



**BEVERLEY SCHOOL
FOR
STUDENTS WITH AUTISM**

**SUPPORTING STUDENTS AT SCHOOL
WITH MEDICAL CONDITIONS POLICY**

**Updated: ...November 2023
Approved by Governors: ...November 2023
To be reviewed: ...November 2025**

SUPPORTING STUDENTS AT SCHOOL WITH MEDICAL CONDITIONS POLICY

POLICY STATEMENT

The aim of this policy is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported while at Beverley School so they can play a full and active role in school life, remain healthy and achieve their academic potential.

For full guidance please refer to:

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

- All staff will know what to do in an emergency.
- Relevant staff will be aware of individual children's medical conditions and the plan that is in place to support them.
- The school understands the importance of medication and care being managed as directed by health care professionals and parents / carers. Only **PRESCRIBED** medication will be administered.
- Staff involved in the administration of medicines and provision of support to students with medical conditions will be suitably trained.

ON ADMISSION TO SCHOOL

All parents / carers will be asked to complete an admissions form advising of any medical conditions for which their child may require support at school.

Parents / carers of children with medical conditions for which their child may require support will be requested to complete an Individual Health Care Plan in conjunction (if relevant) with the child's health care professional.

For the start of the new school year (or within 2 weeks of notification of a medical condition that will require support), the school will ensure the individual health care plan has been completed and in conjunction with health care professionals and staff training agreed.

INDIVIDUAL HEALTH CARE PLANS

Relevant staff will be aware of Individual Health Care Plans.

A central register of individual health care plans will be held by the school. Individual health care plans will be reviewed at least annually and more frequently if required.

A copy of the current individual health care plan will be held by the parent / carer / school and, where relevant, health care professional. The individual health care plan will accompany the child on any out of school activities.

ADMINISTRATION AND STORAGE OF MEDICATION IN SCHOOL

Only medicines which have been prescribed for a child will be administered in school. Parents / carers should request that, wherever possible, medication is prescribed so that it can be taken in the school day.

Should medication be required to be administered at school, parents / carers should complete an ***Administration of Prescribed Medicines in School Consent Form***. Medication cannot be administered without signed consent. The completed form and the medication should be handed by the parent / carer to a member of staff.

Medicines will only be administered if they are provided in its original container complete with a pharmacy label showing the child's name, dosage instructions and any relevant storage instructions. The product must be in date. The exception to this is insulin which must still be in date but will generally be provided to schools inside an insulin pen or pump, rather than in its original container.

The school will ensure all medication is stored safely and that students with medical conditions know how to access them. In the case of emergency medicines, they will have access to them immediately.

Parents / carers are asked to collect all medications / equipment at the end of the school term, and to provide new and in date medication at the start of each new term. They must inform school immediately if their needs change. Parents / carers are responsible for replenishing supplies of medicines and collecting no longer required / out of date medicines from school.

Children, where competent, can administer their own medicine. However, parents / carers will be requested to notify the school when this is the case (and request if this is to be supervised or not). Students may carry their own inhalers with the consent of parents. This should be noted in the medical room. An emergency inhaler and spacer should also be kept in the medical room.

The school will keep an accurate record of all medication they administer or supervise administering, including the dose, time, date and staff involved. Two members of staff should be present when it is being administered. The medical room door should be open with a sign on the door indicating that the room is in use. If a medication is not administered, the parents / carers will be notified. Staff should not 'hide' medication unless there is specific consent form a parent to do so. For example; 'Calpol' should not be hidden in a drink or food to help a child to take it unless directed to do so.

DISPOSAL OF MEDICATION

If parents / carers do not collect out of date / no longer required medicines within 14 days of being requested to do so, the medicine will be returned by the school to a pharmacy for destruction. Controlled medication e.g. ritalin, must be collected by parents. School staff should not be responsible for disposing of it.

OUT OF SCHOOL ACTIVITIES / EXTENDED SCHOOL DAY

The school will meet with parents / carers, pupil and health care professional where relevant prior to any overnight or extended day visit to discuss and make a plan for any extra care requirements that may be needed to support a child with a medical condition to participate. This should be recorded in child's IHP which should accompany them on the activity.

Risk assessments are carried out on all out of school activities taking into account the needs of students with medical needs. School will ensure a trained member of staff is available to accompany a pupil with a medical condition on an offsite visit.

