



Croydon High School GDST Whole School Medical and Managing Medicines policy

Responsibility for review: School Nurse
Last review: November 2023
Next review: November 2024

This policy should be read in conjunction with the GDST Administration of Medicines Protocol and the Whole School safeguarding policy.

1. Introduction

Croydon High School believes that inclusion and equal opportunities for pupils with medical needs are an entitlement and that, as a school, it has the responsibility to create conditions in which each pupil can access the education she needs. The School will give regard to the required curriculum adjustments, necessary environmental aspects and desirable social support to minimise barriers for these most vulnerable members of the school community. The School seeks to foster a school community that accepts others as they are and values diversity.

2. Aims

- To manage the education of pupils with medical conditions in such a way that they are treated equally as full members of the school community;
- To safeguard the educational interests of pupils with medical needs by providing as much education as their condition allows, thereby minimising disruption to the learning process;
- To involve the pupil and the family in discussions involving appropriate provision of medical and educational needs;
- To provide appropriate educational opportunities so that teaching and learning can play a part in the recovery process following trauma or illness;
- To secure the best interest of pupils with medical conditions with regard to opportunities when they leave the School;
- To ensure that any medical information relating to a pupil's health is maintained on a confidential basis;
- To ensure pupils requiring medicines receive the support they need; and
- To help ensure all School staff are clear about what to do in a medical emergency.

3. Responsibility of Parents / Carers

As the pupil's main carers, parents have the primary responsibility for health care and should provide the following information to the School:

- Prior to admission of a pupil to school, parents/guardians will complete a Pupil Induction electronic Booklet including a Medical Record. If there is information, which suggests a Care Plan may be required, the School Nurse will contact the parent/guardian for additional information. Parents/guardians are required to facilitate access to information from their child's GP and/or other health care professionals and update the school if anything changes.

4. Documentation

The School will maintain the following records:

Medical Records: Individual files are kept electronically by the School Nurse containing the health questionnaire, results of medical assessments, Care Plan (where appropriate), and other medical information relevant to the pupil.

Daily Contact Records: A record is kept on CPOMS by the School Nurse (or Junior Office in the case of Juniors or EYFS) of any visit by a pupil to the School Nurse, the reason for the visit and any advice or treatment given. Staff members are made aware of relevant health issues.

Individual Care Plans support pupils with:

- Medical Needs e.g. Diabetes
- Emergency medicine to be administered in school in a potentially life-threatening situation e.g. Adrenaline Pen.

The School Nurse will be responsible for drawing up and maintaining the Care Plan in consultation with the pupil concerned, Deputy Head (Pastoral) or Head of Juniors, parents, health care professionals and other specialists, as necessary.

Medication Record: Medication prescribed by the pupil's medical practitioner may only be given if a request for school to administer medication form has been completed, the medicine supplied in the original container as dispensed by the pharmacy. A record is made of any medication given.

5. Confidentiality

Confidentiality is a fundamental part of the nurse/pupil relationship. This includes pupils under the age of 16. The School Nurse should not pass information on to persons outside healthcare professionals without the agreement of the pupil.

The exceptions are:

- Where the School Nurse considers the information to be a matter of public interest e.g. serious crime, safeguarding concerns or drug related activities which place others at serious risk.
- Where a court order overrides the duty of confidentiality.
- When, in the Nurse's professional judgment, the individual will only receive the best possible outcome if information is shared.
- When the issue concerns the pupil's protection when , in accordance with our Safeguarding Policy, information will be passed to the Designated Safeguarding Lead:

Designated Safeguarding Lead	Other DSLs
David King, Deputy Head (Pastoral)	Anna Gilmour, DDSL, Deputy Head (Sixth Form)
	Maria Murray, DDSL, (Head of Year 9)
	Sarah- Jane Pendleton DDSL, (Head of Juniors)
	Laura Threadgold, DDSL, (Deputy Head of Juniors)
	Amanda D'Aranjo, DDSL, (EYFS)

6. Administration of Medicines

Medicines brought into School by pupils (parents in the case of Juniors and EYFS) should be given to the School Nurse (Junior office in the case of Juniors and EYFS) for safe-keeping in the locked medicine cabinet in the Medical Room together with a completed medicines consent form with clear instruction for administration. Medicines should be stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which dispensed. Medicines requiring refrigeration can be kept in the Medical Room fridge.

The School Nurse or Junior Office will hold the keys for the medicine cupboard whilst she is on duty. When she is off duty, the keys will be held in the School Office for safekeeping.

All medicines held at school should be in the original containers and clearly labelled with the pupil's name.

All medicines should be accompanied by details from a parent including –

- Name of medicine
- dosage
- Timing of its administration or the circumstances in which it should be used,
- Contact names in case of emergency.

These details must be kept with the medicine and staff should check any details provided are consistent with the instructions on the container.

