



# STREATHAM & CLAPHAM HIGH SCHOOL

## MEDICAL POLICY

<b>Person(s) responsible for this policy</b>	<b>Nurse, Second Master</b>		
<b>Last review by</b>	<b>A Oladejo</b>	<b>Review date</b>	<b>March 2019</b>
<b>Date of next review</b>	<b>September 2020</b>		

### Rationale

The aim of the Trust's Health Service is to enable pupils to fulfil their educational potential by means of supporting their health care needs in the school environment.

Streatham & Clapham High School believes that inclusion and equal opportunities for girls with medical needs are an entitlement and that as a school it has the responsibility to create conditions in which each girl can access the education she needs. Streatham & Clapham High 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. Streatham & Clapham High School's intent is to foster a school community that accepts others as they are and values the diversity of life.

### Aims

- ❑ To manage the education of girls 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 girls with medical needs by providing as much education as their condition allows, thereby minimising disruption to the learning process
- ❑ To involve the girl 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 girls with medical conditions with regard to opportunities when they leave school.

### Responsibility of Parents/Guardians

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

- ❑ Prior to admission of a girl to school, parents/guardians will complete a GDST –PUPIL HEALTH ASSESSMENT FORM. If there is information which suggests a Health 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 daughter's GP and/or other health care professionals.
- ❑ Parents/guardians should inform the School in writing of any further changes to the information held. If a Health Care Plan is required, the procedures above will be followed.

## Documentation

The School will maintain the following records-

### *Medical Records*

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

Records are kept by the School Nurse of any visit by a pupil to the School Nurse, the reason for the visit and any advice or treatment given.

It may be appropriate to disclose medical information to the Head Master if failure to do so would impair a girl's academic progress or have serious consequences on her health. Permission will be sought from the girl and/or her parents if signed consent has not been given on the Pupil Health Assessment Form

***Individual Pupil Health Care Plans*** - For supporting girls with

- Medical Needs eg: Diabetes or Disabilities
- Emergency medicine to be administered in-school in a potentially life-threatening situation e.g. epi-pen

The School Nurse will be responsible for creating and maintaining the Health Care Plan in consultation with the girl concerned, Pastoral Deputy Head Mistress, 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 Administration of Prescribed Medicines in School (RAPMS) form has been completed, the medicine supplied in the original container as dispensed by the pharmacy. A record is made of any medication given, and a record is made of all medication taken by a girl.

## Health Checks

Summary of School Health Programme (Subsequent to School Entry)		
Year	Activity	Professional
Entry to Prep. School	<input type="checkbox"/> Medical Questionnaire	<input type="checkbox"/> School Nurse
Various	'Flu immunisation	Local NHS school Immunisation Team
Entry to Senior School	<input type="checkbox"/> Health & Wellbeing Assessment	<input type="checkbox"/> School Nurse
Upper 3	<input type="checkbox"/> Health & Wellbeing Assessment	<input type="checkbox"/> School Nurse
Lower 4	<input type="checkbox"/> HPV Immunisation	<input type="checkbox"/> Local Authority Immunisation Team
Upper 4	<input type="checkbox"/> Immunisation: Diphtheria, tetanus, polio, Meningitis, MMR Catch-up	<input type="checkbox"/> Local NHS Immunisation Team

## **Counselling/Support**

Mental health and family problems are extremely common in school children, especially in adolescents. Girls are encouraged to talk about problems with their Form Tutor, Head of House or the School Nurse. The school also retains the services of a counsellor, who is available via referral from pastoral Deputy Head Mistress or the School Nurse.

## **Administration of Medicines**

No child under 16 should be given medicines without their parent's written consent. Medication should only be given by the school nurse, or a named first aider.

- the child's name and prescribed dose;
- expiry date and written instructions provided by the prescriber on the label or container
- written instructions and information provided by the parent/guardian, on the Request for Administration of Prescribed Medicines in School (RAPMS) form.

If in doubt about administering medicines, staff should not administer the medicines but check with the parents or School Nurse before taking any further action.

