

## All Saints C of E Primary School



### **POLICY FOR THE MANAGEMENT OF CHILDREN WITH MEDICAL NEEDS & FIRST AID PROCEDURES**

*This school policy has been based on the LEA guidelines for the management of children with medical needs 2004.*

The full legal framework for the administration of medication in schools can be found in DFEs Circular 14/96, “ Supporting Pupils with Medical Needs in school.” Further guidance is available to schools in “Supporting Pupils with Medical Needs- A Good Practice Guide”.

LEAs, schools and Governing Bodies are responsible for the health and safety of pupils in their care. The Education Act,1996 and the Medicines act, 1968, also guide schools in dealing with pupils’ medical needs. The Health and Safety at Work Act, 1974 makes employers responsible for the health and safety of their employees as well as for anyone else on the premises. In schools this includes the Head and teachers, non – teaching staff, pupils and other visitors. ( For the legal purposes of the Health and Safety at Work Act, all pupils are considered visitors to the site.)

There is no legal or contractual duty on school staff to administer medicine or supervise a pupil taking it. **THIS IS A VOLUNTARY ROLE.**

The LEA (Local Education Authority) will provide appropriate insurance cover for school staff who volunteer to administer medicines within these guidelines. Any claims would then be directed against the insurance holder i.e. the LEA.

### **Responsibilities**

#### **Sandwell MBC**

The LEA should:

- Provide a general policy framework of good practice on supporting pupils with medical needs for Governors, Head Teachers, and Teachers
- Maintain appropriate insurance cover
- Provide explicit reassurance to staff who volunteer to assist with any form of medical procedure that they are acting within the scope of their employment and are indemnified ( see indemnity statement in indemnity forms)
- Provide access to named staff for advice

- Have in place procedures to monitor and review management of children with medical needs in schools
- Work collaboratively with the Health Services
- Ensure training needs have been addressed
- Facilitate training in conjunction with health professionals

### **The Governing Body**

Where the Governing Body is the employer they will also have the responsibilities indicated above for the LEA.

The Governing Body should:

- Ensure that the school has a policy for supporting pupils with medical needs in accordance with LEA guidance
- Ensure that the policy is appropriately implemented and monitored within the school
- Ensure that staff have appropriate training to support pupils with medical needs
- Liaise with the Health Services when necessary regarding the policy in general or its application to specific pupils

### **The Head Teacher**

The Head Teacher should:

- Implement the school policy for management of medical needs
- Sign the indemnity Statement ( in indemnity forms)
- Ensure that all staff who support children with medical needs are appropriately qualified, trained and supported
- Ensure procedures are followed and Health Care Plans are reviewed as appropriate
- Ensure that all staff are familiar with the policy
- Ensure that accurate records are kept regarding children with medical needs
- Ensure that the school health nurse, in liaison with the other health professionals, the parents and the school completes Health Care Plans for those children who need them
- Annually review with the school health nurse, specific medical needs of children in the school including the need for Health Care Plans and training for staff
- Be responsible for making decisions about administering medication in school, guided by the school's policy
- Share information with parents to ensure the best care for a pupil
- Seek parents' agreement before passing on information about their child's health to other school / health service staff in line with Data Protection requirements
- Ensure that parents' cultural and religious views are respected

- Make sure that all parents are aware of the school policy and procedures for dealing with medical needs

### **Teachers and other school staff**

School staff responsible for the welfare of children should:

- Take part in training regarding a child's medical needs if they have volunteered to support the child or administer medication. ( This includes supervising pupils who self – administer medication if the school has consented to do this within the guidelines.)
- Understand the nature of the condition, where they have pupils with medical needs in their class and be aware of when and where the pupil may need extra attention
- Be aware of the likelihood of an emergency arising and what action to take if one occurs
- Be aware of the staff who have volunteered and are trained to support the child and the back up arrangements if responsible staff are absent or unavailable
- Be aware of the times in the school day where other staff may be responsible for pupils e.g. in the playground

### **The Health Service**

The Health service should:

- Provide information and communicate effectively with parents and schools, to help them understand the child's medical condition
- Provide advice and appropriate training to school staff who are willing to support pupils with medical needs
- Provide guidance on medical conditions and specialist support for children with medical needs
- Confirm proficiency in medical procedures

The local Consultant in Communicable Disease Control advising on the circumstances in which pupils with infectious diseases should not be in school, and the action to be taken following an outbreak of an infectious disease.

