SUPPORTING PUPILS WITH MEDICAL NEEDS POLICY
Twin Oaks Primary School

Governing Body with Responsibility	Resources
Agreed by Governors on	July 26
Chair's Signature	Gavin Kennedy
Staff Member Responsible for Review	SBM/SENDCo
Date for Review	July 2027

This policy considers DfE “Supporting pupils with Medical conditions” December 2015 and the DofE First Aid in Schools, Early Years and Further Education February 2022 and Benedict’s Law 2026.

Rationale
Twin Oaks Primary School wishes to provide a fully inclusive educational and pastoral system. Some of our pupils may have medical needs, at some point in their school life or have life-long medical conditions. Additional measures are required to ensure these pupils are able to have full access to the curriculum and the impact of their medical difficulties upon their life in school is minimised as far as possible.

Prescription medicines may sometimes need to be given during school time. For many children this will only be over a short period of time but for some children their medical needs may require medication to be administered regularly. In both cases parents, schools and medical professionals must work together to ensure the best health for the individual child and their continued and continuing education.

Teachers and staff are in ‘loco parentis’ and may need to take swift action in an emergency, both in school and offsite. The prime responsibility for a pupil’s health lies with the parent or carer who is responsible for the pupil’s medication and should supply the school with all and any relevant information.

The purpose of this policy is to

- ◊ Ensure that pupils with medical conditions are well supported in school and have full access to education, including school trips and physical education.
- ◊ Ensure that there is clarity around the holding and administering of medication at school
- ◊ Ensure that information about a child’s needs is shared appropriately by health professionals, school staff, parents and pupils
- ◊ To develop staff knowledge and training in all areas necessary for our pupils

Roles and Responsibilities

- The Head Teacher/Governing Body has overall responsibility for the implementation of the Supporting Pupils with Medical Needs Policy.
- The Head Teacher / Governing Body is responsible for handling complaints regarding this policy, as outlined in the school’s Complaints Policy.
- The Head Teacher / Governing Body is responsible for ensuring that members of staff who provide support to pupils with medical conditions are suitably trained and have access to any information needed.
- The Head Teacher / Governing Body is responsible for ensuring that relevant health and social care professionals are consulted to guarantee that the needs of pupils with medical conditions are properly supported.
- The headteacher is responsible for the day-to-day implementation and management of the Supporting Pupils with Medical Needs Policy.
- Twin Oaks has a lead first aider (Rebecca Price) who is responsible for coordinating the management of medicine kept at school.
- Staff, including teachers, support staff and volunteers, are responsible for following this policy and adhering to the procedures.

- Parents/carers are expected to keep the school informed about any changes to their child/children's health.
- Parents/carers are expected to complete a medication administration form (appendix 1) prior to bringing medication into school and discussing the medical condition of their child(ren) with Rebecca Price.
- Parents/carers are responsible for informing the school if the medication is no longer needed or the dosage/frequency changes.
- Parents / Carers need to ensure there is sufficient medication and that the medication is in date.
- Parents / Carers must ensure there is an appropriate medicine spoon, medicine pot or oral medicines syringe provided.
- Parents should collect medicines held by the school at the end of each term and are responsible for ensuring that expired or out of date medicines are returned to a pharmacy for safe disposal.
- The headteacher and Class Teacher are responsible for ensuring that all necessary risk assessments are carried out regarding the administration of medication, including for school trips and external activities.
- In the case of staff absence, the headteacher is responsible for organising another appropriately trained individual to take over the role of administering specific medications.

Definition of the term Medical Condition used in this context

A medical condition is one that is long term with acute episodes, requires ongoing support, and involves the need for medication and/or care whilst at school. The condition will need monitoring and could require immediate intervention in emergency circumstances.

Some children with medical conditions may be disabled. Where this is the case the Governing body must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have an Education, Health and Care Plan (EHCP), which brings together health and social care needs, as well as their special educational provision. For children with SEND, this guidance should be read in conjunction with the SEND code of practice and the school's Local Offer.

Children with medical conditions (e.g. anaphylaxis, epilepsy, diabetes) all have Individual health care plans (IHCP), usually written in conjunction with the Lewisham school nurse and parents.

