

Peterbrook Primary School



Medicines in School Local Policy

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Medicines in School Policy

Peterbrook Primary is an inclusive community that welcomes and supports pupils with medical conditions. Our school provides all pupils with any medical condition the same opportunities as others at school.

We will help to ensure they can:

- Be healthy;
- Stay safe;
- Enjoy and achieve;
- Make positive contribution;
- Achieve economic wellbeing once they leave school.

At Peterbrook Primary School we:

- Ensure all staff understand their duty of care to children and young people in the event of an emergency;
- Understand that certain medical conditions are debilitating and potentially life threatening, particularly if poorly managed or misunderstood;
- Understand the importance of medication and care being taken as directed by healthcare professionals and parents;
- Will listen to the views of pupils and parents;
- Understand that all children with the same medical condition will not have the same needs;
- Recognise the duty of care that we have as stated in the Children and Families Act (England Only). This relates to children with a disability or medical conditions and are anticipatory;
- All staff understand the medical conditions that affect pupils at this school. Staff receive training on the impact medical conditions can have on pupils;
- Understand that every child has the right to the best possible health;
- Every child with a disability has the right to live a full and decent life with dignity and as far as possible, independence and to play an active part in the community.

Policy Framework

- Peterbrook Primary School is welcoming and supportive of pupils with medical conditions;
- It provides children with any medical condition the same opportunities and access to activities (both school based and out of school) as other pupils;
- No child will be denied admission or prevented from taking up a place in our school because arrangements for their medical condition have not been made;
- Pupils and parents feel confident in the care they receive from our school and the level of that care meets their needs;
- The whole school and local health community understand and support the medical conditions policy;
- Our policy is shared with all members of staff, school nurse services and trustees;
All new members of staff receive all relevant documentation, logging training appropriately with the Senior Leadership Team (SLT).

Individual Care Plans

All care plans are put into place after communication between the school, parent/carer, outside agencies, school nurse and child. A multidisciplinary approach is required. A care plan details exactly what care a child needs in school, when they need it and who is going to give it.

All staff are made aware of any information which would impact on the child's learning, behaviour or classroom performance.

At our school we have five different types of care plans.

1. Allergy / medical needs;
2. Intimate care plans;
3. Epilepsy;
4. Diabetes (provided by the hospital specialists);
5. Asthma Care plan formats.

All medical conditions and allergy care plans are currently completed by our school nurse after a referral is completed. These are updated as and when required. These are submitted electronically. A review is carried out by the **medical care officer** and school named nurse to prioritise our needs within school. Training dates are also arranged.

Intimate care plans must be completed in school for children who require toileting/personal care. These are updated as and when required by the class teacher/TA but checked on a regular basis by the **medical care officer**. These are kept in the class care plan folders after agreement from the parents/carer.

Parents of our children who require daily medication must complete all consent forms and a register form must be attached. All tablets must be kept in safe custody in the school office.

Care plans and records are kept in folders which are situated in the office. These are kept up to date by the **medical care officer** and are updated each year or as required. These are kept in safe custody.

A copy of all care plans are also kept in **yellow** folders in every classroom. These folders also hold general documentation, for example: Asthma record sheets and policies.

Prescribed Medicines

Medicines should only be taken to school when it is absolutely essential to do so and when it is impossible for the parent/carer to administer the medication for themselves to their child during the school day; that is where it would be detrimental to a child's health if the medicine were not administered during the school day.

A medical form, which can be collected from the school office, must be completed giving permission for medicines prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber to be administered in school by the **medical care officer**.

It is the responsibility of parents/carers to regularly check the condition of inhalers and ensure that they are working and have not been completely discharged.

We will send inhalers and epipens home at the end of the academic year.

Non-Prescription Medicines

Non-prescription medication such as Calpol, will be treated in the same way as prescription medication. Other remedies, including herbal preparations, will not be accepted.

All medication will require the child's name, dose, and time of administration and accompany a completed consent form, which can be collected from the school office.

Storage of Medicines

All medicines must be taken to the school office by the parent or carer and the appropriate forms should be completed. In no circumstances should medicines be left in a child's possession. **Teachers and support staff should not take receipt of any medicines.** All medicines should be stored in accordance with product instructions (paying particular attention to temperature).

All medicines must be stored in the supplied container and be clearly labelled with the name of the child; the name and dose of the medicine and the frequency of administration. Due to the age of pupils at Peterbrook Primary School, no child will be responsible for their own medicines. Relevant devices will be monitored on a case by case basis with liaison with parents and medical experts as required.

Disposal of Medicines

Staff must not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to the pharmacy for safe disposal. They should collect medicines at the end of the agreed administration time period. We will dispose of needles and any other sharps in line with local policies. Sharps boxes are kept securely within school when required.

