

Castlefields Primary School



Supporting Children at School with Medical Conditions

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Responsibility: Headteacher/Governors

Doc: *Comp 2/Policy Docs*

Castlefields Primary School Supporting Children at School with Medical Conditions Policy

Introduction

Many pupils will, at some time, have a medical (physical and mental health) condition which may affect their participation in school activities. For many, this will be a short-term condition. Other pupils have medical conditions which, if not effectively managed, could limit their access to education (including school trips and PE). Such pupils are regarded as having 'medical needs'. Most pupils with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. However, school staff may need to take extra care in supervising some activities, to make sure that these pupils and others are not put at risk.

This policy describes how Castlefields Primary School supports the needs of pupils with medical needs and also safeguards staff by providing clear guidelines and parameters for the support they offer.

The policy must be adhered to in the case of any member of the school community administering medication to pupils during school time.

Administration of medicines to pupils by teachers is voluntary but by agreeing to attend training related to the administration of medicines a member of staff is therefore agreeing to administer the medication. The administration of medicines may be in some job descriptions and as such that member of staff would be expected to administer the relevant medication.

Any member of staff should not agree to administer medicines without first receiving appropriate training.

Aims

- To ensure that pupils with medical needs receive proper care and support in school.
- To provide guidance for staff on the parameters within which they should operate when supporting pupils with medical needs.
- To reduce the medical conditions impact on academic progress, as well as improving pupils' self-confidence and self-care.
- To define the areas of responsibility of all parties involved: pupils, parents, staff etc

Medicines: Administration and Use

Medication/medicines in this document applies to those prescribed by the pupil's doctor, dentist, nurse prescriber or pharmacist prescriber, whether in the form of tablets, inhalers, liquids, capsules or creams.

Castlefields Primary School will make every effort to co-operate with reasonable and justified requests from parents so that their children need not miss out on their education. With the current legal position and the County Council's insurance arrangements, staff should be able to follow these guidelines and ensure that the risk of acting negligently is kept to an absolute minimum. However, if Heads are in any doubt about administering medicines in school, they should consult the Consultant Paediatrician.

Parents and Carers should provide the school with sufficient information about the child's medical needs if medication or special care is required. School needs to know who has parental responsibility in the event of family breakdown. In relation to unmarried parents, only the mother will have parental responsibility, unless the father has acquired it in accordance with the Children Act 1989. In the case of Looked After Children the Local Authority still has parental responsibility, although day to day responsibility may reside with foster parents, residential care workers or guardians.

Procedures

Castlefields school is committed to supporting pupils, staff and parents where pupils need to take medication, either on a regular basis or as a one off.

School will make every effort to ensure that staff are appropriately trained and have sufficient understanding, confidence and expertise to support children with medical needs. This will be updated on a regular basis.

No member of staff can be required to administer medication to a pupil or to supervise a pupil taking medication. However, there is nothing to stop them from undertaking such tasks if they are willing to do so, provided the parents have given written permission and where necessary appropriate training has been given by Health Professionals.

Practice

- Parents/carers are responsible for ensuring that their child is well enough to attend school
- Parents/carers must provide the school with sufficient information about their child's medical condition and the support and care required
- The school will also listen to and value the views of the pupil
- Parents/carers and the school must reach an agreement on the school's role and responsibility for support for the pupil
- Accurate records will be kept and maintained by staff in supporting pupils with medical need
- The school will ensure that staff who (volunteer and) are caring for pupils with medical needs will receive appropriate training

- The school will ensure that pupils with medical needs have a 'Healthcare Plan' (see Appendix 1) which outline the support needed and the roles of all involved. These plans will be agreed and written after consultation, including advice from specialist medical staff if required (including the school nursing service)
- If necessary, the Healthcare Plan will also include any specific emergency procedures
- Pupils will not be given any medication without parental consent. However, if medicines are required in the school day, these medicines will only be sent into school with agreement between the school and parents. Safe storage, clear instruction and safe disposal of all medicines will be agreed. (N.B. It is parental responsibility to ensure that all medicines are 'in-date')
- If pupils are given medicines, the type of medicine and time will always be recorded by the issuing staff
- The Governors will ensure that the school has clear systems in place to allow the school to support pupils with medical needs. Governors will check that systems are properly implemented

