



Reevy Hill Primary School

Meeting Medical Needs Policy

Introduction

Most children at some time have a medical condition, which could affect their participation in school activities. This may be a short term situation or a long term medical condition which, if not properly managed, could limit their access to education. The Governors and staff of Reeve Hill Primary School wish to ensure that children with medical needs receive care and support in our school. We firmly believe children should not be denied access to a broad and balanced curriculum simply because they are on medication or need medical support, nor should they be denied access to school or other activities.

Roles and Responsibility

The ultimate responsibility for the management of this policy lies with the SLT and Local Governing Body.

The role of the SENCO

The SENCO will manage the policy on a day-to-day basis and ensure all procedures and protocols are maintained. The SENCO will work with the administration team to ensure accurate and up to date records are kept for children with medical needs.

The role of Staff

Staff 'Duty of Care'

Anyone caring for children, including teachers and support staff, have a common law duty of care to act like any reasonably prudent parent/carer. This duty extends to staff leading activities taking place off site, such as visits, outings or field trips and may extend to taking action in an emergency.

Teachers/child care practitioners who have children with medical needs in their care should understand the nature of the condition, and when and where the child may need extra attention. All staff (teaching and non-teaching) should be aware of the likelihood of an emergency arising and be aware of the protocols and procedures for specific children in the school through attending training provided and reading individual health plans devised for individual children.

The role of Parent/Carers

Parents/carers have prime responsibility for their child's health and should provide the school with up to date information about their child's medical conditions, treatment and/or any special care needed. If their child has a more complex medical condition, they should work with the school/other health professionals to develop an individual healthcare plan which will include an agreement on the role of the school in managing any medical needs and potential emergencies.

It is the parent/carers responsibility to make sure that their child is well enough to attend school.

Identification

Upon entry to the school, parent/carers will be asked to complete admission forms requesting medical information. Throughout the year we request that parents keep us up to date with any changes in medical information. We also annually send out data sheets for parents/carers to check and amend to ensure all our records are up to date.

Individual Health Care Plans (IHCP)

The main purpose of an IHCP is to identify the level of support that is needed at the school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school can provide and receive. These plans will be reviewed annually as a minimum, or more frequently at the request of parents/carers or the school, or as required.

An IHCP will include:

- details of the child's condition
- what constitutes an emergency
- what action to take in an emergency
- what not to do in the event of an emergency
- who to contact in an emergency
- the role the staff can play
- special requirements e.g. dietary needs, pre-activity precautions
- any side effects of medicines

A copy will be given to parents/carers, class teachers/childcare practitioners and a copy will be retained in the medical needs file in the office and the child's individual file. The general medical information sheet given to all staff will indicate that the child has an IHCP.

Communicating Needs

A medical file containing class/childcare lists together with an outline of any medical condition and actions to be taken is available to all teaching and non-teaching staff (including Lunchtime Supervisors and Activity Leaders) in the office.

Individual Health Care Plans for children are kept in the classroom/childcare rooms where they are accessible to all staff involved in caring for the child. A copy is also kept in the front of each register so that new or agency staff, following their induction, will be immediately aware of the medical needs of the children in their care. An overview poster of children with IHCPs and a summary of their conditions can be found on staff notice board.

First Aid

We have a number of staff (see medical file for up to date list) who are trained 'first-aiders' and in the event of illness or accident will provide appropriate first aid. In the event of a more serious accident, we will contact the parent/carer as soon as possible. If hospital treatment is required and a parent/carer is not available, a members of staff will take the child to hospital and stay with the child until the parent/carer arrives. If the child is required to travel in an ambulance a member of staff will accompany the child in the ambulance if their parent/carer is unavailable. We will endeavour to inform parent/carers, using accident report slips, if their child has had an accident and received first aid attention. Details of accidents/incidents are recorded in the Accident Book together with any treatment provided.

Physical Activity

We recognise that most children with medical needs can participate in physical activities and extra-curricular sport. Any restrictions in a child's ability to participate in PE or specific physical activities should be recorded in their IHCP. All staff should be aware of issues of privacy and dignity for children with particular needs.

Out of School Visits

When preparing risk assessments staff will consider any reasonable adjustments they might make to enable a child with medical needs to participate fully and safely on visits.

Sometimes additional safety measures may need to be taken for outside visits and it may be that an additional staff member, a parent/carer or other volunteer might be needed to accompany a particular child. Arrangements for taking any medicines will need to be planned or as part of the risk assessment and visit planning process. A copy of IHCP should be taken on trips and visits in the event of information being needed in an emergency.