Staff should complete and sign the medical log on each girl's RAPMS form as well as on SIMS in the Medical Events section. The following should be included:

- Child's name
- Medication given
- Dose given
- Date and time given

*In case of anaphylaxis, please see individual healthcare plan on HUB.*

For children in the EYFS phase, parents must be informed on the day that medication has been given, and if any further action has been taken. Staff administering medication to EYFS phase children will record on the RAPMS form the dose given and time of administration and will sign to confirm this. Medication and the RAPMS form for EYFS phase children may be kept in the nursery office or Reception classroom out of the children's reach if this is more appropriate than the medical room.

**Please refer to the Administration of Medicine Protocol for detailed guidance.**

## **Teachers and Other Staff administering medicine**

The School Nurse should act in accordance with the Nursing and Midwifery Council (NMC) Code of Professional Conduct ('The Code', NMC March 2015) and Standards for medicines management (NMC April 2010) In administering any medication, or assisting or overseeing any self administration of medication, the Nurse will exercise their professional judgement and apply their knowledge and skill in the given situation.

## Prescribed Medicines

- Pupils should only take medication to school when essential; that is where it would be detrimental to a child's health if the medicine were it not administered during the school day.
- Schools should only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber
- Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. Medicines should be stored in a locked cupboard or drug fridge in the medical room.
- The school cannot administer the first 2 doses in case of an adverse reaction
  
- Prescribed medicines are administered at the discretion of the School Nurse or First Aider involved.

## Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. The Misuse of Drugs Regulations 2001 allows 'any person' to administer the drugs listed in the regulations. If a pupil is prescribed a controlled substance, staff administering the medication should do so in accordance with the prescriber's instructions.

A record of any such medications should be recorded and kept for safety and audit purposes. Controlled drugs will be kept in a locked non-portable container and only named staff should have access. The administration of Controlled Drugs to a pupil will only be allowed once the School Nurse has discussed the issue with the parents/guardians, and has drawn up a written protocol for the individual pupil.

## Non-prescription medicines

- All non-prescription medicines should only be given by the school Nurse.
- Written or verbal permission is required from parents before non-prescribed medicine can be administered to a student. This will then be logged onto SIMS, under medical events, and CPOMS.
- **A child under 16 should never be given aspirin, unless prescribed by a specialist medical practitioner.**

Obtaining written/verbal permission from the pupil's parent/guardian allowing the School to administer the medication does not relieve the School of possible negligence in the unfortunate event of a child's death or injury. Any liability incurred by staff for injury arising from non-prescription medicine will be covered by the Trust's insurance.

## Emergency Medicines

Pupils should not carry medicines whilst at school. However, **Pupils in Upper 3 and above will be encouraged to carry and be responsible for their own emergency medicines** when staff, in conjunction with parents, judge that they are sufficiently capable and competent to do so. It may be appropriate for some Prep Pupils to carry their own emergency medication on their person. Before being allowed to do so, it should be discussed with the girl, parents, the school nurse and a member of the Prep SLT.

In the Senior School and Prep. School (usually Year 3 and above), asthmatic pupils carry their own inhalers. Any pupil with active asthma will supply the school with a spare inhaler and this is stored in a container labelled with the pupil's name, year group and form name in the medical room. The pupil's name must also

be on the inhaler itself. Pupils with an asthma inhaler will have a pupil health care plan written by the school nurse.

Pupils with adrenalin auto-injectors (e.g. Epipens) may carry one around with them, and must have at least one stored in a container labelled with the pupil's name and year and form name on a shelf in the medical room. The pupil's name must also be on the injector itself.

Diabetic pupils requiring emergency insulin or sugary foods and drinks, must keep an emergency supply with them, but must also ensure that there is an emergency supply in the medical room, again in a container labelled with the pupil's name and year and form name on a shelf in the medical room. The pupil's name must also be on the medicine itself. Where insulin is stored in the fridge, this must also be in a named container.

The decision about a pupil being allowed to carry their own emergency medicine should take in to account the safety of other pupils, and medical advice from other professionals. The School Nurse will write an individual Pupil Health Care Plan for any such pupil and inform staff.

