**BOWERHAM PRIMARY & NURSERY SCHOOL**

**&**

**BABY ROOM UNIT**

**Supporting Pupils with Medical Conditions and Administering Medication Policy**

**Date: July 2025**

**Review date: July 2026**

**Stand tall, reach high, love learning**

The Bowerham School community is proud to nurture aspiration, inspire love for life-long learning and prepare children for a changing society.

At Bowerham School we:

* Ensure all children have access to a fun and engaging, ambitious and creative curriculum that widens their life experiences
* Develop confident and independent learners with motivation, curiosity and a love of learning
* Ensure all children learn about and demonstrate the British Values of: tolerance, mutual respect, individual liberty, democracy and rule of law, while respecting differences including gender, ethnicity, religion and ability.
* Nurture, develop and challenge children to be aspirational and secure within themselves in order to prepare them for their future

Bowerham Primary School is committed to reducing the barriers to accessing learning and school life for all its pupils.

This policy is written in regards to

* ‘Supporting pupils at school with medical conditions’ - Statutory guidance for governing bodies of maintained schools and proprietors of academies in England - December 2015
* Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions
* Equality Act 2010 which states it is unlawful for a school to discriminate against a pupil or prospective pupil by treating them less favourably due to disability.

**Aims**

* To ensure pupils at school with medical conditions, in terms of both physical and mental health, are properly supported so that they can play a full and active role in school life, remain healthy and achieve their academic potential.
* To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

**Procedures**

The Head teacher is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

* Sufficient staff are suitably trained.
* All relevant staff are made aware of the child’s condition.
* Cover arrangements in case of staff absence is available.
* Supply teachers are briefed.
* Risk assessments for visits and activities out of the normal timetable are carried out.
* Individual healthcare plans are reviewed at least annually.
* Transitional arrangements between schools are carried out.
* If a child’s needs change, the above measures are adjusted accordingly.

When a child joins Bowerham Primary and Nursery School at the start of a new academic year, these arrangements should be in place for the start of the term. Where a child joins mid -term or a new diagnosis is given, arrangements should be in place as soon as possible. Any pupil with a medical condition requiring medication or support in school should have an Individual Healthcare Plan which details the support that child requires with medical supporting evidence.

**Individual Healthcare Plans (IHPs)**

* Children with a medical condition will have an IHP.
* Some children may have an IHP where they require regular medication/ treatment.
* The IHP will detail a child’s medical condition, its triggers, signs, symptoms and treatments. These should be drawn up in partnership between school and parents and should be written alongside medical professionals, e.g. the school nurse, Dr, consultant.
* Medical evidence should always be provided to support the medical diagnosis

**Roles and responsibilities**

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Our school will work collaboratively with all relevant agencies to provide effective support for the child.

**The Governing Body**

* Must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented.
* Must ensure sufficient staff receive suitable training and are competent to support children with medical conditions.
* Must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk.

**The Headteacher**

* Should ensure all staff are aware of this policy and understand their role in its implementation.
* Should ensure all staff who need to know are informed of a child’s condition.
* Should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency situations and they are appropriately insured.
* Has overall responsibility for the development of IHPs.
* Should contact the school nursing team in the case of any child with a medical condition who has not already been brought to the attention of the school nurse.

**School Staff**

* Any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines although they cannot be required to do so.
* Should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions.
* Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
* Staff will keep parents fully informed.

**School Nurses**

* Are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school.
* May support staff on implementing a child’s IHP and provide advice.

**Other healthcare professionals**

* Should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
* May provide advice on developing healthcare plans.
* Specialist local teams may be able to provide support for particular conditions eg Asthma, diabetes.

**Pupils**

* Should wherever possible be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP.

**Parents**

* Parents will be required to complete a medical registration form when their child is offered a place at Bowerham Primary and Nursery School.
* Parents will be required to support school by completing an IHP and provide the relevant medical evidence. To review this annually or update school if any changes occur to their child’s medical needs.
* Parents will be required to complete a medical consent form if their child requires the administration of any medicines/ procedures.
* Parents must provide school with sufficient up to date information about their child’s medical needs.
* Parents should carry out any action they have agreed to as part of the IHP implementation.

