



St Michael with St Thomas C of E Primary School



Individual Medical Needs

Author: SLT

Owner: CEO/Directors

Date adopted: March 2020

Review: March 2023

We are a rights respecting school. All our policies and procedures are written and reviewed to ensure that children's rights, as detailed in the United Nations Convention on the Rights of the Child, are respected and promoted and this policy ensures:

Article 24: *(health and health services) Every child has the right to the best possible health. Governments must provide good quality health care, clean water, nutritious food, and a clean environment and education on health and well-being so that children can stay healthy. Richer countries must help poorer countries achieve this.*

For more information on the convention and the rights of each child visit: <http://www.unicef.org.uk/>

Contents

Prescription Medications	2
Non-Prescription Medicines	3
Short -Term Medical Needs	3
Process For Administering Medicines.....	3
Self-Management.....	3
Refusing Medicines	3
Educational Visits	4
Sporting Activities	4
Roles and Responsibilities.....	4
School Staff Giving Medicines.....	5
Emergency Procedures	5
Intimate Care Policy	5
Sun Cream	5
Individual Health Care Plans	5
Education of Pupils with Long-Term or Specific Medical Needs	6
Specific Medical Conditions and Equipment	7
Training	7

St Michael with Thomas C.E. Primary School Medical Needs Policy

This policy sets out the processes and procedures for managing individual medical needs, out with that would fall under a first aid scenario. This policy covers medicines, specific medical needs, and intimate care.

Prescription Medications

Managing prescription medicines which need to be taken during the school day

Medicines may only be brought to school when they are essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school 'day'. We will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.

Medicines must always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration. School will never accept medicines that have been taken out of the container as originally dispensed or make changes to dosages on parental instructions. The medicine must container must have the child's name printed on the original label.

Parents must fill in the medicine form from the school office. This will include details of dose and time of administration. The parent will sign the form. This will be kept with the medicine in the staff room in a fridge if needed and returned each day with the medicine, if it is returned home. The member of staff administering the medicine will counter sign the form. A copy of the form will be kept on the child's file when they have finished the medicine.

Managing prescription medicines on trips and outings

When on a trip if the medicine needs to be kept cool the parent must send the medicine into school in an appropriate cool bag. The first aider on the trip will carry the medicine and administer it following the above procedures

Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children, e.g. methylphenidate. Two members of staff (one must be a member of SLT) will administer a controlled drug to a child for whom it has been prescribed. Staff administering medicine will do so in accordance with the prescriber's instructions.

Parents must take any prescribed controlled drugs to the school office who will sign for them. They will then be kept in the school safe where only SLT staff and office staff will have access. A record will be kept for audit and safety purposes.

A controlled drug, as with all medicines, will be returned to the parent when no longer required who will arrange for safe disposal and will sign out the empty packet of medicine.

Non-Prescription Medicines

Staff will never give a non-prescribed medicine to a child unless there is specific prior written permission from the parents. Non-prescribed medicine, such as Calpol will be administered to a child if it allows them to be in school when they would otherwise need to be absent but only if this is supplied by the parent, following the same procedures as for prescription medication. School will not hold a supply of Calpol.

If a child suffers regularly from frequent or acute pain the parents will be encouraged to refer the matter to the child's GP. A child under 16 will never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Short -Term Medical Needs

Many children will need to take medicines during the day at some time during their time in a school. This will usually be for a short period only, perhaps to finish a course of antibiotics or to apply a lotion. To allow children to do this will minimise the time that they need to be absent. However, such medicines should only be taken to school where it would be detrimental to a child's health if it were not administered during the school day. In this instance, the same procedure for administration will be followed as with all other medicines.

Long-Term Medical Needs

Please refer to later in this document for policy relating to Long-Term and Specific Medical Needs.

Process For Administering Medicines

1. No child will be given medicines without their parent's written consent.
2. Any member of staff giving medicines to a child should check:
 - a. the child's name
 - b. prescribed dose
 - c. expiry date
 - d. written instructions provided by the prescriber on the label or container
3. Staff will complete and sign a medicine form each time they give medicine to a child
4. Medicine and form to be returned at the end of each day, or as necessary for each case.

If in doubt about any procedure, staff will not administer the medicines but check with a senior leader who will then check with the parents or a health professional before taking further action. Good records help demonstrate that staff have exercised a duty of care.

Self-Management

It is good practice to support and encourage children, who are able, to take responsibility to manage their own medicines. If children can take their medicines themselves, staff may only need to supervise. This will be discussed and arranged with parents beforehand who will sign a consent form.

