

## **Ridgeway Primary School and Nursery**

# Managing Medicines and Dietary Requirements in School Policy

Status: Statutory

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Training'

Approved by: Delegated to HT

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Policy is written in conjunction with Medical Needs, First Aid and Health

and Safety Polices

Revision date	Page no	Significant changes made			
April 23	10	Significant changes made Change caterers to Olive Dining			

The following policy outlines the schools' procedures for children who have a medical need and who may require medicines in school. This policy also gives guidance on the effective recording of children's dietary needs.

#### Procedures for children with an identified medical need

At Ridgeway Primary School and Nursery we are committed to ensuring that all children, regardless of need, are able to access school as fully as possible. Where a child has a medical need that impacts on them at school, or could potentially impact on them, it is important that the school are fully aware of the need, signs, triggers and risks.

The following processes have been designed to ensure that the school has a comprehensive understanding of a child's medical needs, that these needs are recorded centrally and that all relevant staff have a full and thorough understanding of the child's need and any medication that may be required.

This policy should be read in conjunction with the *Medical Needs Policy*.

#### Medical Needs Identified before a Child Starts School

The following procedure should be followed where the school is made aware of a child's medical need before they join the school.

If a child has a medical need before they join the school:

- Parents/carers will complete the School Admission form, and fill in the section about any medical needs.
- For children new to Nursery and Reception, parents will be advised at the new parents meeting and at home visits that a Medical Needs form should be filled out if a medical need has been declared on the School Admission form.
- The school office will check that a Medical Needs form has been received for all children where a need has been identified on the School Admission form.
- For children joining school at any other time, parents/carers will be given a Medical Needs form by the school office if they indicate a medical need on the School Admission form.
- A separate form should be completed for each different medical need.
- The school office will:
  - Input this information into SIMS.
  - Store the hard copy in the 'Medical and Dietary' folder.
  - Make a copy for the class teacher to put in their class folder, known as the 'Jelly Bean' folder'. The 'Jelly Bean' folder contains key information relating to SEND, medical needs and dietary requirements.
  - Notify the SENCO/HST to complete an Individual Healthcare Plan (IHCP).
- The class teacher will:
  - Keep a copy of the forms to put in their 'Jelly Bean' folder.
  - Ensure all staff working in the class have read and understood the Medical Need form.
  - Ensure the "Jelly Bean" folder is kept in the class cupboard and is accessible at all times.

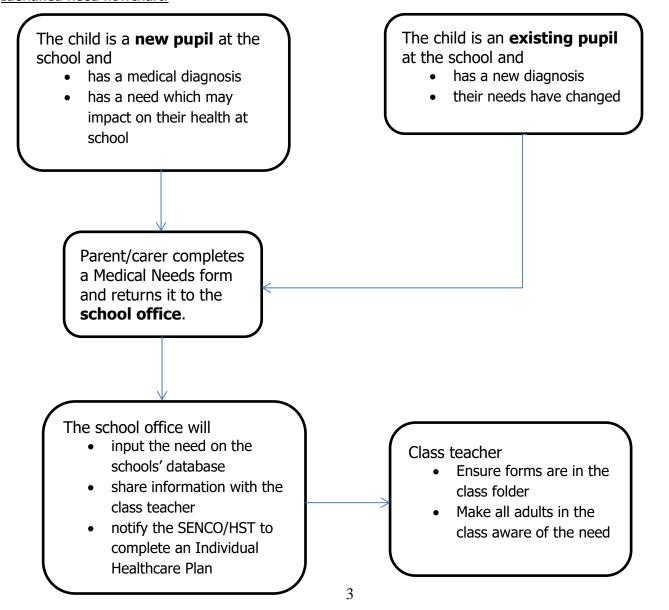
For some children, a medical condition may occur or become known after they have joined the school. In these circumstances the following procedure should be followed:

If a child has a new medical need once they've already joined the school:

- Parents will need to tell the school office and fill in a Medical Needs form. If parents tell the child's teacher first, then the teacher will **always** direct them to the school office.
- The school office will:
  - Input this information into SIMS.
  - Store a hard copy of the form in the 'Medical and Dietary' folder.
  - Make a copy for the class teacher to put in their "Jelly Bean" folder.
  - Notify the SENCO/HST to complete an Individual Healthcare Plan (IHCP).