### **The Parents / Carers**

- Ensure their child is well enough to attend school
- Provide the Head Teacher with information about their child's medical condition and treatment or special care needed at school
- Agree jointly with the Head Teacher, and school health nurse on the school's role in helping with their child's medical needs

- Complete consent forms detailing their child's medical needs

**If medication is to be given in school parents should:**

- Update the school in writing of any changes in their child's condition or medication
- Provide sufficient medication and ensure that it is correctly labelled
- Replace supplies of medication as required if this runs out or is out of date
- Dispose of their child's unused medication
- Give permission where their child is self-administering medication.

**School Procedures for the management of medical needs of pupils**

Teachers' conditions of employment do not include the administering of medication or the supervision of pupils who administer their own medication. This is also true of non teaching staff. However some staff may volunteer to administer medication. Any staff willing to administer medication will receive training and guidance, and be made aware of the possible side effects of the medication where these occur.

- The Head Teacher is responsible for making decisions about staff administering prescribed medication, or supervising children taking prescribed medication in school
- There may be circumstances when the Head Teacher will allow staff to administer or allow a pupil to self administer non prescription medicines. This will be at the discretion of the Head Teacher. Any administration of non prescription medicines must be recorded. This will only be authorised in exceptional circumstances, and will be treated in the same way as prescribed medicines.
- Antibiotic courses will not be administered by school staff.
- The school may make a request to the School Health Nurse for medical information about a child. ( med form 1). Parental consent must be obtained.
- A Health Care plan ( med form 2) will be completed for any child with medical needs
- Prior written agreement from parents or carers must be obtained for any medication to be administered at school to a child ( med form 6 ) The school will not give a child medicine unless this form is completed and the Head Teacher has given permission that school staff can administer medicine.
- Where medication is long term, a letter must be accompanied from the child's GP or consultant. Where the medication is short term, parents will be asked to include instructions about use, on the request form.
- Changes to instructions will only be accepted when received in writing. VERBAL messages will not be accepted.

**ALL medication MUST be clearly labelled with:**

1. The child's name
  2. The name and strength of the medication
  3. The dosage and when the medication should be given
  4. The expiry date
  5. Any special storage arrangements
- Medication will only be accepted into school in the original, labelled, child proof container from the chemist. Where a child requires two types of medication, each should be in a separate container. On arrival at school, all medication should be handed to the designated member of staff.
  - A confirmation form ( med form 7 ) signed by the school and parent / carer will be kept on file with a copy of the confirmation form retained by the parent / carer.
  - A Pupil Medicine Record will be kept. ( med form 8) These records will be kept in a file in the school office along with the relevant consent forms and plans.
  - A list of staff authorised by the Head Teacher to administer medicines will be kept in the file .
  - All medicines will be kept in a locked, wall mounted cabinet in the school office. The key will be kept in an accessible place known to designated members of staff.
  - School Staff who agree to administer medicines to pupils, with the Head Teacher's consent, will be trained by the school nurse in the arrangements and procedures for administering medicine. The school SENCO (Special Educational Needs Coordinator) will ensure that all paperwork is completed and that staff are fully conversant with school policy before they administer medicine to a pupil.
  - School staff who administer medicines will always be accompanied by a witness. Both members of staff will complete and sign the Pupil Medicine Record. ( med form 8)
  - Where there is any doubt about the need to give a particular child medication, this should be discussed with the school nurse.
  - A few medicines may be needed by the pupils at short notice e.g. asthma inhalers. In most cases pupils will be allowed to carry inhalers with them for ease of access. All inhalers kept in school must be recorded.
  - Where a child is self administering medication e.g. asthma inhaler, there must still be a written request. Inhalers must be clearly labelled as with other medicines which are received into school. It will be made clear on the appropriate forms whether the child needs supervision or not. Pupils who self administer inhalers *may* need supervision. All pupils who self administer medication i.e. inhalers, will be asked to report to a designated member of staff each time they self administer and a record will be kept.
  - Changes to instructions regarding the self administration of medicines will only be accepted in writing from the parents/carers. Verbal instructions will NOT be accepted.
  - On off – site visits, the teacher in charge will carry copies of any relevant Health Care Plans/ Medication details.