Medicines will never be carried by children; they will be kept securely as stated previously. The exception to this rule is inhalers where children can be responsible for their own inhaler. These will be kept in their classrooms, and available to them at all times. Children are told to inform their class teacher should they use their inhaler, in line with the specific medical policy.

Refusing Medicines

If a child refuses to take medicine, staff should not force them to do so, but should

note this in the records and then inform parents by telephone. Parents will be requested to come into school to administer the medication.

Educational Visits

Children with medical needs will be encouraged to participate in safely managed visits. School will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. This will include risk assessments for such children. The taking of medicines alone should not prevent a child participating in any of the school's activities, either on or off site.

Arrangements for taking any necessary medicines will be taken into consideration. Staff supervising visits will be aware of any medical needs, and relevant emergency procedures by the class teacher. A copy of any health care plans will be taken on visits in the event of the information being needed in an emergency.

Sporting Activities

Most children with medical conditions will be encouraged to participate in physical activities and extra-curricular sport. There will be sufficient flexibility for all children to follow in ways appropriate to their own abilities. Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. All adults should be aware of issues of privacy and dignity for children with particular needs. Some children may need to take precautionary measures before or during exercise and will 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.

Roles and Responsibilities

The Directors of The Three Saints Academy Trust hold general responsibility for all of school's policies. If the administration of prescription medicines requires technical or medical knowledge then individual training should be provided to staff from a qualified health professional. Training is specific to the individual child concerned.

The Head Teacher is responsible for putting the employer's policy into practice and for developing detailed procedures. Day to day decisions will fall to the head or to whosoever they delegate this to. The employer must ensure that staff receive proper support and training where necessary. Equally, there is a contractual duty on head teachers to ensure that their staff receive adequate and necessary training. The Headteacher will agree when and how such training takes place. The Headteacher will make sure that all parents and all staff are aware of the policy and procedures for dealing with medical needs. The Headteacher will also make sure that the appropriate systems for information sharing are followed. For a child with medical needs, the Headteacher or SENDCO will agree with the parents exactly what support can be provided. Where parents' expectations appear unreasonable, the Headteacher will seek advice from the school nurse or doctor, the child's GP or other medical advisers and, if appropriate, the employer.

Teachers and other staff with children with medical needs in their class or group will be informed about the nature of the condition, and when and where the children may need extra attention. A notification will be kept both in the classroom and in the staff room for all children requiring specific medical support. All staff are made aware of the likelihood of an emergency arising and what action to take if one occurs. At different times of the day other staff may be responsible for children, such as lunchtime supervisors who will also be provided with training and advice.

School Staff Giving Medicines

Teachers' conditions of employment do not include giving or supervising a pupil taking medicines. School has identified members of staff who will carry out this role and this includes trained First Aiders.

Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child will have appropriate training and guidance. They will be made aware of possible side effects of the medicines and what to do if they occur. The type of training necessary will depend on the individual case.

Emergency Procedures

As part of general risk management processes, school has arrangements in place for dealing with emergency situations. All staff have been briefed on this procedure. Children know to tell a member of staff in the event of an emergency. All staff know how to call the emergency services. All staff know who is responsible for carrying out emergency procedures in the event of need, a list of first aiders is displayed around the school, their normal working location and the location of First Aid Kits. Nearest first aiders are identified on the list of the staff who are First Aiders. A member of staff will always accompany a child taken to hospital by ambulance in the absence of a parent and will stay until the parent arrives. Staff will never take children to hospital in their own car. Individual specific medical care plans include instructions as to how to manage a child in an emergency and identify who has the responsibility in an emergency.

School has a defibrillator, located in the entrance hall, and all staff have received training in its use.

Intimate Care

Toileting/Changing

If staff are required to change a child they should inform another member of staff that they are doing this and it should be done in view of another member of staff. Where possible and always with older children, the child should be given the equipment needed and asked to do this themselves. Parents may have to be called into school if a child is badly soiled, but school would endeavour to reduce these incidents to a minimum. Children who soil on a regular basis should be encouraged to bring in spare clothes and keep them on their coat peg. In the case of unexpected accidents school will hold clean, dry replacement clothes for children in different year groups.

Sun Cream

Sun cream must not be applied by staff in school. During hot weather, parents will be requested to put cream on their children before they come to school. Children should bring hats into school to wear during hot weather. There is an exception for Nursery aged (EYFS) pupils or older pupils who have additional needs and would not be able to safely reapply sun cream as needed throughout the day. In this instance, parents/ carers should apply sun cream before their child comes to school and then provide sun cream for the adults to apply throughout the day. When it is deemed appropriate, all pupils will be encouraged/supported to apply their own sun cream. Warnings will be given to parents to ensure that any creams/lotions applied do not contain any peanut oil.

