



## 1. INTRODUCTION

Eagle House School (Mitcham), Eagle House School (Sutton) and Eagle House 6<sup>th</sup> Form (Strawberry Lodge) are independent special schools, which provide an appropriate education for primary and secondary aged pupils who hold a Statement of Special Educational Needs or Education, Health and Care Plan for Autism Spectrum Disorders (ASDs) and associated social and communication difficulties. This includes children and young people with moderate or severe learning difficulties. **Eagle House school is an inclusive community that aims to support and welcome pupils with medical conditions.**

## 2. AIMS

- We understand our responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enroll in the future.
- Wherever possible, pupils with medical conditions are encouraged to take control of their condition and to feel confident in the support they receive from the school to help them do this.
- We aim to include all pupils with medical conditions in all school activities.
- Parents/carers of pupils with medical conditions will feel secure in the care their children receive at this school.
- The school ensures all staff understand their duty of care to children and young people in the event of an emergency.
- All staff feel confident in knowing what to do in an emergency.
- We understand that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.
- All staff understand the common medical conditions (including food allergies) that affect children at this school. Staff receive training on the impact this can have on pupils.
- All staff are aware of and understand the procedure for administering prescribed medicines to pupils.
- The medical conditions policy is understood and supported by the whole school and local health community.

## 3. POLICY COMMUNICATION PLAN

**The medical conditions policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation.**

Parents/carers are informed and regularly reminded about the medical conditions policy:

- at the end of each school year when communication is sent out about Health Care Plans ready for the new academic year

- when their child is enrolled as a new pupil
- via the school's website
- reminded at EHCP reviews (parents of children with medical conditions)

School staff are informed and regularly reminded about the medical conditions policy:

- Copies of the procedure attached to this policy are given to staff as part of their induction programme
- Scheduled 'medical conditions training' is arranged as part of the overall annual staff training programme
- Posters are displayed throughout the school of 'common medical conditions' existing within the school to ensure increased staff awareness
- All supply and temporary staff are informed of the procedure attached to this policy and their responsibilities within it.

#### 4. CURRICULUM

We are committed to ensuring that children and young people with medical needs have access to an appropriately challenging curriculum which is delivered, as far as possible, through the same experiences and activities as those offered to other children and young people with similar cognitive levels. The school manages this within our overall systems for personalised planning, paying particular attention to:

- liaison with families and medical professionals to gain a clear understanding of individual needs
- identifying the impact of medical conditions on pupils' readiness to learn (e.g. some pupils may be drowsy or in pain)
- identifying the impact of mental health conditions on pupils' ability to face challenge
- providing activities which will encourage pupils to stay alert and participate actively
- adapting the content of lessons as necessary (e.g. using low impact activities in PE)
- making practical adaptations (e.g. planning the timetable around times of medication administration, where necessary)
- identifying and planning for risk (e.g. ensuring appropriately trained staff when taking pupils off site)
- being aware of signs that pupils are feeling unwell or in pain and supporting pupils to communicate to those around them
- being aware of possible triggers affecting particular conditions (e.g. certain lighting may trigger a seizure)
- where appropriate, including content which will give pupils an insight into their conditions and

skills to manage them

## 5. THE MOST COMMON SERIOUS MEDICAL CONDITIONS

All staff are aware of the most common serious medical conditions at this school.

Staff in charge of pupils have a duty of care to safeguard the health and safety of pupils on school premises. This might, in exceptional circumstances, include the administration of medication and/or taking action in an emergency situation. School staff, under common law duty of care, are expected to act like any reasonably prudent parent/carer in these circumstances. This duty also extends to staff leading any off-site activities and residential trips.

All staff who work with groups of pupils at this school receive appropriate training and know what to do in an emergency for the pupils in their care with specific medical conditions.

Training is refreshed for all staff as required.

Eagle House School uses Health Care Plans (see Appendix) to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help. Every pupil's health care plans are available via SIMS and a hard copy is in the pupil profile file in every classroom.

There are procedures in place to ensure a copy of the pupil's Data Collection Sheet is sent to the emergency care setting with the pupil. On occasions when this is not possible, the form is sent (or the information communicated) to the hospital as soon as possible.

## 6. GENERAL EMERGENCY PROCEDURES

The school always has many volunteer staff who are trained first aiders. First aiders' names, class location and level of qualification are posted at all first aid points, classrooms, and common areas. In addition, all staff know what action to take in the event of a medical emergency. This includes:

- how to contact emergency services and what information to give
- who to contact within the school (including first aiders)

Training is refreshed for all staff as required.

If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent/carer arrives. The school tries to ensure that the staff member will be familiar to the pupil.

## 7. ADMINISTRATION OF MEDICATION AT SCHOOL & OFFSITE VISITS

The school acknowledges that under the standard terms and conditions for the employment of teachers there is no legal duty for them to administer or to supervise a pupil taking medication.

