



WALSH

MEMORIAL

C.E. (Controlled)

Infant School

ILLNESS AND THE ADMINISTRATION OF MEDICINES POLICY

DATE FOR REVIEW: NOVEMBER 2021



Walsh Memorial CE Infant School



The School aims to serve its community by providing an education of the highest quality within the context of Christian belief and practice. It encourages an understanding of the meaning and significance of faith, and promotes Christian values through the experience it offers to all its pupils.

Illness and the Administration of Medicines

With regard to the document The Supporting Pupils with Medical Conditions Surrey Guidance (January 2016) the policy of Walsh Memorial Infant School is as follows:

Illness

If a child is on medication s/he should only be sent to school if:

- The child has recovered from an illness, and is fit to participate in the curriculum as normal
- The child is suffering from a long-term illness for example cancer
- The child requires preventative medicine such as an inhaler or an EpiPen

It is the responsibility of the parents that no child should be sent to school if they are ill and we ensure children to stay at home for at least forty eight hours after an attack of sickness or diarrhoea in order to break any cycle of infection. Guidance on return to school dates is clearly stated in the Surrey documentation and we follow these stringently.

If a child becomes unwell at school the Headteacher/Deputy Headteacher feel it is appropriate for the child to go home, the parents/carers will be requested to collect the child as soon as possible. It is vitally important that parents keep the school informed of any changes in contact numbers. The school sends out data checking sheets at the start of the academic year, but it is the parent's responsibility to inform the school of any changes during the rest of the school year including relevant medical information. It is the Headteachers responsibility to monitor the individual Health Care Plans.

If a child becomes seriously unwell or is injured an ambulance will be called and the parents or carers contacted. If the parents/carers have not arrived at the school by the time the ambulance leaves, a member of staff, preferably the Headteacher will accompany the child to the hospital and await the arrival of the

parent/ carer. The procedure for dealing with an emergency is in appendix I
Contacting Emergency Services.

If a parent or carer cannot be contacted, the Headteacher, Deputy Headteacher or nominated staff member will act in loco parentis taking the data information sheet and grab bag.

Long Term Sickness (15 days or more)

The Head Teacher is a named person responsible for dealing with pupils who are unable to attend school because of medical needs. She will:-

- inform the LEA/EWO
- supply the appropriate education provider with information about a pupils capabilities, progress and provide programmes of work
- monitor the progress, liaising with other agencies if appropriate
- assisting the re-integration into school of the pupil
- keep family informed of school events
- will encourage and facilitate liaison with peers through visits, letters and videos etc

Medication

Parents are encouraged to administer medication where possible by coming into school or in appropriate cases self-administration by the child. Only prescribed medicines will be administered with parents written consent on form **Child/Young Person Medication Request** (see appendix II) and if parent has provided the school with sufficient information about their child's medical condition. All medicines are to be handed directly to a member of the Office Staff. Any regular treatment or special care needed at school should be declared at the admission stage.

Prescribed medicines will need to be in the container they were supplied in and clearly labelled with:

- the name of the child
- the type of the medication
- the dose and frequency of administration
- instructions for administration
- date of dispensing
- expiry date
- cautionary advice

This information is normally supplied by the dispensing pharmacy on the label.

Staff must follow the procedures in appendix four when administering medicines. When any medication has been administered details will be recorded on the **Record of medicine administered to an individual child** in a file. (See appendix III). This will be kept in the office and the member of staff concerned must initial the information. All records of medicines will be kept until the end of the academic year or when the child leaves the school when they will be returned to the parent.

If a pupil refuses to take medication the school should inform the child's parents as a matter of urgency. If necessary the school should call the emergency services.

Antibiotics - In most circumstances the dosage can be arranged so that administration is not required during school hours.

Regular Treatments e.g. Anaphylaxis, Diabetes, Epilepsy etc. need an individual treatment form and they are available on request. For children suffering from these illnesses a meeting is required with members of the school staff, school nurse and parent to ensure the transfer of vital information is understood by all.

An adult must bring medicines to the school office. No medicines must be brought into school by a child or left in the child's bag.

All staff have the right to decline the responsibility of administering medicines. The following people have agreed to follow the school guidelines and are willing to administer medicines. Medicines (except inhalers) will be administered by the School Administrative Assistant (SAA), Headteacher and Deputy Headteacher or Finance Assistant in the SAA absence or any Teaching Assistant following their agreement.

Inhalers will normally be administered by the Administrative Assistant, Mrs Cawson the Head Teacher, the teachers, Teaching Assistants, lunchtime supervisors may take the responsibility to administer an inhaler if a child is suffering from an asthma attack. The office staff must be notified to ensure the condition of the child is monitored and the details put in the file. No child will be allowed to use an inhaler unless under adult supervision.

Medicines will be kept in the medicine cupboard in the school office unless they are required to be kept in the 'fridge. If this is the case the 'fridge in the staff room will be used and medicine kept in a sealed container marked medicines. No child is allowed in the school office unless accompanied by an adult and no child is allowed to access the medicine cupboard. On occasions it may be necessary for

creams to be available in the classroom for self-administration. These will be kept out of the reach of others.

Controlled Drugs

Will be kept in a double locked container in the school office. Drugs will be counted in and out and double signed.

