

# Brougham Street Community Nursery School Medical Policy

Brougham Street Nursery School welcomes and supports children with medical and health conditions. We aim to include all children with medical conditions in all school activities, including off site visits, differentiated as appropriate. We recognise that some medical conditions may be defined as disabilities and consequently come under the Equalities Act 2010

In addition to this school policy we also use the more detailed North Yorkshire 'Guidance for Supporting Children and Young people with Medical Conditions in School'

## Planning ahead

We have a responsibility to plan ahead for pupils with medical conditions who may enrol for our school in the future and we do this by:

- Having some staff who have the duties of administering medicines and undertaking health care procedures written into their job descriptions.
- Ensuring other staff are aware that they may volunteer to do these duties and that they also have responsibilities in emergency situations.
- Having record keeping procedures in place for administering medication
- Having storage facilities in place for medication
- Having identified a suitable area within school for undertaking health care procedures
- Having suitable toileting facilities for children which are clean, safe and pleasant to use
- Having flexible policies which take into account medical conditions e.g. we do not refuse access to the toilet at any time to any child.
- Appointing a member of staff to be our Named Person for medical needs (Head / SENCO / Childcare Manager)
- Following the guidance provided by the Local Authority in 'Supporting Children and Young People with Medical Conditions in School '

#### **Emergencies**

We are aware that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.

We have a procedure in place for dealing with emergencies and all staff know they have a duty to take swift action. The Headteacher ensures that all staff feel confident in knowing what to do in an emergency. Details of how to call an ambulance are kept by the 'phone at the school office and individual rooms. This procedure is revisited yearly at whole school staff meetings.

If a child needs to be taken to hospital, an ambulance will be called and, if parents are not available, a member of staff will accompany and school will phone the parent/s to meet the ambulance at casualty. The member of staff will stay with the child until a parent arrives. Health professionals are responsible for any decisions on medical treatment in the absence of a parent.

Staff will not take a child to hospital in their own car unless it is an absolute necessity.

#### **First Aiders**

We have trained paediatric first aiders on site at all times throughout the school day who are aware of the most common serious medical conditions at this school. Training is refreshed every two years for paediatric first aid and every three years for First Aid at Work

## Procedure to be followed when school is notified that a child has a medical condition:

- 1. seek further information from parents and health professionals
- 2. determine whether an Individual healthcare plan or a risk assessment is required
- 3. arrange a meeting to develop the Individual health care plan
- 4. arrange any staff training
- 5. Implement and monitor Individual healthcare plan.

## Staff training

Staff who support children with specific medical conditions must receive additional training from a registered health professional. Training requirements are determined via Individual healthcare plans. The Head teacher is responsible for ensuring staff are suitably trained by liaising with the relevant healthcare professional. Any member of staff who is trained but feels unable to carry out these duties competently (for example due to having an injury/condition themselves or due to further training being required) must report this as soon as possible to the Headteacher who will make appropriate arrangements.

The Headteacher keeps a training record and ensures training is refreshed as appropriate. The Headteacher is involved in determining the competency of a member of staff in undertaking specific procedures (see Working **Together**)

Staff who complete records are shown by the Senior Leadership Team how these are to be completed and managed. The Headteacher quality ensures this on termly basis.

Arrangements for induction of new staff are through the Nursery's induction process

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. In some cases written instructions from the parent or on the medication container dispensed by the pharmacist is sufficient and the Headteacher will determine this.

## Whole school staff awareness training

We aim for all staff to receive basic awareness training in the following more common conditions:

- asthma
- epilepsy
- allergic reaction

This training is delivered by Health Authority every two years unless a due to a specific condition or change in legislation

This is supported by having information about these conditions located in prominent positions such as staff notice boards

## Staffing

The Headteacher is responsible for ensuring that all **relevant** staff will be made aware of a child's condition as soon as possible.

Any supply teachers / covering staff will be informed, as appropriate, via medical sheets on the walls in nursery rooms.

Children with Individual Healthcare Plans have staff member named in their plan who have been trained to undertake the procedures in the plan. The Headteacher ensures there are enough staff named to cover for absences and to allow for staff turnover.