### **Staff indemnity and volunteers**

Administration of medicines by any member of the school staff is undertaken on a voluntary basis and volunteers are fully covered by the Eagle House Group Public Liability insurance arrangement. It is very rare for school staff to be sued for negligence and instead, the action will usually be between the parents/carers and Eagle House Group.

An individual's decision to refuse to volunteer to administer drugs will be respected. Volunteer staff will receive appropriate training ensuring familiarity with all administration of medication procedures.

Wherever possible, parents/carers should ensure that their children's medication is prescribed in dose frequencies that enable it to be taken out of school time. There are two general exceptions to this rule:

1. Where it is important for specific purposes that medication is given at a prescribed time on a regular/daily basis, e.g. the use of Ritalin in cases of attention deficit hyperactivity disorder
2. Where a short course of prescribed medication is required to be completed or an individual single dose and the prescription states a specific time for the medication to be administered

Prescribed medication - If a pupil requires regular prescribed medication at school, parents/carers are asked to provide *written consent* giving the pupil or staff permission to administer medication. For regular medication, this information is included in the pupil's Health Care Plan along with the parent/carer's written consent.

Non-Prescribed medication – Pupils may, on occasion, require analgesia (painkillers) such as paracetamol (Calpol/Medinol). Signed consent and written instructions are obtained from parents/carers authorising the administration of the analgesia of their choice, how they want medication administered and the dose as appropriate for age and/or weight. Parents/carers provide analgesia for their child but with appropriate parental permission, school analgesia can be given if none has been provided.

The school checks with parents in advance of administration ascertaining whether analgesia has been administered at home, the dose and time given.

Controlled Drugs - All use of medication defined as a controlled drug, even if the pupil can administer the medication themselves, is done under the supervision of designated staff and staff understand the importance of medication being taken as prescribed.

Training is given to all staff members who volunteer and agree to administer medication to pupils, where specific training is needed.

## **Training**

The Head of School should ensure that staff who administer medication and/or support children with medical needs, undergo suitable training. He/she should consult with the Local Authority to access training and support provided by the Local Authority. There should also be consultation with the child's GP/consultant and the Local Authority school nurse

- Training should be sufficient to ensure that staff 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. They will need to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.
- Staff should not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect individual healthcare plans at all times) from a healthcare professional.
- There should be arrangements for whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing

that policy. Induction arrangements for new staff should be included. The Local Authority school nurse should be able to advise on training that will help ensure that all health conditions affecting pupils in the school are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

- Parents should be asked for their views and may be able to support school staff by explaining how their child's needs can be met. They should provide specific advice, but should not be the sole trainer.
- Training for specific conditions such as the use of an epipen, managing seizures, administering insulin etc, where necessary.

In some circumstances medication is only administered by an adult of the same gender as the pupil.

Some medical conditions will be subject to routine management by GPs and/or health specialists. However, there may be occasions when the condition deviates or changes significantly in its presentation and, as such, may require the administration of emergency medication during the school day, e.g. diabetes, where medication might include the administration of glucogen or epilepsy, where administration of Midazolam/Diazepam may be necessary.

Arrangements for the administration of essential or emergency medication take place within the overall management of the pupil's medical condition by relevant health professionals. This routine management ensures that the occasion when emergency medication may be required is rare.

Refusal - If a pupil refuses their medication, staff will not attempt to force a pupil to do so. Staff record this and follow procedures. Parents/carers are informed as a matter of urgency. If a pupil misuses medication, either their own or another pupil's, their parents/carers are informed as soon as possible. If necessary, the GP may need to be contacted and in urgent cases, the school may need to contact the emergency services.

Management – All staff dealing with emergency medication know about the pupil's specific medical needs. Where appropriate, staff have additional information and training on how to respond to an emergency involving a particular pupil including:

- Management of a condition
- Use of emergency medication
- Contacting parent or emergency contact
- Information for emergency services
- Response after an incident
- Other relevant information

A school care plan is drawn up by the school nurse.

All pupils with medical conditions must have **easy access to their emergency medication, which is kept in a locked cupboard/drawer in their classrooms.**

Offsite – Pupils are encouraged to participate in offsite activities wherever safety permits. As such, staff are aware of medical needs and relevant emergency procedures. Staff carry emergency medication for

pupils at all times during offsite visits (including residential), and ensure that appropriate safety measures are in place for such pupils, including arrangements for taking any necessary medication. Medication is only to be administered to the child named on the label, with two staff checking the name on the label, dose, frequency and expiry date.

Transport - If a pupil needs supervision or access to medication during home to school transport organised by the local authority, properly trained escorts are provided. It is the Local Authority's responsibility to ensure that all drivers and escorts know what to do in a medical emergency and are aware of any pupils in their care who have specific needs. It is not the responsibility of the school to inform the Local Authority Transport Services of a child's medical needs.

