

# **Supporting Pupils with medical conditions**

## **Including procedure for administration of medicines**



**Cavendish**  
Primary School



**Knowleswood**  
Primary School

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## 1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our federation will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities
- Pupils, staff and parents understand procedures for administering prescription and non-prescription medication

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

## 2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance on [supporting pupils with medical conditions at school](#).

## 3. Roles and responsibilities

### 3.1 The governing body

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

### 3.2 The Head of School

The Head of School will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

### 3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

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Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

### **3.4 Parents**

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

### **3.5 Pupils**

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

### **3.6 School nurses and other healthcare professionals**

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

## **4. Equal opportunities**

Our federation schools are clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

## **5. Being notified that a child has a medical condition**

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place as quickly as possible.

See Appendix 1.

## **6. Individual healthcare plans**

The Head of School has overall responsibility for the development of IHPs for pupils with medical conditions.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Head of school will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

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- The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the executive Headteacher, will consider the following when deciding what information to record on IHPs:
- 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, e.g. 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, including in emergencies. If a pupil is self-managing their medication, this will 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 pupil'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 pupil'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 pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

## 7. Managing medicines

Prescription medicines and necessary over the counter medicines supplied by parents will be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have parents' written consent

Pupils will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

### 7.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure cupboard/fridge in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

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## 7.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

## 7.3 Managing over the counter drugs

Following guidance published by the British Medical Association and NHS England; At Cavendish Primary School we will administer over the counter (OTC) medicines to pupils upon written instruction from parents/carers. This includes paracetamol, ibuprofen, piriton and creams where practical and reasonable.

No child should be given over the counter medicines without their parent's written consent.

## 7.4 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. 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 pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

## 8. Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

## 9. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Head of school. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

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Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

## **10. Record keeping**

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school.

IHPs are uploaded to Arbor, as an attachment to the pupils medical conditions and all relevant staff confirm they have read it.

## **11. Liability and indemnity**

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

## **12. Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the Head of school in the first instance. If the Head of school cannot resolve the matter, they will direct parents to the school's complaints procedure.

## **13. Monitoring arrangements**

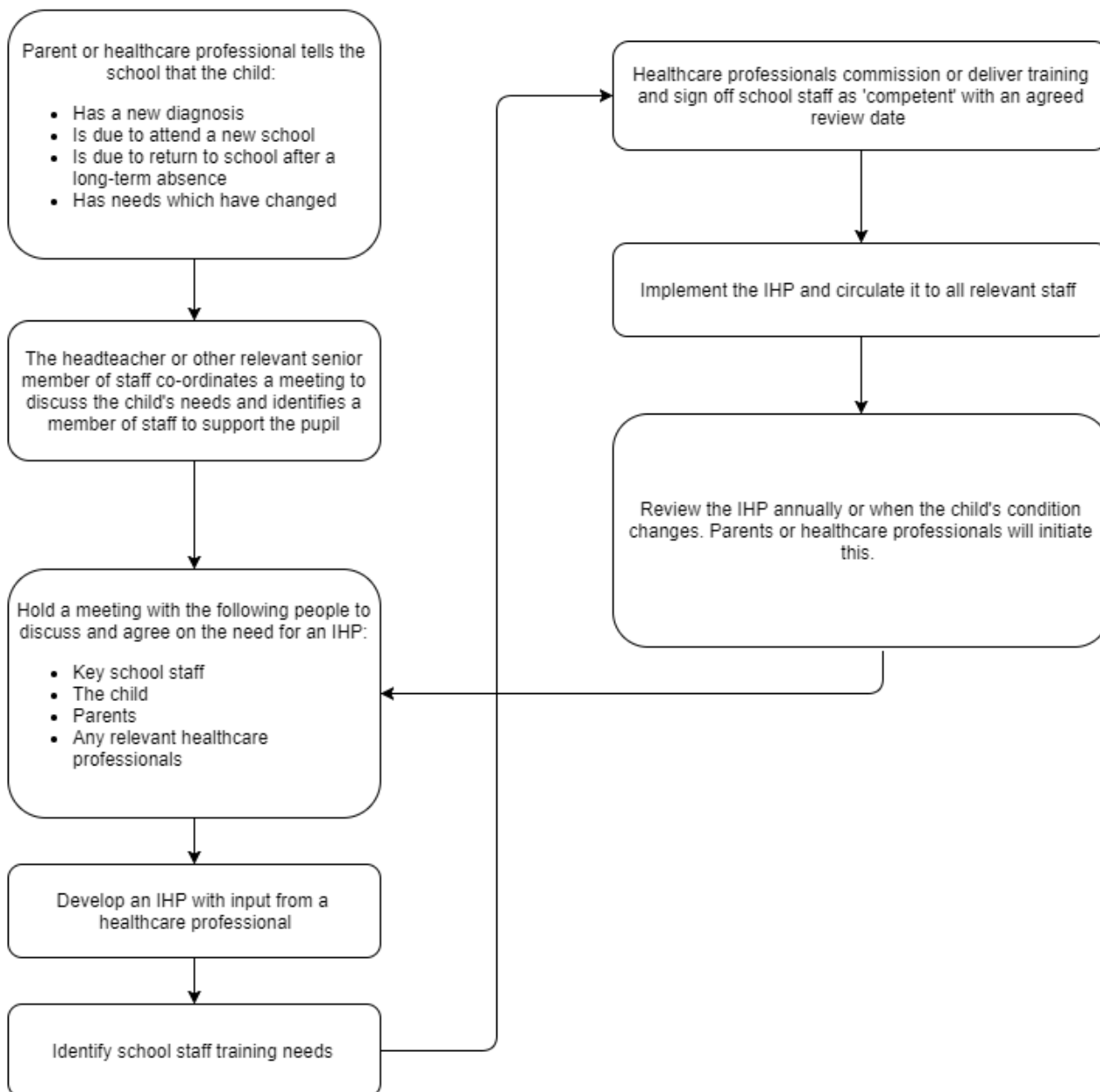
This policy will be reviewed every three years