Policy implementation

- The Headteacher is responsible for ensuring policy implementation
- School leaders will ensure that sufficient staff are suitably trained and aware of individual's conditions
- Absent staff will be covered and supply staff suitably briefed
- Risk assessments for school visits and other school activities outside of the normal timetable will be undertaken
- All Healthcare Plans will be monitored and reviewed annually or as required

Healthcare Plans

- Plans will be written and agreed by the school, healthcare professional, parent and, if appropriate, the pupil and will be based on evidence.
- If a pupil has SEN but does not have a statement or an Education Health and Care Plan (EHCP) their special educational needs will be mentioned in the Healthcare Plan.
- The Healthcare Plan will be developed with the pupil's best interest in mind and will assess and manage risks to the pupil's education, health and social wellbeing while minimising disruption.
- The particular environment of Castlefields Primary School should be considered with many steps on the playground. If possible, the school will make reasonable adjustments to help reduce problems
- Consideration should be given, for example, to how absences will be managed, requirements for extra time for tests, counselling, rest periods, or additional support in catching up in lessons
- Pupils who require medication due to a permanent condition such as Diabetes will either self medicate or have medication administered by staff who have undergone training and are willing to carry out this act
- Pupils who need medication due to a short-term illness will be given the medication by a member of staff who is willing to carry out this act. Written permission will be given from parents and details will be agreed and recorded appropriately

Parents

- Parents play the key role in passing on information and training. They are best placed to understand their child and the best way to support the medical needs
- They will have links to health care professionals and extra support groups and these will normally already be known to the pupil
- Parents therefore have a major role in setting out the support and hence training of school staff
- Parents should be fully involved at all times and any support put in place must have their agreement
- Any regular or emergency medication prescribed to a pupil should always be accompanied by a completed form or other written agreement.

Insurance

- School staff should be appropriately insured.
- The level of insurance should appropriately reflect the level of risk.

The Policy for Supporting Pupils with Medical Conditions has been adopted by the Castlefields Primary School Local Governing Body.

For pupils who require medication long term on a daily basis

A consent form filled out by parents with exact name of medication, times and dosage required. This will need to be updated at least annually. The consent form must be signed by a parent. It is usually the administration staff who will administer this type of medication.

Medication must be provided in a named bag, locked away and dates checked regularly by parents.

For pupils who require prescribed medication for a short term e.g. antibiotics for a week school will only administer antibiotics or similar if the dosage is 4 times a day.

A consent form (available from the office) must be filled out by parents with:

- Exact name of medication
- Reason for medication
- Dosage required
- Name of Doctor or medical professional that has prescribed this medication
- Telephone number of parents and Doctor

The consent form must be signed by a parent. It is usually the administration staff who will administer this type of medication.

Medication must be kept in a named bag and locked away unless it needs to be kept in the fridge in which case it must be in the fridge in the staff room.

ASTHMA – See also separate Asthma Policy

Any child who needs an inhaler for asthma, even if it is infrequent, should have an inhaler in school.

For pupils who require an inhaler for asthma in Foundation Stage or Key Stage 1

A consent form (Appendix 1) must be filled out by parents with:

- Exact name of medication
- Reason for medication
- Dosage required
- Name of Doctor or medical professional that has prescribed this medication
- Telephone number of parents and Doctor

The consent form must be signed by a parent. The children should be encouraged at an early age to use inhalers for themselves but in Foundation and Key Stage 1 they should be supervised by a member of staff who will log on a chart that the child has used their inhaler, with time/date and number of puffs.

For pupils who require an inhaler for asthma in Key Stage 2

A consent form (Appendix 1) must be filled out by parents with:

- Exact name of medication
- Reason for medication
- Dosage required
- Name of Doctor or medical professional that has prescribed this medication
- Telephone number of parents and Doctor

The consent form must be signed by a parent. The children must look after their inhalers in their classroom. They must take them outside during PE and games lessons. If a child has just been diagnosed then a member of staff will supervise them in the early stages. When children use their inhaler it should be logged onto the appropriate form by the child or with support if agreed by parents and staff.

All children must take Inhalers on school trips and into the Forest. The emergency inhaler should be in a grab bag that goes outside when there is a fire drill. All parents of children with Asthma need to give permission on the consent form, if they are willing for their child to receive treatment from the Emergency Subutamol Inhaler.