## Administration of medication at school

Due to the age of the children we support the administration of all medication / care routines

- We will only administer medication at school when it is essential to do so and where not to do so would be detrimental to a child's health.
- We will only accept medication that has been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.
- We will only accept **non prescribed** medication if it is included in an Individual Healthcare Plan **or** if we have a written procedure in place for that type of medication which has been

authorised by NYCC insurance (see Appendix 1 for administration of non-prescription medication).

- We will not give Aspirin to any CYP under 16 unless it is prescribed
- We only give medication when we have written parental permission to do so.
- Medication not carried by CYP is stored in the secure staff cupboards in each room
- Controlled drugs are stored in the secure staff cupboards in each room
- Any medication is administered by an adult due to the age of the children.
- The first dose of any medication must be administered by the parent / adult with parental responsibility in order to ensure there are no adverse reactions to the medication administered.

## Administration of medication - general

- All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a child taking medication unless they have been specifically contracted to do so or it is in their job description.
- For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to pupils but only with a parent's written consent.
- When medication is being administered two staff members will always be present to witness/countersign the documentation.
- Some medicines require staff to receive specific training on how to administer it from a registered health professional.

## Children who can manage their own needs

We encourage all CYP to manage as much of their own health needs as is appropriate in order to promote independence. However due to the age of the children in the nursery medication **will only** be administered by a permanent member of staff.

#### **School Trips**

Staff organising our school trips ensure:

- They plan well in advance.
- They seek information about any medical / health care needs which may require
  management during a school trip. This is specifically relevant for residential visits when
  children may require medication / procedures that they would not normally require during
  the daytime.
- That any medication, equipment, health care plans are taken with them and kept appropriately during the trip.
- They do a risk assessment which includes how medical conditions will be managed in the trip. Staff are aware that some children may require an individual risk assessment due to the nature of their medical condition.

#### Safe storage – general

- The Headteacher ensures the correct storage of medication at school
- The Headteacher ensures the expiry dates for all medication stored at school are checked termly and informs parents by letter in advance of the medication expiring.
- Some medications need to be refrigerated. These are stored in a clearly labelled airtight container in the fridge located in the baby room / Nursery School. This area is inaccessible to unsupervised children.

#### Refusal

If a child refuses to take their medication school staff will note this on the administration of medication record. Parent/s will be informed as soon as is reasonably possible so that they can make alternative arrangements.

## **Accepting Medicines**

 The Headteacher along with the parent/s, ensures that all medication brought into school is clearly labelled with the child's name, the name and dose of medication and the frequency of dose. It must be in the original, full packaging containing the accompanying information leaflet. Wherever possible medicines should be passed from the parent to the child's key worker / room leader / teacher.

## Safe disposal

- Parents are asked to collect out of date medication.
- If parents do not collect out of date medication, it is taken to a local pharmacy for safe disposal.
- Disposal of medication is recorded on the administration of medication record.

## **Record keeping**

The following records are kept in school

Name of record	Location of record	Who completes it	Who quality assures it & how often
Whole school administration of medication record	Policy files – staff room / office / headteacher's office	Headteacher	Governors – yearly (FOSE)
Individual administration of medication record - for children who have frequent & regular medication	Room files	Key Person / Room Leader	Headteacher - termly
Staff training log – including first aid	Headteacher's Office	Headteacher	Governors – yearly (FOSE)
School Medical Register	Headteacher's Office	Headteacher	Governors – yearly (FOSE)

All these records will be kept securely and in accordance with NYCCs Records Retention and Disposal Schedule. All electronic records will be password protected.

#### **Enrolment forms**

We ask on our enrolment form if a child has any medical /health conditions and again at regular times (frequency)

#### Individual Healthcare Plans

- For children with more complex medical needs we use Individual healthcare plans to record important details. Individual healthcare plans are held in the headteacher's office in accordance with data protection. They are updated when and if there are significant changes and also annually reviewed with parents and health care professionals.
- Individual Healthcare Plans are shared on a need to know basis with staff who are directly involved with implementing them.
- Individual Healthcare Plans are also shared, with parent/s permission, with NYCC risk management and insurance

- The Headteacher is responsible for ensuring any Individual healthcare plans are developed
- The Headteacher is responsible for checking Individual Healthcare plans on a (termly) basis to ensure they are up to date and being implemented correctly.