Generally, pupils should not carry medicines, or have them in their possession, (other than emergency medicines such as adrenaline auto-injectors and inhalers) whilst they are at school. However, schools can decide to allow 6<sup>th</sup> form students to bring a small amount of their own over-the-counter medicines into school for personal use which they keep securely on their person or in their lockers. They must provide guidance to pupils on safe storage and use of the medicines they bring into school, and the maximum quantities that are allowed. Parents should also be asked to advise school [**named person**] if their daughter is carrying their own over-the-counter medicine

### **Refusing medicines**

If a child refuses to take medicine, or spits it out 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.

Staff medication

### **Educational Visits**

A list of girls participating in any trip must be given to the School Nurse at least one week before departure for a day trip, and much earlier for a residential trip. The School Nurse will supply background medical information including any health-care plan for girls with particular medical needs such as diabetes or adrenalin auto-injectors. **Girls should be reminded and checked** before they depart that they have their necessary medication and equipment or they will not be allowed to go on the trip. Prep. School pupils will have their medication carried by a member of staff except for asthma pumps which older girls may be able to carry. For pupils in the Prep School, an assessment should be made of their ability to carry and use an inhaler. The group leader should take the **medical information and contact details** for the girls on the trip and ensure that any member of staff taking sole responsibility for a small group during the trip has the appropriate information with them at all times. If necessary a doctor's letter will be need to confirm that a girl is fit to go on the trip. Senior girls may carry their own asthma pumps, diabetics will carry their own emergency supplies, and those with allergies their Epipens, but other prescribed and non-prescription medications will usually be carried by staff members. Staff will also carry a back-up supply of emergency

medication for those with diabetes and allergies requiring an EpiPen. All medicines must be accompanied by a written Pupil Health Care Plan, and signed by the parents and School Nurse.

### **Staff medication**

**Staff** should keep their own personal medication in a secure container with their name on it. The container should be kept in a secure bag. In particular EYFS school trips

**Educational visits involving EYFS children will require the attendance of a paediatric-certified First Aider.**

### **Sporting Activities**

Some pupils may need to take precautionary measures before or during exercise and may need immediate access to their medicines, such as asthma inhalers. See the Chronic-Illness Protocol.

### **Record Keeping**

It is the parent's responsibility to inform the school about the medicines that their child needs to take, and provide details of any changes to the prescription or the support required. Staff should check any details provided are consistent with the instructions on the container. If the prescription is unclear, the medication should not be administered. Staff have a duty to keep a written record of all medications administered to girls during a trip, detailing the

- Girl's name
- Medication given
- Dose given
- Date and time given
- Possible reactions/side effects
- Name of staff member who administered the medication

This should also be logged onto CPOMS when access to the system is available. In addition a log can be made in the pupils school diaries/planners.

### **Staff duty of care**

Anyone caring for children has 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 adrenaline (1mg in 1ml), chlorpheniramine, and hydrocortisone are 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.

### **Storing Medicines**

Staff should only store, supervise and administer medicine that has been prescribed for an individual child. Medicines should be stored strictly in accordance with product instructions, paying particular note to

temperature, and in the original container in which dispensed. Staff should ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration. Where a child needs two or more prescribed medicines, each should be in a separate container, and a RAMP form completed for each medication to be given. Medicines should not be transferred from their original containers

Pupils should know where their medicines are stored. All emergency medicines, such as asthma inhalers, diabetic medication and adrenaline pens should be readily available and should not be locked away. Some pupils may carry their own emergency medicines, see the Emergency Medicines section above.

Some medicines must be stored in a refrigerator because they may break down or 'go-off'. The patient information leaflet supplied with the medicine will state whether the medicine needs to be stored in a refrigerator. Local pharmacists can also give advice.

There should be restricted access to a refrigerator holding medicines. Medicines can be kept in a refrigerator containing food, but should be in an airtight container and clearly labelled. A separate refrigerator is not necessary unless there is a constant need to refrigerate medicines that a pupil takes regularly, for example insulin. However, if vaccines are stored, then the refrigerator must be used solely for this purpose.

### **Disposal of Medicines**

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