**All** information regarding medical needs **must** go through the school office in the first instance. This is to ensure that key medical information is logged centrally on the school system and that the correct procedures (outlined above) are adhered to. Any member of staff who is made aware of a child's medical need, either by a parent/carer or the child themselves, MUST direct this information to the school office immediately.

#### Identified need flowchart:



#### **Medicines in School**

For some children, their medical need may require them to have medication which is kept in school. It is vital that the following procedures are followed in order to ensure that medicines are stored safely and effectively.

Medicines must always be accompanied by the necessary parental permissions. Parents/carers are required to fill out and sign the Parental Agreement for School to Administer Medicine form **before** a medicine can be given to a child. The school *may* agree to accept a letter signed by the parent/carer, or email consent, as an interim measure before the Parental Agreement form is returned.

Medicines kept in school must be:

- in-date,
- labelled,
- where prescribed, be provided in the original container as dispensed by a pharmacist with clear instructions for administration, dosage and storage.

A written record of all medicines administered must be kept in school. For each medication kept, a Record of Medicine Administered to an Individual Child form will be kept. Once the medicine no longer needed, the form will be kept on the child's central school file and the medication will be returned to the parent/carer.

If a child refuses to take their medication, the child's parent/carer will be informed and a decision will be made as to the appropriate next steps. The school will not force a child to take medicine that they are able to self-administer, unless the situation is life threatening (e.g. administering an epi-pen).

#### **Long term medications**

If a child's medical need requires **long-term** medication to be administered during the school day:

- The school office will:
  - Ask parents to fill in the Parental Agreement for School to Administer Medicine and sign the Record of Medicine Administered to an Individual Child.
  - Put both forms with the child's medicine in a zipped wallet, clearly labelled with the child's name and keep it in the office cupboard.
  - Notify the child's class teacher of the medicine and where it is kept. Give the class teacher a copy of the Parental Agreement for School to Administer Medicine form for their class folder.
  - o Update the central 'Medication' spreadsheet with the expiry date of the medicine.
  - Administer this medication as required and complete the Record of Medicine administered to an Individual Child on each occasion.
  - Notify the parent/carer if the medicine is running out or is due to expire a month in advance of expiration.
    - If the medicine is no longer required:
  - Return the medicine to the parent/carer and update the date/remaining quantity updated on the Record of Medicine administered to an Individual Child. (Medicines are not permitted to be disposed of in school).
  - File the completed forms in the child's Pupil Record (kept in SENCO office).

A 'Medical and Dietary' folder will be kept in the school office cupboard.

The folder will be organised by class.

- In each class's section, the hard copies of all medical and dietary forms will be stored as soon as they are updated.
- Previous versions of forms should be filed in the Pupil Record (kept in SENCO office.)
- This folder can be accessed by any members of staff who work with children across the school (e.g. cooking club, Forest School.)

Every class has a 'Jellybean' folder in their cupboard, accessible to any members of staff who work in that class.

- There is a section for Medical forms.
- There is a section for Dietary forms.
- The teacher is responsible for:
  - Updating the folder as soon as they receive any new forms from the school office.
  - o Shredding any previous forms which are no longer needed.
  - Ensuring ALL staff working in the class, including Job-Shares and TAs know that it has been updated so that they can read it.

The school office will check the central 'Medication' spreadsheet monthly to ensure medicines are in date. Where a medicine is due to expire in the next month, parents will receive a notification from the school office. **It is the parent's responsibility to ensure that medicines are in school and in date.** 

#### **Short Term Medications**

If a child has **short-term medication** to be administered during the school day:

- Parents will be asked to speak to a member of the Headship Team who will make a decision about whether we will administer the medication in school.
- For <u>prescribed</u> medicines, the medicine MUST be in the original container, in date and labelled with the child's name and dosage requirements.
- If administration of the medicine is agreed, then a member of the office/Headship Team will:
  - Ask parents to fill in the Parental Agreement for School to Administer Medicine and sign the Record of Medicine administered to an Individual Child.
  - Put both forms with the child's medicine in a zipped wallet, clearly labelled with the child's name and keep it in a locked cabinet in the Deputy Head/Assistant Head's office\*. (If the medicine needs to be stored in the fridge, it will be stored in the school office fridge.)
  - Administer this medication as required and complete the Record of Medicine administered to an Individual Child form.
  - Return the medicine to the parent/carer (once the course of medication is complete) and update the date/remaining quantity updated on the Record of Medicine administered to an Individual Child form. (Medicines must not be disposed of in school.)
  - o File the completed forms in the child's Pupil Record (kept in SENCO office.)

