



# MANAGING MEDICINES AND MEDICAL CONDITIONS IN LOWER SCHOOL

PRESTON MANOR SCHOOL

An All-Through School

<b>Governors' Committee Responsible:</b> Lower School Curriculum, Welfare Committee	
<b>Statutory Provision:</b> Statutory	
<b>Policy Author:</b> Kevin Atkinson	<b>Review Period:</b> Annual
<b>Date reviewed:</b> January 2026	<b>Next Review:</b> January 2027

## We 'ARE' Preston Manor School

### ***Ambition. Responsibility. Excellence.***

#### **Ambition**

We are ambitious for all of our students. Our ambition is driven through raising aspirations, our broad and balanced curriculum and the opportunities that are provided beyond the classroom. We want Preston Manor students to be active citizens, to be prepared for their future, to be happy, healthy and safe and caring individuals who are responsible learners. Students' ambition and equality of opportunity enable them to achieve excellence. We achieve this through our PSHE, Citizenship, UCAS and careers programme which underpins our curriculum and high quality teaching and learning.

#### **Responsibility**

Students are encouraged to lead in their own learning and commit fully to their studies. All of our students have the responsibility to develop their own leadership skills from joining in Reception to the end of their learning at school. We want our pupils to realise their dreams through a positive contribution to their community and wider society. We all have the responsibility to remove the barriers to each individual's development and create the conditions in which our young people are able to love and enjoy learning inclusively. We achieve this through our student leadership, DIVA, Sporting, Artistic and Cultural opportunities embedding responsibility before rights - *Munus Prae Jure*.

#### **Excellence**

Driving our ambition and developing responsibility ensures that each individual achieves personal excellence at the end of every key stage. Our students leave their learning journey at our school with excellent values, virtue, integrity and high academic and personal outcomes. We are making school memorable by striving for excellence. We 'are' Preston Manor School.

### **Medical Confidentiality**

We value parents as key partners for the care of their children. Parents are not obliged to share medical information about their child with the school; however, in order that pupils can receive the best possible care, parents/guardians should advise the school of any conditions that may require intervention during the school day.

We request that all parents/carers complete a "Medication Contact Form" (see appendix 1) which contains information about medical conditions on the induction morning prior to their child's first day of school or upon diagnosis.

Any medical or related information provided to the school either by parents/guardians or health care professionals must always be treated in the strictest of confidence. Information would only ever be shared with those members of staff whose role may lead to them providing treatment or other Intervention as agreed with parents.

### **Prescribed Medicines**

GP prescribed medicines are only administered when essential; that is where it would be detrimental to a child's health if the medicine were not taken during the school day.

Medicines must be in the original container as dispensed and include instructions for administration and dosage. We encourage parents to administer medicines at home (3 doses a day can be before school, after school and at bedtime).

It is important to note that there is not a duty for Head teachers or staff to administer medication. The

Governing Body wishes to point out to school staff and parents that participation in the administration of medicines in schools is on a voluntary basis. Individual decisions on involvement must be respected. Disciplinary action must not be taken against those who choose not to volunteer.

Any member of staff administering medicine must be trained to administer that medicine and all staff should follow universal precautions to protect themselves, and others, when administering medicines. Parents/guardians are asked to fill in a Medicine Permission form (see appendix 1) which can be found in the Welfare Room. No medication will be administered to a child unless this form has been completed. Written records are kept each time medicines are given on a Medication Administered Form (see appendix 1) which is stored in the medication file. If a child refuses to take the medicine we do not force them to do so, this is also recorded on the medication Administered form.

Medicines are stored in the medicine cabinet in the Welfare Room or the fridge, asthma inhalers and epi-pens are stored in named trays in the main office. The cupboard is to remain locked at all times. When the course is complete, the office must hand the medicine back to the parent. Generic Asthma pumps and Epi-pens, which are kept by the school for emergency purposes, are stored securely in the Welfare Room. The school obtains emergency consent forms from parents to administer generic medication in case of an emergency.

