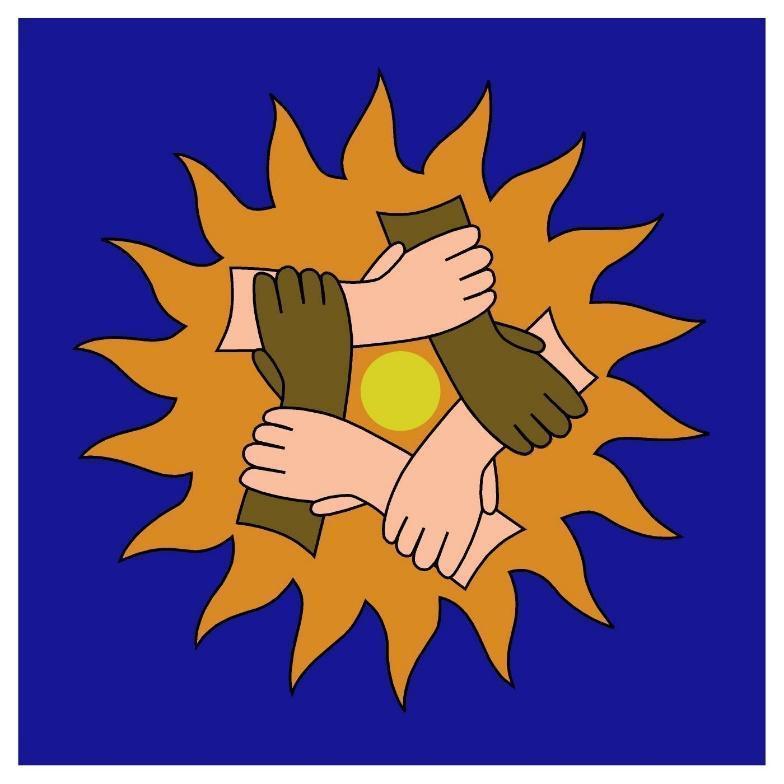
**“Together we can achieve more”**

**Highfield Primary School**



**Supporting Children with a Medical Condition Policy**

**2024-25**

Next Review: Autumn Term 2027

*Review every three years*

*(See also appendix for Highfield Primary School Medication Guidelines)*

This policy has been drawn up using guidelines from the London Borough of Enfield.

Highfield Primary recognises that many pupils at some time may have a medical condition that affects their participation in school life. For many this will be short term eg finishing a course of medication. Pupils who have a medical condition, which if not properly managed, may limit their access to education, will be regarded as having a medical need. All pupils with medical needs have the same rights of admission as other pupils and cannot generally be excluded for medical reasons. Most should be able to attend school regularly and with some support from the school can take part in normal school activities.

The school will:

* Put into place management structures with clear responsibilities eg named person within the school to aid communication with other parties to attend reviews and to facilitate general communication between pupil and school
* Monitor a pupil’s attendance and mark registers so that they show if a pupil is, or ought to be receiving education otherwise than at school eg hospital/home tuition
* Notify the school’s Education Welfare Officer if a pupil is/or is likely to be away from school for more than 15 working days
* Put into place strategies for ensuring support in case of long-term absence, including the provision of assessment, curriculum plans and work programmes
* Liaise with home and hospital teaching services to enable them to draw up an education plan to cover the education for a pupil who is likely to be at home for more than 15 working days and for pupils with chronic illnesses who regularly miss some school. This plan will be agreed with appropriate health service personnel. Pupils who are admitted to hospital on a recurring basis will have work provided to take into hospital with them
* Be active in the monitoring of progress and in the reintegration into school, liaising with other agencies as necessary
* Ensure a partnership between home and school and encourage a sharing of necessary information
* Seek help and advice from appropriate agencies eg School Nurse Service, Community Paediatrician, Health and Education Access and Resource Team (HEART), Educational Psychology Service and will support staff to access advice, training and information
* Draw up individual Health Care Plans with parents/carers to ensure school staff have sufficient information to understand and support pupils with medical needs and where appropriate encourage children to contribute to his/her plan
* Annually update Health Care Plans with the parents/carers, the school’s Welfare Officers, the child’s medical advisory team or School Nurse if suitable/available, and (where appropriate) the pupil
* Treat medical information confidentially, only disclosing it to those who need to know, to be able to support the pupil and with the agreement of the parent/carer
* Consider the need for assessment under the SEN Code of Practice
* Take into account the pupils’ views and those of their parents/carers
* Inform parents/carers of any deterioration noticed in a pupil’s health over time
* In emergencies act in loco parentis and administer the necessary assistance. An ambulance will be called, even when there is a Health Care plan to support needs. In non-urgent medical situations where there have been no prior agreements or training, no administration of medicines will be undertaken
* Ensure that pupils with Health Care Plans will be highlighted to all relevant staff and their details given to class teachers. Copies of their care plans will be posted in the staff rooms and welfare room.
* Make sure staff are aware of what is expected of them, their responsibilities are clearly defined and that they receive appropriate training

