

St. Andrew's CEVA Primary School

Supporting Children with medical conditions in School Policy

Person responsible for policy	Sue Gentry
Approved	
Signed	<i>S.GENTRY</i>
To be reviewed	September 2021

At St Andrew's CEVA Primary School we provide Christian worship and Christian teaching. Spiritual and moral development is central to the life of our school and this will be reinforced in the school's Supporting Children with medical conditions in Policy where appropriate.

St Andrew's CEVA Primary School is an inclusive community that welcomes and supports pupils with medical conditions. The school provides all pupils with any medical condition the same opportunities as others at school.

1. Staff will help pupils with medical conditions to ensure they can:
 - Be healthy
 - Stay safe
 - Enjoy and achieve
 - Make a positive contribution
 - Achieve economic wellbeing once they leave school.

St Andrew's make sure all staff understand their duty of care to children in the event of an emergency.

All staff are are trained in what to do in an emergency.

The school understands that certain medical conditions are debilitating and potentially life threatening, particularly if poorly managed or misunderstood.

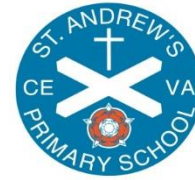
The school understands the importance of medication and care being taken as directed by a health care professional and parents and follow our Administering medicines policy when giving medicine.

2. There is no obligation on any member of staff to administer medicines. However, if there is not a member of staff prepared to administer prescribed and 'over the counter' medicines, a health professional will have to be employed by the school to carry out this task.
3. Any parent/carer requesting the administration of medication should be given a copy of the School's Policy.
4. Medication will not be accepted anywhere in school without complete written and signed instructions from parent/carer. See Appendix 1.
The School is to inform the School Nurse of any pupil, who has been prescribed a controlled medication e.g. Methylphenidate (e.g. Ritalin, Equasym). Controlled drugs are subject to the prescription requirements of Drug Regulations. The prescribing doctor is responsible for

informing the patient when a drug belongs to this group. They are most unlikely to be prescribed to children at school except Methylphenidate (e.g. Ritalin, Equasym)

5. Only reasonable quantities of medication should be supplied to the School/setting by a responsible person (no more than one week's supply).
6. Each item of medication must be delivered in its original container and handed directly to the staff in the school office or to a nominated person authorised by the Headteacher.
7. Each item of medication must be clearly labelled with the following information:
 - Pupil's name
 - Name of medication
 - Dosage
 - Frequency of dosage
 - Date of dispensing
 - Storage requirements (if important)
 - Expiry date (if available)
8. The School will not accept items of medication which are in unlabelled containers.
9. Unless otherwise indicated all medication to be administered in school will be kept in a designated clearly identified locked cupboard.
10. The School will keep a record of the time, date, the amount and the name of the person administering the medication. The administration of the medicine will be witnessed by another member of staff. See Appendix 2.
11. The School may provide parents/carers with details of when medication has been administered to their child.
12. The School will provide parents/carers with details of when medication has **not** been administered to their child. See Appendix 3.
13. Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents/carers will be asked to confirm in writing if they wish their child to carry their medication with them in school.
14. It is the responsibility of parents/carers to notify the school if there is a change in medication, a change in dosage requirements, or the discontinuation of the pupil's need for medication.
15. Staff who volunteer to assist in the administration of medication will receive appropriate training/guidance through arrangements made with the School Health Service.
See Appendix 4.
16. The School will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required. Separate, formally agreed arrangements are acceptable on educational visits that involve an on over-night stay. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed.

St. Andrew's CEVA Primary School Medical Consent Form



APPENDIX 1

(to be filed in Medication Administration Record File)

The school/setting will not give your child any medication unless you complete and sign this form and the Headteacher has confirmed that school staff have agreed to administer the medication.

DETAILS OF PUPIL

Surname:

Forename (s):

Address: M/F:

..... Date of Birth:

..... Class/Form:

Reason for medication (optional):

CONTACT DETAILS:

Name: Daytime Contact Telephone No:

Relationship to Pupil:

Address:

I understand that the medication must be delivered by a responsible adult to an authorised/appointed person in school and accept that this is a service which the school is not obliged to undertake

Date: Signature (s):

MEDICATION (1)

Name/Type of Medication (**as described on the container**)

For how long will your child take this medication:

Date dispensed:

FULL DIRECTIONS FOR USE:

Dosage and amount (**as per instructions on container**):

Method:

Timing:

Special Precautions:

Self-Administration:

a) I would like/would not like (**please delete accordingly**) my son/daughter to keep his/her asthma inhaler with him/her to use as necessary.

b) I would like/would not like (**please delete accordingly**) my son/daughter to keep his/her medication on him/her for use as necessary:
(please note that this option excludes Methylphenidate (e.g. Ritalin, Equasym) and applies only to pupils of secondary age)

MEDICATION (2)

Name/Type of Medication (**as described on the container**)

For how long will your child take this medication:

Date dispensed:

FULL DIRECTIONS FOR USE:

Dosage and amount (**as per instructions on container**):

Method:

Timing:

Special Precautions:

Self-Administration:

a) I would like/would not like (**please delete accordingly**) my son/daughter to keep his/her asthma inhaler with him/her to use as necessary.

b) I would like/would not like (**please delete accordingly**) my son/daughter to keep his/her medication on him/her for use as necessary:
(please note that this option excludes Methylphenidate (e.g. Ritalin, Equasym) and applies only to pupils of secondary age)

St.Andrew's CEVA Primary School Staff Training Form for Medications

Appendix 3



Date:

Dear

Re: the Administration of requested medication

Unfortunately, we were unable to give his/her
in school today as.....

Yours sincerely,

Mrs Thompson & Miss Davidson
Head Teachers St. Andrew's CEVA Primary school

Diabetic Training July 2019:

Name of staff member	Date of Training	Training provided by	Date training needs renewing
Hayley Causebrook	July 2019	Diabetes Nurse - Amy	July 2020
Julie Frost	July 2019	Diabetes Nurse - Amy	July 2020
Hayley Owen	July 2019	Diabetes Nurse - Amy	July 2020
Amy Bunker	July 2019	Diabetes Nurse - Amy	July 2020
Julie Reed	July 2019	Diabetes Nurse - Amy	July 2020
Tessa Hodges	July 2019	Diabetes Nurse - Amy	July 2020
Rebecca Dalson	July 2019	Diabetes Nurse - Amy	July 2020