



Bringing out the Best in Everyone"

## **Pebble Brook School**

### **Medications Policy**

### **(Supporting Pupils in School with Medical Conditions)**

Signed \_\_\_\_\_ dated \_\_\_\_\_

Chair of Governors

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## **1. Introduction**

The Governing Board of Pebble Brook School will ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life. To help achieve this, the school has adopted the Department for Education policy on Supporting Pupils at School with Medical Conditions, which was issued under Section 100 of the Children and Families Act 2014.

The aim of this policy is to ensure that the parents / carers of pupils with medical conditions feel confident that the school will provide effective support and that pupils feel safe and reach their full potential.

Some pupils with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The school will comply with their duties under the Act to make reasonable adjustments to support pupils with disabilities.

Some pupils with medical conditions may also have special educational needs (SEN) and may have an Education, Health and Care Plan (EHCP) which brings together health and social care needs as well as the provision for their special educational needs. Where the pupil has a special educational need identified in an EHCP, a school Health Care Plan will be put in place to allow additional medical information to be accessed by staff and medical services, particularly in the case of an emergency.

Supporting a pupil with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with parents / carers, pupils, healthcare professionals, where appropriate Social Care professionals and Local Authorities to ensure that needs of pupils with medical conditions are met effectively.

## **2. Roles and Responsibilities**

### **2.1 The Governing Board**

The Governing Board will ensure that:

- Arrangements are in place so that pupils with medical conditions are properly supported, can play a full and active role in school life, can remain healthy and achieve their academic potential.
- Staff are properly trained to provide the support that pupils need.

- In line with their safeguarding duties, ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases.
- In those circumstances, they do not have to accept a pupil at a time where it would be detrimental to the health of that pupil or others to do so.

## 2.2 The Headteacher

The Headteacher will ensure that:

- A person is appointed to have overall responsibility for the implementation of this policy.
- All staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- All staff including supply staff who support pupils with medical needs receive sufficient information to provide appropriate support.
- Individual Healthcare Plans are developed, monitored and reviewed annually or earlier if evidence is presented that the pupil's needs have changed. Where appropriate, Healthcare Plans will be reviewed at the pupil's Annual Review.
- Sufficient staff are suitably trained and achieve the necessary level of competency before they take on responsibility to support pupils with medical conditions.
- Sufficient numbers of trained staff are available to support all individual Healthcare Plans to cover staff absence, contingency and emergency situations.
- A register is kept of pupils in the school who have been diagnosed with asthma and / or prescribed a reliever inhaler.
- All staff are trained to recognise the symptoms of an asthma attack and are able to distinguish them from other conditions with similar symptoms.
- At least one emergency inhaler kit is maintained and readily available in an emergency situation.
- Risk Assessments for school visits, holidays and other school activities outside of the normal timetable are undertaken for pupils with medical conditions.

- All staff are aware that medical information must be treated confidentially.
- School staff are appropriately insured and are aware that they are insured to support pupils in this way.

## **2.3 Appointed Person**

The Headteacher has been appointed to have overall responsibility for implementing the school's policy for supporting pupils with medical conditions. They will ensure that pupils with medical conditions are appropriately supported.

## **2.4 School Staff**

All members of school staff may be asked to provide support to pupils with medical conditions, including administering medicines.

All members of staff should know what to do and respond accordingly if they become aware that a pupil with a medical condition needs help.

Although administering medicine is not part of teachers' professional duties, teachers should take into account the needs of pupils with medical conditions that they teach.

Staff must not give prescription medication or undertake healthcare procedures without appropriate training.

## **2.5 Pupils**

Where appropriate, pupils with medical conditions:

- Will be consulted to provide information about how their condition affects them.
- Will be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual Healthcare Plan.

## **2.6 Parents / Carers**

Parents / Carers have the prime responsibility for their child's health. Parents / carers include any person who is not a parent of a pupil but has parental responsibility for or care of a pupil.

It only requires one parent / carer to request that medicines are administered. As a matter of practicality, this will be the parent / carer with whom the school has day-to-day contact.

Parents / carers should provide the school with sufficient and up-to-date information about their child's medical needs. Parents / carers should tell the school of any change in prescription which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional.

Parents / carers are key partners and will be involved in the development and review of the Healthcare Plan for their child.

Parents / carers should provide medicines and equipment as required by the Healthcare Plan. Parents / carers should:

- Bring their child's medication and any equipment into school at the beginning of the school year.
- Replace the medication before the expiry date.
- As good practice, take into school a new asthma reliever inhaler when prescribed.
- During periods of high pollen count, encourage their children, who have been prescribed anti-histamines, to take their medication before school so that their condition can be better controlled during the school day.
- Keep their children at home when they are acutely unwell.
- Ensure that they, or another nominated adult are contactable at all times.