**Administering Medicines**

* There is no legal obligation that requires school staff to administer medicines.
* Staff at this school can only administer prescribed medicines to those children who require regular medication for a medical condition or to those children whose well-being would be affected without it. Antibiotic medication will only be administered if it is 4 times a day or at a specific time during the school day as stated on the dispensing label
* Except in the case of emergency medicines, all medication must be delivered to, administered in and collected from the school office.
* Emergency medicines will be kept centrally in the Nursery (for children in EYFS) and in the school office or the pastoral room at breaktime for immediate and easy access for all staff
* Asthma medication in kept in the classroom medical trays
* A consent form must be in place before any medication will be administered, even if the child is able to self-administer.
* Where the school agrees to administer medicines or carry out other medical procedures:
* Staff will receive appropriate training and support from health professionals.
* The parent or guardian will be asked to complete and return a consent form giving all the relevant details in full before any medication will be administered.
* Each time medicine is administered it must be recorded, including if the child refused to take it.
* School can only accept medicines provided in the original container as dispensed by a pharmacist and include the name of the child and the prescriber’s instructions for dosage and administration. School cannot accept medicines that have been taken out of the container nor make changes to dosages on parental instruction.
* No child will be given any medicines without their parent’s verbal or written consent.
* Written records are kept of all medicines administered to children. (See Appendices).

These offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents will be informed if their child has been unwell at school.

**Non-prescription Medication (also known as over the counter medicine) In The Baby Unit**

* We recognise that our youngest children may require non-prescription medications such as infacol as part of their daily care needs. In cases such as this the following will apply:

• Staff will not administer any non-prescription medication containing aspirin

• Staff will only administer non-prescribed medication for a short initial period and only if necessary. After this time parents / carers will be advised to seek medical advice

• Staff reserve their right to refuse to administer medication if they feel that the child does not need the medication or deem further medical attention is required

• For all medication the parent/carer must give prior written permission for the administration of each and every medication

• Medicines must be in their original containers

• The parent / carer will complete the relevant form to enable the nursery to administer the medication(s) required.

• The written permission is only acceptable for the medication listed and cannot be used for similar types of medication

• Parents must notify the nursery IMMEDIATELY if the child’s circumstances change, e.g. a dose has been given at home, or a change in strength/dose needs to be given

• Any significant changes in the details listed above must be recorded on a new form and countersigned by the parent/ carer

• Staff will only administer as per the information listed on the form

• At each visit the child’s parent/carer will be asked if there have been any changes to the requirements stated on the form. If there have been changes, a new form must be completed and counter-signed by the parent/carer

• When the child is picked up from the setting, the parent / carer must be given an update as to the times and dosage given throughout the day. This will be recorded on the child’s care diary on Tapestry.

• At the time of administering the medicine, a member of staff will ask the child to take the medicine, or offer it in a manner acceptable to the child at the prescribed time and in the prescribed form.

**Asthma**

* Where a child has an asthma inhaler it is the parents responsibility for ensuring their child’s asthma inhalers are in school and in date.
* All pumps are labelled and kept in the class medical trays. In the event of an attack, the inhaler must be taken to the child.
* All inhalers should accompany children when they are off the school grounds e.g. on a trip, swimming, visiting another school, etc.

**Diabetes**

* Where a child has a diagnosis of Diabetes. The child’s IHP will have details of the child’s needs and procedures, as agreed by parents, diabetes nurse and school.
* School is responsible for checking the insulin given by parents is in date.
* All insulin and equipment (diabetes pen, pump, or blood glucose meter) is kept in a suitable place. Every time a trained member of staff is administering insulin, whether, through a pen or a pump, each dose is recorded.
* All sharps are stored in a Sharps Bin provided by parents, prescribed to the child, in the central office. It is the parents' responsibility to dispose of their child’s sharps bin. School are to inform parents when the bin needs replacing.

**Epi Pens**

* Epi Pens are labelled and kept in the class medical trays.
* Anyone can administer an Epi-Pen in an emergency if the adult/child is unable to do it themselves.
* Should a member of staff, who has not had the training have to do this, then the emergency services must be informed at the same time as the Epi-Pen is administered.
* A spare Epi Pen is kept in the school office and stored in line with the manufacturer's guidelines.
* Epi pens are to be taken on school trips and a lead person is responsible for the administration of this.