## **14. Links to other policies**

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

## Appendix 1: Being notified a child has a medical condition





## Appendix 2: Administration of Medication in Schools

### Over the Counter (OTC) medication

- Following guidance published by the British Medical Association and NHS England; At Cavendish Primary School we will administer over the counter (OTC) medicines to pupils upon written instruction from parents/carers. This includes paracetamol, ibuprofen and creams where practical and reasonable.
- Any staff administering an OTC medicine must follow the same administration guidelines for prescribed medication, outlined in this document.
- When administering OTC medicines, under no circumstances should a staff member stray from the instructions printed on the products packaging, even under instruction from a parent/carer.
- When administering OTC medicines, records of the medicine and when it was administered should still be maintained as per statutory guidelines relating to prescribed medicines.
- If you have any concerns relating to the frequency or the type of OTC medicine brought into Cavendish, please speak immediately to the Head of School.

### Checklist

- Medication both prescription and non-prescription must be provided in a secure and labelled container.
- Medication can only normally be accepted in school where it has been prescribed by a doctor or other medical professional. In other cases, eg where a pupil suffers regularly from acute pain, such as migraine, parents may request and must supply appropriate pain killers for their child's use. Aspirin will not be permitted or administered unless there is written authorisation from a medical professional for this to be administered.
- Medication both prescription and non-prescription provided in a secure and labelled container can only be administered to pupils where parents provide such medication to the school and parents must specifically request in writing that the school administers it.
- Parents must also specify in advance at what times/intervals and what dose of the non-prescription medicine is to be given. It must never be left for staff to diagnose or decide where and when the non-prescription medication is required or administered.
- If the non-prescription medication is to be taken with other prescribed medications, parents must certify to the school that the non-prescription medication has been administered to the pupil without any adverse effect and that approval for the combined administration has been obtained from a medical practitioner.
- Non-prescription medication should not be administered over a long period of time. If non-prescription medication is required to be administered for more than a day or two then parents must seek medical advice and a medical practitioner must authorise its continued use.
- The requirements in the policy as to requests, consent, provision of information, labelling, etc, of prescription medicines also apply to non-prescription medicines.
- Medication, both prescription and non-prescription, will not be accepted without a written parental request and clear instructions as to administration. This should be provided in conjunction with the GP or other medical professional as appropriate. A member of the leadership team must be in agreement to the administration of any medication must be sought.
- Each item of medication must be delivered in its original container and handed directly to the office. The school will not accept medication which is in unlabelled containers.