### **Non-prescription Medicines**

*At the time of writing the policy, the school has referred to the advice of the British Medical Association (BMA.org.uk). Previously, school staff were advised not to give non-prescribed, over the counter, medication to pupils. This was because they may not know whether the pupil has taken a previous dose or whether the medication may interact with other medication being taken. This has now been amended to say that staff should only administer over the counter medicines with written permission from parents. Preston Manor Lower School will only administer Calpol, Piriton or another child appropriate antihistamine medication. These medications must be in their original packaging and be in date. Any over the counter medication given to a child will be recorded on the Medication administration sheet. In the case of an emergency, where the child falls ill at school, school staff may administer Calpol or an antihistamine (such as Piriton) with written consent from the parent.*

### **Drawing up a Health Care Plan (HCP)**

The main purpose of the HCP (see Appendix 2) is to identify and clarify the level of support needed. Not all children with medical needs will require an HCP. A short written agreement is often all that is required. On admission, the admin staff who have been involved with the induction will forward any medical needs to the Welfare Officer who assesses whether an HCP is required. The Welfare Officer informs the Assistant Head teacher for Inclusion. The plan is agreed with parents and the plan is reviewed at least annually and more frequently if deemed necessary by the Welfare Officer. Phase leaders will inform themselves of all HCPs in the summer term as they prepare to receive a New Year group in their phase. It is the Welfare Officer's responsibility to ensure that class teachers and phase leaders are informed of any new Health Care Plans. It is the responsibility of class teachers, support staff and phase leaders to refer to the Welfare Officer of any new medical needs highlighted to them to ensure the right and best possible care can be provided for the pupil. A sample HCP form is attached to this policy. The HCP must be communicated to the school nurses department.

### **Procedures for children with allergies**

1. When children are admitted to the school, or when an allergy is diagnosed, parents/carers are required to give information about allergies and medication by completing an HCP. It is good practice for the parents to consult with the Welfare Officer and to provide up-to-date information regarding any allergy and related medication in the best interests of their child. Parents are

required to provide a letter from the hospital or doctor which is also kept in the office. The HCP is kept in the Welfare Room.

2. Epipens are stored in the Welfare Room together with the HCP in an individual box with the child's name on it. Emergency medication is also kept in the pupil's classroom in an orange labelled box, for classroom staff to access easily. This is locked in the classroom.
3. Class teachers and phase leaders are informed about children with allergies in their class at the beginning of the school year (or on admission if during the school year). The Class teachers and phase leaders ensure that teaching assistants are also aware. Admin staff must ensure that supply teachers are aware of the class profile folder when introducing them to the class. PPA staff, including from external sports agencies, should familiarise themselves with this information.
4. Epipens and anti-histamines are stored in clearly marked trays in the Welfare Room. Staff have regular training on how to administer the epi-pen.
5. Teachers ensure that the medicines are taken on any trip out of school.
6. The Welfare Room staff checks epi-pens regularly and inform parents/carers if they are about to become out of date.
7. We aim to be a "nut-free" school and ask our parents to bear that in mind when preparing food for school, for example packed lunches, party treats and cake stalls.
8. In the event of a child having an anaphylactic reaction the school will administer the epipen, ring 999 and then inform parent/carer.

## Educational Visits

All children are encouraged to take part in visits, including School Journey. Medicines such as asthma pumps and epipens are taken on trips. In more serious medical conditions parents are asked if any additional safety measures are needed or parents may be invited to go on the trip and a health care plan (see page 4) will be completed. A copy of the health care plan will be taken in the event of the information being needed in an emergency. Medication and first aid bags are organised by the Welfare Officer before school trips and collected by the first aider accompanying staff on the trip. It is the responsibility of the class teacher to ensure that the Welfare Officer is informed of school trips at least a week in advance to ensure adequate preparation time for medical and first aid bags to be suitably prepared. Risk Assessments are taken on the trip if it is outside office working hours e.g. School journey, evening visits.

The office staff have a copy of the emergency forms for any school journey.

## Staff Training

Training takes place regularly from the school nurse on Asthma, Epilepsy and Anaphylaxis. The school has trained first aiders on site at all times. Our trained first aider's names are displayed on every floor. Teaching Assistants and kitchen staff are informed of any children with specific medical needs at lunchtime.

Staff in the Lower School who are trained in first aid are:

**Office and Welfare:** Sunita Bharj

**Teaching staff:** Dhiba Malik, Chandni Madani, Charulata Parmar, Claire Francis, Jekita Lalji, Jekaterina Sumner, Elaine Patton, Kinga Rogoznska-Wojcik, Kausar Dadd and Lucy Waring

## Record keeping

A record is kept of any administration of prescribed drugs, this is kept in the Welfare Room. It is the responsibility of the duty Welfare Officer to check on a weekly basis that all drugs are up to date on the online system and that all record keeping is correct. To take medication out of the office for a school trip, it must be signed out in the "Medication Sign-out book" which is stored in the school office. This should be signed by the Welfare Officer and the First aider accompanying on the trip. The medicines must be returned and signed in by the first aider and Welfare Officer as soon as the class arrives back at school. The book and the trays will be checked at the end of every day by the Welfare Officer.