All staff attending off site visits are aware of any pupils with medical conditions. The Health Care Plan details information about the type of condition, emergency care and any other additional support necessary, including any additional medication or equipment needed. This is included in the class Grab file.

If a trained member of staff, who is usually responsible for administering medication, is not available alternative arrangements are made to provide the service. This is always addressed in the risk assessment for offsite activities.

## 8. STORAGE OF MEDICATION AT SCHOOL

### Safe storage – emergency medication

Emergency medication is readily available to pupils who require it at all times during the school day or at offsite activities.

If the emergency medication is a controlled drug, they are stored in accordance with the *Misuse of Drugs, (Safe Custody) Regulations 1973* (as amended) which requires that:

- Controlled drugs are stored securely in a locked cupboard or drawer quickly accessible for immediate use
- The keys for the controlled drugs cupboard are kept securely in the personal possession of the most senior member of staff on duty in that class. These keys are kept separately from other keys for the school/ classroom

Controlled drugs are prescription medicines controlled under the 'Misuse of Drugs' legislation e.g. morphine, pethidine based drugs. The 'Misuse of Drugs' Regulations 2001 has a full list of controlled medicines available on line.

Where appropriate, pupils carry their own emergency medication. Pupils are to carry their own emergency medication securely and are reminded to keep it with them at all times. Staff ensure that emergency medication is in the possession of relevant pupils before leaving school.

Pupils, whose healthcare professionals and parents/carers advise the school that their child is not yet able or old enough to self manage and carry their own emergency medication, know exactly where to access their emergency medication.

### Safe storage – non-emergency medication

All non-emergency medication is kept securely, in a lockable cupboard/drawer in a cool dry place. Pupils with medical conditions know where their medication is stored and how to access it.

Staff ensure that medication is only accessible to those for whom it is prescribed with labeled packaging clearly showing the pupils name, medication, expiry date, dose, frequency and administration instructions (where required).

### **Safe storage – general**

The school nurse supports classes to oversee the correct storage of medication within school. Each class is ultimately responsible for the safe storage of medicines within their own classroom environment.

At the start of each term the school nurse and/or school administrator checks the expiry dates for all medication stored at school, and makes a record. New information is updated by the data & systems coordinator on SIMS and the school administrator informed.

The school nurse and/or school administrator, along with the parents/carers of pupils with medical conditions, ensure that all emergency and non-emergency medication brought in to school is clearly labeled. This includes all medication that pupils carry themselves. The medication checklist (see Appendix) is completed by the school administrator in collaboration with the school nurse.

Medication is stored in accordance with instructions, paying particular note to temperature.

Some medication for pupils may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labeled. Refrigerators used for the storage of medication are in a secure area (school office, medical room), inaccessible to unsupervised pupils or lockable as appropriate.

All medication is sent home with pupils (handed to transport where relevant) at the end of the school year. Medication is not stored at school during the summer holidays.

It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year.

### **SAFE DISPOSAL**

If any medication remains in school for whatever reason, the school administrator will take it to a local pharmacy for safe disposal.

Sharps boxes are used for the disposal of needles. Parents/carers can obtain sharps boxes from the child's GP or pediatrician on prescription. All sharps boxes are stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis.

If a sharps box is needed on an offsite or residential visit, a named member of staff is responsible for its safe storage and returning it to a local pharmacy or to school or the pupil's parent/carer.

Where necessary, collection and disposal of sharps boxes is arranged with the Local Authority's environmental services.

## **9. RECORD KEEPING**

Parents are asked if their child has any change to their health or health issues on the school data collection form, which is sent to parents at the end of the summer term and completed ready for the

start of each school year, or for new pupils, before they start. If they do have any medical/health conditions they are asked to complete a Health Care Plan.

Every pupil receiving regular medication will be issued with a Health Care Plan, which will be completed by the parents. Forms must be returned to the school administrator/data & systems coordinator and recorded on SIMS.

## 10. HEALTH CARE PLANS

### Drawing up Health Care Plans

Eagle House School issues a Health Care Plan (HCP) to record important details about individual pupil's medical needs at school. Further documentation can be attached to the Health Care Plan if required.

Health care plans should have the following details:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication (its side-effects and its storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues eg crowded corridors, travel time between lessons
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their own medication, this should be clearly stated with appropriate arrangements for monitoring
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional
- who in the school needs to be aware of the child's condition and the support required
- written permission from parents and the head teacher at your school for medication to be administered by a member of staff, or self-administered by individual pupils during school hours
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate eg risk assessments
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- what to do in an emergency, including whom to contact, and contingency arrangements

The Health Care Plan is accompanied by an explanation as to how it is used and is automatically sent to all parents/carers of pupils with a medical condition or when a diagnosis is first communicated to the school.

If a pupil has a short-term medical condition that requires medication during school hours, an 'ad hoc medication' letter is sent home to the pupil's parents/carers to complete or copy of the prescription



detailing medication, dose, time, expiry date and end date of administration.