If a child leaves the school and medication is left on the school premises, it should be returned to the pharmacy for safe disposal.

<sup>\*</sup> At such time when the office has sufficient capacity, short term medications will then be stored in the office and administered by a member of office staff.

#### Medications in school flowchart:

The child has a **long term medication** that needs to be kept in school / administered at school

Parent completes and signs the following forms:

- Parental Agreement for School to Administer Medicine
- Record of Medicine Administered to an Individual Child

Medicine MUST be in the original container, in date and labelled with the child's name and dosage requirements.

Medication and forms are kept in the school office, in a zipped wallet clearly marked with the child's name. The medicine is logged on the central Medication Spreadsheet, including expiry date of medicine.

School office notify the class teacher and give them a copy of the Parental Agreement for their class file.

'Record of Medicine Administered to an Individual Child' is completed whenever the medicine is administered (any supervising adult).

School office send a reminder email sent 1 month prior to the expiry of the medication. If the medicine is no longer required, the remaining medicine is returned to the parent.

The child has a **short term medication** that needs to be administered at school

Parent speaks to a member of the HST who will authorise/not authorise the medication to be administered in school.

**If authorised** parent completes and signs the following forms:

- Parental Agreement for School to Administer Medicine
- Record of Medicine Administered to an Individual Child

Medicine MUST be in the original container, in date and labelled with the child's name and dosage requirements.

HST/SENCO notify CT that the child has medicine in school and when the child needs to take the medicine.

Medicine is stored in the DH office in a locked cabinet. The 'Record of Medicine Administered to an Individual Child' is completed whenever the medicine is administered by a member of the HST or SENCO.

When the medicine is no longer required, the remaining medicine is returned to the parent by HST.

Completed forms are filed in the child's Pupil Record by HST.

#### Specific Medical Needs including Epipen, Diabetes, Asthma

For specific medical needs a specialist procedure is required. The procedures below outline the steps to be taken where a child requires an Epipen, has diabetes or Asthma, as these conditions most regularly affect children in school. For all other serious conditions the same procedures should be followed, in conjunction with the Medical Needs Policy.

#### **Epipens**

#### If a child has an allergy that requires an Epipen:

- A Medical Needs form should be completed.
- The SENCO/HST will:
  - Complete an Individual Healthcare Plan (IHCP) alongside healthcare professionals and parents.
- The school office will:
  - Input this information into SIMS.
  - Input this information into the 'Medication' spreadsheet (including the expiry date of medication.)
  - Store a hard copy of the Medical Needs form and Individual Healthcare Plan (IHCP) form in the 'Medical and Dietary' folder.
  - o Keep the Epipen with a copy of the IHCP in a sealed, named box in the office cupboard.
  - o Make a copy of the forms for the class teacher to put in their "Jelly Bean" folder.
  - Update the 'Epipen Register' and
    - Replace the copy in the staff room.
    - Replace the copy on the inside of the office cupboard door.
- The 'Epipen Register' is an A4 page with photos of all children who have an IHCP for an allergy that may require an epipen. It will be displayed on the inside of the office medical cupboard door.
- The Epipen Register will be emailed to all staff on a termly basis, or when any information on the Register changes.
- Other information *may* be provided by the child's healthcare professional. This will be kept in the school office 'Medical and Dietary' folder and a copy given to the class teacher to put in their "Jelly Bean" folder.

#### **Diabetes**

#### If a child has **diabetes**:

- A Medical Needs form should be completed.
- The SENCO/HST will:
  - Contact the diabetes nurse and arrange training
  - Complete an Individual Healthcare Plan (IHCP) alongside healthcare professionals and parents.
- The school office will:
  - o Input this information into SIMS.
  - Input this information into the 'Medication' spreadsheet (including the expiry date of medication.)
  - Store a hard copy of the Medical Needs form and Individual Healthcare Plan (IHCP) form in the 'Medical and Dietary' folder.