The school asthma lead – Mrs Rebecca Lee - will have asthma awareness training on an annual basis. This is on top of our normal Paediatric First Aid training. There must be a register of children who suffer from asthma available to all staff at all times. This should include brief details about the triggers for the child's asthma.

Allergic Reactions

Anaphylactic shock

For Pupils who may need an EpiPen for Anaphylactic shock resulting from an allergic reaction. There should be a Health care plan (HCP) for these children.

A consent form (Appendix 2) must be filled out by parents with:

- Exact name of medication
- Reason for medication
- Dosage required
- Name of Doctor or medical professional that has prescribed this medication
- Telephone number of parents and Doctor

EpiPens should be within easy access of the child at all times and there should be a spare one in the office.

All staff who deal with these children will have EpiPen training by the school nurse and there should be a register of such children available to all staff at all times.

For Pupils who may need antihistamine (piriton) or other medication e.g. phenergen when they appear to be having an allergic reaction

A consent form (Appendix 2) must be filled out by parents with:

- Exact name of medication
- Reason for medication
- Dosage required & details about other medication that may need to be taken with this medicine e.g. inhaler
- Name of Doctor or medical professional that has prescribed this medication
- Telephone number of parents and Doctor

Diabetes

Castlefields Primary School prides itself on being an inclusive community that commits to supporting all pupils, including those with diabetes. Our aim is that ensure that all children are able to and encouraged to participate fully in all aspects of school life.

We understand that diabetes is a long-term medical condition which means that the levels of glucose in the blood are too high because the body is unable to use it properly. Academic performance may be adversely affected if a child is not supported in accordance with their care plan to manage their condition.

Children with diabetes will need support to manage their condition and a child will know exactly who supports them individually. The teaching assistant(s) and teacher(s) will complete training with the diabetic nurse and have responsibility for ensuring the child's condition is managed. Diabetic pupils must have immediate access to their medicine, monitoring devices and hypo packs at all times and all steps must be taken to ensure that the necessary kits are within easy access.

All members of staff are aware of which children have diabetes and are aware of what to do if a pupil becomes unwell.

We will work closely with parents/carers, the child and professionals to ensure that all information is shared to create a thorough knowledge and understanding of the child's condition and the care that each particular child needs.

For pupils with Diabetes. There should be a medical care plan for these children

A consent form (Appendix 2) must be filled out by parents with:

- Exact name of medication
- Reason for medication
- Dosage required
- Name of Doctor or medical professional that has prescribed this medication
- Telephone number of parents and Doctor

Pupils should carry their diabetes kit with them at all times and there should be a spare one in the office. A snack box should be kept in school if there are any children who are diabetic and on the Health Care Plan it should clearly outline when these snacks should/could be used. This differs with the severity of diabetes. If pupils use needles to inject themselves there should be safe provision for the disposal of sharps.

Diabetes medication

Storage

Castlefields Primary School has a comprehensive Administration of Medicines Policy which covers all aspects of medicine storage, administration and monitoring and should be read in conjunction with this policy. It may be necessary for insulin to be stored in a fridge, so the school will ensure that diabetic students and staff have easy access to a controlled medical fridge specifically for this purpose. Pupils are advised to carry their insulin with them at all times in appropriate storage containers.

Off Site

Diabetes should not prevent a pupil from going on school trips or residential trips. Any trip will require careful planning, an individual risk assessment and liaison between staff and parents/carers. A diabetic student should only leave the school once the trip leader has accessed and retained a copy of their individual care plan and has checked that all control measures are in place (e.g. medications, blood glucose monitoring equipment etc.)

Record keeping and care plans

When a pupil joins Castlefields Primary School, any medical condition will be identified in the application forms. If a child is already a Castlefields pupil upon diagnosis, all relevant information must be shared with the school. A meeting will be arranged with parents/carers and the diabetic nurse. It is vital that parents/carers keep the school informed of any changes to the pupils' care.

Care Plan

A care plan must be devised and agreed, sent to parents for approval then kept on file for school staff to access as necessary. The Individual Care plan should describe the responsibility of all parties, address the pupil's specific needs and provide clear instructions for ongoing and emergency care. It should be regularly reviewed and updated.

