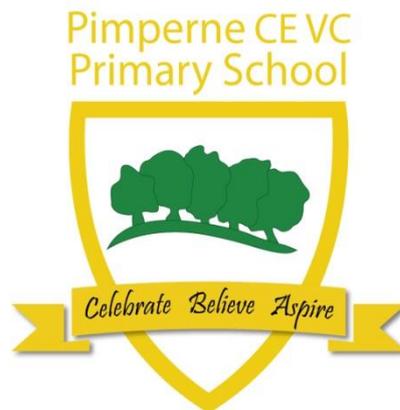


PIMPERNE PRIMARY SCHOOL



Supporting pupils at school with medical conditions and managing medicines policy: including asthma

**Updated: September 2017
Review Date: June 2018**

PIMPERNE CE VC PRIMARY SCHOOL

Policy for supporting pupils with medical conditions and managing medicines

This policy has been structured based upon the most recent government advice "Supporting pupils at school with medical conditions" (DfE - December 2015), the "Guidance and Code of Practice - First Aid at Work" provided by Dorset County Council, guidance from local Health Services, professional teaching associations and Dorset County Council Health and Safety Team.

Pimperne Primary School adheres to the duty as stated in the Children and Families Act 2014 that pupils with medical conditions will have the same right of admission to our school as other pupils and will not be refused admission or excluded from school on medical grounds. Appropriate levels of assessments will be undertaken to establish and determine what support pupils with medical conditions require. This will be done in partnership with parents and health professionals.

The prime responsibility for a pupil's health rests with parents. It is anticipated that parents/carers will ensure that appropriate information is provided for the school that enables proficient management and a good understanding of their child's medical condition; this includes working in partnership in the management of any medicines administered at school.

Pimperne Primary School takes advice and guidance from a range of sources, including the School Nurse, Paediatric Consultants, and other Health professionals in addition to the information provided by parents in the first instance. This enables us to manage support effectively and to minimise any disruption to learning.

Key Personnel

The designated person with overall responsibility to implement this policy is:

Mrs Fiona Waller

This person will also ensure that staff are appropriately aware of the medical condition of children with whom they work and that any confidential information pertinent to the medical condition is entrusted to individual staff.

The person responsible for developing Individual Healthcare Plans is:

Mrs Samantha McCarthy & Mrs Jayne Brealey

The Governor with specific responsibility to oversee the arrangements to support pupils at schools with medical conditions is:

Mr Steven Fielding

AIMS

The school is committed to assisting children and young people with long-term or complex medical conditions and working in partnership with their parents/carers.

Our aims are:

1. To ensure that pupils at Pimperne Primary School with short or long term medical conditions, are properly supported so that they have full access to education, including off-site activities, residential visits and physical education.
2. To make arrangements for staff to ensure that they receive adequate and appropriate training for them to support children with medical needs.
3. To ensure that parents and children have confidence in the medical support arranged at school.
4. To work in partnership with Health Service colleagues.
5. To be fully compliant with the Equality Act 2010 and its duties.
6. To manage medicines within school in accordance with government and local advice.
7. To keep, maintain and monitor records as detailed in this policy.
8. To write and to monitor Individual Healthcare Plans, in partnership with health professionals.
9. To ensure that the pupils in our school are safe and are able to attend school regularly with their medical condition.
10. To support pupils with complex medical conditions and or long term medical needs in partnership with Health professionals and parents to enable their access to education.
11. To adhere to the statutory guidance contained in “Supporting pupils at school with medical conditions” (*DfE – December 2015*), and “Multi-Agency Guidance for the Management of Long Term Health Conditions for Children and Young People” (*DSCB 2011*)¹ as set out and agreed with the school’s governing body.

