



HIGHGATE PRIMARY SCHOOL

Policy on Managing Medicines and Medical Conditions in School

December 2021

Medical Confidentiality

In order for pupils to receive the best possible care, parents are requested to advise the school of any conditions that may require medical intervention during the school day. Information provided to the school, either by parents or health care professionals is treated in the strictest confidence. Information is only shared with members of staff whose role may lead to them providing treatment or other intervention as agreed with parents. The Head of Inclusion agrees with the parent who else should have access to records and other information about the child.

Notifying the school of medical conditions

All parents are requested to share medical information with the school through the Pupil Information Form prior to the child's first day of school. This information is updated annually. Parents are asked to inform the school office as soon as a condition has been diagnosed that will require medical treatment. Further information on specific conditions is attached to this policy (Appendix 1).

Health Care Plans (HCP)

The main purpose of the HCP is to identify and clarify the level of medical support a child needs. Not all children with medical needs will require a HCP. A short written agreement is often all that is required. On admission, the Head of Inclusion will assess whether a HCP is required. If so, the plan will be agreed with parents. A sample HCP form is attached to this policy (Appendix 2).

Record Keeping

A record of children's medical conditions is kept on the school's Information Management System 'Integris'. Where a child has a medical condition, this information is shared with the school's Welfare Assistant. A summary of medical needs is shared with the class teacher at the beginning of each academic year, and with the team of lunchtime supervisors (SMSAs) if necessary.

Prescription and non-prescription medicines

Medicines are only administered when essential; that is where it would be detrimental to a child's health if the medicine were not taken during the school day. Parents complete an 'Administering Medication' form (Appendix 3) which is available on the school website and can be obtained from the school office. No medication will be administered to a child unless this form has been completed.

Medicines must be in the original container as dispensed and include instructions for administration and dosage. We encourage parents to administer medicines at home (three doses a day can be before school, after school and at bedtime). Any member of staff administering medicine must be trained to administer that

medicine. Written records are kept each time medicines are given. If a child refuses to take the medicine, we do not force them to do so. This is recorded and parents are informed.

Staff should never administer non-prescription medicines with or without written permission from parents.

School emergency medication

In line with the Guidance on the use of emergency salbutamol inhalers for use in schools (2014) and the Guidance on the use of adrenaline auto-injectors in schools (2017), the school has a salbutamol inhaler and an adrenaline auto-injector without a prescription for use in emergencies when a child with asthma or epilepsy cannot access their own medication. These emergency measures are primarily for use with children with an existing diagnosis (of either asthma or allergies) and with specific parental consent. However, with the guidance of an emergency call operator, these medicines may be used on any pupil in a life-threatening situation.

Storage and disposal of medicines

All medicines, including asthma inhalers and adrenaline auto-injectors (Epipen, Jext or other brand), are stored in the medical room. Emergency medication is kept in high cupboards. Other medication is kept in either a locked cupboard or locked fridge, as appropriate.

It is the responsibility of the Welfare Officer to ensure that all medication is up-to-date and that all record keeping is correct. When a child requiring medication is taken off site, medicine must be signed out from the medical room and signed back on return, using the medicine book. If a parent asks to take the medicine out of school, it must also be signed out and logged in when returned.

Parents are responsible for the disposal of medicines and ensuring that the medicine has not expired. Medicine that is out of date and has not been collected by parents is disposed of responsibly by school staff.

Educational Visits

All children are encouraged to take part in visits and residential trips. Medicines such as asthma pumps and Epi-pens are taken on trips. In more complex medical conditions, parents are asked if additional safety measures are required and this information may form part of the risk assessment. A copy of the child's Health Care Plan will be taken on the trip, and on occasions parents may be invited attend. This applies to extra-curricular trips planned outside of regular school hours.

Staff Training

Appropriate training takes place regularly from the school nurse with regard to Asthma and Anaphylaxis. The school has trained first aiders on site at all times. Our trained first aider's names are displayed within the medical room. SMSAs are informed of children specific medical needs.

Emergency procedures

In the event of an emergency, office staff will contact emergency services and parents. A member of staff will accompany a child taken to hospital in an ambulance, and will stay there until a parent arrives. Health professionals are responsible for any decisions on medical treatment until a parent arrives.