Administration of medication

* The pupil’s GP or Consultant should confirm that the child is fit to attend school whilst taking prescribed medicines
* School staff will not administer medication without first receiving appropriate training. Pupils who can be trusted to do so should manage their own medication from a relatively early age and may only need staff to supervise (eg asthma inhalers) and where appropriate should be encouraged to contribute to his/her Health Care Plan
* The administration of medicine will take place in line with our guidelines set out in **Highfield Primary school administration of medication Guidelines.**
* Parents/carers have to give written prior agreement for any medication to be given
* Pupils who refuse to take medication will not be forced to do so by staff but parents/carers will be informed as a matter of urgency and if appropriate emergency services called
* The school will keep detailed records of administration of medication and provide copies for parents/carers

Parent/Carers’ Responsibility

* Please note that parents/carers should keep their children at home if acutely unwell or infectious.
* Parents are responsible for providing the welfare team with comprehensive information regarding their child’s condition and / or medication requirements.
* Prescribed medication will not be accepted in school without complete written and signed instructions from the parent.
* Only reasonable quantities of medication should be supplied to the school for the administration by staff (for example, a maximum of four weeks supply at any one time).
* Where the pupil travels on school transport with passenger assistants, parents should ensure they have written instructions relating to any medication sent with the pupil, including medication for administration / self-administration during respite care.
* It is the parents’ responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
* For staff administration – each item of medication must be delivered to the Authorised Person (this will be a member of the welfare team), in normal circumstances by the parent, in a secure and labelled container as originally dispensed.

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

Access and storage of medicines

* All medication is to be clearly labelled (as specified above)
* EYFS and KS1 asthma inhalers are to be kept in the child’s classroom where they can be monitored
* KS2 asthma inhalers to be kept in child’s class/on their person so they have easy access
* Medicines to be stored in Welfare cabinet and given only under supervision with parents/carers written consent for children with special medical needs
* Pupils with Health Care Plans have their own storage area in the Welfare room for medicines
* Epipens for EYFS and KS1 are to be clearly labelled and kept securely in EYFS/KS1 staffroom and Epipens for KS2 are to be clearly labelled and securely kept in the welfare room.

Appendix 1:

**Highfield Primary School Medication Guidelines**

At Highfield Primary School, we support children needing certain medications and administer/support administration according to our guidelines.

**The following guidelines are based on advice from the Enfield Local Authority Health and Safety team and from Government guidelines:**

* Where clinically possible, medicines should be prescribed in dose frequencies, which enable them to be taken outside school hours. School’s do not have to administer medication.
* Schools should only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
* No child under 16 should be given prescription medicines without their parent’s written consent. Therefore Highfield will only accept medications labelled from a pharmacy with the dosage, name of medication and child’s full name on it.

**We will only administer medication when a parent completes a request for medication form available from the school. Medication that we are able to administer includes:**

* **Antibiotics on the 3rd day of treatment if to be taken 4 times a day**. We will administer after the medication has been given for two days - this is to ensure the child is ok to take this medication without an allergic reaction. We will administer if the dosage is 4 times a day. If it should be taken 3 times a day the medication should be given before school, after school and before bedtime.
* **Hay fever treatment if prescribed and needed before going outside.** It should have specific instructions or the dosage and will only be given if it should be taken 4 times a day.
* **Paracetamol based medications if prescribed and needed for a medical need.** A care plan will be completed for the medical need. Painkillers will not be administered for general pain reduction.
* **Eye drops if the dosage is 4 times a day**. If the dosage states 3 times a day, the medication can be given before school, after school and before bedtime.
* **Epi pens and emergency seizure medication**- when prescribed and a care plan will be completed.
* **Asthma pumps**- when needed. Children in Nursery, Reception and Key stage 1 will be supported during administration. Children in Key stage 2 will be encouraged to administer their own asthma pump unless in an emergency situation where support may be needed. An adult will always observe a child taking their asthma pump and first aider will always support in an emergency.
* **Allergy medication**. When prescribed and needed for the child’s medication. A care plan will be written.
* For longer term medical needs a care plan will be written and agreed with the parent/carers and child.

**This policy should be read in conjunction with the Safeguarding Children and Child Protection Policy.**

This policy is based upon good practice and draws on information contained within the Equality Act (2010) and the DfE document "Supporting pupils at school with medical conditions" (December 2015).

See also: Infection Guidance for Schools, Asthma Information