### **3. Staff Training and Support**

The Headteacher will ensure that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy.

Any member of staff who agrees to accept responsibility for administering prescribed medicines to a pupil does so voluntarily and will have appropriate training and guidance.

Training needs will be identified during the development or review of individual Healthcare Plans and will be reviewed annually. The family of a pupil will often be key in providing relevant information to school staff about how their child's needs can be met and parents / carers will be asked for their views but will not be the sole trainer.

Training will be provided for staff to ensure that they are competent and have confidence in their ability to support pupils with medical conditions and to fulfil the requirements as set out in individual Healthcare Plans. Training for new staff will be provided on induction or as soon after as possible.

Training will be provided by appropriate healthcare professionals so that staff have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative and emergency measures so that they can recognise and act quickly if a problem occurs.

Only staff with appropriate training will give prescription medicines or undertake healthcare procedures. A First Aid Certificate does not constitute appropriate training in supporting pupils with medical conditions.

- The school will ensure that at least 3 people have attended Supporting Pupils with Medical Conditions training to understand Buckinghamshire Council policy and to ensure medicines are appropriately managed within the school.

#### **4. Individual Healthcare Plans**

A Healthcare Plan clarifies for staff, parents / carers and the pupil the support that can be provided. Individual Healthcare Plans for pupils with medical conditions, e.g. asthma, anaphylaxis, diabetes, epilepsy, will be drafted with parents / carers, pupils and other healthcare professionals, where appropriate.

The Healthcare Plan will include:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication dose, side effects and storage.
- The level of support needed, including in emergencies. Some pupils will be able to take responsibility for their own health needs. If a pupil is self-managing their medication, then this will be stated with appropriate arrangements for monitoring.

- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. Risk Assessments.
- Where confidentiality issues are raised by the parent / carer / pupil, the designated individuals to be entrusted with information about the pupil's condition and what to do in an emergency, including whom to contact and contingency arrangements.

Some pupils may have an Emergency Healthcare Plan prepared by their lead clinician that could be used to inform development of their individual Healthcare Plan.

Healthcare Plans will be reviewed at least annually but some may need to be reviewed more frequently. Where appropriate, the Healthcare Plan will be reviewed at the pupil's Annual Review.

## 5. The Pupil's Role in Managing Their Own Medical Needs

After discussion with parents / carers, pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. Parents / carers will be asked to sign a form to acknowledge that their child is mature and responsible enough to manage their own medication. This information will be recorded in the Healthcare Plan.

Parents should be aware that if their child holds their own medication then school staff will not be recording the doses self-administered.

If it is not appropriate for a pupil to self-manage then relevant staff will help to administer medicines and manage procedures for them and a record of administration will be made.

If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but will contact their parents / carers and follow the procedure agreed in the individual Healthcare Plan.

Parents / carers will be contacted where a pupil is seen to be using their asthma inhaler more frequently than usual as this may indicate their condition is not well controlled.

## **6. Managing Medicines on School Premises**

Pupils will only be given prescription or non-prescription medicines after parents / carers have completed a General Medication Agreement, except in exceptional circumstances where the medicine has been prescribed to the pupil without the knowledge of the parents / carers. In such cases, the school will encourage the pupil to involve their parents / carers while respecting their right to confidentiality.

Sharps boxes will be used for the disposal of needles and other sharps.

### **6.1 Prescribed Medication**

The school will 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 be available inside an insulin pen or a pump, rather than in its original container.

- If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but will contact the parents / carers and follow the procedure agreed in the individual Healthcare Plan.
- Parents / carers will be contacted where a pupil is seen to be using their asthma inhaler more frequently than usual as this may indicate their condition is not well controlled. Parents should note the expiry date so that they can provide a new prescription as and when required.
- Medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

### **6.2 Short-Term Medical Needs**

Many pupils will need to take medicines during the day at some time during their time in the school. This will usually be for a short period only, perhaps to finish a course of antibiotics, which will minimise the time that they need to be absent.

Antibiotics prescribed 3 times a day can be taken out of the school day. The school will support pupils who have been prescribed antibiotics that need to be taken 4 times a day.

### 6.3 Controlled Drugs

Some medicines prescribed for pupils, e.g. methylphenidate, are controlled by the Misuse of Drugs Act, 1971. A pupil who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another pupil for use is an offence.