THE GOVERNING BODY WILL:

- ensure that arrangements are in place to support children and young people with medical conditions and that support is tailored to individual medical needs;
- make arrangements for this policy to be published on the school website;
- review this policy annually;
- ensure that staff are identified to implement the policy from day to day;
- monitor the arrangements associated with Individual Healthcare Plans so that they are managed appropriately, reviewed and maintained in partnership with Health professionals;
- ensure that staff receive appropriate training enabling them to provide bespoke and purposeful support to pupils with medical needs and that the training is refreshed regularly;

¹ This document will be refreshed in 2016 to align guidance with more recent Statutory Guidance issued by DfE and DoH.

- ensure that specific arrangements are made for the self-management of medicine where applicable and how this will be both monitored and managed by staff;
- oversee the school's management of medicines to ensure that Health & Safety standards are met and that parents have confidence in the schools ability to support their child's medical needs;
- ensure that insurance arrangements cover staff in carrying responsibility for medical procedures;
- have 'due regard' to the rights of pupils who are disabled as set out in the Equality Act 2010;
- ensure that appropriate arrangements are made to include pupils with medical conditions on off-site activities;
- ensure that parents/carers are aware of the school's complaints policy.

INDIVIDUAL HEALTHCARE PLANS

Individual Healthcare Plans will be developed for pupils with medical conditions in accordance with the advice contained in "Supporting pupils at school with medical conditions" (DfE – December 2015). Individual Healthcare Plans will set out the support that is needed so that the impact on school attendance, health, social well-being and learning is minimised. Not all conditions will require an Individual Healthcare Plan. In some cases the agreement request to administer medicines will be sufficient to cover short term conditions and treatment. The plan will include the name of the member of staff who is appropriately trained and providing the agreed support.

Pimperne Primary School will use the recommended DfE Templates or develop their own versions in line with the advice provided by the DfE to capture relevant information that will enable an appropriate plan to be structured. The Templates cover a range of issues for which governors have responsibility. Health professionals will be involved in the development of Individual Healthcare Plans in addition to parents and pupils.

The Individual Healthcare Plans will be tailored to meet the needs of short term, long term and/or complex medical conditions. The plans will be kept under review by the designated person and revised as required, or at least annually, to ensure that they reflect current medical needs (e.g., changes in medication). Individual Healthcare Plans will include details on emergency arrangements and these will be shared with all relevant staff, First Aiders and school office staff as applicable.

Where pupils have been issued with an Education and Health Care (EHC) Plan by the local authority, any Individual Healthcare Plan will be linked to, or become part of that EHC Plan.

ROLES AND RESPONSIBILITIES

Parents

Parents are asked to provide the school with sufficient and up-to-date information about their child's medical needs and medication using a standard form so that arrangements to manage their short or long term medical conditions can be implemented in partnership.

Parents are asked to deliver medicine to school if it is not possible for this to be administered outside the school day. Medicine should be provided in the original

container(s) ensuring that the medicine is in date and that it has been stored correctly. All medicines must be marked with the following information clearly indicated:

- the child's name on the medicine;
- when the medicine should be given;
- the prescribed dose and pharmacist's instruction, e.g., after meals.

Parents are expected to notify the school immediately (in writing) of any changes or alteration to a prescription or recommended treatment so that adjustment can be made to Individual Healthcare Plans or previous agreement. It is important that the school is aware and informed by parents about other issues or symptoms their child may have experienced over night or before school; this is particularly important for asthma conditions

It must be remembered that the prime responsibility for a child's health rests with parents/carers.

