

# **Gillespie Primary School**



## **Children with Medical Condition - Policy**

**Oct 2018**

Named person responsible: Headteacher, Mark Owen  
If you are a parent or carer and would like to discuss your child's medical condition,  
please see Mark, or Anna

## **Policy for children with Medical Conditions**

*This policy takes account of the statutory guidance in section 100 of the Children and Families Act 2014 updated in 2015, which places a duty on governing bodies of maintained schools to arrange for supporting pupils with medical conditions.*

At Gillespie School, we are committed to providing pupils with access to education whatever their medical needs, disability or individual circumstances. Most pupils with medical needs are able to attend school regularly and with support can take part in most activities, enjoying the same opportunities at school as any other child. For some children their medical conditions will affect their quality of life and may be life threatening.

This policy sets out how we arrange to support each individual child whatever its needs, by:

- Providing a whole school approach to supporting pupils with medical needs
- Ensuring that all staff, parents and governors are familiar with procedures relating to pupils who have medical conditions
- Helping pupils to take increasing responsibility for their own medication, (subject to each individual's need and understanding) and to be increasingly involved in arrangements to provide for their medical needs
- Establishing clear links with outside agencies to ensure that there is continuity of provision for all pupils with medical needs
- Minimising the disruption to a pupil's learning caused by absence resulting from a medical condition
- Meeting legal requirements with regard to storing and administering prescription medication in school

### **IMPLEMENTATION**

#### **Named Person**

The Headteacher is responsible for ensuring that pupils with medical needs have proper access to education. In his absence, the Named Person will be the Deputy Head. He will be the person with whom parents/carers discuss particular arrangements to make in connection with the medical needs of a pupil. It is the Named Person's responsibility to ensure information is passed on to the relevant members of staff. Wherever possible, confidentiality will be maintained. The Head ensures that all teachers including supply teachers have all the relevant information about pupils who have medical needs and are shown relevant health care plans. The Head is also responsible for overseeing risk assessments for school visits, residential trips and other activities outside of the normal timetable and for the monitoring of individual health care plans.

In addition to the Headteacher, the Senior Teaching Assistant acting under the Head's authority, oversees management and administration of medicines within the school in conjunction with the Admin team who also administer medicines.

### **RESPONSIBILITY OF PARENTS/CARERS**

- Parents/carers are responsible for supplying the school with updated information regarding their child's condition and medication.
- Parents/carers have to complete a written consent form for the administration of medication. Medicines will not be accepted in school without this. (See appendix 1)
- Parents/carers are responsible for supplying reasonable quantities to school and ensuring that the medicine for their child is in date.
- Parents/carers are responsible for ensuring each container is handed in with a signed consent form clearly stating the following:

- Name of medicine
- Pupil's name
- Dosage
- Dosage frequency
- Date of dispensing
- Storage requirements, if important
- Expiry date

It is the parents/carers responsibility to inform the school in writing when the medicine is discontinued or the dosage changed. Any relevant paperwork can then be updated.

### **INDIVIDUAL HEALTH CARE PLANS**

All health care plans are drawn up by parents/carers in conjunction with the school, education and health professionals. The plan sets out in detail the measures needed to support a pupil in school including preparing for an emergency. Plans will be reviewed at least annually and on the child's transfer to or from another school. They may be reviewed more regularly depending upon each individual child's circumstances.

Individual health care plans will vary depending upon the medical condition, its triggers, signs, symptoms and treatments. However they will usually include the following:

- How a pupil's needs are met including medication, other treatments, dietary requirements and environmental issues within the school e.g. possible triggers for allergic reactions
- Specific support for pupils with physical or other disabilities
- Specific support for pupils educational, social and emotional needs
- Level of support needed including what level of responsibility pupils are able to take for their own health needs including managing their medication
- Who will provide this support and their training needs and who will provide cover if they are unavailable
- Who in the school needs to be aware of the child's condition and the support required
- Arrangements for written permission from parents for medication to be administered by a member of staff or self-administered by a pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal hours that will ensure the child can participate e.g. risk assessments
- Where confidentiality issues are raised by the parent, child, the designated individuals to be entrusted with information about the child's condition; and
- What to do in an emergency, including whom to contact, and contingency arrangements

A copy of each health care plan is kept centrally in a file in the school office together with the medical needs register- a list of children across the school with any medical need. It is updated regularly by the Senior Teaching Assistant and the Admin Team and is monitored by the Headteacher.

