



Our vision

Challenging  
expectations  
and sharing  
success

# Waverley School

## Supporting pupils with medical needs policy

### Health and Safety document

Name of School	Waverley School
The original policy	May 1996
Amended	May 1998
Amended	July 2003
Amended	February 2008
Amended	November 2011
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Amended	March 2015 - DFE guidance
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<b>Contents</b>
<b>Introduction</b>
<b>Principles and Procedures</b>
<b>Storage and administration of medication</b>
<b>Incidents and emergencies</b>
<b>Care plans</b>
<b>Drugs error</b>
<b>Children educated at home illness</b>
<b>staff training</b>
<b>Pupil absence</b>
<b>good practice and complaints</b>

## **SUPPORTING PUPILS WITH MEDICAL CONDITIONS**

Overall responsibility for this policy: Head teacher

Policy to be reviewed: Every three years or more frequently if there are changes to legislation or school circumstances.

### **Introduction**

At Waverley we believe that every child has the right to have an education. We therefore are an inclusive school who find ways to enable pupils with complex medical needs to attend school.

It is the school's intention to enable access to all students regardless of their medical needs and joint working with health professionals enables us to welcome pupils with even the most complex medical needs.

This policy outlines the procedures adopted at Waverley to ensure that all pupils are able to attend school safely and with the least disruption to their education as is possible. The procedures outlined in this policy ensure the safety and wellbeing of the pupils and staff. It is written in conjunction with the Health Service representatives at the School and the Community Paediatrician and takes into account guidance from the DFE "Supporting pupils

with medical conditions". The policy has been agreed jointly with the School, the Health Service representatives, the legal department of the LA and the employees' Unions. The policy is available to all staff, Governors and parent/carers.

## Principles

- The safety and wellbeing of all pupils is paramount.
- All medication will be administered by the nurses whenever possible.
- All medical procedures will be carried out by the school nurses where possible.
- The administration of medicines and medical procedures is voluntary by all other school staff and will not become part of their job description. This excludes the scale 5 Teaching Assistants who are employed to support pupils with medical needs.
- The administration of medication or the carrying out of medical procedures by staff other than school nurses will be agreed where necessary.
- A second willing member of staff should, whenever possible, be present to witness the procedure when medication is administered by staff other than the school nurse.
- Staff agreeing to administer medication or to carry out medical procedures will receive appropriate training.
- Clear records of medicine administration will be kept by the school nurses.
- The school nurse will provide Care Plans for all pupils requiring one.
- Medicines prescribed by a doctor or medical practitioner will be administered by the School nurses.
- The decision as to whether a pupil requires other medication will be made and administered by the school nurse.
- Routine medication will be stored in the Medical Room. Anti-Convulsions to be used in the event of a seizure will be stored in medical cabinets in each department. All medication will be stored in the original container and labelled with the original label. It will be kept in the medical cupboard unless it requires refrigeration, in which case it will be stored in the medical fridge in the medical room.
- Confidentiality and dignity of the pupil and family must be respected
- These principles will enable pupils to attend school and prevent them from missing school activities.

## Procedures

When the school is made aware that a pupil has a medical condition the head of that school (Primary or Secondary) will notify the school nurse. If there are confidentiality issues raised, designated individuals that are to be entrusted with information will be notified.

If the school is made aware that a new pupil who has not yet started school has a medical condition, information from health professionals should be gathered and shared with the head of school.

Following a home or school visit the head of school should arrange a meeting to ensure all information is available. Professionals at the meeting should include a school nurse, prospective class teacher, prospective head of department and therapists who will have contact with the pupil on admittance and the head of school. This meeting will be used to assess the risks to the pupil attending school. A risk assessment must be completed and shared with the head teacher. There may be actions resulting from this meeting which may need to be completed before the pupil can attend.

The expectation will be that once the risk factors have been reduced the pupil will be able to attend school.

### **Storage and administration of medications.**

All medication that is transported to and from school in the bus bags must be signed in and out of school, medication must not be transported in the pupils own bags.

All medication must be clearly labelled with the pupil's name and the required doses as prescribed by the pharmacist or doctor. It must be in the original bottle and not transferred to a syringe or any other container.

