



Management of Pupils with Health Care Needs in Schools Policy

Date: January 2013

Version number: 1

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Review date: January 2016

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NHS SHETLAND DOCUMENT DEVELOPMENT COVERSHEET*

Name of document	Management of Pupils with Health Care Needs in Schools Policy		
Registration Reference Number	NHPOL006	New <input checked="" type="checkbox"/>	Review <input type="checkbox"/>
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Proposed groups to present document to:				
Clinical Governance Committee		ANMAC		
Medicines in Schools Group		SIC Children and Families Group		
Date	Version	Group	Reason	Outcome
17/01/2013	1	Medicines in Schools Group	PI	PRO
06/03/2013	1	ANMAC	PO	PRO
30/07/2013	1	Clinical Governance Committee	For noting and approval	Noted and approved

Examples of reasons for presenting to the group	Examples of outcomes following meeting
<ul style="list-style-type: none"> Professional input required re: content (PI) 	<ul style="list-style-type: none"> Significant changes to content required – refer to Executive Lead for guidance (SC)
<ul style="list-style-type: none"> Professional opinion on content (PO) 	<ul style="list-style-type: none"> To amend content & re-submit to group (AC&R)
<ul style="list-style-type: none"> General comments/suggestions (C/S) 	<ul style="list-style-type: none"> For minor revisions (e.g. format/layout) – no need to re-submit to group (MR)

- For information only (FIO)

- Recommend proceeding to next stage (PRO)

*To be attached to the document under development/review and presented to the group

Please record details of any changes made to the document on the back of this form

DATE	CHANGES MADE TO DOCUMENT

1. Purpose

This document has been prepared by NHS Shetland and Shetland Islands Council to assist schools in meeting the health care needs of pupils. By working in partnership with parents/carers, pupils and health professionals, schools will be able to support pupils who have health care needs in a safe, efficient and secure environment. This includes pupils who require medication during school time. These procedures will be carried out by school staff who have access to clear instructions and appropriate training.

2. Introduction

Most pupils will, at some time, have a medical condition that may affect their participation in school activities. For many this will be short-term e.g. finishing a course of prescribed medication when the General Practitioner regards the pupil to be fit to attend school. Others have medical conditions which, without help, could limit their access to education. Such pupils are regarded as having health care needs. However, school staff may need to take extra care in supervising some activities to ensure that these pupils, and others, are not put at risk. A positive response by the school to a pupil's health care needs not only benefits the pupil directly, but can also positively influence the attitude of the whole class.

This policy outlines the agreements reached between Shetland Islands Council Children's Services and NHS Shetland with regard to a formal system for the administration of medication in schools and support and training for school staff involved with pupils with health care needs. It clarifies local policy including legal liability, the policy and procedures which should be in place at school level. This policy applies equally to nurseries, primary and secondary and specialist additional support needs settings within schools.

Shetland Children's Services will assist disabled children with medication and other health care needs when they are attending school, taking advice from NHS Shetland services about what is required.

3. Definitions

The following terms are used in this document:

- **Medication:** any drug, preparation or substance in any form used for medical or dental treatment e.g. tablets, capsules, liquids, creams, sprays, gases, suppositories.
- **Prescription:** written instruction for the composition and use of medication issued by a doctor, dentist or registered nurse prescriber for the treatment of a single individual.

- **Prescribed medication:** any medication dispensed on NHS prescription.
- **Non-prescribed medication:** any medication obtained without a prescription. These may sometimes be referred to as over the counter medications or household remedies.