Class teachers will be given copies of health care plans where appropriate. Staff must familiarise themselves with the medical needs of the children they work with. Training will be provided for specific staff responsible for an individual child's specific medical needs so that they know what actions to take and how to react in an emergency. Training will be updated on a regular basis. All records of training and appropriate updates are stored in the 'Safeguarding file' in the Headteacher office.

Governors will monitor the effectiveness of procedures with regard to managing medical needs of pupils as part of their annual Safeguarding audit, which will be reported at the main Governing Body meeting and shared with the Local Authority. This will include examining information displayed in the school and the medical conditions register to check that they are up to date and accessible

**IDENTIFICATION OF MEDICAL CONDITIONS** Most medical conditions will be identified by parents/carers in consultation with a medical professional such as their local GP, medical specialist or community health Care Nurses and Assistants. Medical needs are initially highlighted by parents

identified on entry to the school when filling in the 'Admissions booklet'. Any medical concerns the school has about a child will be raised with the parents/carers and reported to the Islington community health team. When contacted the team will come in to the school and help review and advise on health care plans in consultation with family GP's.

The current named School Nurse for Gillespie is:

Waveney Herbert  
Community Staff Nurse  
School Health Team  
Highbury Grange Health Centre  
1-5 Highbury Grange, Islington, N5 2QB  
Tel: 020 3316 8028, 07789 305 571, [w.herbert@nhs.net](mailto:w.herbert@nhs.net)

## **MANAGING MEDICINES**

No medicines are administered without parents having signed the 'consent form for administering medication in school'. Wherever possible, competent children are encouraged to take responsibility for managing their own medicines and procedures. This is reflected in their individual health care plan.

A record is kept of all administration of medicines.

The administration will be facilitated in the following ways:

### **SUPERVISED SELF-MEDICATION**

The consent form records that the pupil has taken the medication. The staff supervising the self-medication will ensure that the pupil is provided with the correct dosage of current medication to take or to apply. Only appropriately trained staff are allowed to administer any medicines.

### **STAFF ADMINISTRATION OF MEDICINES**

There may be times when supervised self-medication is not possible for example (but not limited to) febrile convulsions, anaphylaxis, and hypoglycaemic episodes or when the pupil's judgement would be so affected to render them unable to self-medicate. Requests to treat any conditions that require medical interventions e.g. use of an Epipen, must also be accompanied by a form to authorise the administration of medical treatment.

## **STORAGE OF MEDICATION**

All medication is stored in the medical cupboard in the school office for easy access and in accordance with specific instructions for that medication. Medicines are stored in colour coded year group bags for easy access. Pupils know where their medication is stored and are made aware of the role of key adults who will be responsible for ensuring that they receive appropriate medication. Where a pupil needs two or more prescribed medicines, each will be stored in a separate container. Some medicines need to be refrigerated. These will be kept in a clearly marked airtight container in the refrigerator in the medical room.

## **DISPOSAL OF MEDICINES**

School staff should not dispose of medicines. Parents and Carers will collect medicines held at school where necessary. Parents and Carers are responsible for disposal of date-expired medicines.

## **TRAINING OF STAFF**

The school will liaise with appropriate education and healthcare professionals to undertake general training for all staff including how to administer an Epipen and specific training related to individual pupils medical conditions including Asthma. This is to ensure that nominated staff are proficient and confident in administering medication and with simple medical procedures.

## **INSURANCE**

The school is covered by the LA's insurance policy, which includes cover for arrangements for children who are competent to manage their own health needs and medicines.

## **ARRANGEMENTS FOR EDUCATIONAL VISITS & SPORTING ACTIVITIES**

Staff taking pupils out of the school will always take with them the medicines, equipment and associated information for any pupil in the group who has a medical condition. Children with asthma must always take their asthma pumps on any outing or they will not be allowed to go. Staff must have access to a mobile telephone on any outing or visit.

## **MEDICATION ON SCHOOL JOURNEYS OR RESIDENTIAL VISITS**

Every effort will be made to ensure pupils who require administration of medicines can go on school journeys or residential visits. If a pupil requiring administration of medicine cannot be accompanied by a trained member of staff their needs will be discussed with a Community Specialist Nurse to identify whether there is any other practical way of resolving the problem should it arise while off site.

If a pupil is able to self-medicate on school journeys or residential visits consideration will be given to the best way of transporting and storing the medicines.

## **COMMON MEDICAL CONDITIONS:**

### **ANAPHYLAXIS, ASTHMA, DIABETES, ECZEMA AND EPILEPSY**

The school recognises that these are common conditions affecting many children . We ensure that all staff in the school have a good understanding of these through relevant training and do not discriminate against any child who is affected.