Individual Health Care Plans

Some children will have an IHP due to toileting issues. This will be reviewed alongside SEND support plans or annually and involve other agencies (health) where necessary. Pupils needing creams applying due to eczema will have this detailed on an IHP, in addition their parents will have completed the appropriate medicine form.

Education of Pupils with Long-Term or Specific Medical Needs

At St Michael with St Thomas Church of England Primary School, we believe all pupils have the right to receive an education commensurate with their individual needs. We aim to offer pupils a curriculum that presents them with interesting and challenging programmes of work and we endeavour to encourage all our pupils to develop co-operation, self-discipline and perseverance.

School will ensure they have sufficient information about the medical condition of any child with long-term medical needs. If a child's medical needs are inadequately supported this may have a significant impact on a child's experiences and the way they function in or out of school. The impact may be direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state. Some medicines may also affect learning leading to poor concentration or difficulties in remembering. The impact could also be indirect; perhaps disrupting access to education through unwanted effects of treatments or through the psychological effects that serious or chronic illness or disability may have on a child and their family.

The Special Educational Needs (SEN) Code of Practice 2001 advises that a medical diagnosis or a disability does not necessarily imply SEN. It is the child's educational needs rather than a medical diagnosis that must be considered.

School must be informed about any particular needs before a child is admitted, or when a child first develops a medical need. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. School will put in place an Individual Health Plan (IHP) School and medical professionals will agree a medical/health care plan and indicate this to all staff through the Specific Medical Needs process, involving the parents and relevant health professionals.

Outcomes

The Headteacher is identified co-ordinator with overall responsibility for Pupils with SMN. The Lead Senior First Aider is made aware of all pupils with SMN. Where appropriate, the SENDCO will place pupils with SMN on the SEND register in order to help them overcome any barriers to learning. Monitoring of Attainment levels for these pupils will be undertaken through careful analysis of the School Tracking Chart. There will be clear guidelines on how to deal in a sensitive way with Pupils with SMN.

Whole School Approach

All staff will be required to deal with these pupils in a positive and sensitive manner. All staff will have an understanding and empathy for the particular issues affecting pupils with SMN. All staff will be aware of the pupils in the school with SMN. Class teachers must inform visitors of any specific medical needs. The Headteacher will have overall responsibility for monitoring of pupils with SMN. Staff Development will be planned according to School Improvement Plan Priorities.

Handling of Medical Information

All medical information will be handled in line with GDPR guidance. Up to date medical cards displaying the pupil's name and photograph, year group, date of birth, medical needs and treatment requirements will be in the folder in the staffroom. Copies of these will be placed in individual classrooms, inside the class stock room doors. Each class teacher will maintain a class list with details of medical needs, which should be shared with the Learning Assistant. This information is updated, at least, termly and given to the new class teacher at the transition staff meeting in the summer term.

Mid-day Supervisors/Learning Assistants not linked to classes

Any adults working with pupils with SMN will be kept updated by the Senior First Aiders.

Specific Medical Conditions and Equipment

Inhalers

Pupils requiring inhalers will keep them in a marked box in the classroom with their 'spacers' if required. The pupils will have free access to these whenever they need them. For younger children, support will be given to administer the inhaler if needed or required and parents will be informed. If a pupil is deemed able to administer their inhaler themselves, parents do not need to be informed. On trips, these inhalers will be taken and kept with the group leader responsible for the pupil's group.

Monitoring asthma medication in school

Asthma inhalers will be checked once per half term to ensure that they are in date and contain sufficient medication for the next half term by a First Aider. If replacement is required, the parents will be informed immediately. Records of these checks are kept on the tracker on the Staff Share First Aid folder.

Epi-Pens

Pupils requiring the use of an epi-pen will keep it in a labelled bag/box in their class stockroom. Free access must be ensured at all times.

Diabetes

Adults involved with supporting any pupils with diabetes will receive regular training and always act in accordance with the medical care plan put in place for the individual.

School will:

- Consult healthcare professionals, pupils and parents to ensure that the needs of the pupils with SMN are effectively supported
- Ensure that an appropriately trained member of staff will always be available to support a child with SMN
- Ensure that specific staff will be trained by healthcare professionals to provide specific medication to a child with SMN. When such medication is given, appropriate records will be kept using the procedures in place in school
- Endeavour to support the pupil with SMN in school and only send for parental support if absolutely necessary

Training

Training for First Aiders will be coordinated by the Lead First Aider, ensuring enough people are trained across the school and to cover trips and residential. Additional training will be organised as and when needed for the adults working with pupils with specific medical needs that require additional support. All staff will have bi-annual training in the identification of allergic reactions and asthma problems and the administration of appropriate medication, including epi-pen and inhaler training.