The school will:

- ✓ Ensure that pupils with medical conditions are identified as they transfer to the school.
- ✓ Arrange for written permission from parents/carers and a member of the Senior Leadership Team for medication to be administered by a member of staff or self-administered by the pupil during school hours.
- ✓ Have separate arrangements in place for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate (e.g. including individual children on risk assessments)

- ✓ Designate individuals to be entrusted with information about a pupil's condition where confidentiality issues are raised by the parent/child
- ✓ Have an identified key worker trained to specifically meet the needs of pupil with an EHCP linked to a medical condition.
- ✓ Be clear about what to do in an emergency, including who to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their Individual Healthcare Plan
- ✓ Make all staff working directly with the pupil, aware of their medical condition.
- ✓ Provide sufficient training for staff to meet the needs of pupils at the school with medical conditions.

We will work with the parents and medical professionals to ensure we have specific protocols in place as soon as a child with an identified medical condition starts school. This may take the form of information sharing, developing specific care plans, organising training, employing new staff or reorganising classroom facilities.

We will also regularly send out medical questionnaires to parents to ensure all our records are up to date.

Training regarding specific conditions will be delivered as required. This is usually within the term of a new pupil beginning school but if necessary before they commence their education at Twin Oaks Primary School.

First aid training will continue to be under the guidance of the Health and Safety Policy. The Lewisham school nurse liaises with the school and is available by email and phone for support. Pupils requiring continuous support for a medical condition will be given an Individual Health Care Plan (IHCP).

Individual Health Care Plans

The main purpose of an IHCP is to identify the level of support that is needed at school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school can provide and receive. These plans will be reviewed annually as a minimum, or more frequently at the request of parents/carers or the school, or as required.

An IHCP will:

- Be clear and concise, giving brief details of the child's condition
- Be written in partnership with parents, child, healthcare professional and key staff.
- Give details of what constitutes an emergency, what action to take and who to contact
- Special requirements e.g. dietary needs, pre-activity precautions
- Be reviewed annually or sooner if there is a change in the condition of the pupil.
- Be easily accessible whilst preserving confidentiality. With parents' consent the care plan and a photo of the child are displayed in the school office. A copy is kept with the medication in both the child's class room and the school office
- Outline educational provision if the student is unable to attend school

- Contain details of the medical condition, its triggers, signs, symptoms and treatments
- Include relevant SEND information
- Provide details of the student's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements, modifications to buildings, furniture or equipment, and environmental issues e.g. crowded corridors, travel time between lessons
- Outline the level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring
- State who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable.

Access to education for children with Medical Needs

Should a pupil be unable to attend school for a period lasting longer than a fortnight, or it seems likely that this will be the case, special arrangements will be made to ensure the best possible education is maintained for the pupil.

The SENCo will carry this out. The SENCo will, when necessary, be an organiser of support and the agent who brings together the parents/carers, class teachers, Home Tuition Service and medical recommendations to ensure a continuation of provision and a smooth transition back into school.

The SENCo is responsible for the following:

- Informing the Home Tuition Service/Education Welfare Officer, if a pupil is, or likely to be, away from school due to medical needs for more than 15 days;
- Liaising with the Home Tuition Service and Class Teacher to enable a Personal Education Plan to be drawn up for the pupil;
- Working with the class teacher to provide the Home Tuition Service with information about the pupil's attainment and ability;
- Ensuring that the class teacher provides suitable lesson notes securing continuity within the context of the National Curriculum at the appropriate Key stage and level for the pupil;
- Ensuring that appropriate resources are loaned;
- Ensuring appropriate arrangements for SATs if the child is in Year 2 or Year 6;
- Arranging for progress meetings and monitoring of progress and the smooth reintegration of the pupil into school;
- Ensure that all arrangements are made to involve the pupil in social activities in school, as far as this is medically possible

In summary the home will be seen as an annex to the school. It is anticipated that, providing the pupil is well enough to work, education will continue as planned, as though the pupil was at school itself.

Expectations

The prime responsibility for a pupil's health lies with the parent who is responsible for the child's medication and the parent/carer must supply the school with all relevant information needed in order for proficient care to be given to the child. The school takes advice and guidance from a range of professionals.