The school nurses will collect all medication from the school bus bags via the office and return it, if necessary, at the end of the day. School nurses and the office staff must register receipt to record medication transfer.

The school nurses are responsible for administering anti-convulsions and other regular medication.

The school nurses are responsible for carrying out routine medical procedures.

The School nurses are responsible for ensuring that there is a safe system for administration of medication in place. This will include procedures for checking doses. Sheets for recording who has given medication and gastro feeds will be prepared by the Care Co-ordinator in liaison with the School nurse and dietician. These will be recorded on by the class staff.

If a pupil is receiving antibiotics or other temporary medication it is the responsibility of the school nurse to administer the medication in consultation with the parents.

All pupils have equal opportunities to the curriculum offered at Waverley, including college placements and therefore it is sometimes necessary for school staff other than the school nurses to administer medication.

School staff will only be asked to administer medication, including midazolam, by means of a gastrostomy or naso-gastric tube if all below is satisfied:

1. the nurses are unavailable,
2. there is parental consent
3. they have received appropriate training from the school nurse or another medically trained person,
4. they feel competent in giving the medication or carrying out the medical procedure after they have received appropriate training,
5. they are willing to do so.

All parents/carers will be required to sign a consent form giving permission for medication, including midazolam, to be administered by the school nurse or a member of School staff. (See appendix 1). This form will be circulated with the Starting School Booklet. This form will be initiated by the Care co-ordinator after liaison with the Headteacher and School Nurse.

Medical training for new staff and new procedures for staff will be provided by the school nurses as well as all update training. Where necessary training will be specific to individual pupils. Training will be provided during school time.

The school nurse will keep a record of all medication required by pupils. Parents/carer will notify the school nurses of any changes to the medication.

Medication required if a pupil is off the school premises will be kept in a locked cupboard in their department area. Each medical TA will have a key to their department medicine cabinet to be responsible for, ensuring that medication taken is signed for and returned. Spare keys for the cupboards will be kept with the nurse and school office. At the end of the day, Medical TAs must leave their keys in the school office. If a Medical TA is not in school, the Department scale 5 or 6 Teaching Assistant will take over the responsibilities. When a pupil is participating in an integration placement or attending college, it may be necessary for them to travel with one member of staff. This may occur after parents have signed consenting to this arrangement.

Before the administration of any medication or the carrying out of any medical procedures, staff should be confident with those procedures. If procedures are adhered to the member of staff will not be held responsible for any accident or mistake in the administration of medication or the medical procedure.

School staff will not be asked to give injections, enemas, pessaries or suppositories. They will not be asked to empty catheter bags or give catheterisation. Changing a tracheostomy requires specific training. Some

staff may be trained in this procedure however generally this operation should be carried out by the school nurse or other agencies where possible.

Gastrostomy Pumps and naso-gastric tubes can be operated safely by all trained staff in school.

The dressing of wounds and skin conditions will be administered by the school nurse.

Creams and lotions will not be applied unless prescribed and/or supplied by the parent. These should be named and only used for that individual. This includes sun cream.

### Incidents and emergencies

All staff have a responsibility to keep the pupils well and to support the pupils in case of an accident. Staff should also contact a first aider if they are concerned about a pupil. If a first aider advises, or the concern is greater, the school nurse should be called.

If any pupil has an epileptic seizure which is unusual, or if it is the first time a seizure has been seen, the school nurse must be called immediately. If this occurs off the school premises during the school day, the school nurse must be notified immediately on return to school.

Senior leaders should be informed of the outcomes of these actions. Incident and accident forms should be completed as soon as is possible after the incident.

If a child becomes unwell in school, it is the school nurse who decides if the child goes home and who will phone the parent/carer.

The school nurse will decide if a pupil should be taken to hospital. If there is no nurse on site a member of the Senior Leadership team may make this decision.

If a member of staff is off school premises the lead staff member must call an ambulance if there is a serious incident concerning the pupils or staff health and is in doubt about the seriousness of the condition, they must use the school mobile and telephone school, take advice and if required take the child to hospital. Staff must always carry the school telephone number, contacts and identification card with them (020 8805 1858). Risk assessments which hold medical information must be completed before an outing.

### Care plans

The school nursing team is responsible for the production and development of care plans. The head of school, school nurse and parents must sign the care plan to indicate their compliance with the plan.