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- Where a pupil travels on school transport with an escort parents/carers should inform the escort of any medication sent with the pupil or should hand the medication to the escort for transporting to the school.
- Each item of medication must be clearly labelled by the parent with the following information:

Pupil's name

Pupil's date of birth

Name of Medication

Dosage

Frequency of dosage

Date of dispensing

Storage requirements (if necessary)

Expiry date

- Where appropriate pupils will be encouraged to self-administer their own medication under staff supervision.
- Staff who volunteer to assist in the administration of medication must receive appropriate training/guidance.
- Unless otherwise indicated, all medication to be administered will be kept in a secure medicine cupboard or fridge.
- The school member of staff administering the medication must record details of each occasion when medicine is administered to a pupil.
- If pupils refuse to take medication, the school staff should not force them to do so. The school should inform the child's parents as a matter of urgency and may need to call the emergency services.
- Parents/carers should be advised that it is their responsibility to notify the school of any changes to a child's medication. Parents/carers should also inform the school of any other circumstances that may affect the administration of medication or of the child's reaction to the medication. (Schools should consider having procedures requiring parents at regular intervals – termly – to confirm that the information currently held by the school is correct.)

## Procedures

- 1 Parents and carers are responsible for supplying school with all necessary information regarding their child's condition and medication. This should be provided in conjunction with the GP or other medical professional as appropriate. This information should be recorded on a standard form which records the request of the parent to the administration of medication which should be updated regularly – **Appendix 3**. A signed copy of this form should be kept in an accessible place near to the medicine, a copy on the pupil's file and a copy given to parents.
- 2 Medication can only be administered to pupils where parents **provide** such medication to the school and parents must specifically **request in writing** that the school administers it.
- 3 All items of medication should be delivered to the school office staff by parents, carers or escorts employed by the authority.
- 4 Each container should be clearly labelled with the following:
  - Name of medication
  - Pupil's name
  - Pupil's date of birth

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- Dosage
  - Dosage frequency
  - Date of dispensing
  - Storage requirements (if applicable)
- 5 Parents should be asked to make it clear whether medication needs to be kept in school or should be collected at the end of the day.
- 6 Unless otherwise indicated, all medication to be administered will be kept in a secure medicine cabinet in the school office. Office staff have access to the medication. Inhalers are kept in the classroom in a clear plastic box with a red lid.

### Appendix 3: Confirmation of the agreement to request to administer medication.

Dear Parent/Carer of .....

I agree that ..... (name of child) will receive .....  
(quantity and name of medication) every day at ..... am/pm (time medication to be administered e.g. lunchtime)  
as you have requested.

..... will be supervised whilst he/she takes their medication by our  
First Aider. The arrangement will continue until either end of course of medication or until instructed by Parent/Carer.

Each item of prescribed medication must be clearly labelled by the parent/carer with the following information:

Pupil's Name	Date of Birth
Address	Name of Medication
Dosage	Expiry Date
Frequency of Dosage	Date of dispensing
Storage Requirements (if necessary)	

The school will not accept medication which is in unlabeled containers. Non-prescription medication will be administered by the school as outlined on the relevant medication dosage instructions following receipt of a signed parental consent form.

You have already supplied us all the information in the attached form giving us details of your child's medication.

Where your child requires several medications, you have confirmed that combined medication has been administered to your child without any adverse effect and that the approval has been obtained from a medical practitioner for their combined administration.

Can I remind you that it is your responsibility to ensure the school is informed in writing of any changes in your child's medication. The school should also be informed of any other circumstances that may affect the administration of medicine or your child's reaction to the medicine.

Signed .....

Leadership team member

I confirm that I will supervise .....  
medication.

whilst he/she takes their

Signed .....

Printed name of member of staff .....

**Appendix 4: Confirmation of the agreement to request to administer medication.**

**Form for schools to record details of medication given to pupils.**

Pupil's Name	
Date of Birth	
Name of Medication	

Date	Time	Dose Given	Any Reactions to the Medication	Signature of Staff Member	Print Name

## Appendix 5 – Individual Health care plan (template)

### Checklist for completing

- Describe the medical needs and give the details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc
- Name of medication, dose, method of administration, when taken, side effects, contra-indications, administered by/supervision
- Daily care requirements
- Specific support for pupil's education, social and emotional needs
- Arrangements for school visits/trips etc
- Describe what constitutes an emergency and what action to take if this occurs
- Who is responsible in an emergency?
- Identified any staff training needs

## Individual Health Care Plan

NAME:  D.O.B:	Parent's contact no:
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<b>Date</b>	<b>MEDICAL CONDITION / CONCERN</b>	<b>Signature</b>
	<b>PLANNED CARE IN SCHOOL</b>	