4. Roles and Responsibilities in meeting Health Care Needs

4.1 School Staff

There is no legal duty which requires school staff to administer medication; this is a voluntary role although all school staff have a legal duty to care for pupils. This means that they have an obligation to exercise a level of care towards an individual to avoid injury and includes addressing health care needs. Staff who provide support for pupils with medical needs or who volunteer to administer medication need support from the Head Teacher and parents, access to information and training and reassurance about their legal liability. The school must confirm that they agree to administer medication and give a signed copy of the agreement to the pupil's parents (Appendix I)

4.2 School Health Service, NHS Shetland

NHS Shetland (through the school health service provided in schools including school nurse(s) and the Community Children's Nurse (SHS)) is responsible for the medical treatment of pupils in schools, including the administration of medicines and assistance to school staff in discharging this responsibility. The SHS provides advice on health issues to pupils, parents, teachers and others to ensure pupils with medical needs and school staff have effective support in schools.

4.3 Parents

Parents have prime responsibility for their child's health and should provide schools with information about their child's medical condition. Parents and pupils may give details in conjunction with their General Practitioner or Pediatrician. Quality assured information for specific medical conditions can be sourced from specialist web sites e.g. NHS inform www.nhsinform.co.uk The Community Children's Nurse is also a source of specialist information.

N.B. The term "parent(s)" throughout this document will include carers and legal guardians.

4.4 Individual Health Care Plan

An Individual Health Care Plan (IHCP) can help schools to identify the safety measures to support pupils with medical needs and ensure that they and others are not put at risk. An individual health care plan will generally only be drawn up for a pupil with medical needs who cannot attend school normally without help with medication or medical assistance. Please

see Appendix IV - flowchart outlining procedures for creating and maintaining an individual health care plan. (See also Section 7 for more detailed discussion of IHCP).

5.0 Vicarious Liability

5.1 NHS Shetland is legally liable for the negligent acts and omissions of their employees only (the principle of vicarious liability), and have arrangements for meeting this liability. NHS Indemnity applies where:

the negligent health care professional was working under a contract of employment (as opposed to a contract for services) and the negligence occurred in the course of that employment; or

the negligent health care professional, although not working under a contract of employment, was contracted to an NHS body to provide services to persons to whom that NHS body owed a duty of care.

www.nhshealthatwork.co.uk/images/library/files/.../C2.2_NHSIndemnity.rtf

5.2 Shetland Islands Council is legally liable for the negligent acts and omissions of their employees and will have comparable arrangements for meeting this liability in circumstances outlined above.

5.2 If there is an error in administering medicine identified e.g. a child has not received medicine or an appropriate dose of medicine and this action may have a medical impact, the Head Teacher must be informed and the SIC incident reporting policy followed.

6.0 Medication Administration Processes and Procedures

6.1 Storage of medicines

6.1.1 The Head Teacher has prime responsibility for the safe management of medicines kept at school (Control of Substances Hazardous to Health Regulations 1994). School staff are also responsible for making sure that everyone in school is safe.

6.1.2 Schools must not store large volumes of medication and will reach individual agreement with parents about what medication can be kept in school. Please also refer to 6.1.8. The parent should ask a pharmacy for transit containers suitably labelled with the pupil's name, medication name, dose and time of administration.

6.1.3 The SHS can advise on suitable storage of medication.

6.1.4 In cases where the school does store medicines, staff must ensure that each is in a labelled container showing the name of the pupil, the dose of the drug and the frequency/time of administration. Where a pupil needs two or more prescribed medicines, each should be in a separate container. An exception to this is emergency medication which may be kept in the one pack. School staff must never transfer medicines from their original containers into other containers. Some medicines e.g. asthma reliever inhalers (usually blue in colour) must be readily available to pupils and it would be preferable to allow pupils to carry their own inhalers (Appendix II). Other medicines must be kept in a secure place.

6.1.5 If medicines which could be required in an emergency are kept in a locked cabinet, all staff must know where to obtain the keys to this cabinet.

6.1.6 Some medicines require to be refrigerated. These can be kept in a refrigerator containing food but must be kept in an airtight, clearly labelled container. This refrigerator must be in a secure place, preferably locked, which cannot be accessed by pupils.

6.1.7 School staff must not dispose of medicines. Parents should collect any medicines held in the school at the end of each term. Parents are responsible for disposal of any date-expired medicines.

