Administering medicines in school policy

Date	Reviewed By	Review Date
July 2026	Bridget Nicholls Pastoral Lead / DSL	July 2027

Aim

The aim of this policy and scheme is to provide the safeguarding of children and ensure equity and inclusion for all and to ensure all their medical needs are met in a sensitive and safe way.

Introduction

Most children at some time have a medical condition, which could affect their participation in school activities. This may be a short-term situation or a long-term medical condition which, if not properly managed, could limit their access to education. The Governors and staff of Heronshaw school wish to ensure that children with medical needs receive care and support in our school. We firmly believe children should not be denied access to a broad and balanced curriculum simply because they are on medication or need medical support, nor should they be denied access to school or other activities. This includes children with physical needs or a physical disability.

Roles and Responsibility

- **The role of the Head Teacher and Governing Body**

The ultimate responsibility for the management of this policy lies with the Head Teacher and Governing Body. The Head Teacher will manage the policy on a day-to-day basis and ensure all procedures and protocols are maintained.
The allocated first aider will work with parents and school staff to ensure accurate and up to date records are kept for children with medical needs.

- **The role of Staff**

Staff 'Duty of Care'

Anyone caring for children, including teachers and other school staff have a common law duty of care to act like any reasonably prudent parent. This duty extends to staff leading activities taking place off site, such as visits, outings or field trips and may extend to taking action in an emergency.

Teachers/childcare practitioners who have children with medical needs in their care should understand the nature of the condition, and when and where the child may need extra attention. All staff (teaching and non-teaching) should be aware of the likelihood of an emergency arising and be aware of the protocols and procedures for specific children in school through attending training provided and reading individual health plans devised for individual children.

- **The role of Parent/Carers**

Parents/carers have prime responsibility for their child's health and should provide

school with up-to-date information about their child's medical conditions, treatment and/or any special care needed. If their child has a more complex medical condition, they should work with the school/other health professionals to develop an individual healthcare plan which will include an agreement on the role of the school in managing any medical needs and potential emergencies.

It is the parent/carers responsibility to make sure that their child is well enough to attend school.

<u>Individual Health Care Plans (IHCP)</u>

The main purpose of an IHCP is to identify the level of support that is needed at school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school can provide and receive. These plans will be reviewed annually as a minimum, or more frequently at the request of parents/carers or the school, or as required.

An IHCP will include:

· details of the child's condition
· what constitutes an emergency
· what action to take in an emergency
· what not to do in the event of an emergency
· who to contact in an emergency
· the role the staff can play
· special requirements e.g. dietary needs, pre-activity precautions
· any side effects of medicines

A copy will be given to parents/carers, and a copy will be retained in the child's individual file. The general medical information given to all staff will indicate that the child has an IHCP.

Communicating Needs

A medical file containing an outline of any medical condition and medication is available to all teaching and non-teaching in the pastoral room.
Individual Health Care Plans for children are kept with the child's medication and a copy in their pupil records.

Intimate Care Plans

Intimate care plans are written for all pupils in school who are still in nappies or need additional help learning to use the toilet.

The purpose of the care plan is:

To safeguard the rights and promote the best interest of the child and staff members.

To ensure children are treated with sensitivity and respect, and in such a way that their experience of intimate care is a positive one and that the child feels comfortable with the staff member carrying out the task.

To raise awareness and provide a clear procedure for all staff carrying out intimate care on a child, and to inform parents on how the intimate care is administered.

Medication

Any parent wishing for medication to be administered to their child during the school day must complete a 'Request for School to Administer Medication Form' and return to the school office with the medication. The form can be completed so that regular medication can be kept in school for the week or longer and administered as required or taken home at the end of every day via the school office.

All prescribed medications to be kept and administered in school must be held in their original packaging, with the name of the patient and dosage clearly marked. Prescribed medications held in School are to be sent home at the end of each academic year. Medication is checked for expiry dates at the end of every term and parents contacted if new supplies are needed.

Non prescribed medication can be given during school time if provided by parents with a form. We have Calpol Infant in school. Should your child require Paracetamol during school hours, and you are not able to come in to bring in the medicine, we can administer it. the school will phone parents/carers to obtain verbal permission first even if written consent via MCAS has been given. Medication will only be given by a trained first aider.

ASTHMA

Children with asthma are encouraged join in all aspects of school life.

Relievers are the inhalers that children need to use immediately when asthma symptoms appear. In the event of a severe asthma attack relievers can be given in higher doses using a metered dose aerosol inhaler and larger volume spacer.

Heronshaw School DO NOT keep spare/free Inhalers in school. Parents with children at school who need an Inhaler MUST complete a 'Request for School to Administer Medication Form 'and supply a prescribed Inhaler from the Doctor with their child's name clearly marked on it. These Inhalers are checked for contents and expiry date. It is the parent's responsibility to ensure their child always has enough Inhaler in School. We cannot give an Inhaler to a child that has not been prescribed for them.

SCHOOL ARRANGEMENTS FOR PUPILS WITH ASTHMA

Inhaler storage

- Inhalers will be kept in the front office. Inhalers should be in the original box and clearly marked with the child's name on the prescription label
- Children will always have access to their relief inhaler, access must never be restricted
- Staff must ensure that children's relief inhalers are taken on all school trips.
- When an inhaler is administered this must be recorded on CPOMS.
- Children from Heronsgate who need an inhaler will carry this with them in their bag if joining us at Heronshaw for wraparound. A member of staff will check that they have this with them.

Asthma Awareness in School:

- School staff are well placed to make observations that may help in recognising asthma and in monitoring its severity. They should be aware that there are three principal symptoms or any combination of them, which are:

1. wheezing
2. breathlessness
3. coughing

If staff note symptoms that suggest that a child might have asthma they will inform the parents of what they have observed. *It is not the responsibility* of *school staff to diagnose.* If any difficulties arise the school nurse should be consulted.

If an asthmatic child is seen to have an increase in symptoms or use the blue inhaler more frequently parents will be informed.

ANAPHYLAXIS AND ALLERGIES

All pupils in school with an allergy are identified. Children with food-based allergies are identified and a copy of these are given to each year group and provided to the lunchtime staff and food servers.

If medication is required for any allergic reactions, then a care plan will be done, a request to administer medication form completed and relevant medication will be kept in school. Sometimes this may just require antihistamine to be in school.

In the case of a possible anaphylaxis an Auto-injector will be prescribed by their doctor. All pupils requiring an Auto-injector must provide school with two Auto-injectors and antihistamine, this should be in a sealed container with the child's name on. A copy of the child's care plan should be kept in the box with the medication. If parents fail to provide medication or replace out of date medication, then the child may not be allowed in school until the relevant medication is provided.

Children from Heronsgate who need an Auto-injector will carry this with them in their bag if joining us at Heronshaw for wraparound. A member of staff will check that they have this with them.

The school has two Auto-injector which can be used in an emergency with prior parental permission, these are kept in the front office in a plastic container.