Residential Visits

Parent/carers of children participating in residential visits will need to complete a consent form giving details of all medical/dietary needs. Administration of medicine forms need to be completed prior to the day of departure and all medication which needs to be administered during the course of the visit should be handed directly to the group leader before leaving the school at the start of the visit.

Administration of Medication Policy

- The Governors and staff of Reeve Hill Primary wish to ensure that pupils with medical needs receive care and support in school. Pupils should not be denied access to a broad and balanced curriculum simply because they are on medication or need medical support, nor should they be denied access to school trips etc.
- The Headteacher will accept responsibility for members of school staff giving or supervising pupils taking prescribed medication during the school day where those members of staff have volunteered to do so and they have adhered to this policy.
- Medication can only normally be accepted in school where it has been prescribed by a doctor. In other cases, eg where a pupil suffers regularly from acute pain, such as migraine, parents may authorise and supply appropriate pain killers for their child's use. Aspirin will not be permitted or administered unless there is written authorisation from a medical professional for this to be administered. The requirements in the Policy as to consent, provision of information, labelling, etc of prescription medicines also apply to non-prescription medicines.
- Medication will not be accepted without written parental instructions as to administration. This should be provided in conjunction with the GP or other medical professional if appropriate. The Headteacher must approve the administration of the medicine.
- The Headteacher will consider in each case the nature of the medication to be administered, any potential risks and all other relevant information before deciding whether in any particular case medicine can be administered in school. Where there is concern about whether the school can meet a pupil's needs the Headteacher should seek advice from the school nurse or doctor, the child's GP or other medical adviser.
- Each item of medication must be delivered in its original container and handed directly to the relevant member of staff. The school will not accept medication which is in unlabelled containers.
- Each item of medication must be clearly labelled by the parent with the following information:
 - Pupil's name
 - Name of Medication
 - Dosage
 - Frequency of dosage
 - Date of dispensing
 - Storage requirements (if necessary)
 - Expiry date
- Where appropriate pupils will be encouraged to self-administer their own medication under staff supervision. Parent/carers of pupils will be asked to confirm in writing their consent to this. In deciding whether to permit this the Headteacher will take into account the nature of the medication, the age of the pupil and the safety of other pupils.
- Staff who volunteer to assist in the administration of medication must receive appropriate training/guidance identified by the Headteacher in liaison with Health professionals.
- The Headteacher or his representative will seek the advice of healthcare professionals on the type of training required for each authorised member of staff and what types of medication that training covers.
- Unless otherwise indicated, all medication to be administered will be kept in a locked medicine cabinet.
- The school member of staff administering the medication must record details of each occasion when medicine is administered to a pupil. **Appendix 2**
- If pupils refuse to take medication, the school staff should not force them to do so. The school should inform the child's parents as a matter of urgency, and may need to call the emergency services.

- Parents/carers should be advised that it is their responsibility to notify the school of any changes to a child's medication. (Schools should consider having procedures requiring parents at regular intervals – termly/annually – to confirm that the information currently held by the school is correct.)
- The procedures to be followed to implement this Policy are set out in the Procedures below and the appendices.

Administration of Medication Procedures

- 1 Parents and carers are responsible for supplying school with all necessary information regarding their child's condition and medication. This should be provided in conjunction with the GP or other medical professional as appropriate. This information should be recorded on a standard form which records the consent of the parent to the administration of medication which should be updated regularly – **Appendix 1**. A signed copy of this form should be kept in an accessible place near to the medicine, a copy on the pupil's file and a copy given to parents.
- 2 The Headteacher or his representative will confirm on the form that a member of staff (authorised by the Headteacher) will administer medicine to the pupil.
- 3 All items of medication should be delivered to a named member of school staff by parents, carers or escorts employed by the authority. The name of that member of staff must be recorded on **Appendix 1**.
- 4 Where a parent of a child requests that the pupil carries and administers his/her medication they should complete **Appendix 3**. The Headteacher will decide whether to grant this request taking into account the pupil's age, understanding, the nature of the medication and the safety of other pupils.
- 5 In all other cases parents should be notified in writing that all medication should be delivered to school directly into the keeping of either the Headteacher or authorised person in a secure and labelled container as originally dispensed.
- 6 Each container should be clearly labelled with the following:
 - Name of medication
 - Pupil's name
 - Dosage
 - Dosage frequency
 - Date of dispensing
 - Storage requirements (if applicable)
- 7 Parents should be asked to make it clear whether medication needs to be kept in school or should be collected at the end of the day.
- 8 Unless otherwise indicated, all medication to be administered will be kept in a locked medicine cabinet.

