

Supporting Pupils with Medical Conditions

Annex 2. Local policy and working practice Gresham Village School and Nursery

The named person with responsibility for implementing the Supporting Pupils with Medical Conditions in Schools policy in this school is the Headteacher, Marc Goodliffe.

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

This annex is available on the school website.

Reviewed **30.1.24**

Administration of Medicines

School staff will administer medicines, but only with parental permission and the agreement of the headteacher in accordance with section 7 of the Trust 'Supporting Pupils with Medical Conditions Policy'. The school administration of medicines form must be completed and signed by the headteacher.

We allow the administration of non-prescription medicines, but only with parental permission and the agreement of the headteacher in accordance with section 7 of the Trust 'Supporting Pupils with Medical Conditions Policy'.

In the event of non-prescription medicines such as antihistamine and Calpol being required on a residential visit, this will only be administered if the parent has agreed on the parent consent form. In all events, the administration of any medicines will be recorded on the visit medication form.

Storage and Transfer of Medicines

All medicines that are kept in school must be signed in and out using the Medication Receipt Record, which is kept in the office and managed by the school secretary. This tracks the location of medicines at the point they enter and finally leave the school premises.

All medicines are kept in the medicine cabinets in either the staff room or the EYFS kitchen. Medicines associated with an IHP are also kept in the locked cabinets in the child's classroom.

Spare adrenaline injectors are kept in the staffroom medical cabinet.

Medicine cabinets are always locked with the key kept on top of the cabinet, where it can be easily found by an adult.

The school office check that all medicines are in date or will stay in date in September of each school year. There are also half-termly checks (see Monitoring below). Medicines that are out of date are returned to parents for replacement. Medicines held in classrooms are transferred over to new classrooms at the end of the school year. Movement of all medication is recorded

using either the Medication Receipt Record kept in the school office at the end of the year or the Tracker Sheet kept in each classroom cabinet, whichever is appropriate.

Out of date medicines that are no longer required must be returned to parents. Parents will be notified by ParentMail and if they are not collected, they will be disposed of safely by the school after 2 weeks.

Medical Conditions Register

The central point for all medical records is the school MIS. All changes to a child's medical record must be done through the MIS. This is used to generate the Medical Conditions Register. The school office maintains and shares the Medical Conditions Register with all staff.

The Medical Conditions Register must not be displayed in a public place, but teachers must ensure that it is easily accessible in the Class Profile folder on the teacher's desk in every classroom. In EYFS it is located in the Class Profile folder in the EYFS kitchen. It is also displayed beside the staffroom medicine cabinet, the library and after-school club first aid cupboards and on the staff room noticeboard.

The Medical Conditions Register is ordered in alphabetical order with children with IHPs highlighted clearly.

At the beginning of every school year and on admission, parents are required to complete an Allergies and Medical Conditions Form. This enables the school office to update each child's medical record on the MIS and consequently to update the Medical Conditions Register.

Parents are required to inform the school of new conditions or changes to existing medical conditions. The school office must be informed and their medical record updated.

The Allergies and Medical Conditions form is given to all new parents in their Welcome Pack. Parents must return the form whether their child has a medical condition or not.

Individual Healthcare Plans

The headteacher with the school office collates all Allergies and Medical Conditions forms. The headteacher decides if a child needs an Individual Healthcare Plan (IHP). An IHP will always be required if the child has an NHS Allergy Plan or NHS Care Plan.

IHPs will be drawn up in accordance with Annex 1 of the Trust 'Supporting Children with Medical Conditions Policy'. The school IHP format has been developed using the DfE model document.

IHPs must not be displayed in a public place, but teachers must ensure that it is easily accessible in the Class Profile folder on the teacher's desk in every classroom. In EYFS it is located in the Class Profile folder in the EYFS kitchen. It is also displayed beside the staffroom medicine

cabinet and the library first aid cupboard. The IHPs for after-school club are stored in the office and collected and returned for each session.

Pupils with IHPs are clearly highlighted in the Medical Conditions Register.

Pupils with food allergies and special dietary requirements due to a medical condition

The school office works in collaboration with our school meals contractor to ensure that information is consistent and up to date.

Our Midday Supervisory Team have a copy of the Medical Conditions Register in a folder that is kept in the office and is taken to the lunch hall. This includes all IHPs.

Breakfast and after-school club have a similar folder that is kept on the medical cabinet in our breakfast and after-school club room.

Procedure for children with special dietary requirements and allergies:

These are the checks we make for every meal:

Check 1: Parents alert school office to allergies and potential dietary issues on the weekly allergen and non-allergen choice form.

Check 2: Every day, the school office collate the daily dinners, sorting by yes/no to allergies and then by class and check and highlight against allergy list. This will bring all the allergies to the top of the dinner list, so they are more easily checked off.

Check 3: Office delivers dinner list to kitchen, who check against their allergy list. Special dinners are then named in the kitchen.

Check 4: At service, MSA checks against the dinner list at the point of service.

Pupils at risk of anaphylaxis or other life-threatening conditions

All members of staff are trained in anaphylaxis and know how to administer adrenaline. In an emergency, staff follow the instructions in the child's IHP and call 999, stating 'anaphylaxis'.

Parents of children at risk of anaphylaxis must provide school with two adrenaline injectors. These are clearly labelled with the child's name. One is kept in the staffroom medicine cabinet; the other in a medical cabinet in each class base. These cabinets are kept locked with the key kept on top of the cabinet.

School also keep additional junior adrenaline injectors in the medical cabinet in the staffroom. These are labelled clearly and the cupboard is locked with the key kept on top of the cabinet.

Pupils with asthma

Blue inhalers and associated equipment such as spacers need to be available for pupils whenever they need them. They are named clearly and kept in the inhaler box in the classroom.

Trips and visits

The risk assessment for all trips and visits must account for all children with medical conditions. Two adrenaline injectors must be signed in and out for every trip using the Medication Tracker Sheet located in the appropriate medical cabinet.

Monitoring

IHPs are reviewed in September every year and whenever there is a change to a child's medical condition. These need to be signed off by parents and headteacher.

The Medical Conditions Register is reprinted at the beginning of every term and whenever there is a significant change to the register.

Every half term, all paperwork and medication is checked for location and condition using the Medical Checklist that is located in the school office.

Training

All staff will receive annual training on implementing this policy in September or at the point of employment. This will include refresher training on anaphylaxis and administering adrenaline injectors.

Please see attached Appendix 1 for the Receipt of Medication Process.



Preparation for life's journey

RECEIPT OF MEDICATION PROCESS