- With SENCO/HST support, write a Diabetes Procedure for administering the medication each day.
- Make a copy of both forms for the class teacher to put in their "Jelly Bean" folder.
- Write an Emergency Protocol and:
  - Make 2 copies for the class teacher to be put on the inside of their cupboard and in the "Jelly Bean" folder.
  - Make a copy for the school office to put on the inside of the cupboard door where medicines are stored.
  - Update the 'Emergency Protocol list'. This list will be kept alongside the Epipen Register on the inside of the office medical cupboard door. It will contain a photo of the child, their medical condition and a brief overview of key steps in the emergency protocol.
- Store both the procedure and emergency protocols with the medication in a sealed box in the office cupboard. Ensure CT knows where the medicine is kept.
- Copies should be made for the 'Medical and Dietary' folder

#### **Asthma**

#### If a child has asthma that requires an inhaler:

- Parents will fill in a Medical Needs form and an Asthma Healthcare Plan (AHCP). Unlike other
  Individual Health Care Plans, the AHCP can be completed by the school office. Some parents may
  have Asthma plans that they have received from their doctor or asthma nurse. They must still
  complete a school form (although we can keep a copy of any additional information on our file).
- Parents will provide the school office with an asthma pump and spacer (if required).
- The school office will:
  - Input this information into SIMS.
  - Input this information into the 'Medication' spreadsheet (including the expiry date of medication.)
  - Make a copy of the Asthma Healthcare Plan (AHCP) for the class teacher to put in their
     "Jelly Bean" folder.
  - o Put the asthma pump in a zipped wallet with the Asthma Healthcare Plan (AHCP) and the Record of Medicines Administered to an Individual Child form for the class teacher.
  - Store a hard copy of the Medical Needs Form and AIHP form in the 'Medical and Dietary' folder.
  - Contact the parents to let them know when the medication is due to be renewed.
- The class teacher will:
  - Ensure that the child and all staff working with the child know where the inhaler is kept.
     This should be in the class 'medical box' which should be stored in an easily accessible place in the classroom cupboard.
  - Enable the child to access their inhaler independently at all times. Children can take their inhaler unsupervised if they are able to self-administer, but an adult must always record the dosage.
  - Ensure that an adult always fills in the Record of Medicines Administered to an Individual Child whenever the child administers the pump.

#### **Individual Healthcare Plans**

#### **Individual Healthcare Plans (IHCPs)**

Individual Healthcare Plans should be completed where a child has a medical need that *impacts on their health at school*. Examples of medical needs requiring an IHCP include: Diabetes, Epilepsy, and Allergic reactions. An IHCP is not needed for temporary medications.

Where an Individual Healthcare Plan is required:

- The SENCO/HST will:
  - Liaise with parents and the school nurse (if necessary) to write an Individual Healthcare
     Plan (IHCP) and ensure it is signed by parents/carers.
  - Make a copy for parents/carers.
  - Make a copy for the school office (to be kept in the 'Medical and Dietary' folder), who will also update SIMS.
  - Make a copy for the class teacher to put in their "Jelly Bean" folder.
  - Write an Emergency Protocol (if required) and:
    - Make 2 copies for the class teacher to be put on the inside of their cupboard and in the 'Jelly Bean' folder.
    - Make a copy for the school office to put on the inside of the cupboard door where medicines are stored.
  - For LIFE THREATENING medical needs a copy of the IHCP/Emergency Protocol will be displayed on the staffroom display board.
  - The SENCO/HST is responsible for ensuring that Emergency Protocols are reviewed annually or sooner if there is a change to the medical need.

#### **Asthma Healthcare Plans (AHCP)**

Asthma Healthcare Plans should be completed for all children who have an inhaler in school. The AHCP should be kept with the child's inhaler in the classroom as it contains all the necessary information regarding dosage, triggers, actions and emergency procedures.

Asthma Healthcare Plans can be filled out by parents/carers with the school office. They do not need to be completed alongside SENCO/HST.