The Headteacher will ensure the following:

- that governors are informed about the implementation and effectiveness of this policy;
- that arrangements are made with staff supporting pupils with medical conditions, and for any medicines required in delivering that support to be stored safely and in line with guidance provided by the local authority;
- suitable arrangements are agreed in partnership and liaison with parents/carers to support the medical needs of pupils;
- that appropriate training has been provided for staff that enables them to carry out agreed procedures;
- that staff will not be directed to administer medicines - they can choose to volunteer to do so if they so wish (all staff will be advised to refer to advice from their professional associations before volunteering to administer medicines);
- liaison with governors in the review of this policy at appropriate intervals, in line with local and national advice;
- that all staff and parents/carers are aware of this policy and the procedures for dealing with medical needs at Pimperne Primary School
- make arrangements through the designated teacher to manage the following:
 - prescription medicines in school;
 - prescription medicines on trips and outings, including school transport;
 - accurate record keeping when administering medicines;
 - the safe storage of medicines;
 - procedures for access to medicines during emergency situations;
 - adhering to risk management procedures involving medicines;
- that risk assessments and arrangements for off-site visits are checked and that governors are informed of the details.

The Designated Teacher will ensure the following:

- staff work in partnership with parents/carers to ensure the well-being of children and young people;
- that interruption to school attendance for medical reasons will be kept to a minimum;
- staff who have agreed to administer medicines will receive the appropriate training;
- adherence to Individual Healthcare Plans;
- all cultural and religious views, made known to the school in writing, will be respected;

STAFF TRAINING AND SUPPORT

Most medicines to be administered will not require professional training; however the school will ensure that staff supervising the administering of medicines will understand that accurate records are to be kept and are completed at the time of being administered. Staff who maintain these records should be clear about what action to take, (such as referring to the Designated Senior Person for Child Protection) if they become concerned about the welfare of an individual pupil. If child or young person is provided with an Individual Healthcare Plan, additional training must be given by a nominated Health professional, e.g., use of a nebuliser, using Epipens. Training received or cascaded from parents will not be accepted unless otherwise instructed by a health professional. Record of Training Forms must be completed and maintained (see DfE Template E: staff training record).

(Also see “Multi-Agency Guidance for the Management of Long Term Health Conditions for Children and Young People” (*DSCB 2011*); section 3.3 and 3.4 including Chart E.)

REASONABLE ADJUSTMENTS

The school understands it's duties under the Equality Act 2010 to make reasonable adjustments and enable children and young people to have equitable access to education. Children and young people with complex or significant medical needs will be included in activities for as much as their health permits.

MANAGING MEDICINES ON SCHOOL PREMISES AND ON OFF-SITE ACTIVITIES

We will ensure that:

- records are maintained detailing an accurate history of the administering of medicines as far as possible – this will not include self administering of over the counter medicines for older pupils for whom parents have requested permission using the appropriate Template;
- DfE Templates C and/or D (or an appropriate equivalent) will be used to log administering of medicines;
- suitable back-up systems are in place to cover administering of medicines in the event of staff absence;
- if there are any doubts or confusion about arrangements for administering medicines, staff must consult with the parents and the designated member of staff;
- no child or young person under 16 will be given medicines or be permitted to self-medicate without their parents' written request.

Pimperne Primary School has a defibrillator that may be used in an emergency in accordance with the manufacturer's instructions and in line with the DCC's Guidance and Code of Practice on Automated External Defibrillators (AEDs).

STORAGE OF MEDICINES

The school will adhere to the advice contained in "Guidance and Code of Practice - First Aid at Work" and local guidance provided by Dorset County Council's Health & Safety Team and the local authority's Physical and Medical Needs Service.

REFUSAL OR TOO UNWELL TO TAKE MEDICINES

If a child refuses to take medicine as prescribed and as requested by parents, the records (DfE Template C or D or appropriate equivalent) must state 'REFUSED' clearly and the parents/carer informed immediately. Children/young people will not be forced to receive medicine if they do not wish to do so.

If a child or young person is ill/injured and therefore unable to receive the agreed prescribed medication, the person designated to supervise the taking of medicine will consult with parents/carers immediately and advise the Headteacher of their actions. If the child vomits or has diarrhoea soon after receiving medication, parents must be contacted so that they can seek further medical advice.

