

# **Grosvenor Road Primary School**

# Policy for Medical Needs and Medicines

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# **Grosvenor Road Primary School**

# **Policy for Medical Needs and Medicines**

The school has a commitment to support its children and their families and is committed to Inclusion. To that end we offer support in ensuring access where possible regarding medical needs and medicines.

### **Roles and Responsibilities**

### **Governing Body**

The Governing Body should ensure that the school has a Health and Safety Policy which supports the Medical Needs and Medicines Policy. They should also ensure that policies are updated annually, and that strict security measures are in place to give safe keeping to all medicines.

#### **Head Teacher**

The Headteacher takes ultimate responsibility for any decisions regarding access for children with medical conditions, or who need to take medicines whilst in school.

#### All Staff

All staff may be called upon to assist in ensuring access for children with medical needs. Where appropriate, training will be given. All staff should have awareness of children with severe medical conditions that may need a quick and appropriate response – this is facilitated through weekly staff meetings. The office should have an up to date list of all children with medical concerns, as well as the information listed on INTEGRIS (the school's information management system).

#### **SENDCO**

The SENDCO should have knowledge of all medical needs of any children registered on the Special Needs Register, and will liaise with teaching and office staff, parents and medical professionals in supporting those children.

#### Parents/Guardians

Parents/Guardians are responsible for making sure that they inform school of their child's medical needs, this information is then held on INTEGRIS. They should also ensure that their child is well enough to come to school. If it becomes apparent that there will be need for medical treatment to support the child in school, they must ensure that the school has all necessary information to support the child correctly and safely. Parents should work with the Office Staff/Headteacher to agree the school's role in supporting the child's medical needs. Parents are responsible for the safe disposal of out of date/no longer needed medication left in school. Any such medication will be returned to parents for disposal.

#### **Security of Medication**

The bringing into school of any medication must be agreed between the parent/carer and the office staff, under the guidance of the Headteacher. The Headteacher will only agree to the administration of medicines which have been prescribed by a doctor and require administration 4 x daily. Parents/Carers must complete a 'Medication Consent Form' on PARENTAPPS before the school will administer any prescribed medication.

The parent/ carer should ensure that:

- a Medication Form is submitted on ParentApps
- the medication is handed in personally to a member of the office team by the parent/carer
- only sufficient medication for that day is brought into school
- medication is securely wrapped and the child's name clearly visible
- Liquid medicine should be drawn from a prescribed bottle, marked with the child's name, into a syringe in front of a member of staff
- Ongoing administration of tablets must be provided in the labelled medicine box, marked with the child's name, for safe storage in school.

#### The office staff should ensure that:

- the medication is passed to the appropriate year group staff and is stored in a secure cupboard (or fridge) until needed
- there is a list showing all children taking medication (ParentApps)
- the type, dosage and times taken is recorded on the pupil's class medicine record see Appendix 1 (This form must be kept in RED Class Medical Information folder) When the class medication sheet is filled, this should be passed back to the office and a new form issued to the class teacher

#### **Administering of Medication**

Year group staff should administer the medicine as required and complete the record sheet. The type, dosage and times taken is recorded on the pupil's class medicine record (kept in RED Class Medical Information folder) When the class medication record is filled, this should be RETURNED TO THE OFFICE.

All staff handling medication should ensure that their hands are washed before and after handling/or that gloves are worn. Any soiled dressings or equipment should be disposed of in the designated bins.

#### **Storage of Medicines**

<u>Tablet medication</u> with be stored in the main school office (for pupils in Nursery to Year 4) or in the Y5&6 Staffroom lockable Medicine Cabinet (for pupils in Year 5&6)

<u>Liquid Medication</u> will be stored (where required) in a 'Medicines Only' container within designated fridge:

Nursery & Reception: Nursery Kitchen fridge

Year 1 – Year 4: Main Staffroom fridge Year 5 and Year 6: Y5/6 Staffroom fridge

<u>Inhalers</u> (also see Asthma Policy) will be stored in individual classroom / stock cupboard as

appropriate - accessible to staff / children

#### **Children with Intimate Care Needs**

If a child has a medical condition that requires intimate care, a care plan will be written to support his/her needs.