6.1.8 Parents are responsible for ensuring that all medicines held at school are within their “use by” date.

6.2 Hygiene

All staff must be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures. Staff must have access to protective disposable gloves and follow local guidelines when dealing with spillage of blood or other bodily fluids and when disposing of dressings or equipment.

6.3 Medicine administration

6.3.1 No pupil under the age of 16 years should be given medication without his/her parent’s written consent (see Appendix III for consent form).

6.3.2 Any member of staff giving medicine to a pupil should check the following:

- The pupil’s name
- Written instructions provided by his/her parent or doctor
- Prescribed dose
- Expiry date

If in doubt about any of the procedures, the member of staff must check with the pupil’s parents or a health professional before taking further action.

6.3.3 If a pupil refuses medication, school staff should not force them. The school must contact the pupil's parent and in an emergency, the emergency services.

6.3.4 Staff must complete and sign form "Record of Medication Administered in School" (Appendix IV) whenever they give medication to a pupil. Where practical, the dosage and administration should be witnessed by a second adult although it is recognized that frequently, this will be impractical in a school setting.

6.3.5 Pupils must have access to their medicine when required. The school must make special access arrangements for emergency medication which is kept on the school premises. Medicines **must** only be accessible to pupils for whom they are prescribed.

6.3.6 Pupils who carry their own medication. Please see additional information in section 6.1.4

6.4 Emergency Procedures

6.4.1 All staff must know the local procedure for calling the emergency services and also know who is responsible for carrying out emergency procedures.

6.4.2 Generally staff should not take pupils to hospital in their own car. However, in an emergency it may be the best course of action and the member of staff should be accompanied by another adult. N.B. the staff member should not use their private vehicle unless their insurance allows them to do so.

6.4.3 All schools are required to complete a pin form in the case of an accident or emergency. The links to these documents are below.

<http://intranet.shetland.gov.uk/services/safety-risk/documents/Nonemployeeinpart1.doc>

<http://intranet.shetland.gov.uk/services/safety-risk/documents/PinPartTwo.doc>

6.5 Record Keeping

6.5.1 Parents are responsible for supplying information about medicines that their child needs to take at school and for informing the school of any changes to their prescription. The parents should provide written details including:

- Name of medication
- Dose
- Method of administration
- Time and frequency of administration
- Any side effects
- Other treatments

6.5.2 Record Retention

Records must be kept with all Individual Health Care Plans until the date of the pupil's 25th

birthday. In the case of children who have a Health Care Plan, health care records should be kept indefinitely. These plans will be returned to the School Office, Gilbert Bain Hospital by the Head Teacher when the pupil leaves school and stored with the School Health Record for that pupil.

7.0 Individual Health Care Plan

The IHCP is always drawn up by a Health Care Professional.

7.1 Purpose of an Individual Health Care Plan

The purpose on an IHCP is to identify the level of support that is needed at school for a pupil with medical needs who is unable to attend school normally without assistance with medication or support of a medical nature. A written agreement with parents clarifies for staff, parents and pupil, the help that the school can provide and will form part of specific disease management guidelines.

7.2 Identifying which children will not require an IHCP

These will be most children who have a medical need that requires medication to be given in school e.g. to finish a prescribed course of antibiotics. A detailed plan is not required for short term needs for over the counter medications e.g. a painkiller for a headache as long as there is a parental consent system in place for administering the drug. However, there also needs to be a recording system in place for having administered the medicine (Appendix II)

7.3 Children who do require an IHCP

These pupils will have a significant and long term medical condition and meet at least one of the following criteria:

- Have a need for school staff to volunteer to provide some prescribed intervention of a nature not normally associated with school staff
- Have a need for school staff to be alert to recognize potential emergency situations and be able to act appropriately
- Have a need for school staff to be aware of medical implications for certain areas of the curriculum e.g. PE

7.4 Stages of identification of children who will require an IHCP (Appendix VI)

7.4.1. The additional support needs of most children may be identified within the nursery setting and a draft multi- disciplinary IEP or GIRFEC support plan may well be drawn up at this stage. An IHCP should also be considered at this time for children who meet the criteria set out above. This will ensure that when a pupil with significant medical needs transfers to

Primary School, they will already have an IHCP in place and this will be given consideration as part of the transition process.