## **ASTHMA**

The school has an up to date asthma policy and all staff are trained at regular intervals by the Asthma Nurse from the Whittingham Hospital. In 2018 the school received a certificate from the Whittingham Hospital indicating that it was an 'Asthma friendly School '

## **ANAPHYLAXIS**

Anaphylaxis can be triggered by foods or non-foods (wasp and bee stings, certain medicines, even exercise). The symptoms of anaphylaxis can be identified by effects on the respiratory system, cardiovascular system, gastrointestinal system, skin, nervous system and genitourinary system. All children who have an Epipen have a specific health care plan so that we know what procedure to follow in an emergency. Medical emergency information cards including photographs of all pupils are displayed in the main office, in the pupil's classrooms, medical room, and staffroom and in the school kitchen. The Senior Teaching Assistant is responsible for monitoring the expiry date of Epipens and for advising parents. This is monitored by the head and inspected by the Safeguarding governor at least annually.

## **DIABETES**

We recognise that Diabetes is a very serious condition, and could result in a Hypoglycaemia attack (Hypo) where blood sugar level becomes too low, or a Hyperglycaemia attack (Hyper) where blood sugar levels become too high. Prompt medical attention will then be required to rectify the chemical and sugar imbalance in the blood. Children who are diabetic need supervision and careful monitoring so that staff are aware of any changes in the child and are able to take immediate action if they should need to. All children with Diabetes in school will have their own individual health care plan. Each child with diabetes will have an emergency box labelled with their name and photograph and containing any relevant equipment required to control a hypo or hyper attack. Staff had Diabetes training from a

Diabetes Nurse in 2017 and two Teaching Assistants have had specialist training to enable them to support a pupil with Diabetes attending the school.

## **ECZEMA**

Active (acute) eczema causes constant itching and can mean sleepless nights and daytime drowsiness. We recognise that children who suffer with eczema may need the support of school staff to help them deal with this condition and that they may need help to apply emollients.

## **EPILEPSY SEIZURES**

All staff had training on Epilepsy from a specialist Nurse from the Whittingham hospital Pupils with epilepsy will have a health care plan, which will include information about medication. In the event of a child having an epileptic seizure, staff are trained to:

- Stay calm
- If the child is convulsing then put something soft under their head
- Protect the child from injury (remove harmful objects from nearby)
- NEVER try and put anything in their mouth or between their teeth
- Try and time how long the seizure lasts – if it lasts longer than usual for that child or continues for more than five minutes then call medical assistance
- When the child finishes their seizure stay with them and reassure them
- Do not give them food or drink until they have fully recovered from the seizure

## **DIETARY NEEDS**

Many pupils have specific dietary needs. They are identified and recorded using the same procedures as for medical conditions.

## **ABSENCE AS A RESULT OF A MEDICAL CONDITION**

- In cases where pupils are absent for periods less than 15 working days, parents will follow the normal arrangements for informing the school. If the length of the period of absence can be anticipated, then it may be appropriate for the school to provide the pupil with a pack of work to do at home.
- Where an absence exceeds 15 working days, the school will inform the Education Welfare Service. Parents will need to provide the school with a letter from a medical Consultant containing details of the medical condition or intervention and information about the estimated period of absence. If a pupil is to be admitted to hospital for a period longer than 5 working days, then the school will contact the Hospital School and will consult with staff there about ensuring continuity of education. If a child requires temporary education at home, the school will liaise with parents to provide appropriate work.
- The school, with the parents' cooperation, will maintain contact with pupils unable to attend. It may be appropriate for email to be used and if special events are taking place at school it may be possible for a video to be made and a copy sent to the hospital or home.
- The school will continue to monitor the progress of pupils unable to attend. This will be done through discussion with teachers working with the child out of school and by examining work samples (where appropriate). In cases of extended absence, the SENCo will arrange for a review to be held, attended by the pupil's parents and the class teacher.

## **CONFIDENTIALITY**

A discussion will take place between the school and parent/carers about what level of confidentiality is appropriate in relation to any child's medical needs. In order to keep a child safe, all adults in the school, not only adults who have direct responsibility for the child may have to know about the child's condition and its implications. Where it will help in supporting the child, for example with allergies, the school will encourage the child and parent/carer to share the information more widely including with other children.

## **COMPLAINTS**

If parents are concerned about how the school is meeting the needs of pupils with medical conditions in the first instance they should contact the Head. If the Head is not able to resolve the issue then parents should make a formal complaint to Governors via the school's complaints procedure.

## **DON'Ts**

It is not Gillespie's practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