SELF MANAGEMENT OF MEDICINES

In some cases it might be appropriate that pupils self administer medicines, e.g., inhalers, epipens. The school will encourage those with long term medical conditions to take responsibility for administering their own medication but continue to ask staff to supervise so that the appropriate records can be completed for safeguarding purposes.

Some pupils may carry 'over the counter medicines' (non-prescribed medicines) for their own use or self administer prescribed medicines that are appropriate to carry. When this occurs parents should request permission from the Headteacher in writing (using DfE Template B or appropriate equivalent) and provide relevant details about the type and dosage of the medicine. We understand the need for personal dignity in addressing this matter to avoid individual embarrassment. We recommend that only one dose should be brought to school at any one time in order to reduce potential risk of medicines being abused.

OFF-SITE ACTIVITIES/SCHOOL TRIPS

All arrangements for medicines, including the storage of medicines, Individual Healthcare Plans, and Risk Management programmes will apply for all off-site activities or school trips. A member of staff will be designated to ensure there are suitable off-site arrangements for storage, and recording of the medicines when assessing any risks associated for the trip, particularly for those children and young people with long term or complex health conditions. All plans and risk assessments will be discussed with parents/carers in preparation for the activity in advance of the departure day and agreed with the Headteacher (and Governors).

All off-site activities will be evaluated in terms of proximity and accessibility to emergency services and any implications for those with short or long term medical conditions before receiving approval to go ahead from the Headteacher/Governors.

EMERGENCY PROCEDURES

Care is taken to ensure that all pupils are safe. The school has 2 'First Aid at Work' qualified first aiders, 4 'Paediatric First Aid' qualified first aiders and all the staff are Emergency First-Aid trained.

Pupils with life threatening medical conditions or that require close monitoring/supervision may have Individual Healthcare Plans developed by school staff and Health professionals that provide contact details for emergency situations, e.g., anaphylaxis, diabetes, or epilepsy.

All cases deemed 'complex' or 'serious' medical conditions have emergency contact details held in the school office.

Asthma can also be life threatening; Pimperne Primary School will follow the "Guidance on the use of emergency salbutamol inhalers in schools" issued by the Department of Health (*September 2014*) and the Schools Asthma Policy (See Appendix 1).

Pupils who are 'at risk' due to their medical condition hold a *Grab Pack* (collated information to pass to a doctor or ambulance crew in an emergency) that will accompany them at all times. The purpose of the pack is to provide emergency services with up to date information such as: diagnosis of principle conditions, key personnel and medical contacts, medication taken, up to date records of medicines that have been administered together with other relevant medical information and an agreement with parents/carers about what to do in an emergency.

BEST PRACTICE

Pimperne Primary School will endeavour to eliminate unacceptable situations by promoting best practice in supporting pupils with medical conditions. In doing so we will:

- ensure that pupils have access to the medicine they need as arranged with parents;
- where necessary, manage each medical condition through an Individual Healthcare Plan;
- listen to the views of pupils and their parents and take advice from medical professionals in planning the support needed;
- ensure that pupils with medical conditions are supervised appropriately and not left alone when ill;
- support access to the full curriculum or as much as medical consultants recommend;
- work in partnership with health services to ensure swift recovery or access to treatment;
- facilitate opportunities to manage medical conditions with dignity;
- manage medical needs such that parents are not required to support their child in school;
- include all children in school on and off-site activities, meeting their medical needs in the best way possible.

LIABILITY AND INDEMNITY

Pimperne Primary School is covered by the local authority's medical malpractice insurance policy. This covers all staff in the arrangements made to support pupils with medical conditions for whom particular training has been given. Staff must follow the guidance, procedures and administering of medicines accurately.

COMPLAINTS

Pimperne Primary School holds a Complaints Policy details of which can be found on the school website. Should any complaint be received in respect of the support provided for individual medical conditions, it will be dealt with in accordance with the Complaints Policy.