It is expected that

- Parents will inform the school of any medical condition which affects their child and provide evidence where requested
- Parents will supply school with appropriately prescribed medication, where the dosage information and regime are clearly printed by a pharmacy on the container and details included inside the container
- Parents will ensure that medicines to be given in school are in date and clearly labelled
- Parents will co-operate in training their children to self-administer medicine if this is appropriate

Management of Medication

Pupils will not be able to carry any medication with the exception of epipens, inhalers for asthma control, or care plan specified medication after a risk assessment. No pupil is allowed to carry any non-prescription drugs in school; this is to ensure that no pupil unwittingly or otherwise gives another pupil his or her medication.

Medicine brought into school must be given personally to a member of the office staff for the attention of Rebecca Price, including inhalers. Medication is either then kept in the child's classroom or in the office fridge as appropriate.

Managing Medicines During the School Day

Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Prescription medicines must be in date, labelled, in the original container including prescriber's instructions re administration, dosage and storage.

Parents should be encouraged to look at dose frequencies and timing so that if possible, medicines can be taken out of school hours. Parents can ask doctors for timed-release medication for a minimum number of daily doses.

No child should be given prescription or non-prescription medicines by school staff without their parent's written consent.

Any member of staff administering medicines to a child should check:

- Childs name
- Name of the medicine
- Dose and the frequency of administration,

- Expiry date and date of dispensing included on the pharmacy label.
- Written Instructions provided by the prescriber on the label or container.

If in doubt about any procedures staff should not administer the medicines but check with the parents or health professional before taking further action.

Prescription Medication

- A member of staff may administer such a drug to whom it has been prescribed, according to the instructions
- Parents will complete an authorisation form (see appendix 1)
- The school will keep the drug safely locked up with access only by named staff and record keeping for audit and safety
- All prescription and non-prescription drugs should be returned to the parents when no longer required
- Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration
- Parents are responsible for the disposal of any remaining prescription drugs (should be taken to pharmacist)

The school will always endeavour to administer the medication at the stated time as per the signed parental consent to administer medicines form– however there may be occasions when for some reason, the timing may not be adhered to.
If this happens the school office will contact the parents and advise them of the actual timings.

AAI's (Adrenaline Auto-Injector)

AAI's are stored in clearly labelled plastic boxes/bags with the name of the child on the outside and the care plan enclosed. Children are required to have two AAI's in school, one in class and one in the school office. Parents/carers have the responsibility of checking whether the medication is in date, however this will also be checked termly by school staff and when the children change class.
See Allergy & Anaphylaxis Policy which incorporates the requirements under Benedict's Law.

Asthma pumps
Children with asthma should have easy access to their inhaler, which must be clearly marked with their name and guidelines of administration.
No other inhaler other than the blue Ventolin inhaler is to be administered in school unless as part of a Healthcare Plan. Inhalers and spacers (where possible) for younger children should be kept in a clearly marked box in the classroom and out of the reach of children or locked with the medicine as appropriate.

Emergency Medication
Schools are permitted to keep spare auto-injectors and Salbutamol inhaler for emergency use.
The school's emergency medications are stored in the school office.
Asthma Pumps -
Adrenaline Auto-Injectors -
General school emergency medication includes spare adrenaline auto-injectors (AAI) 150mcg and 300mcg and a Salbutamol Inhaler(s).

Consent
A separate written consent will be sought for the use of the in spare AAI and Salbutamol inhaler from parents/carers.
The school also has a spare compatible spacer(s) for use with pupils who already use a spacer.

The Medicines and Healthcare Products Regulatory Agency has clarified in June 2023 that the legal exemption under Regulation 238 of the Human Medicines Regulations 2012 permits a school's spare adrenaline auto-injector(s) to be used for any pupil or other person not known by the school to be at risk of anaphylaxis in an emergency. Written permission is not required. However, the MHRA highlighted that this was for exceptional circumstances only where the reaction could not have been foreseen.

Ritalin and Related Drugs
Ritalin is a controlled drug. It needs to be kept in a more secure environment than suggested above. Generally, children are prescribed slow release Ritalin and do not need to take at school.
However, if this is not the case the drug will be locked in the school office. The adult taking it out of the locked medical cabinet will need to do so with an observer who will check the number of tablets going out and back in again and ensure that the child takes the tablet.

Non-prescription medication
Twin Oaks Primary school will assess on an individual basis whether they will accept the responsibility of administering non – prescription drugs (over the counter medications).