## School Medical register

We keep a centralised register of children with medical needs. The Headteacher has responsibility for keeping the register up to date.

#### **Asthma**

- School staff are aware that, although it is a relatively common condition, asthma can develop into a life threatening situation.
- We have a generic asthma plan in place in school which details how asthma attacks are managed. This plan is displayed in prominent locations in school – staffroom
- children who have asthma will not have an Individual Healthcare Plan unless their condition is severe or complicated with further medical conditions.
- The Headteacher and Governing body have chosen to keep emergency Salbutamol inhalers and spacers in school for use by children who have a diagnosis of asthma and whose parent/s have given us written permission for their child to use it. This would be in rare circumstances where an inhaler has become lost or unusable. Parents are informed by standard letter if their child has used the schools emergency inhaler.
- The named person is responsible for managing the stock of the emergency school Salbutamol inhalers.
- The emergency salbutamol inhalers will be kept in the Nursery School hygiene suite Along with a register of children whose parent/s has given permission for these to be used as appropriate.
- The Headteacher / named person is responsible for ensuring the emergency inhalers and spacers are washed as necessary

#### **Working Together**

A number of people and services may be involved with a child who has a medical condition e.g. parent/s, childthemselves, Healthy Child Nurse, specialist nurse, community nurse etc.

We seek and fully consider advice from everyone involved and from the Local Authority to assist us in our decisions around a child's medical needs.

We aim to maintain regular contact with our Healthy Child nurse who may inform us of any children who have health conditions that we are not already aware of e.g. where a child has developed a new condition.

We work together to identify needs, identify training, draw up Individual Healthcare Plans, identify staff competency in procedures etc. However the Headteacher and Governing body take overall responsibility for ensuring a child's needs are met in school.

We work together to ensure our policy is planned, implemented and maintained successfully.

#### Headteacher

The Headteacher holds overall responsibility for the following but may delegate some of the responsibilities to a named person:

- 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 child, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, Healthy Child Nurse, parents and governors.

- Ensure the policy is put into action, with good communication of the policy to all.
- Ensure every aspect of the policy is maintained.
- Ensure information held by the school is accurate and up to date and that there are
- good information sharing systems in place using Individual Healthcare plans.
- Ensure children's confidentiality.
- Assess the training and development needs of staff and arrange for them to be met.
- Provide/arrange provision of regular training for school staff in managing the most common medical conditions in school.
- Ensure all supply staff and new teachers know and implement the medical conditions policy.
- Update the medical policy at least once a year according to review recommendations and recent local and national guidance and legislation.
- Ensure absences due to medical needs are monitored and alternative arrangements for continuing education are in place.
- Ensure Individual Healthcare plans are completed and reviewed annually.
- Check medication held in school termly for expiry dates and dispose of accordingly
- Inform parents when supply of medicine needs replenishing / disposing
- Quality assure record keeping
- Work together to quality assure staff competency in specific procedures
- Regularly remind staff of the school medical policy and procedures

#### School staff

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 implement the medical policy.
- Know which children in their care have a medical condition.
- Allow all children to have immediate access to their emergency medication.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- Be aware of children with medical conditions who may be experiencing bullying or need extra social support.
- Ensure all children with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- Ensure children have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

#### **Teaching staff**

Teachers at this school have a responsibility to:

- Ensure children who have been unwell catch up on missed school work.
- Be aware that medical conditions can affect a child's learning and provide extra help when needed.
- Liaise with parents, healthcare professionals and special educational needs co-ordinator if a child is falling behind with their work because of their condition.

## First aiders

First aiders at this school 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.
- Check the contents of first aid kits and replenish as necessary

## Special educational needs co-ordinator

## Has a responsibility to:

- Help update the school's medical condition policy.
- Know which children have a medical condition and which have special educational needs because of their condition.
- Ensure teachers make the necessary arrangements if a child needs special consideration or access arrangements in exams or coursework.