The school will keep controlled drugs in a locked non-portable container, to which only named staff have access but will ensure they are easily accessible in an emergency.

School staff may administer a controlled drug to the pupil for whom it has been prescribed in accordance with the prescriber's instructions.

Pebble Brook staff who have access to the controlled drugs cabinet and have agreed to administer medication are those who have training in Managing Children with Medical Conditions.

A record will be kept of any doses used and the amount of the controlled drug held in school, i.e. total number of doses (tablets) provided to the school, the dose given and the number of doses remaining.

Where the dose is half a tablet, then this will be cut using a tablet cutter at the time that the medication is required. Half tablets will be retained but not issued at the time of the next dose – a fresh tablet will be cut. Half tablets will be returned to the parent / carer for disposal.

A controlled drug, as with all medicines, will be returned to the parent / carer when no longer required to arrange for safe disposal. If this is not possible, it will be returned to the dispensing pharmacist.

Some pupils with epilepsy are prescribed rectal diazepam or buccal midazolam.

### 6.4 Pain Relief

Pupils sometimes ask for pain relief (analgesics) at school, i.e. paracetamol tablets or liquid. **Paracetamol** should not be given for more than 2 instances within a week unless a signed letter from parents / carers giving reasons for paracetamol to be given is received or a temporary Health Care Plan is created by the school for pupils with short term medical conditions such as a fracture.

## Secondary School

Parents / carers will be asked to sign a consent form confirming that the medicine has been administered without adverse effect to their child in the past and that they will inform the school immediately if this changes.

The school holds a supply of paracetamol based pain relief, which will be issued to those pupils on request, whose parents / carers have signed a consent form.

The school will hold non-prescription analgesics on behalf of pupils on request. The medication must be brought into school in the original packaging and a consent form.

The school will only administer paracetamol to those pupils requesting analgesics - generally non-prescription ibuprofen will not be given.

If ibuprofen is the analgesic of choice, then pupils / parents / carers will be advised that a dose could be taken before school as ibuprofen is effective for 6 hours. If required, the school will top up the pain relief with paracetamol.

A child under 16 will never be given aspirin-containing medicine unless prescribed by a doctor.

When a pupil requests pain relief, staff will first check maximum dosages and when the previous dose was taken. Parents / carers will be contacted for confirmation. If parents / carers are unavailable, a dose will not usually be given before 12.30pm.

A record of medication given will be kept and parents / carers will be informed by the schools T2P (text message) system.

## **7. Record Keeping**

The school will keep a record of all medicines administered to individual pupils stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted.

A second person will witness the administration of controlled drugs.

A record of administration of medicine will not be recorded where the pupil has taken responsibility for their own medication, e.g. asthma inhalers, and take their medication as and when it is required.

A record will be made where medication is held by the school but self-administered by the pupil.

## **8. Safe Storage of Medicines**

Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature and in the original container in which dispensed.

Pupils know where their medication is stored and are able to access them immediately or, where relevant, know who holds the key.

Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available and not locked away.

A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled and stored in the Family Services refrigerator, which is not accessible to pupils. A temperature log of the refrigerator will be taken during the period of storage.

Medication will never be prepared ahead of time and left ready for staff to administer.

An audit of pupil's medication will be undertaken every half term, disposing of any medication that is no longer required.

It is the parent's / carer's responsibility to ensure their child's medication remains in date. The school will remind parents / carers when their child's medication is due to expire.

## **9. Disposal of Medicines**

Parents / carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. The return of such medicines to parents / carers will be recorded.

Parents / carers should also collect medicines held at the end of the Summer Term. If parents / carers do not collect all medicines they will be taken to a local pharmacy for safe disposal.

Sharps boxes will always be used for the disposal of needles.

## 10. Hygiene and Infection Control

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures.

### 8 Step Handwashing Techniques



## 11. Day Visits, Residential Visits and Sporting Activities

The school will actively support pupils with medical conditions to participate in school trips and visits or in sporting activities.

The school will make reasonable adjustments for the inclusion of pupils in such activities.

Some pupils may need to take precautionary measures before or during exercise and may need access, for example, to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions and will consider the need for a Risk Assessment to be made.

The school will consider the reasonable adjustments that can be made to enable pupils with medical needs to participate fully and safely in visits. These arrangements will be included in the Risk Assessment for the event.

One member of staff accompanying the visit will be asked to take on the lead role for administering medicines or healthcare procedures. Individual

Healthcare Plans, medicines, equipment and consent forms will be taken on school visits.

Medicines are administered and witnessed and recorded in the pupil's records on return to school, or a copy of the recording book is taken on trips (for residential trips only).