Treating diabetes

Insulin has to be injected and most children with diabetes will need several injections every day. While some injections will be given out of school hours, the majority of pupils will require one or more injections during the school day. This will be detailed in their health care plan.

All children with diabetes will need to test their blood sugar levels during school time. This is vital to the management of the condition and must be facilitated. Blood glucose testing involves pricking the finger, using a special device, and placing a small drop of blood onto a glucose testing strip. The level is displayed on a small electronic meter. The procedure takes as little as a minute to complete. Most pupils will carry out this procedure discretely in the classroom. However, if they wish to do this in a more private space, this should be allowed. Staff may need to oversee the blood glucose test and help a young child to interpret the reading.

If a child has low blood glucose level (hypo – see below) they may also interpret the reading incorrectly, or need assistance inserting the testing strip etc. There are no exposed sharps that could pose a danger to other pupils in a blood glucose testing kit, though it is important to discuss the safe use and disposal of equipment in the classroom.

In most cases the equipment used for insulin injections will be an insulin 'pen' rather than a syringe. Pupils may be able to administer the insulin injection themselves; however younger children may need the dose 'double checked' by staff prior to injection. For children under the age of 8 or who have a learning difficulty it may be necessary for a member of the school staff to administer the insulin.

Staff training, support and information will be available from the Diabetes or School Nursing Team. All staff who are required to administer insulin will receive specific training.

Hypoglycaemia

Hypoglycaemia (Hypo) is the most common short-term complication in diabetes and occurs when blood sugar levels fall too low. Hypos can happen at any time. It is important to understand that a hypo cannot be predicted. It is a physiological response that can happen very suddenly and without warning. It is during a hypoglycaemic episode that adult support is most likely to be required and there is a need for awareness and training for all staff.

Most children will have warning signs that will alert them, or people around them, to a hypo. However, some children will have no hypo awareness at all and can be completely unaware of their deteriorating state. It is vital to encourage pupils displaying symptoms to test their blood glucose levels.

The warning signs can include:

- Mood changes, especially angry or aggressive behaviour
- Hunger
- Sweating

- Drowsiness
- Glazed eyes
- Pallor
- Trembling or shakiness
- Headache
- Lack of concentration

The symptoms can be different for every child and it is important to get information from the child and the parents/carers about each individual. A child's health care plan will detail their specific symptoms and signs.

It is vital that a hypo is treated quickly. If left untreated, the blood sugar level could fall so low that the child can become unconscious. A pupil should never be left alone during a hypo, nor sent from the classroom unaccompanied to treat it, e.g. sending a pupil to the school office alone is not appropriate. Recovery treatment must be brought to the child. Most children will know when they are going hypo and will be able to take appropriate action themselves. Pupils with diabetes will usually have a treatment, e.g. dextrose tablet or full sugar drink, in their school bag and an emergency kit box kept in school. Specific symptoms and treatments will be detailed in the child's health care plan. In the unlikely event of a child losing consciousness, do not give them anything by mouth. Place them in the recovery position and call an ambulance informing them that the child has diabetes.

A hypo can occur as a result of:

- Too much insulin
- Not enough food to fuel an activity
- Too little food at any stage of the day
- A missed meal, or delayed meal or snack
- A change in the weather
- The child vomiting
- Hormonal development (particularly menstruation)
- Growth
- Emotional changes

Physical activity

Diabetes should not stop children with the condition from enjoying any kind of physical activity or being selected to represent the school and other teams, providing they have made some simple preparations. Pupils may need to check their blood glucose level before and during the activity and may need to eat a snack before and / or after an activity, otherwise their blood sugar level could fall too low and cause a hypo. For more strenuous or prolonged activity, pre-planning, including liaison with parents/carers is advised to avoid hypoglycaemia. Diabetes should not be seen as a barrier to full participation in physical activities. While it is important to keep an eye on all children, the child with diabetes should not be singled out for special attention as this can lead to embarrassment.

Other considerations

If a child is unwell their blood glucose levels may rise. This can cause them to become very thirsty and to need to go to the toilet more frequently. If staff notice this, they should report it to the child's parents/carers. If a child vomits at school contact the parents/carers immediately and support the child to monitor their blood glucose level. (This is of particular importance for a child using an insulin pump.)

