



Supporting Pupils with Medical Conditions Policy

Governors' Committee Responsible	CFC committee
Status	Statutory
Review Cycle	Three years *
Date written/last review	November 2024
Date of next review	November 2025

Marshgate Primary School

Supporting Pupils with Medical Conditions Policy

At Marshgate Primary we are committed to ensuring that all our children learn successfully. We recognise that it is the responsibility of all stakeholders in school to work in partnership with other agencies, parents/carers and children to contribute to the identification and support of pupils' medical needs. We believe that in so doing each child with needs will be properly supported so that they have full and equal access to learning, including school trips/journeys and P.E.

The Board of Governors has a responsibility to monitor that all arrangements are in place for a child's additional medical needs. The implementation of clear procedures for early identification and assessment, involvement of parents/carers, systematic action and planning, appropriate record keeping and monitoring of needs are all critical to maximizing a child's achievements.

Marshgate is an inclusive school, where every pupil with a medical need has entitlement to access all opportunities for success.

This policy is written under the statutory guidance issued by the Secretary of State and the Children and Families Act 2014. It takes account of the updates contained within in the DfE statutory document [Supporting pupils with medical conditions at school.](#)

1. PURPOSE

To ensure that children with medical needs receive proper care and support in the school setting. To ensure that clear procedures are in place for the safe storage, handling and administration of medicines. To provide clear guidelines to enable parents/carers and staff to work together so that children with medical needs attend school regularly.

2. SUPPORT AND CARE OF CHILDREN WITH MEDICAL NEEDS

Close co-operation between the school, parents/carers, health professionals and other agencies is essential so that each child can have a successful and fulfilling school experience where they are cared for, stay safe, enjoy and achieve. Children with long term medical needs are identified and known to all staff. For children who attend hospital appointments on a regular basis, special arrangements and liaison with the hospital and school may be necessary. Some children will need a written Healthcare Plan involving the parents/carers and relevant health professionals to ensure that staff are aware of their specific needs and what to do in an emergency. Where children have specific needs, training and advice will be arranged with local health professionals (see Appendix 1).

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All class teachers and staff concerned are provided with a confidential up-to-date list of medical and dietary needs and relevant Healthcare Plans. Files containing individual Healthcare Plans and class lists of needs are kept in the office, the Medical Room, the Headteacher's office and also with the Deputy Headteacher and Assistant Headteacher.

3. PROCEDURES FOR MANAGING PRESCRIPTION MEDICINES WHICH NEED TO BE TAKEN DURING THE SCHOOL DAY

Storage, administration and handling of medicines:

For safety reasons, all medicines with the exception of asthmatic inhalers and eczema creams are stored centrally in a locked cupboard in the school's Medical Room. Asthma inhalers and eczema creams are stored in the Medical Room. All medicines are handled by adults only, with the exception of asthma inhalers. Children administer their own inhalers. Children needing to apply eczema creams may apply these themselves under adult supervision. If the child needs assistance to apply creams, parental written permission will be required.

Two adrenaline auto injectors (for those who need them) are required on site. One is stored securely in the Medical Room and one in an individual clearly marked emergency box in the child's classroom. In addition, following guidance from the Department for Education, the school now holds two additional "spare" Adrenaline auto injectors for use if necessary for a child. These are kept in the Medical Room.

Parents/carers are asked to deliver any medication to school via the school office and to collect them at the end of the day in the same way. Parents/carers must be asked when the last dose was given. At no time should children be given medicines to bring in or take home from school. Only medicines that have parental consent, are appropriately named and in the original doctor prescribed container are allowed in school.

Administration of prescribed medicines:

The designated member of staff for assisting with the administration of medicines will administer the medicines as prescribed at the appropriate time. This varies as some need to be taken with food, whilst others have to be taken an hour before food. Children requiring eczema creams, asthma inhalers, adrenaline auto injectors, medazepam or diabetic glucose or insulin etc will have these administered as on the Healthcare Plan. The administration of antibiotics should be done at home or the child's parent or nominated person comes into school to administer at lunchtime. A prescribed dosage of three times per day is usually taken at home before school, after school and at bedtime.

N.B. Any medicine administered at school will need to be witnessed, checked and recorded in the Administration of Medicines Log by two staff members. This will take place in the school's Medical Room. The school will keep a record of all

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medicines administered at school to individual children stating what, how and how much was administered, when and by whom. If it is deemed necessary that medicine needs to be administered in a place other than the Medical Room (for example, the classroom or lunch hall), then it will be kept in a safe locked space.