#### Children

Have a responsibility to (in an age-appropriate context):

- Treat other children with and without a medical condition equally.
- Tell their parents, teacher or nearest staff member when they or another child is not feeling well. We remind all children of this on as part of our PSED teaching
- Treat all medication with respect.
- Ensure a member of staff is called in an emergency situation

## **Parents** are expected to support their child by:

- Telling school if their child has / develops a medical condition
- Immediately informing (the school office) in writing if there are any changes to their child's condition or medication.
- Ensuring that they/ their emergency representative is contactable at all times.
- Administering medication out of school hours wherever possible
- Undertaking health care procedures out of school hours wherever possible
- Ensuring they supply school with correctly labelled in date medication.
- Contributing to the writing of individual health care plans / intimate personal care plans as appropriate
- Completing the necessary paperwork e.g. request for administration of medication
- Collecting any out of date or unused medicine from school for disposal
- Keeping their child at home if they are not well enough to attend school / infectious to other people
- 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.

Parents who do not provide this support should be aware that we may not be able to fully support their child's medical condition in school.

## School procedure to be followed on being notified of a Child's medical condition;

Notification of a child's medical condition may come via a number of routes e.g. by parents, Healthy Child nurse, admission forms etc.

Whatever the route the Headteacher must be informed as soon as possible.

#### They must then:

- Seek further information about the condition
- Determine with the support of parents and relevant health professional whether an Individual Healthcare Plan is required
- Identify any medication / health care procedures needed
- Identify any aspects of a child's care they can manage themselves
- Identify which staff will be involved in supporting the child
- Identify what, if any, training is needed, who will provide this and when
- Identify which staff need to know the details of the child's medical condition and inform them as appropriate
- Ensure parent/s written permission is received for any administration of medication

## **Unacceptable Practice**

School staff use their discretion about individual cases and refer to a child's Individual Healthcare Plan, where they have one, however; it is not generally acceptable to:

- Prevent children from accessing their inhalers or other medication
- Assume every child with the same condition requires the same treatment
- Ignore the views of the child and their parents
- Ignore medical evidence or opinion although this may be challenged
- Send children with medical conditions home frequently or prevent them from staying for normal school activities e.g. lunch unless it is specified in the child's Individual Healthcare Plan
- Send an ill child to the school office or medical room without a suitable person to accompany them
- Penalise children for their attendance record if their absences relate to their medical condition e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition
- Require parents, or otherwise make them feel obliged to come into school to provide medical support to their child, including toileting issues and manual handling issues
- Prevent children from participating, or create unnecessary barriers to children
  participating in any aspect of school life, including school trips e.g. by requiring the
  parent to accompany the child.

#### **Data Protection**

We will only share information about a child's medical condition with those staff who have a role to play in supporting that child's needs. In some cases e.g. allergic reactions it may be appropriate for the whole school to be aware of the needs. In other cases e.g. toileting issues, only certain staff involved need to be aware. We will ensure we have written parental permission to share any medical information.

## School environment

We will ensure that we make reasonable adjustments to be favourable to children with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

## **Physical Environment**

We have an accessibility plan which outlines how we aim to develop our facilities and staffing to meet potential future health care needs e.g. improved physical access, improved toilet facilities.

## **Education and learning**

We ensure that children with medical conditions can participate as fully as possible in all aspects of the curriculum and ensure appropriate adjustments and extra support are provided.

Teachers and support staff are made aware of children in their care who have been advised to avoid or take special precautions with particular activities.

We ensure staff are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these triggers.

Staff are aware of the potential for children with medical conditions to have special educational needs (SEN). The school's SEN coordinator consults the child, parents and pupil's healthcare professional to ensure the effect of the child's condition on their schoolwork is properly considered

#### Insurance

The Headteacher is responsible for ensuring staff are insured to carry out health care procedures and administer medication. A copy of the NYCC insurance policy is made available to all staff involved if requested

Additional insurance may need to be taken out for specific procedures and the Headteacher will ensure relevant staff are able to access a copy of the insurance policy.

## **Complaints**

For details on how to make a complaint around medical issues in school please follow our school complaints procedure available from the school office.

## Home to school transport

Parents are responsible for informing SEN transport or Integrated Passenger transport if their child has a medical need that they may require assistance with during the journey to and from school.

## Dignity and Privacy

At all times we aim to respect the dignity and privacy of all children with medical conditions we do this by only sharing information with those who have a role in directly supporting the child's needs.