ADMINISTRATION OF PARACETAMOL ON RESIDENTIAL VISITS

Should paracetamol be required whilst students are in the care of the school during an overnight residential visit, this can be administered non-prescribed by school staff.

Consent forms must be completed by parents / carers prior to the visit and a record is to be kept throughout the visit by staff of any paracetamol administered, which will then be available to the parent / carer upon return.



**BEVERLEY SCHOOL PARENTAL REQUEST AND CONSENT FOR SCHOOL TO
ADMINISTER MEDICATION**

School will not give your son / daughter any medication unless you complete and sign this form.

*** All medication must be in original packaging with a dispensing label, and have been prescribed by a doctor ***

Name of child _____

Date of Birth _____

Medication condition(s) or illness (es) _____

Medication details (please complete separate form(s) if your son / daughter needs to take more than one type of medication at school)

- Name/type of medicine _____
(as described on the container)
 - Dosage _____
 - Timing _____
 - Special precautions, method of Administration, etc. _____
 - Are there any side effects that the school/setting needs to know about _____
 - Self administration i.e. should school allow him/her to take the medicine without help/direct supervision?
YES/NO (If YES, please give additional info) _____
 - Procedures to take in an emergency _____
- Contact details:**
- Name:** _____
- Daytime phone number:** _____
- Relationship to child:** _____
- Address:** _____

I accept that this is a service that the school provides on a voluntary basis, under the terms of its medication policy. I understand that the school will contact me if it is not possible or reasonably practical for school to administer medication.

Signature: _____

Date: _____

Name: _____

Relationship to child: _____



INDIVIDUAL HEALTH CARE PLAN

For students with medical conditions at school
(NB. Beverley School Parental Request and Consent for School Administer
Medication form must also be completed)

1. Pupil's information

Name of school _____ Class _____
Name of pupil _____
Date of birth _____ Male Female
Member of staff responsible for home-school communication _____

2. Contact information

Pupil's address _____
Post code _____

Family Contact 1

Family Contact 2

Name _____	Name _____
Phone / Mobile (day) _____	Phone / Mobile (day) _____
Phone / Mobile (evening) _____	Phone / Mobile (evening) _____
Relationship with child _____	Relationship with child _____

GP Name _____ Phone _____
Specialist Contact Name _____ Phone _____

3. Details of pupil's medical conditions

Signs and symptoms of the pupil's condition

Triggers or things that make this pupil's condition/s worse

4. What to do in an emergency

5. Regular medication taken during school hours

Medication 1

Medication 2

Name /

Strength

Name / Strength

Dose and method of administration

Dose and method of administration

When it is taken (time of day)

When it is taken (time of day)

Are there any contra-indications

Are there any contra-indications

(signs when medication should not be given)?

Self-administration: can the pupil administer the medication themselves?

Self-administration: can the pupil administer the medication themselves?

Yes No

Yes No

Yes, with supervision by:

Yes, with supervision by:

Staff member's name

Staff member's name

Spare / back-up supply of medicine to be provided e.g. inhalers/adrenaline pen

Spare / back-up supply of medicine to be provided e.g. inhalers/adrenaline pen

Yes No

Yes No

If Yes, state location – not advised to be held by child

If Yes, state location – not advised to be held by child

6. Emergency Medication

(Please complete even if it is the same as regular medication)

Name / type of medication (as described on the container):

Describe what signs or symptoms indicate an emergency for this pupil

Dose and method of administration (how the medication is taken and the amount)

Are there any contra-indications (signs when medication should not be given)?

Are there any side effects that the school needs to know about?

Self-administration: can the pupil administer the emergency medication themselves?

Yes No Yes, with supervision by:

Staff member's name

Spare / back-up supply of medicine to be provided e.g. inhalers / adrenaline pen

Yes No

If Yes, state location

Is there any follow-up care necessary?

Who should be notified if emergency medicines required?

Parents Specialist GP

7. Regular medication taken outside of school hours

(For background information and to inform planning for residential trips)

Name / type of medication (as described on the container):

Are there any side effects that the school needs to know about that could affect school activities?

Parental and pupil agreement

I agree that the medical information contained in this plan may be shared with individuals involved with my / my child's care and education (this includes emergency services. I understand that I must notify the school of any changes in writing.

Signed _____ Date _____
Pupil

Print Name _____

Signed _____ Date _____
Parent (if pupil's age is below 16)

Print Name _____