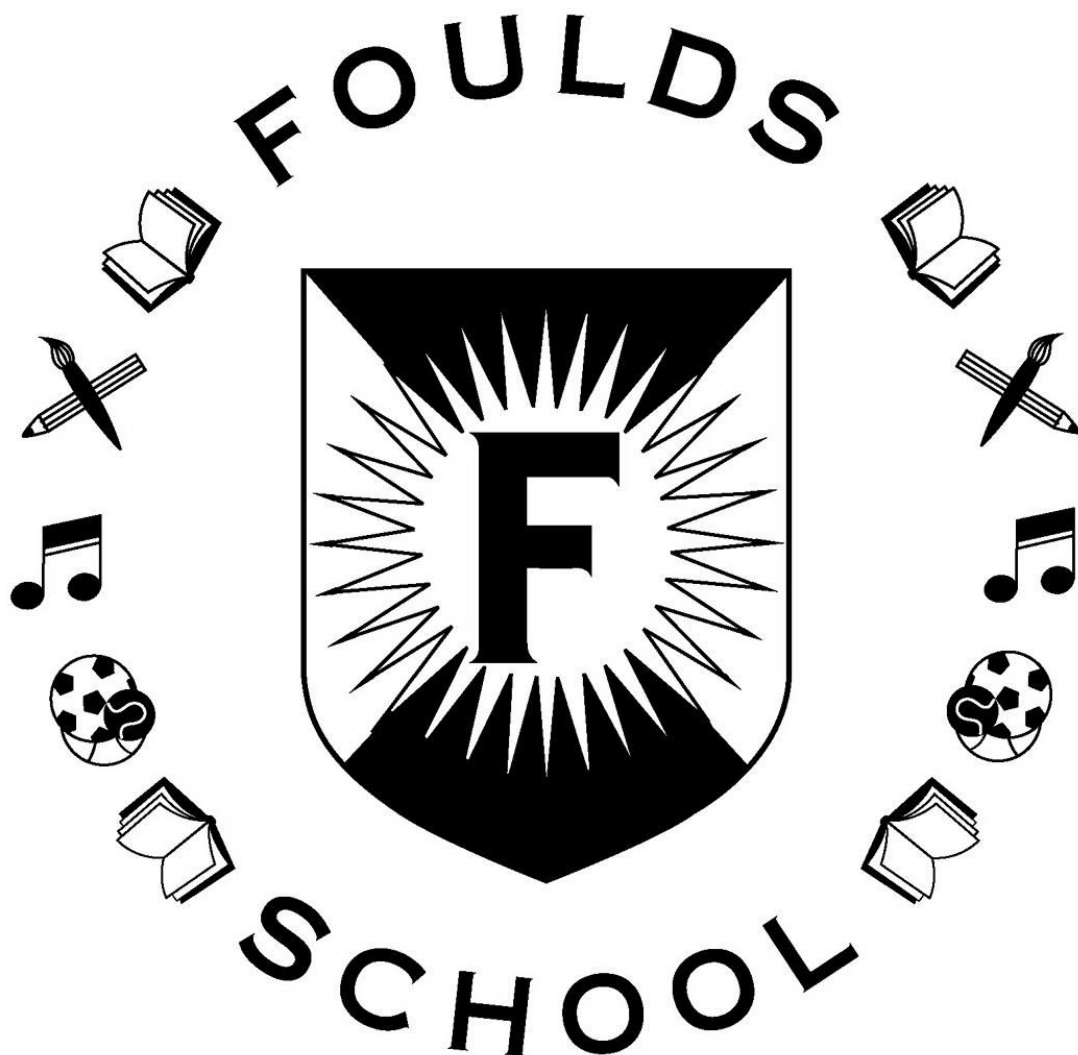


# FOULDS PRIMARY SCHOOL



## Medical Policy

Spring 2019

Updated: Spring 2019

To be reviewed: Spring 2020

## Policy for Supporting Children with Medical Needs in School.

1. The Governors and staff of Foulds School wish to support pupils at school with medical conditions and to ensure that pupils with medical needs receive appropriate and effective care and support at school. The school aims to assess risks and the Head teacher will accept responsibility in principle for members of school staff giving or supervising pupils taking prescribed medication during the school day where those members of staff have volunteered to do so and are suitably trained to provide the support that pupils need. Children are, under supervision from trained staff, actively encouraged to manage their own health needs where appropriate and if they demonstrate the competency to do so.
2. At Foulds School we will follow the guidance set out by the Barnet LA and PCT on the following: -
  - a) Guidance for the administration of medicines
  - b) Guidance for pupils at high risk of anaphylactic reaction
  - c) Guidance for use with pupils with asthma
  - d) Other conditions not specified above.
  - e) Managing medicines on the school premises
  - f) Statutory Framework for the Early Years Foundation Stage

3. Pupils in school who have a medical condition which may impact on their ability to learn will have a 'Health Care plan'. Health Care Plans are written to provide essential clarity about an individual's needs, what needs to be done, when and by whom, especially in an emergency. Plans will be reviewed annually or earlier if there is evidence that the child's needs have changed. The school's procedure for developing health care plans, once a parent/carer or healthcare professional informs school of a child's diagnosis, is outlined in Appendix 3

Copies of these plans and other medical information will be filed in the learning mentors room with due regard to confidentiality. Copies of **emergency** information will be kept with child's medication. A further copy will may be held at the relevant GP clinic along with the school health records.