We are considerate when giving / supervising medication / managing health care needs.

## Distribution of the school medical policy

Parents are informed about this school medical policy:

- When their child is enrolled as a new pupil
- Via the school's website, where it is available all year round

**School staff** are informed and reminded about this policy

- At scheduled medical conditions training / school training days
- whole school staff meetings

Governing Bodies should review this policy annually

#### Appendix 1

Parental Request for medicine to be taken at school

## **Appendix 2**

## Medicine Administered signature form

## Non-prescription medication

- Over-the-counter medicine such as pain and fever-relief and teething gel may be administered when essential to the child's health and/or well being. However, the same procedures must be followed regarding documenting the dosage to be given and when it is administered (medicine form) see BSNS Medication policy
  - The nursery will administer non-prescription medication for a short initial period, dependant on the medication or the condition of the child. After this

time medical attention should be sought. If there are any concerns regarding the medication, its effects or the child's health the parents will be contacted and appropriate medical advice sought.

- If a child needs liquid paracetamol or similar medication during their time at nursery, such medication will need to be provided by the parent/carer
   Medicines containing aspirin will not be given – staff will check non – prescribed medication to ensure it does not contain aspirin
- Giving liquid paracetamol will be a last resort and the nursery staff will only administer medication after having contacted the parent and secured their permission. A Medication form will have been previously completed by the parent. The child will be closely monitored until the parents collect the child and if there are any concerns about the child's condition parents will be contacted again in order to collect them from nursery. Medical attention will be sought if there are any concerns regarding the condition of the child.
- For any non-prescription cream for skin conditions e.g. Sudocrem, prior written permission must be obtained from the parent and the onus is on the parent to provide the cream which should be clearly labelled with the child's name
- If any child is brought to the nursery in a condition in which he/she may require medication sometime during the day, a Senior Leader will decide if the child is fit to be left at the nursery. If the child is staying, the parent must be asked if any kind of medication has already been given, at what time and in what dosage and this must be stated on the medication form
- As with any kind of medication, staff will ensure that the parent is informed
  of any non-prescription medicines given to the child whilst at the nursery,
  together with the times and dosage given
- The nursery **DOES NOT** administer any medication unless prior written consent is given for each and every medicine
- In the case of medication that may need to be given to a child due to them becoming ill during the day, e.g. liquid paracetamol for temperature reduction, parents will be contacted before any medication is administered.

Appendix 1:

## Parental request for medicine to be taken at school

School staff will not give your child medicine unless you complete and sign this form. The school has a policy that the staff can administer certain medicines.

Childs name:		DOB:
А		
Medical condition/illness:		Class/form:
		31433.1011111
Name 4 and 5		
Name/type of medicine (as described on the		
container)	ND: Medicines must be in th	
	pharmacy	e original container as dispensed by the
Expiry date		
Dosage and method		
Times of day medicine is to		ė
be administered		
Date and time the most recent		
dose was given ( school should	1. 007	
not give the first dose of a medicine)	7 6 7	
Special precautions /		
instructions		
Are there any side effects that	T X X	The state of the s
the school needs to know		
about?	14	
Procedures to take in an		
emergency	on general segment of	m <sup>m</sup>
	I.	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy and the prescribers instructions.

I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

I understand that, where medicine is not self- administered, it will be given by non-medically qualified staff.

I agree not to hold staff responsible for loss, damage or injury when undertaking agreed administration/supervision of medication unless resulting from their negligence

I will abide by the schools policy and procedure for the delivery and return of medication
I will ensure adequate supply of in date medication

Name	of Parent	
Signat	ure of parent	Date
Relation	onship to Child	
Schoo	ol Consent:	
•	The school agree to administer the above as requested Staff administering medication or supervising the admini have received any necessary training Staff are insured to undertake the above	stration of medication
Name	of Headteacher/designated person	
Signat	ureDate	

NB: If more than 1 medication is to be administered then a separate form should be

used for each one.

Appendix 2: Brougham Street Community Nursery School Record of Medicine

Administered	SUPPORT. NI.
Child's name:	
Medication given:	- Lundy little of
	A de Community But se Community But se Co

Date	Time	Dose Given	Any reactions	Staff Signature 1	Staff witness signature	Print names