Links to other policy documents

This policy should be read in conjunction with the following documents:

- Home/School Agreement
- Teaching and Learning Policy
- Use of Force

- Equalities Policy
- Complaints Procedure

Staff Responsible

William Dean – Headteacher

Rebecca Lewis – Deputy Headteacher and Head of Inclusion

Rita Cook – Welfare Officer

Policy Monitoring and Review

A copy of this guidance is available to all staff and parents and is published on the school website. Parents will be made aware of this policy when their child is admitted to this school.

This policy is reviewed every two years by the Governors' Health and Safety Committee.

Appendix 1: Information on specific conditions

Procedures for children with allergies

1. When children are admitted to the school, or when an allergy is diagnosed, parents are required to provide information about allergies and medication by completing an HCP. In addition, parents are required to provide a letter from the hospital or doctor which is also kept in the medical room.
2. Epi-pens are stored in the medical room along with the HCP and a named photograph of the child
3. A photograph of the child and a brief description of the allergy are displayed in the staffroom. All staff are made aware of any child with an allergy.
4. Class teachers and support staff are informed about children with allergies in their class at the beginning of the school year (or on admission if during the school year).
5. Epi-pens and anti-histamines are stored in clearly marked cupboards in the medical room. Staff have regular training on how to administer the pen.
6. Teachers ensure that emergency medication is taken on any trip out of school.
7. The Welfare Officer check pens regularly and inform parents if they are about to become out of date.
8. We are a 'nut-free' school and ask our parents to bear that in mind when preparing food for school for example packed lunches, party treats and cake stalls.
9. In the event of a child having an anaphylactic reaction the school will administer the Epi-pen, ring 999

Asthma-medicine and control

Children need to have immediate access to their relievers when needed. Older children may carry them with them but there should always be an additional inhaler kept in the labelled tray in the office. Inhalers should be taken out if the child is going on a trip or to the playground for PE.

In the event of an asthma attack, an ambulance should be called if the symptoms do not improve sufficiently in 5-10 minutes, the child is too breathless to speak, the child is becoming exhausted or the child looks blue.

Epilepsy medicine and control

An epileptic seizure or fit can happen to anyone at any time. Not all seizures involve loss of consciousness. Symptoms range from twitching or jerking of a limb, pins and needles, confusion or mumbling sounds.

Most children with epilepsy take anti-epileptic medicines to reduce seizures.

During a seizure make sure that the child is in a safe position, not to restrict movement and to allow the fit to take its course. Nothing should be placed in the mouth. An ambulance should be called if it is the first time, the child is badly injured, they have a problem breathing afterwards, it lasts for more than five minutes or there are repeated seizures.

Diabetes medicine and control

Diabetes is a condition where the level of glucose in the blood rises.

The diabetes of the majority of children is controlled by injections of insulin.

Children with diabetes need to eat regularly during the day. Indicators of low blood sugar-a hypoglycaemic reaction are: hunger, sweating, drowsiness, pallor, glazed eyes, shaking, lack of concentration, irritability, headache or mood change. If a child is hypo, fast acting sugar is brought to the child. An ambulance should be called if the child takes longer than 15 minutes to recover or the child becomes unconscious.

Anaphylaxis medicine and control

Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. Early symptoms are a swelling of the face, eyes and possibly hives on the body. Other severe symptoms are swelling of the throat which restricts air supply, or severe asthma. The treatment of a severe allergic reaction is an injection of adrenaline.

The injection should be administered into the muscle of the upper outer thigh. An ambulance should always be called.

Appendix 2

School Health Care Plan

Child's name

Class

Date of birth

Address

Contact Information:

Family contact 1

Name

Home No

Mobile

Work

Family contact 2

Name

Home no

Mobile

Work

Diagnosis/ Condition

Date

Review date

Medicine renewal date

Doctor

Address

Phone

Clinic/Hospital

Phone

Describe medical needs and give details of child's symptoms:

Daily care requirements:

Describe what constitutes an emergency for the child, and the action to take if it occurs:

Consent to administration of school emergency medication (asthma/allergies only) Yes/No

Signed (parent/carer):

Date

Appendix 3

ADMINISTERING MEDICATION FORM

Child's Name

Date of birth

Class

I accept full responsibility for the administration of the medicine

Medicine prescribed by the doctor for my child:

The dose to be given:

To be given before lunch/after lunch (please circle)

I understand that whilst the school will administer the medication, neither the school, nor any of its staff, can be responsible for any misadministration, whatsoever, of this medicine.

Signed (Parent/Carer)

Date _____

[illegible]