The parents/carers, healthcare professional and pupil with a medical condition, are asked to fill out the pupil's Health Care Plan together. Parents/carers then return these completed forms to the school. The data and systems coordinator is responsible for ensuring that these are completed prior to the pupil's admission and, if required, can help to draw up a Health Care Plan for pupils with complex healthcare or educational needs. The data and systems coordinator is responsible for uploading the completed Health Care Plan on to SIMS and informing the school administrator and class team.

### **School Health Care Plan Register**

Health Care Plans are used to create a centralised register of pupils with medical needs. The data & systems coordinator has responsibility for the register.

The data & systems coordinator, with the support of the school nurse, follows up with parents/carers to ensure all details required by the school are in place on a pupil's Health Care Plan. This includes necessary permission for the administration of medication.

### **Ongoing communication and review of Health Care Plans**

Parents/carers are reminded annually or 'as required' to update their child's Health Care Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change.

Staff use opportunities such as teacher–parent interviews, annual reviews, parent's evenings, phone calls and home–school diaries to check that information held by the school on a pupil's condition is accurate and up to date. If there are any changes, staff should report these to the data & systems coordinator, who will update the register.

Every pupil with a Health Care Plan has their plan discussed and reviewed at least once a year.

### **Storage and access to Health Care Plans**

Parents/carers and pupils are provided with a copy of the pupil's current agreed Health Care Plan.

Health Care Plans are kept in the Central HCP File in the school data office and uploaded in to SIMS by the data & systems coordinator. A hard copy is also present in the pupil HCP file (Red) stored in class.

All members of staff who work with groups of pupils have access to the Health Care Plan of pupils in their care via SIMS and the HCP file.

When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of and have access to the HCP file of pupils in their care.

All staff protect pupil confidentiality.

The school requires permission from parents/carers (emergency treatment form) to allow the Health Care Plan to be sent ahead to emergency care staff, should an emergency happen during school hours or during an offsite visit.

The school seeks permission from parents/carers before sharing any medical information with any other party.

## Use of Health Care Plans

Health Care Plans are used by the school to:

- inform the appropriate staff and supply teachers about the individual needs of a pupil with a medical condition in their care
- remind pupils with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times
- identify common or important individual triggers for pupils with medical conditions at school that bring on symptoms and can cause emergencies. This information is used to help reduce the impact of common triggers
- ensure that all medication stored at school is within the expiry date
- ensure local emergency care services have a timely and accurate summary of a pupil's current medical management and healthcare in the event of an emergency
- remind parents/carers of pupils with medical conditions to ensure that any medication kept at school for their child is within its expiry dates.

## 11. CONSENT TO ADMINISTER MEDICINES

If a pupil requires regular prescribed or non-prescribed medication at school, or if they need emergency medication, parents/carers are asked to provide consent on their child's Health Care Plan giving the pupil or staff permission to administer medication as required. This also applies to consent for the administration of one-off medication. The parental consent form is kept with the medication.

## 12. RESIDENTIAL VISITS

Parents/carers are sent a residential visit form to be completed and returned to school shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the pupil's current condition and their overall health. This provides essential and up-to-date information to relevant staff and school supervisors to help the pupil manage their condition while they are away. This includes information about medication not normally taken during school hours.

All residential visit forms are taken by the relevant staff member on visits and for all out-of-school hours activities where medication is required. These are accompanied by a copy of the pupil's Health Care Plan.

All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

## 13. OTHER RECORD KEEPING

The school keeps an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil, dose, date and time are recorded (see Appendix). If a pupil refuses to have medication administered, this is also recorded and parents are informed as soon as possible.

The school nurse gives training on common medical conditions at least annually and more frequently if

required. All staff attending receive a certificate confirming the type of training they have had. A log of the medical condition training is kept by the Training coordinator/HR department and reviewed every 12 months to ensure all new staff receive appropriate training.

All school staff who volunteer or who are contracted to administer medication are provided with training by the school nurse. The school keeps a register of staff who have had the relevant training.

## **14. THE SCHOOL ENVIRONMENT**

The school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities, and off site visits. We recognise that this sometimes means changing activities or locations.

### **Physical environment**

We are committed to providing a physical environment that is accessible to pupils with autism spectrum disorders with medical conditions. However, due to the nature of the buildings and the challenging behaviour of pupils, we are not able to meet the needs of children with complex mobility difficulties.

### **Social interactions**

We consider the needs of pupils with medical conditions to ensure their involvement in structured and unstructured social activities, including breaks, before and after school, as well as extended school activities such as school discos, breakfast club, school productions, after school clubs and residential visits.

All staff are aware of the potential social problems that pupils with ASD and medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's anti-bullying and behaviour policies.

### **Exercise and physical activity**

Staff understand the importance of all pupils taking part in sports, games and activities.

The school ensures that all classroom teachers, PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.