Staff Training

The Headteacher is responsible for ensuring that sufficient staff are suitably trained. A selection of staff attend the Appointed Person's certificated First Aid Course. Training on how to use an Epipen/ other brands for Anaphylaxis reaction and epilepsy occurs on an annual basis. Administering medicine is an act of 'taking reasonable care' of the pupil. Staff agreeing to administer medication are **fully indemnified** against claims for alleged negligence proving they are acting within the remit of their employment.

All staff will be kept informed which children need medicine and for long term medication a photograph will be placed in the front of the registers to help supply teachers identify children on medication.

A record of the names of persons who administer medicine will be kept.

Parental Responsibility

If a child has an ongoing medical problem it is the parents/carers responsibility to inform the school of their child's health needs in writing which should include information on the symptoms and treatment the child requires. The school will issue a form on a yearly basis and to parents of children who enter school during the year. Any further information or support arrangements from Health Professionals will be reviewed and kept in the child's school file. School will photocopy any professional report available for school records.

It is the parents responsibility to inform the school if their child's needs change .

This policy will be reviewed and circulated to parents on a yearly basis. Policies will also be given to the parents / carers of children who join the school after the circulation date.

Educational Visits

Teaching Assistants will administer inhalers. Staff will administer any medicines necessary under normal procedures and write the details of the medication given on the permission form and transfer details to the correct form on return to

school. If any additional safety measures are necessary for any visit, staff should refer to the Surrey Education Services Guidelines for Educational Visits and Outdoor Education Activities (part 1. section 3) for further guidance from The Supporting Pupils with Medical Conditions Surrey Guidance (January 2016)

Disposal of medicines

- school staff should not dispose of medicines.
- Parents should collect medicines from school at least at the end of each term.
- Parents are responsible for disposal of date expired medicines.

Work Experience

The Headteacher will ensure that the placement is suitable for a student with a particular medical condition and students will be encouraged to share relevant medical information with employers.

Treatment for serious medical conditions

Children with chronic medical conditions which may require urgent action to prevent a possible life threatening situation from developing will have specially appointed ancillary staff to carry out these tasks. When such staff are unable there may be other willing staff to do so, exercising their duty of care. In such cases the following points should be followed:

- Professional training must be obtained before the school makes a commitment.
- All staff should be able to recognise the onset of conditions which may require rapid intervention and take appropriate action.
- Teachers (including supply) and other relevant staff normally coming into contact with pupils with such conditions should be made aware of them.
- The school has an action plan for emergencies including - **a clear procedure for summoning an ambulance and access to telephones and clear instructions on what and what not to do.**
- If staff are not willing to administer treatment it is essential that appropriate aid is summoned urgently by telephoning for an **ambulance on 999.**
- The following medical conditions are commonly found among school children: **Anaphylaxis (severe allergic reaction), Asthma, Diabetes, Epilepsy.**
- For the most severe conditions Individual Treatment Plans will be established in consultation with the parents and the School Health Service and such ITPs will be regularly reviewed.
- The school will ensure that contingency plans are in place in case the normal routine for treatment breaks down, eg trained staff are absent. This will be included in the ITP.
- **Medicalert - Bracelets/Necklaces** - worn to alert others of a specific medical condition in case of an emergency. As sources of potential injury in PE

consideration will be given to their temporary removal and safe keeping. In such cases staff will need to be alerted to the significance of the items and be clear who they belong to when taking charge of them.

- Following a child absence due to medical issues the Headteacher will meet with the parents to ensure a smooth reintegration back to school. Advice from parents will be sought and further training if required.

Emergency assistance

- A child who is unwell or injured at school will be looked after in the short term. Staff must inform the Headteacher/Senior School Assistant before a child is left outside the School Office.
- If necessary the school will ask the parent to collect the child as soon as possible.
- In a case of more serious injury, e.g. suspected fractures, all eye injuries, serious head injuries, acute illness, that will not respond to first aid treatment, the school will attempt to contact the parent but if this is not possible, will summon an ambulance.
- If a child needs to be taken to hospital and a parent is not available, a member of staff will accompany the child and remain at the hospital with them until the parent arrives.
- Consent is generally not required for any **life saving emergency treatment** given in A & E Departments. Any religious/cultural wishes, i.e. blood transfusions, known to the school must be communicated to the medical staff for due consideration. **The teacher accompanying the child cannot give consent for any medical treatment as he/she does not have parental responsibility for the pupil.**

Record keeping

The following is a summary of the records which schools **MUST** keep in connection with the administration of medicines:

- Records of requests/parental consent.
- Names of staff responsible for medication, keeping information and medicines up to date and keeping equipment and devices clean and in good working order.
- Names and locations of staff authorised and trained to administer medication.
- Details of all treatments/medication given, including the date, time, medicine, dose, method and signatures of the administrator and, where appropriate, the witness.
- Full details of any incidents involving emergency action.

Transition Arrangements

When a child leaves the school we will inform the receiving school of the necessity to contact the parents immediately to share their child's personal

information. Should the child leave the locality a letter will be sent to the school and an acknowledgement of receipt required. A copy of medical information will be kept until the acknowledgement is received upon which it is destroyed.

This policy will be available to parents, staff and others as required.

Home to School Transport

It is the responsibility of the local authority who find it helpful to be aware of a pupils individual health care plan, and what it contains, especially in the respect of emergency situations.