**Controlled Drugs**

* Controlled drugs, such as Ritalin, are controlled by the Misuse of Drugs Act, and therefore have to be strictly managed.
* The amount of medication handed over to the school will always be recorded on the ‘Record of medicine administered to an individual child’ sheet.
* It will be stored in a locked non portable container, and only specific named staff will be allowed to access to it.
* Each time the drug is administered it must be recorded, including if the child refused to take it.
* Passing a controlled drug to another child is an offence under the Misuse of Drugs Act.

**Refusing Medication**

* If a child refuses to take medication staff will not force them to do so. The refusal will be recorded and the parents informed. If necessary the school will call the emergency services.

**Pain Killers**

* Unless prescribed by a doctor and needing to be administered more than twice daily, pain killers such as paracetamol, ibuprofen and aspirin will not be administered and must not be brought to school by pupils. If calpol needs to be administered in school, written or verbal permission must be given and the usual procedures followed.

**Sun Cream**

* Sun cream may come in to school as long as it is clearly labelled with the pupil’s name and the pupil can apply the cream for themselves.
* Pupils must not share sun cream and staff are not able to administer unless permission has been sought.

**Sun cream in EYFS**

* Children in our Baby Unit, Nursery and Reception Classes apply the following procedure for the administration of suncream:
* Parents must ensure sun cream is applied to their child before they bring them to The Baby Unit/Nursery/school – this will give their child the sun protection they will need for the immediate session.
* Staff will re-apply sun cream to children if they are in The Baby Room/Nursery all day. Please note that this only applies to children who are in the Baby Unit/Nursery for the full day. Reception Class staff will reapply suncream to children in reception class at lunchtime, in preparation for the afternoon session.
* School have purchased sun cream – Boots Soltan Kids Factor 50 hypoallergenic sun care lotion. Parents who **do not**wish for their child to use this due to an allergy and would like to provide their own lotion, should send their chosen sun lotion in a named bottle – which can be left in the Baby Unit/Nursery/School for the summer term. Lotion cannot be kept in children’s bags for safety reasons. The school’s chosen sun cream is available for parents to ‘patch’ test if needed.

**Safe Storage of Medication**

* The school will only store and administer medication that has been prescribed for an individual child.
* Medicines will be stored strictly in accordance with product instructions. Children will be informed where their own medicines are stored.
* All emergency medication, such as asthma inhalers and adrenaline pens (epi-pens), will be readily available to children and will not be locked away.

**Emergency Medicines**

* Pupils who require emergency medication will not participate in school trips if they do not have their medication in school to take with them.
* Parents/ carers need to inform the school by letter if the pupil no longer requires their emergency medication.

**Training**

* Any specific training required by staff on the administration of medication will be provided by or through the school nurse. Staff will not administer such medicines until they have been trained to do so.
* The school will keep records of all staff trained to administer medicines and carry out other medical procedures. Training will be updated as appropriate.

**Day trips, residential visits and sporting activities**

* Teachers should be aware of how a child’s medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. School should make arrangements for the inclusion of pupils in out of school activities with any adjustments as required.
* All staff supervising visits should be aware of any medical needs, medication to be administered and the relevant emergency procedures. Where necessary an individual risk assessment should be drawn up.
* It should be ensured that a member of staff who is trained to administer any specific medication accompanies the pupil and that the appropriate medication is taken on the visit.

**Unacceptable Practice**

* Preventing children from easily accessing and administering their inhalers and medication when and where necessary; assuming that every child with the same condition requires the same treatment.
* ignoring medical evidence or opinion.
* Sending children with medical conditions home frequently or preventing them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.
* If the child becomes ill, sending them to the school office unaccompanied or with someone unsuitable.
* Penalising children for their attendance record if their absences are related to their medical condition, eg hospital appointments.
* Preventing pupils from drinking, eating or taking toilet or other breaks as is reasonable, in order to manage their medical condition effectively.
* Preventing children from participating, or creating unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

**Complaints**

* Should parents or pupils be dissatisfied with the support provided they should discuss their concerns with the Headteacher. If this does not resolve the issue, they may make a formal complaint via the school’s complaints procedure.