EQUALITY STATEMENT

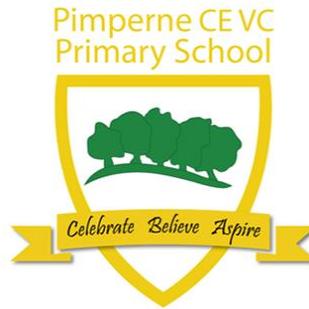
Pimperne Primary School is mindful of its Equality Duties; respecting religious belief and ensuring that support is provided for those with disability needs that might be affected by this policy. Where there are language or communication issues, and to avoid any misunderstanding, the parents/carers and Headteacher will agree an appropriate course of action. The Headteacher will engage interpreters or signers when required to ensure that full understanding of a pupil's medical needs are determined accurately.

With regard to off-site visits and residential opportunities, school will ensure that reasonable adjustments enabling pupils to be included are appropriate and made in consultation with parents/carers.

This policy was reviewed in September 2017

Next Review date is June 2018

Appendix 1.



PIMPERNE PRIMARY SCHOOL ASTHMA POLICY

The school:

- Recognises that asthma is a widespread, serious but controllable condition and the school welcomes all pupils with asthma
- Ensures that pupils with asthma can and do participate fully in all aspects of school life, including art, Physical Education, science, educational visits and (out of hours activities) extra curricular activities otherwise it excludes walks etc in the school day
- Recognises that pupils with asthma need immediate access to reliever inhalers at all times
- Keeps a record of all pupils with asthma and the medicines they take
- Endeavours that the whole school environment, including the physical, social, sporting and educational environment, is favourable to pupils with asthma
- Ensures that all staff (including supply teachers and support staff) who have pupils with asthma in their care, know who those pupils are and know the school's procedure to follow in the event of an asthma attack (list on staff allergy board)

Asthma medicines

Immediate access to reliever medicines is essential. All inhalers are kept in the medical area and can be accessed by all staff.

It is advised that the, parent/carer provides the school with a labelled, in date spare reliever inhaler. These are held in case the pupil's own inhaler runs out, or is lost or forgotten and are kept in the school office. All inhalers must be labelled with the child's name.

If a parent/carer has stated that their child requires an inhaler in school but does not supply an **in-date inhaler**, the school will take the following action:

- Phone the parent/carer and request that the inhaler is brought into school without delay. The phone call will be logged on the pupil's Asthma Information Form (reverse side 'For Office Use' box). Further conversations may be appropriate, at the discretion of the school.
- Treat the child, with the verbal permission, via telephone, of the parent-with a spare in date inhaler.

School staff who agree to administer medicines are insured by the local authority when acting in agreement with this policy. All school staff will facilitate pupils to take their medicines when they need to.

Record keeping

When a child joins the school, parents/carers are asked to declare any medical conditions (including asthma) that require care within school, for the school's records.

At the beginning of each school year, parents are requested to update details about medical conditions (including asthma) and emergency contact numbers.

All parents/carers of children with asthma are given an asthma information form to complete and return to school. From this information the school keeps its asthma records. All teachers know which children in their class have asthma. Parents are required to update the school about any change in their child's medication or treatment. Should a child have to use their inhaler, more than twice in a school day, parents will be notified by text message.

Exercise and activity – Physical Education and games

All children are encouraged to participate fully in all aspects of school life including P.E. Children are encouraged/reminded to use their inhalers before exercise (if instructed by the parent/carer on the asthma form) and during exercise if needed. Staff are aware of the importance of thorough warm up and down. Each pupil's inhaler can be obtained from the medical area by the office.

Children are trusted to independently or peer supported travel to the office and request their inhaler (unaccompanied).

School Environment

The school endeavours to ensure that the school environment is favourable to pupils with asthma. The school will take into consideration, any particular triggers to an asthma attack that an individual may have and will seek to minimise the possibility of exposure to these triggers.