Care plans should be reviewed at least annually or more frequently if there are any changes to the pupils' health or how their health is managed.

Care plans should be linked to Education health and care plans.

The plan should show: medical condition, triggers, signs, symptoms and treatments, the pupil's resulting needs including medication (dose, side effects and storage), other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, and environmental issues, eg crowded corridors.

### Staff training

Staff receive regular onsite training and supervision from the nursing team. The nursing team also deliver bespoke training to class groups and whole school. Specific training is targeted to the classes that have specific medical needs. Training is reviewed annually.

Information regarding protective clothing or equipment will be included in the training and will be provided by the school. Training will be provided and reviewed on an annual basis and at staff's request. Training will also be provided in all new staff Induction packages.

Basic training and instructions will include:

- o Policy on administration of medicines
- o Tasks that staff should not undertake
- o Understanding labels and other instructions
- o Administration methods
- o Infection control measures before and after administration
- o Side effects of and adverse reactions to medicines and medical procedures and details on reporting these.
- o What to do if there is a failure to administer
- o How and when to contact the school nurse
- o Safe storage of medicines
- o Disposal of waste materials
- o Awareness of policies on infectious diseases
- o Awareness of policy on admitting children with or recovering from illness/diseases etc.
- o What to do if there is a drug error and how to report this error

Records of all medical training are kept by the CPD co-ordinator.

### Pupil absence

A number of our pupils require hospital treatment which can affect their attendance at school.

1. To reduce this disruption we have worked closely with health colleagues to ensure many clinics are held on site, this will then reduce the pupils to leave school to attend appointments.
2. We hold bi-weekly dietician clinics, wheelchair clinics, paediatrician clinics, epilepsy clinics. Pupils who have long stays in hospital are supported by the hospital teachers, and we have strong links with Great Ormond Street Hospital school.

3. If a pupil is absent for long periods, the Head of school is made aware by the class teacher and a referral to the Home School team, funded by the LA, can be made.
4. As a result a teaching assistant may provide some support at home until the pupil is well enough to return to school.

### **Good Practice**

This policy is accessible to all parents. It is published on our website [www.waverley-school.com](http://www.waverley-school.com) . A copy will be filed in the office and individual copies will be available on request.

Each class will be supplied with an orange medical bag for transporting drugs when off site. The bag will also contain a list of all the pupils' contact details, medication requirements, including emergency anti-convulsants, and the school's telephone number.

### **Complaints**

All stakeholders and pupils have the right to complain about any aspect of this policy and the implications of its delivery. Complaints regarding any aspect of supporting pupils with medical conditions should be made to the following senior staff:

Gail Weir - Headteacher

Sandra Chaaya - Secondary Department

Sue Hogan - Primary Department

[enquiries@waverley-school.com](mailto:enquiries@waverley-school.com) or by talking to them directly.

If you are not satisfied with the responses to your concern the chair of governors Janet Leach can be contacted at [janet.leach@enfield.gov.uk](mailto:janet.leach@enfield.gov.uk)

**This policy was reviewed and agreed by the Health and Safety Group of the Governing Body on ..... and will be reviewed every three years**

Appendix 1

**REQUEST FOR ADMINISTRATION OF AS REQUIRED MEDICATION**

Name of Child:..... Child's Date of Birth:.....

Telephone Number:.....

**DETAILS OF ROUTINE MEDICINES TO BE ADMINISTERED DURING SCHOOL HOURS**

Name & strength of medication	Dose	Route (e.g. mouth, gastrostomy, inhaler, injection)	Circumstances when this may be required

**Does your child have any allergies? If so please list**

1.	2.
3.	4.

**CONSENT**

I give consent for (name of child)..... to receive medicines as documented.

Signed: ..... Print Name:  
.....

Relationship to child: ..... GP Details:  
.....

Date .....

**PLEASE ENSURE MEDICINES ARE LABELLED AND IN THE ORIGINAL CONTAINERS DISPENSED BY THE PHARMACIST WITH THE CORRECT DOES ON THE LABEL.**

**PARACETEMOL & IBUPROFEN CAN BE GIVEN FROM OUR STOCK WITH A SIGNED CONSENT FORM – PLEASE SPECIFY STRENGTH AND DOSE**