## **12. School Arrangements for Common Conditions**

### **12.1 Asthma**

An inventory of all pupils with asthma will be compiled.

An Individual Healthcare Plan will be developed.

All staff will be trained annually to recognise the symptoms of an asthma attack and know how to respond in an emergency.

Emergency salbutamol inhalers and spacers are kept in Reception, the Therapy Room and in the Sixth Form.

Emergency salbutamol inhalers will only be given to pupils previously diagnosed with asthma whose reliever inhaler is not in school or whose inhaler has run out, who are on the register and whose parents / carers have signed the consent form.

All staff will know how and when to use the emergency salbutamol inhaler.

Parents / carers will be informed of any emergency dosages given.

### **12.2 Anaphylaxis (Severe Allergic Reaction)**

All staff will attend annual training on the symptoms of anaphylaxis, which includes information and practice on when and how to use the adrenaline auto-injector.

An Individual Healthcare Plan will be developed which includes the arrangements the school will make to control exposure to allergens.

Pupils' or staff's own auto-injectors will be kept readily available. If deemed necessary, an emergency auto-injector will be held by staff in an accessible but secure place.

### **12.3 Epilepsy**

An Individual Healthcare Plan will be developed.

An appropriate number of staff will be trained in identifying the symptoms and triggers for epilepsy, including administering medication.

There will be a number of trained members of staff available **at all times** to deliver emergency medication. Details will be recorded on the pupil's Healthcare Plan.

The school will enable pupils to take a full part in all outings and activities with the appropriate Risk Assessment in place.

The school will liaise fully with parents / carers and health professionals.

Some pupils with epilepsy are prescribed rectal diazepam or buccal midazolam. This will be administered by staff who are specifically trained to undertake this task and have agreed to this responsibility.

2 adults will be present for the administration of rectal diazepam. The dignity of the pupil will be protected as far as possible, even in an emergency.

If appropriate, a record will be kept of the pupil's seizures so that any changes to seizure patterns can be identified and so that this information can be shared with the pupil's parents / carers and healthcare team.

### **12.4 Diabetes**

An Individual Healthcare Plan will be developed.

Pupils diagnosed with type 1 diabetes and have been prescribed insulin will be supported by staff who have specifically agreed to this responsibility and have received training and support from the Diabetic Nurses Team.

A suitable private place will be provided for pupils to carry out blood tests and administer doses, e.g Family Liaison room.

Pupils will not be prevented from eating, drinking or taking toilet breaks whenever they need to in order to manage their medical condition effectively.

If a pupil has a hypo they will not be left alone and a fast-acting sugar, such as glucose tablets, a glucose rich gel, or a sugary drink will be given immediately.

Staff will then follow instructions on the pupil's Healthcare Plan to advise next steps and parents / carers will be informed.

## **13. Liability and Indemnity**

The Governing Board will ensure that the appropriate level of insurance is in place for staff providing support to pupils with medical conditions and appropriately reflects the level of risk.

The school will contact their insurers to extend their cover should a medical intervention fall outside the conditions covered by this policy.

## **14. Complaints**

Parents / carers / pupils should discuss any concerns directly with the school if they become dissatisfied with the support provided. If, for whatever reason, this does not resolve the issue, they may make a formal complaint via the school's Complaints Procedure.

## **15. School Procedures for Managing Temporary Prescribed Medicines**

Medicines should be brought to the school office by parents / carers, pupils or taxi drivers. The parents / carers should have already signed the General Medications Agreement Form but will need to provide additional details either by phone or in writing.

The designated person will check:

- The medicine is in its original container as dispensed by a chemist and details match those on the form.
- The label clearly states:
  - The child's first and last name.
  - The name of the medicine.
  - Dose required.

- Method of administration.
  - Time / frequency of administration.
- The patient information leaflet is present to identify any side effects.
- The medication is in date.
- Medicines requiring refrigeration will be kept in the fridge in a clean storage container. A daily temperature of the fridge will be taken and recorded.
- The designated person will administer medication at the appropriate time.
- If a pupil refuses to take their medicine, staff will not force them to do so. Staff will record the incident and follow agreed procedures which are set out in the pupil's Healthcare Plan and contact parents / carers. If a refusal results in an emergency, the emergency procedures detailed in the Healthcare Plan will be followed.
- If the designated person has concerns about a procedure or a medication that they are being asked to administer they will not administer the medicine, but check with the parents / carers or a health professional before taking further action.
- Temporary prescribed medication records will be recorded on the Behaviour Watch Medical tab (if appropriate).