## **Emergency Medication**

There may be occasions where staff are asked to administer medication either in an emergency situation or to facilitate a child's attendance. Staff cannot be directed to do so. The administration of medicines by school staff is voluntary. It is not a contractual duty.

However, Teachers and other staff in charge of pupils have a common law duty to act as any reasonable prudent parent would to make sure that pupils are healthy and safe on school premises. This might, in exceptional circumstances, extend to administering medicine and / or taking action in an emergency. This duty also extends to teachers leading activities taking place off the school site.

This type of medication will be kept in a designated place. A copy of the consent form will be kept with the medication and will include precise, clear details of the action to be taken. The procedures will identify:

- Where medication is to be stored
- Who should collect it in an emergency
- Who should stay with the child
- When to arrange for an ambulance / medical support
- Recording systems
- Supervision of other pupils nearby
- Support for children witnessing the event

## **Staff and Visitors requiring Medication**

If staff need medication during the course of the working day, they should bring this to school with them. Any medication brought into school must be kept in a suitable, locked cabinet / cupboard. NB: STAFF in this case includes all teaching, non teaching, contract staff, visitors and volunteers.

## **Safe Disposal of Medicines**

Medicines will be returned to the child's parents and a receipt obtained and filed when:

- A course of treatment is complete
- Labels become detached or unreadable
- Instructions are changed
- The expiry date has been reached
- The term or half term ends

At the end of the half term, a check will be made of the lockable cabinet. Any medication which has not been returned to parents and is no longer required, out of date, or not clearly labelled, will be disposed of by returning it to a local pharmacy.

All medication returned, even empty bottles must be recorded. If it is not possible to return a medicine to parents it will be taken to a local pharmacy for disposal.

## **Safe Disposal of Medical Waste**

If a child requires injections, the parents must provide the equipment required, including an empty Sharps container which must be used for the disposal of any needles following use. Sharps containers if needed will be kept in the designated area of the school office.

## **First Aid**

A Learning Support assistant / practitioner will be on duty each playtime in the designated first aid area. Meals supervisory assistants will be on duty during the lunch break. First aiders will have completed an appropriate training course and will hold a current certificate.

A list of qualified first aiders will be kept in the medical file held in the school office.

## **The School's First Aid Procedures**

Where there is a risk of coming into contact with bodily fluids, the following minimum precautions must be adopted.

- Disposable gloves must be worn
- Open wounds on anyone handling spillage must be covered with a waterproof dressing
- Clean up spillages of blood or body fluids immediately, however small
- Wet spillages should be covered with Haz Tab granules NB: not urine. The school caretaker should be informed and asked to clean up spillages.
- Hands should be washed before and after any medical contact
- A record will be kept of treatment given by first aiders ( med form 9 )
- Siting of first aid boxes and first aid rooms will be displayed at key points around the building e.g. next to telephones and other key sites in the school

## **Emergency situations**

Advice and training are given to staff by the school nurse on a regular basis regarding possible emergencies that may arise with particular children in school. Identified children will have a specific care plan which will be kept in the medical file in the office. The plan will give clear instructions on what to do in case of an emergency.

## **Offsite/ Out of Hours Activities**

Risk assessments undertaken before arranging offsite/ out of hours activities must include consideration of participating pupils' medical needs. Medical needs of participating children will be considered, including the need for a trained member of staff or parental attendance.

If medication is needed, a parental request form must be completed.  
( 9 Med form 11 D)

If the child is not able to self administer under supervision, and no trained person is available to administer medicine, it may be necessary to ask the parent to attend.

The group leader will carry all relevant health forms and decide how medication should be carried.

Full LEA guidelines on the **Management of Children with Medical Needs** are available in the Head Teacher's Office.

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