## Disposal of medicines

Staff do not dispose of medicines. Parents are responsible for the disposal of medicines and ensuring that the medicine has not expired. The school Admin Assistant checks asthma inhalers and epipens weekly using our online system and informs parents if necessary. Medication will be returned to parents if their child leaves Preston Manor Lower School.

## Emergency procedures

All staff know about the school's emergency procedures. Office staff will contact emergency services and parents. A member of staff will accompany a child taken to hospital in an ambulance, and will stay there until a parent arrives. Health professionals are responsible for any decisions on medical treatment until a parent arrives. Staff never take children to hospital in their own cars.

## Confidentiality

The Head teacher and staff treat medical information confidentially. The child's phase leader and the Welfare Officer agree with the parent who else should have access to records and other information about the child.

### Asthma- medicine and control

Asthma is very common, affecting 1 in 10 children in the UK. The most common symptoms are coughing and wheezing, tight feeling in the chest or getting short of breath.

There are two main types of medicines used to treat asthma, relievers and preventers. Usually a child will only need a reliever during the school day. Children need to have immediate access to their relievers when needed. Pupils need to go to the Welfare Room to take their inhalers. This is to ensure that the school can monitor how many puffs the pupil has taken. Inhalers should be taken out if the child is going on a trip or to the playground for PE.

An ambulance should be called if the symptoms do not improve sufficiently in 5-10 minutes, the child is too breathless to speak, the child is becoming exhausted or the child looks blue.

### Epilepsy medicine and control

An epileptic seizure or fit can happen to anyone at any time. Not all seizures involve loss of consciousness. Symptoms range from twitching or jerking of a limb, pins and needles, confusion or mumbling sounds.

Most children with epilepsy take anti-epileptic medicines to reduce seizures. During a seizure make sure that the child is in a safe position, not to restrict movement and to allow the fit to take its course.

Nothing should be placed in the mouth apart from prescribed medication such as Buccolam. An ambulance should be called if it is the first time, the child is badly injured, they have a problem breathing afterwards, it lasts for more than five minutes or there are repeated seizures.

### **Diabetes medicine and control**

Diabetes is a condition where the level of glucose in the blood rises. The diabetes of the majority of children is controlled by injections of insulin. Children with diabetes need to eat regularly during the day. Indicators of low blood sugar- a hypoglycemic reaction- are: hunger, sweating, drowsiness, pallor, glazed eyes, shaking, and lack of concentration, irritability, headache or mood change. If a child is hypo, fast acting sugar is brought to the child. An ambulance should be called if the child takes longer than 15 minutes to recover or the child becomes unconscious.

### **Anaphylaxis medicine and control**

Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. Early symptoms are a swelling of the face, eyes and possibly hives on the body. Other severe symptoms are swelling of the throat which restricts air supply, or severe asthma. The treatment of a severe allergic reaction is an injection of adrenaline. The treatment of a mild allergic reaction would be to administer an antihistamine based medicine.

The injection should be administered into the muscle of the upper outer thigh. An ambulance should always be called.



**General Healthcare plan Condition**

<b>Name of Pupil:</b>	<b>Date of Birth</b>
<b>Home address:</b>	
<b>Name of Parent/Guardian Contact numbers:</b>	

<b>Surgery Name:</b>
<b>GP Name:</b>
<b>Surgery Address:</b>

<b>Specialist Nurse/Doctor</b>
<b>Name:</b>
<b>Hospital:</b>
<b>Phone No:</b>

I have discussed this care plan with a health representative from the school and am satisfied that it reflects my/my child's health care needs in school.

**Signature of Parent/Guardian:**

**Date:**

**Print Name:**

**Health Care Plan Review Date:**

**DIAGNOSIS:** .....

**Health Care Needs In School**

*(Healthcare needs can be added)*

**Response to Symptoms**

**Emergency Action**

Contact parent regarding medical intervention

**Prescription medication can be left in Welfare for emergency use.  
All medications must have a chemist dispensary label.**

**Health Care Plan Completed By:** Mrs Sunita Bharj

**Designation:** Welfare Officer

**Date:**