Medicines must be provided in the original container (as purchased) and include the manufacturer's instructions for administration. We cannot accept medicines that have been removed from their original container nor make changes to dosage on parental instruction.

All medicines will only be given with the consent of the parent. A consent form must be signed by a parent before medicine is administered (see appendix 1).

Creams and Lotions

a) Non-prescribed creams and lotions may be applied at the discretion of the Head teacher in line with this policy but only with written consent from parents and carers. See intimate care policy.

b) Parents and carers are responsible for sending in the cream, labelled for the individual pupil.

c) Sun cream needs to be supplied by parents and carers. We ask parents and carers to apply sun block in the morning before coming to school. Children may bring in their own creams, but parents and carers must ensure it is in date and of at least SPF 25 or above. It should be labelled clearly and is the child's responsibility. Staff will supervise pupils applying sun cream.

Eye Drops

Twin Oaks does not administer eye drops either prescribed or over the counter medications.

Alternative Medications

Alternative medication, including homeopathic medication and herbal remedies, will not be administered unless prescribed or agreed by a GP/consultant.

Simple Analgesics (Pain Relief)

These will only be given if there is an on-going medical condition and it has been prescribed by a GP/consultant.

Recording

When a parent requests administration of medication, the form in appendix 1 must be completed. The members of staff willing to administer the medication to a pupil should be recorded on the appropriate form (see appendix 2).

Medication (other than epipens and asthma inhalers) are stored in the first aid room and generally dispensed by office staff. When a child takes medication the dose and time are recorded. Younger children with spacers for their inhalers may need supervision by staff in order to ensure they are used appropriately.

Refusing Medicines

If a child refuses to take medicine, staff should not force them to do so, but should note this in the records. Parents should be informed immediately. If a refusal to take medicines results in an emergency, the school's emergency procedures should be followed.

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. They should also collect medicines at the end of the agreed administration time period.

Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained by parents on prescription from the child's GP or paediatrician.

Hygiene and Infection Control
All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

Managing Medicines on School Trips
When arranging a school trip, staff carry out a risk assessment that includes children with medical needs. Where it is necessary to take medication, this is noted. A copy of the care plan is taken alongside the medication. Staff supervising should always be aware of any medical needs and relevant emergency procedures.

Children with medical needs will be encouraged to take part in residential visits. The responsible member of staff will carry out a specific and additional risk assessment.
The trip leader will take a school paracetamol-based medicine and an antihistamine with them on trip. Parents / Carers will be asked to authorise the use of these medications prior to the journey. If required to use any school medications on the school journey, the parents / carers will be contacted as soon as is possible.
The risk assessment will identify any children with medical conditions and the trip leader will ensure that all their medications are available / in date / sufficient amounts are available.
All staff supervising on residential visits must ensure they have a detailed understanding of the medical or healthcare need of all pupils in their care. This includes all prescribed mediation and emergency medication.

Where children without care plans have been prescribed medication parents should include these details in the form provided for school journeys.
Medication should be in the original packaging.

PE / Sports
Any restriction to PE / sports activities must be noted in the care plan. Flexibility will be planned to allow pupils to benefit in ways appropriate to them (this constitutes differentiation of the curriculum).

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers. Staff supervising sporting activities should consider whether risk assessments are necessary for some children, be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

Extended provision

Generally, any medicine that needs to be administered will be done so during school hours. If it really absolutely needs to be administered either in Breakfast club or After School club then this will need to be discussed in advance and the medicine taken from the school office with the paperwork and given to the first aid trained staff member.

Children who have an AAI or an inhaler will need to be given advance warning of attendance (forms must be completed by parent and discussed with staff before attendance can be approved for any child). Allergy details and a photo passed onto the staff and a discussion with the parents as to whether food will be provided or they will bring in their own pack lunch. See ASC/BC Risk Assessment.

Emergency Procedures

In the case of an emergency, it is vital that all staff act quickly and call for medical assistance from the emergency services as soon as possible.
The child's parents should be contacted.
Where a decision has been made to take a child to hospital, then the parents must be contacted.
Medical information contained on the child's record must be taken to the hospital
The child must be accompanied by a member of staff, who remains with the child until their parents arrive.