Asthma Attacks – School's Procedure

In the event of an asthma attack, staff will follow the school procedure:

- Encourage the pupil to use their inhaler
- Summon a first aider, (initially Mrs McCarthy, Mrs Brealey) who will bring the pupil's Asthma Information Form and will ensure that the inhaler is used according to the dosage on the form
- If the pupil's condition does not improve, the First Aider will follow the 'Emergency asthma treatment' procedures – see 'red' sheet

- The First Aider will call for an ambulance if there is no improvement in the pupil's condition
- If there is any doubt about a pupil's condition an ambulance will be called and a parent will be informed.

Access and Review of Policy

The Asthma Policy will be accessible to all staff and the community through the school's website. Paper copies can be obtained from the school office. This policy will be reviewed on a two yearly cycle.

Dear Parent/Carer

Asthma Information Form

Please complete the questions below so that the school has the necessary information about your child's asthma. **Please return this form without delay.**

CHILD'S NAME Age
.....Class.....

1. Does your child need an inhaler in school? Yes/No

2. Please provide information on your child's current treatment. (Include the name, type of inhaler, the dose and how many puffs? Do they have a spacer?)

.....
.....

.....
.....

3. What triggers your child's asthma?

.....
.....

It is advised to have a spare inhaler in school. Spare inhalers may be required in the event that the first inhaler runs out, is lost or forgotten. Inhalers must be clearly labelled with your child's name and must be replaced before they reach their expiry date.

I agree to ensure that my child has in-date inhalers and a spacer (if prescribed) in school.

Signed:.....

Date.....

I am the person with parental responsibility

Circle the appropriate statements

- My child requires a spacer and I have provided this to the school office
- My child does not require a spacer
- I need to obtain an inhaler/spacer for school use and will supply this/these as soon as possible

4. Does your child need a blue inhaler before doing exercise/PE? If so, how many puffs?

.....
.....
5. Do you give consent for the following treatment to be given to your child as recognised by Asthma Specialists in an emergency?

- Call parent/carer or message to say Emergency treatment is taking place now
- Give **6 puffs of the blue inhaler via a spacer**
- Reassess after 5 minutes
- If the child still feels wheezy or appears to be breathless they should have a further **4 puffs of the blue inhaler**
- Reassess after 5 minutes
- **If their symptoms are not relieved with 10 puffs of blue inhaler then this should be viewed as a serious attack:**
- **CALL AN AMBULANCE and CALL PARENT**
- **While waiting for an ambulance continue to give 10 puffs of the blue reliever inhaler every few minutes**

Yes/No

Signed:.....

Date.....

I am the person with parental responsibility

Please remember to inform the school if there are any changes in your child's treatment or condition.

Thank you

Parental Update (only to be completed if your child no longer has asthma)

My child no longer has asthma and therefore no longer requires an inhaler in school or on school visits.

Date

For office use:

Signed

I am the person with parental responsibility

	Provided by parent (Yes/No)	Location (delete as appropriate)	Expiry date	Date of phone call requesting inhaler/spacer	Date of letter (attach copy)
1st inhaler					
2nd inhaler Advised					
Spacer (if required)					
Record any further follow up with the parent/carer:					

Emergency asthma treatment

Asthma attacks & wheeziness

Signs of worsening asthma:

- Not responding to reliever medication
- Breathing faster than usual
- Difficulty speaking in sentences
- Difficulty walking/lethargy
- Pale or blue tinge to lips/around the mouth
- Appears distressed or exhausted

- Call parent/carer and inform them of treatment proceeding
- Give 6 puffs of the blue inhaler via a spacer

- Reassess after 5 minutes

- If the child still feels wheezy or appears to be breathless they should have a **further 4 puffs of the blue inhaler**

- Reassess after 5 minutes

- **If their symptoms are not relieved with 10 puffs of blue inhaler then this should be viewed as a serious attack:**

- **CALL AN AMBULANCE and CALL PARENT**

- **While waiting for an ambulance continue to give 10 puffs of the reliever inhaler every few minutes**