#### **Dietary Requirements**

Where a child had a dietary need or requirement, parents and carers should notify the school of the requirement.

For all dietary needs, a Dietary Requirements form should be completed by the parent/carer.

The form states all of their child's dietary requirements, including:

- 1. Allergies requiring Epipens
- 2. Mild allergies/intolerances which means that the child shouldn't have that food
- 3. Religious/cultural requirements, including no pork, vegetarian (no meat/fish), pescatarian (no meat), vegan.

#### If a child has a dietary requirement before they join the school:

- Nursery and Reception parents will be made aware of the Dietary Requirements form in their parent meeting and at home visits.
- The school office will:
  - Input this information into SIMS.
  - Store the hard copy in the 'Medical and Dietary' folder.
  - Make a copy for the class teacher to put in their class folder, known as the 'Jelly Bean' folder'. The 'Jelly Bean' folder contains key information relating to SEND, medical needs and dietary requirements.
- The class teacher will:
  - Check on home visit that the Dietary Requirements form has been completed if required. If a form is completed it should be given to the school office to process, in line with the procedure above.

#### If a child has a new dietary requirement **once they've started school:**

- The school office will:
  - Give the parent a Dietary Requirements form to fill in.
  - Input this information into SIMS.
  - Store the hard copy in the 'Medical and Dietary' folder.
  - Make a copy of the form for the class teacher to put in their 'Jelly Bean' folder.

#### **Olive Dining**

The school catering service is run by Olive Dining. They follow their own procedures for children with dietary requirements and ask parents to inform them directly.

If your child has a food allergy or dietary requirement:

- Parents/carers will need to inform Olive Dining separately about any dietary requirements.
- Olive Dining will liaise individually with parents.
- Olive Dining will create their own emergency protocols if needed.

Parents and carers can contact Olive Dining directly through **Trisha Topping (Catering Manager) on 020 8651 5973** 

## **Annex A: Medical Forms**

## **Individual Healthcare Plan**

Name of school/setting	Ridgeway Primary School
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review Date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (mobile)	
(home)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	Dr
Phone no.	(Secretary)
G.P.	
Name	
Phone no.	
Who is responsible for providing support	
in school	

Ridgeway Primary School  Describe medical needs and give details of child's symptoms, triggers, signs, treatments,		
facilities, equipment or devices, environmental issues etc:		
Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision		
Daily care requirements:		
•		
Specific support for the pupil's educational, social and emotional needs and arrangements for school visits/trips:		
•		
Other information		
Describe what constitutes an <b>emergency</b> , and the action to take if this occurs:		
If		
CALL AN AMBULANCE IF:		
Who is responsible in an emergency (state if different for off-site activities)		
Follow up care:		
•		
Staff training needed/undertaken – who, what, when:		

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Form copied to:

PARENTS: Sign:				
<b>SCHOOL:</b> Sign:				
HEALTHCARE PLAN COMPLETED BY:				
Sign: <b>DATE:</b>				

## **Asthma Healthcare Plan**

Name of school/setting	Ridgeway Primary School
Child's name	
Class	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review Date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (home)	
(mobile)	
(work)	
Name	
Relationship to child	
Phone no. (mobile)	
(work)	
G.P./Asthma nurse	
Name	
Phone no.	
Emergency contact details	
Name	
Relationship to the child	
Daytime telephone no.	

1.	Mν	inha	ler i	in sc	hool
	,				

•	My reliever inhaler is called and its colour is	
•	I need to take puff/s of my inhaler when needed	
•	The expiry date on my inhaler is	
•	My inhaler is kept in the classroom cupboard and I can get it when I need it	
	I need help to take my inhaler: Yes / No	

- I need help to take my inhaler: Yes / No
- I need to use a spacer with my inhaler: Yes / No
- I can tell an adult when I need my inhaler: Yes / No

#### 2. If my asthma gets worse

For wheeze, cough, shortness of breath or sudden tightness in the chest I will need to take my reliever inhaler.