Staff Guidance: Anaphylaxis, Asthma, Diabetes, Eczema and Epilepsy

The Academy recognises that these are common conditions affecting many children and young people, and welcomes all children with these conditions.

The Academy believes that every child has a right to participate fully in the curriculum and life of the Academy, including all outdoor activities and residential trips. The Academy ensures that all staff in the Academy have a good understanding of these conditions, through relevant training and do not discriminate against any child who is affected.

Anaphylaxis

Anaphylaxis can be triggered by foods (nuts, shellfish, dairy products) or non-foods (wasp and bee stings, certain medicines, even exercise). The symptoms of anaphylaxis can be identified by effects on the respiratory system, cardiovascular system, gastrointestinal system, skin, nervous system and genitourinary system. In the event of an attack it is important to call 999 for an ambulance.

If a child requires an epipen, the details of the child and the location of the epipen shall be shared with all staff. Photographs of all children needing an epipen can be found on staff room and office notice boards. Children's Individual Health Care Plans are kept centrally in the Medical File in the office and in individual children's files.

Asthma medicines

Immediate access to reliever medicines is essential. Reliever inhalers (blue) are kept in the Academy office/centre day care area, in individual named zipped wallets. Parents/carers are asked to ensure that all reliever inhalers are labelled with a chemist dispensing label containing the child's name. It is the parent/carers responsibility to ensure that the inhalers are in date and replaced regularly. Asthma medicines will only be administered to children once an administration of medicines consent form has been completed. (See Appendix 2). Children are encouraged, wherever possible, to administer their own inhaler with adult supervision.

Record keeping

Each time a child receives their asthma medication it is recorded on an administration of inhalers record sheet kept in the inhaler box.

PE, games & activities, including pre-Academy and after Academy clubs

Taking part in sports, games, activities and clubs is an essential part of Academy life for all pupils. Staff are aware of which children have asthma from the Academy's medical register. Children with asthma are encouraged to participate fully in all PE lessons. Staff will remind children whose asthma is triggered by exercise, to take their reliever inhaler before the lesson and to thoroughly warm up and down before and after the lesson. Staff follow the same principles as described above for games, activities and clubs involving physical activity. Staff need to be aware of the potential triggers for children with asthma when exercising, tips to minimise these triggers and what to do in the event of an asthma attack.

The School environment

The school does all that it can to ensure the school environment is favourable to pupils with asthma. The school does not keep furry or feathery animals for sustained periods and has a no-smoking policy. As far as possible the school does not use chemicals in science and art lessons that are potential triggers for children with asthma. If however particular fumes do trigger their asthma, children are removed from the classroom by an adult and taken to sit in a safe space, where they can be supervised until fully recovered.

Asthma attacks - Guidance

IN THE EVENT OF A CHILD HAVING AN ASTHMA ATTACK

- If at all possible take the child to the office
- Stay calm and reassure the child
- Encourage the child to breath slowly
- Ensure that any tight clothing is loosened
- Help the child to take their spacer device/ reliever (blue) inhaler
- Usually 2-4 puffs are enough to bring the symptoms of a mild attack under control. This medication is very safe; do not be afraid to give more if it is needed
- Inform and seek assistance from First Aider on site

ALWAYS CALL FOR AN AMBULANCE IF ANY OF THE FOLLOWING OCCUR

- There is no significant improvement in 5 – 10 minutes
- The child is distressed and gasping or struggling to breath
- The child has difficulty in speaking more than a few words at a time
- The child is pale, sweaty and may be blue around the lips
- The child is showing signs of fatigue or exhaustion
- The child is exhibiting a reduced level of consciousness

WHILST THE AMBULANCE IS ON ITS WAY

- The child should continue to take puffs of their Reliever (blue) inhaler until the symptoms improve
- If the child has a spacer device and reliever (blue) inhaler available give up to ten puffs, one puff every minute (shaking the inhaler between each puff)
- If the child's condition is not improving and the ambulance has not arrived, repeat the process in the previous bullet point
- Contact the parents/carers, once the emergency situation is under control and the ambulance has been called

Diabetes

We recognise that Diabetes should not be taken lightly because it is a very serious condition, and could result in a Hypoglycaemia attack (Hypo) where blood sugar level become too low, or a Hyperglycaemia attack (Hyper) where blood sugar levels become too high. Prompt medical attention will then be required to rectify the chemical and sugar imbalance in the blood. Children who are diabetic need supervision and careful monitoring so that staff are aware of any changes in the child and are able to take immediate action if they should need to. All children with Diabetes in the Academy have their own IHCP and their details are recorded in the Medical File. 7 Each child with diabetes has an emergency box labelled with their name and photograph and containing any relevant equipment required to control a hypo or hyper attack.