Day and residential visits out of school should not cause any additional problems as the routine should be very similar to that at school. There should be no need for parents/carers to accompany the child. The child with diabetes should take their insulin and blood glucose kit with them. It is a good idea for parents to provide extra snacks in case of delay in returning home. The emergency kits box should also be taken as back up. Staff with responsibility for administering medicines on trips can receive training and support from Health colleagues. Overnight assistance may be required to check blood glucose levels do not fall too low, and to assist pupils with snacks during the night should this occur.

Castlefields School will have enough staff trained so that a child with diabetes can take part in all elements of school life. If all the trained staff are away or on leave, school must have a contingency plan to train up replacements quickly.

Diabetes kits must be taken with the child for fire evacuation and whenever the child leaves the classroom.

All staff who deal with these children will have Diabetes training by the Diabetes nurse – this should be child specific.

Children with other medical issues:

There may be children in school who do not require medication on a regular basis but for whom there is still a Health care plan e.g. those children suffering from coeliac disease

Staff are to familiarise themselves with the condition of these children. All staff must have awareness and basic training. There will be further training for the staff in appropriate year band.

Head lice

If a pupil is found to have head lice, the parents of that pupil will be informed and they will be given advice on how to treat the pupil.

Other medication

Calpol

Anti-histamine

If a child has been stung or seems to be having an allergic reaction staff would ring parents and seek permission to administer the correct dosage of anti-histamine. Likewise if a child has a temperature or really bad headache and parents cannot get to school to pick the child up we would seek verbal permission to give the correct dosage of Calpol for the age group of that child.

Ibuprofen and Aspirin should not be given to pupils under 12.

The name of the actual medication should always be given over the phone and staff should always check that children have had this medication before.

With all of the above 'The Schools Administration of Medication Record Log' should be filled in with time and dosage and signed by the member of staff.

If at any point in the above procedures a member of staff feels that a child is deteriorating or not responding they must call 999.

Appendix 1 School Asthma Health Care Plan

Castlefields Primary School

Child's name

Date of birth

Group/class/form

Child's address

Date Asthma Diagnosed

Family Contact Information

Parents / Guardians Name

Phone no. (work)

(home)

(mobile)

Name

Phone no. (work)

(home)

(mobile)

G.P.

Name

Phone no.

Clinic/Hospital Contact

Name

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Phone no.

Describe how the asthma affects your child including their typical symptoms and asthma 'triggers '

Describe their daily care requirements including the name of their asthma medicine(s), how often it is used and the dose

(E.g. once or twice a day, just when they have asthma symptoms, before/during sport)

Describe what an asthma attack looks like for your child and the action to be taken if this occurs

Who is to be contacted in an emergency? Give three contact telephone numbers

Form copied to Headteacher.

I give permission for my child to receive treatment from the school Salbutamol Sulphate inhaler in an emergency.

Signed:

Date:

ADVICE FOR PARENTS

Remember:

It is your responsibility to tell the school about any changes in your child's asthma and/or their asthma medications

It is your responsibility to ensure that your child has their 'relieving' medication with them in school and that it is clearly labelled with their name. You should confirm this with your child's class teacher

It is your responsibility to ensure that your child's asthma medication has not expired

Your child should not be exposed to cigarette smoke

Parents and school staff should both take responsibility for ensuring medication comes back to school after trips. In KS2 children should also take some responsibility for this.

G.P.

Name

Phone no.

Clinic/Hospital Contact

Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)?

Plan developed with


Staff training needed/undertaken – who, what, when

Describe how your child is affected including their typical symptoms and any 'triggers ' and what action should be taken

Describe their daily care requirements including the name of their medicine(s), how often it is used and the dose

Who is to be contacted in an emergency? Give three contact telephone numbers





Form copied to class teacher:

ADVICE FOR PARENTS

Remember:

It is your responsibility to tell the school about any changes in your child's medication.

It is your responsibility to ensure that your child has their medication with them in school and that it is clearly labelled with their name. You should confirm this with your child's class teacher

It is your responsibility to ensure that your child's medication has not expired

Parents and school staff should both take responsibility for ensuring medication comes back to school after trips. In KS2 children should also take some responsibility for this.

Signed: (Parent/Carer)

Dated:.....