7.4.2 During Primary 1, the health assessment should include information about the child's on-going medical needs and may identify further children as eligible for an IHCP, agree this with the parents, gain consent and advise the school.

7.4.3 At Primary 7, the IHCP will be reviewed as part of the transition process from primary to secondary. Eligible pupils will therefore have an IHCP on moving into secondary school. It is recommended that the detail of the plan is reviewed in the course of the first year to ensure that the school arrangements are working.

N.B. At any time it may be necessary to draw up an IHCP if a pupil meets the criteria above.

8.0 Information Sharing

8.1 Staff who may need to deal with an emergency will need to know about a pupil's medical needs. The Head Teacher must also make sure that temporary staff know about any medical needs.

8.2 In the event of pupils having special transport needs, escorts should have appropriate training to cope with the requirements of individual pupils. This is the responsibility of the SIC.

8.3 Where a child has an IHCP, the pupil record should be marked with a YELLOW dot.

9.0 Staff Training

9.1 An IHCP may reveal the need for some school staff to have further information about a medical condition or specific training in administering a particular type of medication or in dealing with emergencies.

9.2 The SHS (including the Community Children's Nurse) are happy to respond to requests for training routed through the SIC Training Department.

10. Confidentiality

10.1 The Head Teacher and school staff should treat medical information confidentially. The Head Teacher should agree with the pupil (over 16 years providing they have capacity) or the parent who should have access to records and other information about a pupil. It may be

necessary to refuse assistance with medication where permission to share information is unreasonably withheld.

10.2 If medical information about a pupil was withheld from staff, they would not generally be held responsible if they act incorrectly in giving medical assistance in an emergency.

Confirmation of the school's agreement to administer medication

I agree that (name of child).....

will receive (quantity and name of medicine).....

every day at (time medicine to be administered e.g. lunch-time or afternoon break).....

.....

This pupil will be given/supervised whilst he/she takes their medication by (name(s) of member(s) of staff)

.....

This arrangement will continue until (either end date of course of medicine or until instructed by parents)

.....

If a member of staff who is trained to give this medication is not available for any reason, the medication may not be given to the child and the parent will be informed.

Signed (Head Teacher).....

Date.....

Parental request for pupil to carry their medication

To be completed by parent/guardian

Pupil's name.....**Class**.....

Address.....

.....

Condition or illness.....

.....

Name of Medicine.....

.....

Procedures to be taken in an emergency.....

.....

.....

Name of contact.....**daytime phone no**.....

Relationship to pupil.....

I would like my son/daughter to keep and administer his/her own medication as necessary.

Signed.....**date**.....

Relationship to pupil.....

Appendix III

Parental Request for School to Administer Medication.
The School will not give your child medicine unless this form is completed and signed.

Surname of pupil..... Forename(s).....

Address..... M/F.....

Date of Birth..... Class.....

Condition or illness.....

Name/Type of Medication (as described on the container).....

.....

For how long will your child take this medication

Date dispensed.....

FULL DIRECTIONS FOR USE

Dosage.....

Timing.....

Route e.g. oral, injection etc.....

Side Effects.....

Self Administration.....

Procedures to take in an emergency.....

.....

Emergency contact name.....

Relationship to pupil..... Daytime phone no.....

Address.....

Please read and sign this declaration:

I understand that:

1. I must deliver the medicine personally to

(Member of Staff)

2. If no member of staff who is trained to give medication is available, then the medication will not be given and I will be informed

Signature(s)..... Date.....

Relationship to pupil.....

Record of medication administered in school

[illegible]

Procedure for creating and maintaining an individual health care plan