Parental Authorisation

Before medication can be given in school, parents must complete a Healthcare Plan indicating the name of medication and relevant dosage to be taken. For children who have extreme eczema, a Healthcare Plan will be drawn up.

Please note in the case of a medical emergency and a child is in severe pain a parent/carer may be asked for verbal permission for the school to administer pain relief (for example Calpol or Nurofen at the appropriate dosage).

Non-prescribed Medicines:

Medicines that have not been prescribed by a doctor or dispensed by a chemist such as cough lozenges, hay fever or travel sickness tablets will not be administered by staff and are not to be brought into school. For residential journeys parents may give permission for the administration of travel sickness tablets. This must be in writing and school procedures will be followed when these are administered.

Monitoring of Administration of Medicines:

When a child receives prescribed medication in school, details of the time, the date and amount are to be recorded in the Administration of Medicines log.

Administration of medicines on school trips:

On school outings or residential trips, administration of prescribed medicines will be the responsibility of a designated member of staff. Parents/carers must have completed an authorisation form in advance of the trip and give the medication to the teacher in the original dispensed container, together with any information about administration. All medicines and Healthcare Plans are taken on day trips and school journeys as required.

N.B. Asthma inhalers and eczema creams would be taken from school and already have parental consent. Administration of these would need to be recorded in the Administration of Medicines log.

School responsibilities:

The school will store medicines safely and supervise appropriate administration in line with the prescriber's instructions and parental consent. If the administration of medicines requires technical or medical knowledge, then individual training will be provided to staff from a qualified health professional. Training will depend on individual cases. The school will consult with the school nurse for advice as necessary.

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The school will maintain regular communication with families if their child has a medical condition.

Parental responsibilities:

It is the responsibility of parents/carers to ensure that a parental consent form is completed whenever their child requires medication at school. Parents must also ensure that all adrenaline auto injectors, asthma inhalers and eczema creams held in school are in date. Parents/carers must also inform the school of any possible side effects from medication that their child is taking. Parents/carers must ensure that medicines that are brought into school are in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. Parents must ensure that asthma inhalers taken to external sporting events are returned to school. Parents/carers must dispose of any out-of-date medicines.

Defibrillator - Defibtech Lifeline Fully Automatic AED with 5 Year Battery

Pack:

In the event that a defibrillator is required, it is kept in the Medical Room, in a labelled box on top of the medical cabinets. In the event of the Defibrillator being used staff must follow the audio instructions.

Staff training

This will be conducted on a yearly basis and on a new staff needs basis. All staff are trained in the administration of adrenaline auto injectors.

Confidentiality

All information regarding a child's medical needs and medication will be treated in confidence by the school.

Aspirin

St John's Ambulance advises "Do not give Aspirin to a child under 16 years" (Heart Attack – signs, symptoms and what to do – sja.org)

Emergencies

Individual Healthcare Plans should clearly define what constitutes an emergency and explain what to do. If a child is taken to hospital, staff should stay with the child until the parent/carer arrives or accompany a child taken to hospital by ambulance.

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Appendix 1 – this is an example of a Healthcare Plan which is completed by the parent/carer upon medical advice from a qualified professional.

RECENT PHOTO TO BE PROVIDED BY PARENT/CARER

HEALTHCARE PLAN (Drawn up in conjunction with parent/carer)

Child's name:

Date of birth:

Contact numbers

Please put name, relationship and numbers

- 1.
- 2.
- 3.
- 4.

Type of allergy, medical condition or illness

Please provide a brief paragraph (please use second sheet if necessary)

Please list any signs & symptoms of your child's condition. For example, if your child is allergic to a food, do they get blotchy skin, wheezy etc.

- 1.
- 2.
- 3.
- 4.

What to do if your child has an allergic reaction:

- 1.
- 2.
- 3.
- 4.

IF (CHILD'S NAME) HAS A REACTION IN SCHOOL THE DESIGNATED PEOPLE WILL BE:

1. Designated first aider
2. Head Teacher
3. Deputy Head
4. Assistant Head
5. Any other qualified first aider

Please return this form to the school office with an up-to-date photo of your child.

You can email a photo through to parents@marshgate.richmond.sch.uk

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Appendix 2

Record of medicines administered in school (for individual child with Healthcare plan)

Name: _____ Class: _____

Medication:

Instructions for use: _____

Date	Time	Dosage	Administered by

November 2024

The governors on the Children, Families and Community Committee will review this policy in November 2025 as there will be new guidance from the NHS about supporting pupils in mainstream schools who have complex medical needs.