Where a pupil needs two or more prescribed medicines, each should be in a separate container. Medicines should not be transferred from their original containers.

Medicine (both prescription and non-prescription) must only be administered to a child where written permission for the particular medicine has been obtained from the parent and or/carer.

Exceptions are medicines pupils may need to carry around with them. These include

- An asthma reliever inhaler (e.g. salbutamol or terbutaline)
- An Adrenaline pen for anaphylaxis
- A diabetic insulin pen.

7. Medicines carried by pupils

Asthma inhalers

All pupils will self-medicate with their inhalers. Parents of all pupils using inhalers in School are asked to complete a school asthma record. This record is kept by the School Nurse and updated annually. It can be referred to by first aiders and is kept with the inhalers in the Medical Room.

Adrenaline Pens

Senior pupils are encouraged to carry their own Adrenaline Pen. An individual care plan is completed jointly by the parent, pupil and the School Nurse and updated annually. This states the circumstances in which the medicine may be needed, the dosage to be given, effects and side effects and the procedure that should be carried out for hospitalisation. The care plan also contains emergency contact numbers. Care plans are kept with the spare Adrenaline Pens in the Medical Room.

Staff are regularly first aid trained and additional sessions are held to train staff in use of the Adrenaline Pen.

Diabetic Insulin pens

Pupils will carry out their own treatment with this pen. An individual care plan is completed jointly by the parent, pupil and School Nurse and updated annually. This will be kept with the individual care plans on top of the filing cabinet in the Medical Room.

It is the responsibility of each pupil and her parent to ensure she has an inhaler/EpiPen for PE and school trips/visits.

General Medication consent

The School Nurse keeps a stock of everyday remedies for common ailments. Parents are asked to indicate consent for these medicines as required when their child joins. This forms part of the medical questionnaire in the Pupil Induction Booklet.

Everyday remedies include paracetamol tablets/syrup, antihistamine tablets/syrup and ibuprofen tablets (for Seniors only). Aspirin is not stocked and no medication containing aspirin is given to under 16s, unless prescribed by their GP.

In Juniors and EYFS parents are contacted before any medication is given in addition to general consent.

On school trips/visits, teaching staff may administer these remedies if parental consent has been obtained.

Exceptions

There are certain circumstances in which the School should exercise special caution before accepting responsibility for administering medicine during the school day and/or trips/visits:

- Where the medicines or tablets are dangerous;
- Where the timing and nature of the administration are of vital importance
- Where technical or medical knowledge or expertise is required; or
- Where intimate contact is necessary, e.g. rectal drugs.

8. Refusing Medicines

If a pupil refuses to take medicine, staff should not force them to do so, but should note this in their records. Parents should be informed on the same day. If a refusal to take medicines results in an emergency, the School's emergency procedures should be followed.

9. Records

A record of all medications administered must be maintained. Medicines administered are to be recorded on CPOMs. Parents and/or carers should be informed on the same day or as soon as reasonably practicable.

If medicines are given on a School trip, they should be noted down and the School Nurse informed on arrival back in school, so that a record can be made in the pupil's medical notes.

10. Disposal of Medicines

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. If parents do not collect medicines, they should be taken to a local pharmacy for disposal.

11. Staff duty of care

Anyone caring for children including teachers or other school staff have a common law duty of care to act like any reasonably prudent parent. In some circumstances, the duty of care could extend to administering medicine and/or taking action in an emergency. This duty also extends to staff leading activities off-site, such as visits, outings or field trips.

Certain medicines can be given or supplied without the direction of a doctor for the purpose of saving life. For example the administration of prescribed doses of adrenaline is among those substances listed under Article 7 of the POM order for administration by anyone in an emergency for the purpose of saving life (Prescription Only Medicines (Human use) Order 1997).

Staff assisting in an emergency in good faith and acting reasonably and responsibly, whilst carrying out their duties, will be covered by the Trust's insurance against claims of negligence.

12 Staff taking medication/other substances

Staff working in EYFS must seek medical advice and inform the Head of Juniors if they are taking medication other than paracetamol, and any staff medication must be securely stored at all times. Parents will need to complete a medicine consent form for prescribed medication such as antibiotics. In the Junior School all staff medication must be securely stored in the Junior School medical room.

Senior School staff taking medication should keep it secure in the staff room – medication other than for emergency (e.g. adrenalin pen) should never be accessible in teaching spaces.

13 Responding to Children who are ill or infectious

Parents must be informed that the school will take the following actions when children are ill or considered infectious:

- parents will be contacted as soon as practicably possible and informed about illness or infections identified in school
- parents are expected to notify the school immediately if they are suspect or made aware that their child is ill or infectious
- in the first instance pupils must not return to school for 48 hours after the last instance of vomiting/diarrhoea
- parents are obliged to share any information about child illness or infections with the School Nurse; the school will act upon the advice provided