Self-Management

It is good practice to support and encourage children, who are able, to take responsibility to manage their own medicines from a relatively early age and schools should encourage this. The age at which children are ready to take care of, and be responsible for, their own medicines, varies. As children grow and develop, they should be encouraged to participate in decisions about their medicines and to take responsibility.

Older children with a long-term illness should, whenever possible, assume complete responsibility under the supervision of their parent. Children develop at different rates and so the ability to take responsibility for their own medicines varies. This should be taken into consideration when deciding about transferring responsibility to a child or young person. There is no set age when this transition should be made. There may be circumstances where it is not appropriate for a child of any age to self-manage. Health professionals need to assess, with parents and children, the appropriate time to make this transition.

If children can take their medicines themselves, staff may only need to supervise. The medical plan should say whether children may carry, and administer (where appropriate), their own medicines, bearing in mind the safety of other children and medical advice from the prescriber in respect of the individual child.
As an inclusive school we strive to ensure that children with medical conditions fully participate in school life.

Adult Medication

It may be necessary from time to time for members of staff, governors, volunteers and other visitors to bring medication, either prescription or over the counter, onto the school premises. This is perfectly normal and allowable.

- However, the individual must ensure the medication is kept beyond the reach of children.
- It is not acceptable to leave medication in a location where a child could gain access to it, for example in a handbag or briefcase or in a desk drawer, unless this is locked.

- Staff should be sensitive when they are taking medication and consider what children may think if they take a pill / capsule or an injection in view of pupils.

Training

Twin Oaks will ensure that staff receive the appropriate training for the administration of basic medication.
All staff will receive training on the school's policy and procedures for managing and administering medication and on how to call emergency services.
Staff undertook whole school first aid training in November 2024.
School staff will receive training for any pupils with individual care plans – where specific training is required, prior to them attending the school or until alternative arrangements have been put in place.
An up-to-date list of staff who are trained and competent to administer medication are posted around the school.

Insurance

The Governing Body / Head Teacher must ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk. Lewisham Council obtains insurance on behalf of the school. Insurance policies should provide liability cover relating to the administration of medication, but individual cover may need to be arranged for any more risky / high level health care procedures.
Advice will be sought from London Borough of Lewisham Insurance Team if required.

Complaints

Should any parent or carer be unhappy with any aspect of their child's care at Twin Oaks Primary School, they must discuss their concerns with the school. This will be with the child's class TA or the office staff in the first instance. If this does not resolve the problem, then it should be taken to a member of the senior leadership team. In the unlikely event of this not resolving the issue, the parent/carer can make a formal complaint using the school complaints procedure.

This policy will be monitored annually and updated when necessary ensuring new legislation is incorporated and be made available to parents on the school website.
We will ask parents for annual updates regarding medical information.

Twin Oaks
Primary School

Appendix 1

Twin Oaks Primary School

Parental Consent to Administer Medicines

Name of pupil	
Date of birth	/ /
Group/class/form	
Medical condition or illness	

Prescribed Medicine

Name/type of medicine *(as described on the container)*	
Expiry date	
Dosage and method	
Timings (we will give the medicine as nearas possible to your stated time)	
Special precautions/other instructions	
Are there any side effects that the school needs to know about?	
Self-administration — Y/N	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Non-Prescribed Medicine (Over-the-Counter OTC Medicine)

Name/type of medicine *(as described on the container)*	
Reason for medicine	
Expiry date	
Dosage and method — not more frequently than stated on the bottle	
Timing(s)	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration — Y/N	
Procedures to take in an emergency	

Non-Prescribed Medicine (Over-the-Counter OTC Medicine)

☐ I confirm my child has taken this over-the-counter medicine before without ill effect.

☐ I confirm that I will inform the school office if I have administered any of the above medication prior to my child attending school.

☐ I confirm this over-the-counter medicine does not interact with the other medicines mychild is taking.

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to pupil	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff

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. 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. It will be my responsibility to collect any medications when they are no longer required or at the end of the term.

Signature(s) _____ Date _____

Appendix 2

Twin Oaks Primary School
Record of Medication Administered to All Children

Date	Childs Name	Time	Name of Medication	Dose Given	Any Reactions	Print Name (person administering)	Signature (person administering)	Comments