If my asthma gets worse, I should:

- Take \_\_\_\_\_ puff/s of my blue reliever inhaler
- If I take my inhaler, I need an adult to sign my medicine record

### 3. Things that can trigger my asthma

The things that can make my asthma worse are:

- •
- •

I need to take my inhaler before exercise: yes, \_\_\_\_\_ puffs / no (please circle)

#### 4. When I have an asthma attack

- My blue reliever inhaler isn't helping, or
- I can't talk or walk easily, or
- I'm breathing hard and fast, or
- I'm coughing or wheezing a lot

#### When I have an asthma attack, I should

- Sit up don't lie down. Try to be calm.
- Take one puff of my reliever inhaler every 30 to 60 seconds up to a total of 10 puffs.

Other signs:



#### Even if I start to feel better,

- I don't want this to happen again, so I need to see my doctor or asthma nurse today.
- I need you to call my parent/carer to advise them that I need to be collected from school and seen by a medical professional.

#### If I still don't feel better and I've taken ten puffs,

- I need to call 999 straight away.
- If I am waiting longer than 15 minutes for an ambulance I should take another \_\_\_\_ puffs of my reliever inhaler every 30 to 60 seconds (up to 10 puffs)

Parent/Carer signature:	Date:
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# Ridgeway Primary School **Medical Needs Form**

This form should ONLY be completed where the child has a diagnosed medical condition.

Name of child	
Date of birth	
Class	
Diagnosed medical need, condition or illness	
Signs / Symptoms /Triggers	
Potential risks	
Action	
Date for review to be initiated by	
Date for review	
If necessary, a Medicine Administration	Form should also be completed.
Parent/Guardian Name	
Signature(s)	
Date	

## Parental Agreement for School to Administer Medicine

In order for school staff to administer medicine to your child, you will need to complete this form in accordance with our Medical Needs policy. Name of child Date of birth Group/class/form Medical condition or illness **MEDICINE** Name/type of medicine (1) (as described on the container) Expiry date Dosage and method **Timing** Special precautions/other instructions Are there any side effects that the school/setting needs to know about? Self-administration – Yes/No Procedures to take in an emergency Name/type of medicine (2) (as described on the container) Expiry date Dosage and method **Timing** Special precautions/other instructions Are there any side effects that the school/setting needs to know about? Self-administration – Yes No Procedures to take in an emergency NB: Medicines must be in the original container as dispensed by the pharmacy. If the medicine is prescribed, it must also have the child's name on the label. **Parent/Carer Contact Details** Name

Ridgeway Primary School

Daytime telephone no.

Relationship to child

Address

GP

I understand that I must deliver the medicine to the school office

Emergency contact details

Name

Relationship to the child

Daytime telephone no.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the Medical Needs policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped. It is my responsibility to ensure the medicine is in school and in date.

Date

Signature(s)\_\_\_\_\_

# Record of medicine administered to an individual child

Name of child							Clas	S	
Date medicine prov	ided by pa	rent							
Name and strength	of medicin	ie							
Expiry date									
Dose and frequency	of medici	ine							
Quantity recieved									
Date returned									
Quantity returned									
Staff signature Signature of parent				_					
Date									
Гime given									
Dose given									
Name of member of taff									
Staff Signature									
					T				
Date									
Γime given									
Oose given									
Name of member of taff									
Staff Signature									
Date									
Time given									
Oose given									
Name of member of taff									
Staff Signature									

**Dietary Requirements Form** 

Name of child					
Date of birth					
Class					
1.	Diagnosed serious food allergy e.g. nut *	Allergy to:			
	(Life threatening or high risk)				
		YOU MUST COMPLETE A MEDICAL NEEDS FORM AND AGREEMENT TO ADMINISTER MEDICINES. Please obtain these from the school office.			
2.	Diagnosed mild allergy or intolerance e.g. kiwi *	Allergy to:			
	(Where there may be a reaction, but this is not severe)	If the allergy/intolerance requires medication, please contact the school office for a Medical Needs form			
3.	Religious / Cultural requirements e.g. no pork, no beef, vegetarian, pescetarian	Please state:			
rele	vant school adults. *Medical evi Olive Dining forms will be issued	nly and will be shared with your child's class teacher and other idence should be provided.  It separately by Olive Dining. Any medical/dietary needs affecting directly with the catering manager.			
Pare	Parent/Guardian Name				

Signature(s)

Date \_\_\_\_\_