4. Staff taking pupils out of the school will always take with them the medicines, equipment and associated information for any pupil in the group who has a medical condition including, as necessary, risk assessments relevant to individual's medical needs.
5. In the event of a child sustaining an injury out of school, such as bone fractures, sprains, strains etc, which may compromise their ability to access any aspect of school or curriculum, parents are to inform the school and meet with medical leader on or before return to school.
6. In the event of a child having a hospital admission, parents are to inform the school and meet with the medical leader on or before the child returns to school.
7. In the event of a child not being able to participate fully in aspects of school due to a medical reason, parents/carers are to write a covering letter to inform the school. School may request medical verification.
8. In the event of a child presenting as unwell during the school day, first aid trained staff will make an informed assessment of the child's condition and, where necessary, parents will be contacted and asked to arrange for their child to be collected from school. Children will not be allowed to go home on their own if they are unwell or have a significant injury.
9. As a matter of principle, all pupils at Foulds School will be included in every educational activity we normally undertake, unless written medical advice specifically precludes it.
10. Unacceptable Practices:

Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;

- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition eg hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

11. This policy will be reviewed annually and in response to any new health guidance.

## Medication in School Guidance for Parents and Carers

To ensure the safe administration of medicine in school, the following guidelines have been drawn up. If these are not followed, then unfortunately the medication cannot be given. The Head teacher can only accept medicines prescribed by a medical practitioner.

Appropriate training for members of staff undertaking medical procedures is essential and any training required should be arranged through discussion with the CAYP (Children and young person ) service.

1. Parents/carers are responsible for supplying the school/ first aider with information regarding their child's condition and medication.
2. Parents/carers are responsible for completing written and signed instructions. Medicines will not be accepted in school without this.
3. Parents/carers are responsible for ensuring medication is delivered in its original container with the pharmacist's label attached and handed directly to the first aider. Labels with no patient name, pharmacy name, address and telephone number and logo will not be accepted.
4. It is the parents/carers responsibility to inform the school in writing when the medicine is discontinued or the dosage changed by a medical practitioner. The relevant paperwork will need to be updated. Variations in dosage CAN NOT be made on parental instruction alone and must be corroborated by the prescribed medication label or by written instruction from the prescriber.
5. If the pupil uses local authority transport, the parent/carer is responsible for informing appropriate authority about the health care plan, especially in respect of emergency situations.
6. Parents/carers are responsible for supplying reasonable quantities of medication to school.
7. Parents/Carers are responsible for ensuring medication provided is within date and replacing medication before expiry date.
8. Parents/carers are responsible for ensuring each container provided is clearly labelled with the following prescriber's information: -

Name of medicine  
Pupil's name  
Dosage  
Dosage frequency  
Date of dispensing  
Storage requirements if important  
Expiry date

**MEDICINES IN UNLABELLED CONTAINERS WILL NOT BE ACCEPTED.**

**IT SHOULD BE NOTED THAT MEDICINES REQUIRED 3 TIMES A DAY E.G. ANTIBIOTICS SHOULD BE GIVEN BEFORE SCHOOL, AFTER SCHOOL AND DURING THE EVENING, UNLESS SPECIFICALLY INSTRUCTED OTHERWISE BY THE DOCTOR.**

**ANY MEDICATION THAT IS NOT PRESCRIBED BY A MEDICAL PRACTITIONER WILL NOT BE ACCEPTED OR ADMINISTERED IN SCHOOL.**

Medicines will be stored in the welfare room to be available for emergency use. Some medicines will be refrigerated as necessary. Medications not needed for emergency situations will be stored in a locked cabinet. Inhalers will be kept in an open cupboard, in trays with the child's name for easy access and use in an emergency. Named epipens will be kept in a drawer in the first aid treatment area. These again will be available quickly to be used in an emergency.

Emergency medication, one Epipen and one inhaler for foundation stage children will also be stored in the first aid cupboard in Apple class.

# Appendix 1

## Request for school to administer medication

The school will not give your child medication unless you complete and sign this form and the Headteacher has agreed that school staff can administer the medication.

### DETAILS OF PUPIL

SURNAME: .....FORENAME:

.....

ADDRESS: .....

.....

MALE/FEMALE: ..... PARENT CONTACT NUMBERS:

.....

DATE OF BIRTH: ..... GP NAME:

.....

CLASS: .....

CONDITION OR ILLNESS: .....

MEDICATION: .....

Name/Type of medication (as described on the container)

.....

For how long will your child take this medication?

.....

Date dispensed: .....

Expiry date: .....

### **FULL DIRECTIONS FOR USE:**

Dosage and method: .....

Timing: .....

Special Precautions: .....

Side Effects: .....

Self-Administration: .....

Procedures to take in an emergency: .....

Who brought medicine into school: .....

Signature of Parent/Carer: .....

Date: .....

## Appendix 2

### Common Illnesses and Complaints

Illness/complaint		Period to be kept away from school – <u>once child is well</u>
Diarrhoea and or vomiting with or without specified diagnosis		Until diarrhoea and vomiting has settled. 48 hours from the last incidence of either.
Diarrhoea <b>OR</b> vomiting		Until diarrhoea or vomiting has settled. 48 hours from the last incidence of either.
German Measles		Five days from onset of rash
Impetigo		Until lesions are crusted or healed
Measles		Five days from onset of rash
Scabies		None
Scarlet Fever		Five days from commencing antibiotics
Slapped Cheek		None
Chicken pox		Five days from onset of rash
Flu		None
Conjunctivitis		None
Head lice		None, however, the school will contact parents/carers and request immediate treatment before return.
Mumps		Five days from onset of swollen glands
Threadworms		None
Tonsillitis		None
Athlete's foot		None

## Appendix 3

### Process for developing individual Health Care Plans

