

## MEDICAL POLICY

### MANAGING MEDICINES AND SUPPORTING CHILDREN WITH MEDICAL NEEDS

This policy is in line with DFE ‘supporting pupils at school with medical conditions’ September 2015

#### DATE PALM STATEMENT of INTENT

At Date Palm our vision is for the School to ensure our pupils grow like a Date Palm tree – with **strong foundations, lofty branches and produce fresh fruit:**

- ✓ To build **Strong Foundations for Character Development** that:  
Instil values; inspire each pupil; display best manners.
- ✓ To have **Lofty Branches of Educational Excellence** that will:  
Provide a broad and varied range of experiences and learning opportunities; help each pupil progress and develop in all aspects; support their skills and talents.
- ✓ To produce **Fresh Fruit that provides services to their Communities** in order to:  
Become responsible and confident citizens; make a positive difference; commit to charitable endeavours; become effective contributors towards Britain’s future.

Reviewed by	Position	Signature
Luthfa Begum	SENDCo	<i>L.Begum</i>
Kiran Rahman	Chair of Governors	<i>K.Rahman</i>

<b>Reviewed:</b> March 2024
<b>Next review date:</b> March 2025



DATE PALM  
PRIMARY

Building foundations for life

## Introduction

1. Our aim is to ensure that all children with medical conditions, in terms of both physical and mental health are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

1.1 We recognise that children may require on-going support, medicines, or care while at school to help them manage their condition and keep themselves well.

1.2 At Date Palm Primary School, we receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils. We recognise the social and emotional implications associated with medical conditions and will support children and families to achieve the best outcomes possible.

1.3 Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Some may have special educational needs (SEN) and may have a Statement, or Education, Health and care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision.

1.4 Date Palm Primary school ensures that children with medication needs receive appropriate care and support in order to play and full and active part in their school life.

## Roles and Responsibilities

The Head teacher retains overall responsibility for the development of health care plans. However, the day-to-day management of healthcare plans has been delegated to the school SENCo working in partnership with parents, healthcare professionals and where appropriate social care professionals. Please see Annex A: Model process for developing individual healthcare plans.

2.1 The Head teacher makes sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

2.2 The Head teacher will liaise with the SENCo to monitor the effectiveness of medical provision. This will help identify any further training/advice needed for staff supporting children with medical conditions. It will ensure sufficient trained numbers of staff are available to implement the policy and will adapt to any new situations to promote best outcomes for children.

### School Staff

3.1 Any member of school first aider may be asked to provide support for pupils with medical conditions, including the administering of medicines.

3.2 School staff undertaking medical duties will receive sufficient training to undertake medical tasks and will achieve the necessary level of competency before they take on responsibility to support children with medical needs.

3.3 Staff should not give prescription medicines or undertake healthcare procedures without appropriate training.

3.4 The Special Educational Needs Coordinator (SENCo) is responsible for arranging ensuring that all relevant staff are made aware of the child's medical condition. Risk assessments will be carried out for school trips, residential stays and other school activities.

3.5 Where a child is returning to school following a period of hospital education or alternative provision school staff will work closely with parents and other partners to ensure a successful and smooth reintegration.

3.6 The SENCO takes the lead in writing healthcare plans and will meet with parents and staff to devise and review them.

### Pupils

4.1 Pupils are often best placed to provide information about how their condition affects them and should be fully involved in discussions as much as possible about their medical support needs. This will include encouraging children who are competent managing their own medicines and procedures as reflected in their health care plans.

## Parents

- 5.1 Parents should provide the school with the most up to date information about their child's medical needs.
- 5.2 Parents should work in partnership with the school and health care professionals to develop and review the health care plan.
- 5.3 Parents should carry out any actions identified on their child's health care plan and/or medical requirements e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.
- 5.4 Provide complete written and signed instructions for any prescribed medication as without this the school cannot administer them.
- 5.5 Keep their children at home if acutely unwell or infectious for the recommended period of time.
- 5.6 Provide reasonable quantities of medication in its original bottles.
- 5.7 Renew any medication when supplies are running low and ensure that the medication supplied is within its expiry date.
- 5.8 Each item of medication must be clearly labelled with the following information:
  - Pupil's Name
  - Name of medication Dosage
  - Frequency of administration Date of dispensing
  
  - Storage requirements (if important) Expiry date
- 5.9 Abide by the rule that the school cannot administer any medicines that have not been prescribed by a Doctor.
- 5.10 Notify the school/ in writing if the pupil's need for medication has ceased.

## Training

6.1 Whole staff awareness training regarding supporting children's medical needs will be carried out at the beginning of each term.

6.2 The school undertakes annual Epipen training and diabetes training matched to the individual child's health care plan.

### **Procedures for managing medicines.**

7.1 Medicines should only be administered in school when it would be detrimental to child's health or school attendance not to do so.

7.2 A child under the age of 16 should never be given medicine containing aspirin unless prescribed by a doctor.

7.3 Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours.

7.4 All medicines must be prescribed by a Doctor and in the original container. They must be in date, labelled with the child's name, instructions for administration, dosage and storage. The exception being insulin which still must be in date but will generally be available to schools inside an insulin pump or pen, rather than in the original container.

7.5 All medicines will be stored safely. Children and staff will know where their medicines are kept and must be able to access them immediately. Healthcare plans, medicines and equipment will accompany children on all trips.

7.6 Staff may administer a controlled drug to the child whom it has been prescribed by a Doctor. A record will be kept and instructions will be followed.

7.7 Medicines no longer required will be returned to parents to arrange for safe disposal. Sharps boxes are available in the medical room for the safe disposal of needles.

7.8 If children refuse to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.

### **Unacceptable practice**

8.1 Date Palm primary School follows Department for Education guidelines which state schools must make explicit the following *unacceptable practices*:

- ❖ Preventing children from accessing their medication
- ❖ Assuming every child with the same condition requires the same treatment
- ❖ Ignoring views of the child and parent (although this may be challenged)
- ❖ Sending children with medical conditions home frequently or preventing them from staying for normal school activities, unless this is specified in the health care plans. If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable.
- ❖ Penalising children for their attendance record if absences are related to their medical condition e.g., hospital appointments
- ❖ Preventing children from drinking, eating, or taking toilet breaks whenever they need in order to manage their medical condition effectively.
- ❖ Requiring parents to attend school to administer medication or to provide medical support to their child, including with toileting issues.
- ❖ Preventing children from participating in any aspect of school life.

### Complaints Procedure

9.1 Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school.

9.2 If for ever reason this does not resolve the issue a complaint should be made via the school's complaint procedure. Please request a copy of this from the school office.

### Healthcare Plans

10.1 Healthcare plans ensure that the focus remains on the individual child's needs and consider how their medical condition impacts on their school life.



10.2 Healthcare plans provide clarity of what actions need to be taken, when they need to be carried out by and whose responsibility these actions are.

10.3 When the school is notified that a pupil has a medical condition, the SENCo will meet with parents. Decisions will be made as quickly as possible regarding transition arrangements, staff training or support and these actions will be kept under review according to the needs of the individual child. All healthcare plans are reviewed annually.

**This Policy will be reviewed annually.**