The school ensures that all classroom teachers, PE teachers and sports coaches understand that pupils should not be forced to take part in an activity if they feel unwell.

All teachers and sports coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities. Every teacher receives an updated half termly bulletin, produced by the data & systems coordinator, listing the pupils they need to be particularly aware of with medical needs and emergency medication.

The school ensures that all classroom teachers and school sports coaches are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these triggers.

Staff ensure all pupils have the appropriate medication or food with them during physical activity and that pupils take them when needed.

The school ensures all pupils with medical conditions are actively encouraged to take part in out-of-

school clubs and team sports.

## 15. UNACCEPTABLE PRACTICE

Although school staff should use their discretion and judge each case on its merits, it is not acceptable practice to:

- prevent pupils from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every pupil with the same condition requires the same treatment
- ignore the views of the pupil or their parents/carers
- send pupils with medical conditions home frequently or prevent them from staying for normal school activities including lunch
- if the pupil becomes ill, send them to the school office or medical room unaccompanied
- penalise pupils for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- require parents/carers, or otherwise make them feel obliged to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- prevent or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. requiring parents to accompany the child
- force a pupil to take their medication

## 16. EDUCATION AND LEARNING

Eagle House School ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

If a pupil is missing a lot of time at school, they have limited concentration or they are frequently tired, all teaching staff understand that this may be due to their medical condition.

## 17. OFFSITE VISITS

Risk assessments are carried out prior to any out-of-school visit and medical conditions are considered during this process. Factors that are considered include: how all pupils will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

There may be additional medication, equipment or other factors to consider when planning residential visits.

Full health and safety risk assessments are carried out before pupils start any off site educational placement. The school ensures that the placement is suitable, including travel to and from the venue for the pupil. Permission is sought from the pupil and their parents/carers before any medical information is shared with another education provider.

## 18. COMMON TRIGGERS...

**...that can make medical conditions worse or can bring on an emergency.**

Eagle House School is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.

School staff have been given training on medical conditions by the school nurse. This training includes detailed information on how to avoid and reduce exposure to common triggers for common medical conditions.

Written information about how to avoid common triggers for medical conditions has been provided to all school staff. The school follows "Guidance on Infection Control in Schools and other Childcare Settings" (Public Health, Sep 2014).

The school uses Health Care Plans to identify individual pupils who are sensitive to particular triggers. The school has a detailed action plan to ensure these individual pupils remain safe during all lessons and activities throughout the school day.

The school reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to the school's policy and procedures are implemented after each review.

## 19. ROLES AND RESPONSIBILITIES

Each member of the school and health community knows their roles and responsibilities in maintaining an effective medical conditions policy.

Eagle House School works in partnership with all interested and relevant parties including the school's directors, CEO, Executive Headteacher, all school staff, parents/carers, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully. New Department for Children, Families and Schools and Department of Health guidance is actively sought and fed into the policy review.

The following roles and responsibilities are used for the medical conditions policy at this school. These roles are understood and communicated regularly.

**The proprietor** has a responsibility to:

- ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off site, such as visits, outings or field trips
- ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions
- make sure the medical conditions policy is effectively monitored and evaluated and regularly updated

- report to parents/carers, pupils, school staff and the local authority about the successes and areas for improvement of this school's medical conditions policy
- provide indemnity for staff who volunteer to administer medication to pupils with medical conditions.

**The Head of Education** has a responsibility to:

- ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks
- liaise between interested parties including pupils, school staff, pastoral support/welfare officers, school nurse, parents, directors, the local authority transport service, and local emergency care services
- ensure the effective implementation, monitoring and evaluation of this policy
- ensure every aspect of the policy is maintained and updated regularly
- ensure all school staff and parents/carers are aware of and comply with this policy
- ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils' Health Care Plans
- ensure pupil confidentiality
- assess the training and development needs of staff and arrange for them to be met
- ensure all supply teachers and new staff know the medical conditions policy
- ensure that expiry dates of medicines kept at school are monitored and the school medical conditions register is maintained
- monitor and review the policy at least once a year
- update the policy at least once a year according to review recommendations and recent local and national guidance and legislation
- report back to the CEO/directors about implementation of the medical conditions policy

**All staff** have a responsibility to:

- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- understand and comply with the school's medical conditions policy
- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Health Care Plan
- allow all pupils to have immediate access to their emergency medication

- maintain effective communication with parents/carers including informing them if their child has been unwell at school
- ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom
- be aware of pupils with medical conditions who may be experiencing bullying or need extra social support
- understand the common medical conditions and the impact it can have on pupils (pupils should not be forced to take part in any activity if they feel unwell)
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in
- ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed
- attend appropriate training sessions

**Teachers** have a responsibility to:

- ensure pupils who have been unwell catch up on missed school work
- be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it
- liaise with parents/carers, the pupil's healthcare professionals, welfare officers if a child is falling behind with their work because of their condition
- use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions

**The school nurse** has a responsibility to:

- help update the school's medical conditions policy
- help provide regular training for school staff in managing the most common medical conditions, emergency treatments and administration of emergency medication at school
- provide information about where the school can access other specialist training
- provide advice and support for specific pupils and liaise with relevant medical professionals as required
- Conducting half termly audits and ensuring all staff are provided with updated bulletins
- Ensure the school is compliant with the ISS compliancy checklist

**First aiders** have a responsibility to:

- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards within the school

- when necessary ensure that an ambulance or other professional medical help is called

**The Senior Leadership Team** has the responsibility to:

- help update the school's medical conditions policy
- know which pupils have a medical condition and which have special educational needs because of their condition
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in
- Checking that all procedures are correctly carried out

### **Local doctors and specialist healthcare professionals**

Individual doctors and specialist healthcare professionals caring for pupils who attend Eagle House School have a responsibility to:

- provide advice regarding the pupil's Health Care Plans in conjunction with parents/carers
- where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours
- offer every pupil (and their parents/carers) a written care/self-management plan to ensure they know how to self manage their condition
- ensure the pupil knows how to take their medication effectively
- ensure pupils have regular reviews of their condition and their medication
- provide the school with information and advice regarding individual pupils with medical conditions (with the consent of the pupil and their parents/carers)
- understand and provide input in to the school's medical conditions policy

**Emergency care service** personnel in this area have a responsibility to:

- have an agreed system for receiving information held by the school about pupil's medical conditions to ensure best possible care
- understand and provide input in to the school's medical conditions policy

**Pupils** have a responsibility to:

- treat other pupils with and without a medical condition equally
- tell their parents/carers, teacher or nearest staff member when they are not feeling well
- let a member of staff know if another pupil is feeling unwell
- let any pupil take their medication when they need it, and ensure a member of staff is called



- treat all medication with respect
- know how to gain access to their medication in an emergency
- if mature and old enough, know how to take their own medication and to take it when they need it
- ensure a member of staff is called in an emergency situation

**Parents/carers** have a responsibility to:

- tell the school if their child has a medical condition
- ensure the school has a complete and up-to-date Health Care Plan for their child
- inform the school about the medication their child requires during school hours, inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- tell the school about any changes to their child's medication, what they take, when, and how much
- inform the school of any changes to their child's condition
- ensure their child's medication and medical devices are labeled with their child's full name and are in the original container with original label
- ensure that their child's medication is within expiry dates
- keep their child at home if they are not well enough to attend school
- ensure their child catches up on any school work they have missed
- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional and informing the school of any changes
- ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition where required

## **20. LEGISLATION AND GUIDANCE**

This policy is compliant with the following legislation and guidance:

- Managing Medicines in Schools and Early Years Settings (2004)
- Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005
- Education Act 1996
- Care Standards Act 2000
- Health and Safety at Work Act 1974

- Management of Health and Safety at Work Regulations 1999
- Medicines Act 1968
- Medical Conditions at School: A Policy Resource Pack is designed to work alongside Managing Medicines in Schools and Early Years Settings

### **Additional guidance**

Other guidance resources that link to a medical conditions policy include:

- Healthy Schools Programme – a medical conditions policy can provide evidence to help schools achieve their healthy school accreditation
- Every Child Matters: Change for Children (2004). The 2006 Education Act ensures that all schools adhere to the five aims of the Every Child Matters agenda
- National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams
- Health and Safety of Pupils on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
- Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
- Home to School Travel for Pupils Requiring Special Arrangements (2004) – provides guidance on the safety for pupils when traveling on local authority provided transport
- Including Me: Managing Complex Health Needs in School and Early Years Settings (2005).

## **21. POLICY REVIEW**

It is the responsibility of the Head of Education supported by the other members of the school's Senior Leadership Team to monitor this policy. It should be reviewed annually or when new legislation is published. The Head of Education reports on Eagle House School matters to the CEO/Directors.

## **22. RELATED POLICIES AND DOCUMENTATION**

- ❖ First Aid Policy

### **Appendices:-**

- *Procedures*
- *Health Care Plan*
- *Medication Consent*
- *Change of Medication Regime*
- *Record of Medication Administered*

➤ *Letter to Doctor*

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Document:	Pupils with Medical Conditions and Administering Medications Policy
Last Reviewed:	November 2017
Next review:	November 2018
Version:	Final

## Procedures

### When is Medication administered in school?

There are four occasions where medication will be administered in school:

1. The regular daily dosage of a medicine needed in connection with their autism or other known conditions
2. When medication is needed for a one off condition they are recovering from e.g. antibiotics
3. Paracetamol for a headache – only if we have the parents' permission
4. Emergency medication e.g. epipen

### **No medicine should be given to any pupil without the written consent of the parent/carer.**

All medicines that are not required on an emergency basis should be kept in a locked medical cabinet or locked fridge in a locked room. At Eagle House School (Mitcham) the locked fridge is in the School Office and each classroom has a locked medical cabinet. At Eagle House School (Sutton) the locked fridge is in the Medical Room and each classroom has a locked medical cabinet. At Eagle House 6<sup>th</sup> Form (Strawberry Lodge) the locked fridge is in the Head of 6<sup>th</sup> Form's office and each classroom has a locked medical cabinet.