Many children with or without significant medical difficulties may need help/advice regarding intimate care needs. Children, who have not yet mastered bowel or urinary control, may also need intimate care whilst in school. Parents are requested to give written consent for this to take place.

Advice should always be sought from relevant professionals, and agreements with parents signed and held in the office.

The issue of intimate care is a sensitive one. The following principles must be acknowledged:

- The child's dignity will always be protected with a high level of privacy, choice and control
- Staff will always be respectful of the child's needs and will provide intimate care sensitively and professionally
- Staff will have access to training in all areas of intimate care, procedures, health and safety guidance, and child protection
- Parents/carers will always be consulted and their views respected in terms of the intimate care provided for their children all procedures will be discussed and agreed with them as part of the child's IEP/Care plan where necessary
- All staff are aware of the child protection issues related to intimate care policy
- All children with intimate care needs will be encouraged to achieve a high level of independence according to age and ability

It is advisable for some intimate care to be administered by two members of staff. Any concerns regarding this should be discussed with the Headteacher.

#### **Provision of Equipment**

The school will liaise with the appropriate professionals to agree the equipment needed for specific care. Where necessary, training in use of equipment will be arranged for relevant staff. All equipment will be managed and serviced according to the manufacturer's advice.

# **School Trips**

Children requiring intimate care must be planned for within the risk assessments and trip plans used by the school.

#### Chronic Illness/Conditions requiring long term use of Medication/Support

Children with long term conditions such as asthma, medicated ADHD, diabetes or epilepsy etc. will be monitored by medical professionals. The Headteacher/SENCO/individual teachers will liaise as and when necessary with these professionals, as to what is in the best interests of the child. Parents are responsible for ensuring that any medicines are renewed as needed, and that any changes are clearly made known to relevant school staff as soon as possible.

### **School Visits and Trips**

If a child is likely to be out of school when medication needs to be administered, this should be clearly noted on the trip risk assessment. The parent should give written consent for medication to be given under these circumstances, and the correct dosage should be kept securely by the class teacher/responsible person until needed. No child should be excluded from a school trip because of a medical condition, unless the relevant professionals have stated this. In some circumstances it may be deemed appropriate for the child's parent to accompany their child on the trip; this is at the discretion of the Headteacher.

#### **Specific Medication**

#### **EpiPens**:

Anaphylaxis is triggered by foods – such as nuts, shellfish, dairy products, or non-foods – such as wasp and bee stings, medicines and on occasion by exercise. The symptoms of anaphylaxis can be identified by effects on the respiratory system, cardiovascular system, gastrointestinal system, skin, nervous system and genitourinary system. In the event of an attack, it is important to administer an EpiPen as soon as possible and then call 999 for an ambulance.

A medical list will be held by the office staff detailing those children who can be treated by an EpiPen.

#### Asthma:

The school adopts the National Association for Asthma policy – see policy

## **Epilepsy:**

The school adopts the National Association for Epilepsy policy – see policy

#### **Staff Training**

This should take place annually for all relevant staff.

#### Appendix 1

Administered Medicine Class Register - to be completed by year group staff and KEPT IN THE CLASS RED MEDICAL NEEDS FOLDER

# GROSVENOR ROAD PRIMARY SCHOOL – ADMINSTERED MEDICINE REGISTER CLASS \_\_\_\_\_

#### **PLEASE NOTE-**

- \*Only medicines which have been prescribed by a doctor can be administered by a member of staff.
- \*Evidence is required (that medicine has been prescribed by a doctor) from a parent/carer, this is especially important for 'over the counter' such as Calpol.
- \*All medicines must be in a measured dose clearly marked with the child's name and dated.
- \*Medical consent form must be obtained for the parent/carer in all cases.

DATE	NAME	MEDICINE	ADMINISTERED BY	TIME	MEDICAL CONSENT RECEIVED