Complex Medical Needs

Where children's needs are more complex, we work with medical professionals, including our school nurse, to ensure that individual health care plans (IHPs) are in place.

An IHP can include information on the pupil's:

- Medical condition;
- Needs resulting from the condition;
- Level of support needed, and who will provide the support.

This information will be used to make sure that:

- Staff are fully aware of the pupil's needs;
- Any training required is identified;
- Support is targeted effectively.

Not all pupils with medical conditions will need an IHP. A discussion between school, parents and healthcare professionals will be necessary when any party believes a child will be of benefit, based on evidence. Your child will be involved where beneficial and appropriate to their infant age.

For complex medical needs, Peterbrook Primary School endeavours to provide appropriate school staff with sufficient and suitable training and support to achieve the necessary level of competency before they take on any responsibilities related to this work. We will liaise with our school nurses and other agencies as appropriate such as:

- **Developing an IHP:** from healthcare professionals such as GPs and paediatricians;
- **Implementing an IHP:** from school nurses and community nursing teams;
- **Supporting pupils with specific medical conditions such as diabetes and epilepsy:** from specialist local health teams.

Where we feel we require additional support to ensure we are fully meeting the needs of a child, we will liaise with parents and the Local Authority including the school nurse and specialised teams (eg: members of local NHS clinical commissioning groups) to ensure appropriate arrangements are made.

Roles and Responsibilities

Parent/Carer

- Must give sufficient information about their child's medical needs if treatment or special care is required;
- Must deliver all medicines to the school office in person in the original packaging;
- Must complete and sign the parental agreement form;
- Must keep staff informed of changes to prescribed medicines;
- Must be conscientious of requests with minor issues such as lip balms;
- Keep medicines in date – particularly emergency medication, such as adrenaline pens;
- It is also the responsibility of parents/carers to ensure that their child understands that it is their responsibility that they carry their own inhaler when required.

Headteacher and Trustees

- It is the school trustees' responsibility that the appropriate level of insurance and liability cover is in place;
- It is the Head teacher's responsibility to ensure that the medical lead is suitable and capable of their role.

Medical Lead

- To ensure that the school's policy on the administration of medicines is implemented;
- There are First Aid trained members of staff within the school willing to volunteer to administer medication to specific pupils if required;
- To ensure that staff receive support and appropriate training where necessary and these needs are assessed through consultation of professionals where required;
- To share information, as appropriate, about a child's medical needs;
- Ensure that parents are aware of the school's policy on the administration of medicines;
- Ensure that medicines are stored correctly in a secure place/refrigerator;
- That medication does not go out of date;
- Ensure all staff are aware of the medical needs of pupils within their care.

Staff

- On the agreed administering of medicine, the child's name; prescribed dose; expiry date and written instructions provided by the prescriber must be checked;
- Ensure that the parent/carers completes a consent form for the administration of medicines following the prescriber's instruction;
- Ensure that a second member of staff is present when medicines are administered;
- Complete the 'administration of medicines' record sheet each time medication is given;
- Ensure that medicines are returned to parents for safe disposal.

- Understand that the medical conditions of pupils at this school may be serious, adversely affect a child's quality of life and impact on their ability to learn;
- Understand their duty of care to children and young people and know what to do in the event of an emergency;
- Ensure that medical arrangements are in place for off site visits including personalised medication, emergency inhaler and epipen and basic first aid kit;
- Understand what constitutes an emergency when administering emergency first aid such as a non-prescribed inhaler and/or epipen.

Emergency Medication

- All emergency medication is kept in our safe custody fridge in our school office.
- Our school has clear emergency plans on hand at every phone station within school. This gives clear guidelines to all staff for if an ambulance needs to be called. In this instance a member of staff will wait on the **High Street** and another with the child. Please refer to the risk assessment;
- Our office staff must be informed and be given clear details. Parents must be contacted first or at the same time;
- **Where hospital treatment is needed our form completed must be sent to the Solihull Education Office and a copy is to be kept in school.**

Asthma and the Administration of Inhalers

- Our staff complete an Asthma Awareness inset training on a yearly basis. All staff are encouraged to attend;
- All Asthma registers are kept in every care plan folder in each classroom. All Asthma plans must be completed and signed by a parent/carer;
- We have a spare emergency inhaler which is kept in our safe custody box in the school office. This will be checked and renewed by the **medical care officer** as and when needed.
- It is the responsibility of the class teacher to inform any new staff / supply staff who may be teaching in that classroom of a child who has medical needs.
- Our school only have **blue** inhalers with spacers kept in school;
- All inhalers are taken to every out of school activity and be taken to every PE lesson by the child. Our school inhaler is for emergencies only. This should not be used regularly on a child who may have forgotten an inhaler or not brought one into school. Parents will be informed if this is the case. The TA/Teacher must document the administration.