Designated staff will know where the key is and have easy access as necessary.

Any medicine requiring refrigeration, e.g. antibiotics, will be kept in a locked medical fridge in the School Office.

The Site Maintenance Officer will monitor the temperature of the fridge on a daily basis and keep a record.

Emergency medication, such as epipens and inhalers, need to be within easy access of the child at all times in a locked drawer in their classroom.

Any out-of-date medicines should be returned to the parent/carer.

Medicines should be returned home at the end of each school year.

Any ongoing medication is to be reviewed at the start of each school year.

All medicines **MUST** be administered by two adults, one to administer the medicine and the other to witness the administration of the medicine. (*See Record of Medication Administered*)

### REGULAR MEDICATION

All parents/carers are asked to provide information and/or updates about any medical/health conditions and medication prior to the beginning of the School Academic Year on the Health Care Plan. They are also asked to sign a medication consent form as necessary. The original form is stored in the HCP file in the data office and copies stored/used with the medication in the classroom.

### PARENT/CARER – ADHOC MEDICATION LETTER & (tear off) CONSENT FORM

This form needs to be sent home when a parent/carer requests the school to administer medication, which has not been included already on a Health Care Plan.

#### RECORD OF MEDICATION ADMINISTERED

This form needs to be filled in when school has received the Parent/Carer Ad hoc Medication Consent form. An entry needs to be completed every time a dose is administered. When the medication course has been completed the form needs to be filed in the main Pupil File in the School Office.

#### Paracetamol

The school can only administer paracetamol if a parent has given permission for us to do so. Permission is sought from parents via the annual Parental Consent Form. A copy of this is kept in the pupil's main file in the school office and uploaded on to SIMS. If paracetamol is required the maximum dosage as outlined on the bottle according to the child's age, should be administered. A call must be made home prior to administration ascertaining whether the parent gave their child paracetamol at home, the time it was given and dose. The parents can then give verbal consent and be made aware of the time and dosage paracetamol is given at school. This should also be recorded in the home-school book for parent reference and on the *Record of Medication Administered* in school. If parents are uncontactable, paracetamol can be administered 4 hours after their arrival at school.

#### **New Admissions Medical Information**

Once a placement has been agreed, the admissions coordinator will carry out a pre-admission meeting if required before the child starts to gather further information. The admissions coordinator is responsible for informing the data & systems coordinator who sends out the admissions packs and information from the pack is uploaded on to SIMS making it accessible to staff.

#### **Existing Pupils' Medical Information**

Information is taken from the HCP (given to all new and existing pupils) (sent out prior to the start of the new academic year) and any written letters from parents or medical persons. The data & systems coordinator updates the list of pupils on SIMS.

#### **Role of the Designated Person(s)**

Members of school staff who have volunteered to administer or supervise the taking of medication will:

- Have access to a copy of the HCP file (red)
- undertake appropriate training
- be up to date and aware of the HCPs for those pupils with specific medical needs or emergency medication such as asthma inhalers or epipens
- be aware of HCPs and of symptoms which may require emergency action
- read and check the HCP before administering or supervising the taking of medicines
- check that the medication belongs to the named pupil
- check that the medication is within the expiry date

- inform the parent/carer if the medication has reached its expiry date
- confirm the dosage/frequency on each occasion and consult the medicine record form to prevent double dosage
- record on the medication record all relevant details of when medication was given
- return medications to the secure cabinet or locked drawer/cupboard for storage
- always take appropriate hygiene precautions
- record when a pupil refuses to take medication
- immediately inform the parent/carer of this refusal and note it clearly on the *Medication Administration Form*
- ensure all medications are kept in a secure place and accessible only to the designated persons
- ensure all liquid medications, where appropriate, are kept cool in a small secure fridge
- ensure a designated person will attend all educational visits in order to administer medications
- ensure pupils have immediate access to asthma inhalers during sporting activities in the school day and during extra-curricular clubs
- ensure that two staff members administer medication - one gives the medication whilst the other witnesses

### **Role of the Data & Systems Coordinator**

The data & systems coordinator will:

- ensure the following information is supplied by the parent/carer and updated before the beginning of each school year or when notified of changes:
  - Name and date of birth of the child
  - Name and contact details of the parent/carer
  - Name and contact details of GP
  - Name of medicines
  - Details of prescribed dosage
  - Consent given by parent/carer for staff to administer medication
  - Expiry date of medication
  - Storage details

The Data & Systems Coordinator is responsible for:

- sending out the Medical Consent Forms and current Health Care Plan (if the pupil has one) prior to the start of each academic year, asking parents/carers to update if there are any changes. (see appendix)
- entering information about medical conditions and medication for existing pupils onto the *HCP* form on SIMS (See appendix)
- chasing any forms that have not been returned prior to the start of term
- requesting parents/carers to send in medication

The School Administrator will:

- checking all medication is in a sealed prescribed package with expiry date, putting in medi-pack and storing in correct place with the support of the school nurse

The School Nurse will:

- provide guidance and support to all staff including the school administrator and data & systems coordinator
- perform a termly audit of pupil medical conditions, medications and emergency procedures
- support the senior team to ensure the ongoing success, development and implementation of this policy
- provide training for all staff when the need arises/ requested to according to the training schedule
- keep the senior team abreast of new developments and resources
- annually report to the BSM on the success and development of this policy

## Health Care Plan

Pupil Name:

Class:

Date of Birth:

### Details of pupil's medical and/or health conditions

**Epilepsy:**

**Bowel Issues:**

**Dietary Needs:**

**Other (Please describe)**

**Signs and symptoms of this pupil's condition:**

**Triggers or things that make this pupil's condition/s worse:**

### Does your child suffer with allergies?

**Allergies:**

**Allergy medication:**



**Routine healthcare requirements**

*(For example, dietary, therapy, nursing needs or before physical activity)*

**During school hours:**

**Outside school hours:**

**What to do in an emergency**

**Any follow up care needed?**

**Who should be informed?**

**Specialist education arrangements required**

*(eg activities to be avoided)*

**Any specialist arrangements required for off-site activities**

*(please note the school will send parents a separate form prior to each residential visit/off-site activity)*

**Are there any ongoing medical investigations?**

***Regular medication taken outside of school hours (for background information and planning for residential trips)***

**Name/type/dose of medication**

**Are there any side effects that could affect this pupil at school?**

**Members of staff trained to administer medications for this student**

**Regular medication:**

**Emergency medication:**

**Any other information relating to the student's healthcare in school**

**Emergency medication** (please complete even if it is the same as regular medication)**Name/type of medication (as described on the container):****Describe what signs or symptoms indicate an emergency for this student:****Dose and method of administration (how the medication is taken and the amount)****Are there any contraindications (signs when medication should not be given)?****Are there any side effects that the school needs to know about?****Self administration: can the pupil administer the medication themselves?****Regular medication taken during school hours and consent**

	<b>Medication 1</b>	<b>Medication 2</b>
Name/type of medication (as described on the container):		
Dose and method of administration (the amount taken and how the medication is taken, eg tablets, inhaler, injection)		
When it is taken (time of day)?		
Are there any side effects that could affect this pupil at school?		
Are there any contraindications (signs when this medication should not be given)?		
Self-administration: can the pupil administer the medication themselves?		
Medication expiry date:		

Eagle House School  
Medication Consent 2017



Student Name:

Date of Birth:

Class:

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**Parental and pupil agreement**

I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education (this includes emergency services). I understand that I must notify the school of any changes in writing.

Signed (Parent)

Date

Print name

**Healthcare professional agreement (recommended)**

I agree that the information is accurate and up to date.

Signed:

Date:

Print name:

Job title:

**Parent/Guardian consent**

I give permission for Eagle House school staff to administer the above **regular** medication to my child named above.

I agree that my child can be administered their medication in an **emergency**:

My child **cannot** keep their medication with them and the school will make the necessary medication storage arrangements

My child **can** keep their medication with them for use when necessary

Signed:

Date:

Parent/guardian (Print name):

**School agreement**

It is agreed that (name of child)

will receive the above listed medication at the above listed time

will receive the above listed medication in an emergency

This arrangement will continue until \_\_\_\_\_  
(either end date of course of medication or until instructed by the pupil's parents).

Signed (Class Teacher):.....

**Eagle House School**  
**Change of Medication Regime**

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Name of Child:

Diagnosis:

Medication:

Drug:	Dose:	Frequency:

Please enclose schedule for increasing/ decreasing regime.

Kind regards

GP/ Paediatrician/ Healthcare Specialist .



## Letter to Doctor

Dear GP / Paediatrician

In order to comply with clinical governance with regards to medication administration within the school setting – it is now required that ALL medication must be appropriately prescribed.

We would therefore request that a current list of all prescribed medications is forwarded to Eagle House School in **advance** (attached) of the new academic year, September 2017.

Should the child be unwell and require ad hoc /PRN medication (Nurofen), we would recommend that this is scheduled outside of school hours. If this is not clinically possible or feasible, the medication will need to be prescribed by yourself.

Thank you in advance for your assistance in this matter. Please can you complete and return the form to the patient's parent/carer for our records.

Please do not hesitate to contact me if you have any questions.

Kind regards



**Sheron King**  
**School Nurse Eagle House Group**  
**School Office 0208 661 1419**