Plans; and
- Emergencies etc.



Appendix 1: Process for developing individual healthcare plans





Individual Health Care Plan (IHCP)

Child's name

Class

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

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



Individual Health Care Plan (IHCP)

Daily care requirements

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

Arrangements for school visits/trips etc

Other information

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

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

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to