

# Whimble Primary School

## Policy for Supporting Students with Medical Conditions and for the Administration of Medicine



1. The staff of Whimble Primary School wishes to ensure that students with medical needs receive proper care and support. Our intention is to ensure that students with medical conditions should have full access to education including trips and PE. The governing body will ensure that staff are supported and trained and competent before they take on the responsibility of supporting students with medical conditions.
2. The school's insurance will cover liability relating to the administration of medication.
3. *The Headteacher* will be responsible for ensuring the following:

Procedures to be followed when notification is received that a student will be attending who has a medical condition (including transitional arrangements between schools, re-integration or when students' needs change; arrangements for staff training or support). Some staff have had specific training for diabetes and anaphylaxis.

Procedures to be followed when a student moves to the school mid-term or when a student has a new diagnosis. A trained member of staff will contact the receiving school or meet with the relevant professional if a new diagnosis is given.

There is a defibrillator located next to the school at the village hall for use in an emergency, all staff have a basic level of first aid training.

Asthma inhalers – parents complete a form that includes permission to use the school inhaler in an emergency. If inhalers are used the date, time and dose must be recorded on the form.

Adrenaline auto-injectors - parents complete an individual health care plan with specific triggers and treatment details. If an auto-injector is used an ambulance will be called and parents informed.

4. The above procedures will be monitored and reviewed by the Headteacher.
5. Where identified as being necessary, Individual Health Care Plans (IHCP) will be developed between Whimble Primary School, healthcare professionals and parents so that the steps needed to help a student manage their condition and overcome any potential barriers to getting the most from their education are identified. The IHCP will include:
  - a) The student's medical condition, its triggers, symptoms, medication needs and the level of support needed in an emergency. Also it must include any treatments, time, facilities, equipment, testing and access to food or drink (where it is used to manage their condition), dietary requirements and environmental issues such as crowded corridors and travel time between lessons.
  - b) Specific support for the student's education, social and emotional needs, such as how will absences be managed, requirements for extra time to complete exams, use of rest periods or counselling sessions.

- c) Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support from a healthcare professional.
- d) Cover arrangements and who in the school needs to be aware of the student's condition and the support required including supply staff.
- e) Arrangements for written permission from parents for medication.
- f) Arrangements or procedures for school trips or other school activities outside the normal timetable; completion of risk assessments for visits and school activities outside the normal timetable.
- g) The designated individuals to be entrusted with the above information.
- h) Procedures in the event of the student refusing to take medicine or carry out a necessary procedure.

- 6. *Mrs Carole Shilston* will have the final decision on whether an Individual Health Care Plan is required.

### **Students with asthma**

- 7. *Whimble Primary School* has decided to hold an emergency inhaler and spacer for the treatment of an asthma attack.
- 8. *The headteacher* will be responsible for ensuring the following:
  - Instructing all staff on the symptoms of an asthma attack.
  - Instructing all staff on the existence of this policy.
  - Instructing all staff on how to check the asthma register.
  - Instructing all staff on how to access the inhaler.
  - Making all staff aware of who the designated staff are and how to access their help.
- 9. *The headteacher* will be responsible for ensuring that designated staff:
  - Recognise the signs of an asthma attack and when emergency action is necessary.
  - Know how to administer inhalers through a spacer.
  - Make appropriate records of attacks.
- 10. *Carole Shilston and Caroline Rowe* will be responsible for the storage and care of asthma medication. Parents are responsible for its safe disposal.
- 11. *Caroline Rowe* will be responsible for ensuring that there has been written consent from parents for the administration of the emergency inhaler and spacer. The emergency inhaler/spacer will only be available for students who have been diagnosed with asthma and have been prescribed reliever inhaler AND for whom parental consent has been given. This information shall be recorded in the student's IHCP plan.
- 12. *The class teacher* will be responsible for the supervision of administration of medication and for maintaining the asthma register.
- 13. *The headteacher* will be responsible for ensuring parents are informed in writing when the emergency inhaler/spacer has been used.

## **Students with anaphylaxis**

14. *Whimble Primary School* has decided **not** to hold an emergency adrenaline auto-injector for the treatment of an anaphylaxis attack for pupils who have been diagnosed with anaphylaxis and prescribed an auto-injector.
15. *The headteacher* will be responsible for ensuring the following:
  - Instructing all staff on the symptoms of an anaphylaxis attack.
  - Instructing all staff on the existence of this policy.
  - Instructing all staff on how to check the pupil medical register.
  - Instructing all staff on how to access each child's auto-injector.
  - Making all staff aware of who the designated staff are, and how to access their help.
16. *The headteacher* will be responsible for ensuring that designated staff:
  - Recognise the signs of an anaphylaxis attack and when emergency action is necessary.
  - Know how to administer the auto-injectors.
  - Make appropriate records of attacks.
17. *The Headteacher and class teacher* will be responsible for the storage and care of the adrenaline auto-injector. Parents are responsible for its safe disposal.
18. *The Headteacher and class teacher* will be responsible for ensuring that there has been written consent from parents for the administration of a child's auto-injector. Information shall be recorded in the student's IHCP plan.
19. *Class teacher or another member of staff* will be responsible for the supervision of administration of medication and for maintaining the pupil medical register.
20. *Class teachers* will be responsible for ensuring parents are informed when the auto-injector has been used.
21. Auto-injectors will be taken with the child when off-site, including the MUGA. Whilst children are on site the designated green first aid bumbags will be hung in a labelled area in each child's class.
22. Any supply/temporary staff will be made aware of any medical needs of the children in their class and directed to where all the information is kept.

## **THE ADMINISTRATION OF MEDICINE**

23. The Headteacher will accept responsibility in principle for members of school staff giving or supervising a student taking prescribed medication during the day, where those members of staff have volunteered to do so.
24. Any parent/carer requesting the administration of medication will be referred to the policy on the website (or can ask to see a copy).

25. Prescribed medication will be accepted and administered in the establishment

Non-prescription medication will only be accepted and administered in the following circumstances: attending residential, travelling, seasonal conditions, e.g. hayfever, and at the headteacher's discretion or in the absence of the headteacher, a member of the SLT.

26. Prior written parental consent is required before any medication can be administered.
27. Only reasonable quantities of medication will be accepted and stored at school. This will be agreed between the headteacher or school administrator and the parent prior to storage.
28. Each item of medication should be delivered in its original dispensed container and handed directly to the Headteacher or School Administrator as authorised by the Headteacher.
29. Each item of medication should be clearly labelled with the following information:
- Student's name
  - Name of medication
  - Dosage
  - Frequency of dosage
  - Date of dispensing
  - Storage requirements (if important)
  - Expiry date (if available)
30. The school will not accept items of medication which are in unlabelled containers or not in their original container.
31. Unless otherwise indicated, all medication to be administered in the school will be kept in a locked box in the fridge in the Annex or in a cupboard in the School Office.
32. Where it is appropriate to do so, students will be encouraged to administer their own medication if necessary under staff supervision. Parents/carers will be asked to confirm in writing if they wish their student to carry their medication with them. In the event of a drug which is prescribed but not emergency medicine such as Methylphenidate (Ritalin), students **are not** allowed to carry these without prior agreement by the headteacher.
33. It is the responsibility of parents/carers to notify the school if there is a change in medication, a change in dosage requirements, or the discontinuation of a student's need for medication.
34. Staff who volunteer to assist in the administration of invasive medication will receive appropriate training/guidance through arrangements made with the school's Nurse Service. In pre-school settings arrangements will be made through Primary Care Health Visitors.
35. The school will make every effort to continue the administration of medication to a student whilst on activities away from the premises.