Epipen Care

- Our staff receive training each year and can therefore administer an epipen in an emergency situation following a care plan in place;
- We have a spare emergency epipen which is kept in our safe custody box in the school office. This will be checked and renewed by the **medical care officer** as and when needed. This is available for a child who already has an existing epipen / or a diagnosis of anaphylaxis and in an emergency situation. This should only be used at the same time as calling 999 for an ambulance.

Diabetes Care

- No child will be excluded from any part of our curriculum;
- Every child with Type 1 diabetes should have access to extracurricular activities, including overnight stays;
- Paediatric diabetes team members will ensure named staff are trained in Type 1 diabetes and the care needed for the individual child;
- Every child with Type 1 diabetes is allowed to inject insulin in public or in private, depending on their wishes. Supervision will be given by a named member of staff;
- Each child with Type 1 diabetes will have a care plan completed by the paediatric diabetes team;
- At Peterbrook Primary School we understand that not all children with Type 1 diabetes have the same needs. Each child should be treated as an individual;
- Our school ensures that a minimum of three staff at any one time are fully trained to treat a named child. Plans are made in the absence of the main trained TA/Teacher;
- Our staff will communicate with parents/carers as required by phone, or preferred, effective communication;
- A child with Type 1 diabetes will never be left alone during a hypo or be prevented from eating/drinking what is necessary to treat a hypo;
- As a school we support every child when a child needs to take a blood test. Support will be given when calculating the amount of insulin needed and checked by the named adult;
- A full transition meeting will be held at the end of every year and new named staff will be trained;
- As a school we will take the time to listen to each child and their views regarding their care.

Defibrillator

- An emergency defibrillator is situated on the corridor wall near the main school office and on the corridor wall near the first aid room for all to access;
- Clear instructions are on hand and training to staff has been given by the charity CCSHF;
- Online training is available for new members of staff. A monitoring checklist is to be completed daily by a member of staff on door duty. The **medical care officer** will ensure that the equipment inside is kept up to date and that the battery is changed in sufficient time;
- When an adult is administering CPR and requires support a child may use our helping hand system or
- collect the defibrillator and an ambulance must be called immediately;
- Procedures must be followed as displayed around school.

Documentation of Accidents and Injuries

Record Keeping

- At Peterbrook Primary School we document all accidents;
- All new medical needs are referred to the school health service team as appropriate;
- The school nurse service offers support to staff, children and parents on an appointment basis. Each year they meet with the **medical care officer** to complete a priority plan;
- The school makes sure that the pupils confidentiality is protected and the school seeks parental/carers permission before sharing any medical information with other parties, unless in a medical emergency;
- All documentation is stored away in our main school office.

Bump notes

- All minor injuries are recorded in a log book and a **white first aid form** is completed and sent home;
- All injuries which appear more serious and which may need further treatment are documented in the same way **and logged on to scholar pack by persons dealing with the incident.**
- It is vital that a phone call should also be made to inform the parent/carer of the visual injury and as to whether the child is fit enough to remain in school;
- Our school will never leave an injured child on their own. Every child must be escorted until emergency medics arrive or a parent / carer;
- All documentation must be on hand and yellow bags must be used for any soiled clothing and blood.

Lunchtime Accidents and Sickness

- It is our aim that all dinner supervisors are basic first aid trained;
- Basic first aid bags are taken onto the playground for quick response and are also kept at two locations on our playground site;
- We endeavour to provide a trained member of staff on duty at our station where more serious injuries/sickness are dealt with;
- Extra support is given by other members of staff as required;
- All documentation procedures are followed and lunchtime staff hand white notes directly to school staff to ensure they are aware of the incident. It is the teacher's responsibility to ensure all bump notes go home.

Returning to School Following a Period of Illness

At Peterbrook Primary School we work in partnership with all relevant parties including the pupil, parent, **school's governing body**, all school staff, catering staff, healthcare professionals to ensure that the return to school is planned, implemented and maintained successfully.

Infection Control

Our school follows the Guidance on infection control in schools and other childcare settings written by the Health Protection Guidance for Infectious Diseases 2023.

In the case of all sickness and diarrhoea children must be absent from school for 48 after the last episode to stop infection spreading within school.

Complaints

Complaints by parents or others should be discussed initially, as appropriate, with the class teacher or Head teacher. It is desirable that complaints should be dealt with informally, but if that is not possible, then a written, formal complaint should be registered with the Head teacher following the school complaints procedure.

Linked Policies and Review

This policy shall be reviewed on an annual basis or updated as and when required by the **medical care officer**. Policies that sit alongside this policy are:

- Safeguarding Policy;
- Intimate Care Policy;
- Health and Safety Policy;
- Supporting pupils with medical needs TEFACT.