Eczema

We are aware that active (acute) eczema causes constant itching and can mean sleepless nights and daytime drowsiness. We recognise that children who suffer with eczema may need the support of Academy staff to help them deal with this condition and that they may need help to apply emollients.

Epilepsy Seizures

IN THE EVENT OF A CHILD HAVING AN EPILEPTIC SEIZURE

- Stay calm
- If the child is convulsing then put something soft under their head
- Protect the child from injury (remove harmful objects from nearby)
- NEVER try and put anything in their mouth or between their teeth
- Try and time how long the seizure lasts – if it lasts longer than usual for that child or continues for more than five minutes then call medical assistance
- When the child finishes their seizure stay with them and reassure them
- Do not give them food or drink until they have fully recovered from the seizure

Head Lice

Any case of head lice should be reported to the Academy. Parent/carers will be advised on an appropriate course of action as advised by the local health authority.

Infectious Diseases

Information concerning the control of infectious diseases can be found on CBMDC Health and Safety website www.bradford.gov.uk/scsafety (SOS lookout) who in conjunction with the Health Protection Agency www.hpa.org.uk provide information on the control of infectious diseases. A hard copy of the Control of Infections in Academies document can be found in the Medical File.

Staff training

The Academy is responsible for ensuring that staff have appropriate training to support children with medical needs. Specific training and staff awareness sessions are held for children with highly individual needs prior to the child joining the Academy. Arrangements are made with appropriate agencies e.g. Academy Health to update staff training on a regular basis. Teaching and support staff are directed to attend epipen training annually.

Confidentiality

Staff must always treat medical information confidentially. Agreement should be reached between parent/carers and the Academy about whom else should have access to records and other information about a child and this will be detailed in their Individual Healthcare Plan.

If information is withheld from staff, they will not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

Documentation

Appendix 1	Consent Form and Instructions
Appendix 2	Additional Form where several medications are required
Appendix 3	Confirmation to parents of Headteacher's agreement
Appendix 4	Request for pupil to carry and administer own medication
Appendix 5	Record of Medication Given
Appendix 6	

SUPPORTING CHILDREN WITH MEDICAL NEEDS IN SCHOOL
The Administration of Medicines in School

The school will not give your child any medication unless you complete and sign this form and the Headteacher has confirmed that school staff have agreed to administer the medication and, where necessary have received appropriate training.

DETAILS OF PUPIL

Surname	
Forename(s)	
Address	M/F
	DATE OF BIRTH
	CLASS/FORM
Condition or Illness	
Medication	
Name/type of medication (as described on container)	
For how long will your child take this medication?	
Date dispensed	
Full directions for use	
Dosage and amount (as per instructions on container)	
Method	
Timing	
Special storage instructions (explain if medicine should remain in school or return home daily)	
Special precautions	
Side effects	
Self administration	
Action to be taken if pupil refuses to take the medication	
Procedures to take in an emergency	
CONTACT DETAILS	
Name	
Daytime Telephone No	
Relationship to Pupil	
Address	

I understand that I must deliver the medication personally to (agreed member of staff) and I consent to authorised staff administering the above medication to my child. I accept that this is a service which the school is not obliged to undertake.

I consent to medical information concerning my child's health to be shared with other school staff and/or health professionals to the extent necessary to safeguard his/her health and welfare.

I confirm that the medication has been prescribed by a doctor/consultant and that this information has been provided in consultation with my child's doctor/consultant.

Signature		Date
Signature		Date

Each item of medication must be delivered in its original container and must be clearly labelled with the following information: pupil's name, name of medication, dosage, frequency of dosage, date of dispensing, storage requirements (if necessary) and expiry date.

Authorised by

Headteacher or a representative

Date

SUPPORTING CHILDREN WITH MEDICAL NEEDS IN SCHOOL
The Administration of Medicines in School

REQUEST FOR PUPIL TO CARRY AND ADMINISTER OWN MEDICATION

Example form for parents/carers to complete if they wish their child to carry his/her own medication.

This form must be completed by parents/carers.

Pupil's Name: Class/Form:

Address:

.....DOB.....

Condition or Illness:

.....

.....

Name of medication:

Procedures to be taken in an emergency:

.....

.....

.....

CONTACT INFORMATION

Name:

Daytime Telephone No:

Relationship to child:

I would like my son/daughter to keep his/her medication on him/her for use as necessary and

I confirm that s/he may administer his/her own medicine

or

I confirm that s/he may administer his/her own medicine but will require supervision

Signed: Date:

Relationship to child:

Authorised by

Headteacher or a representative

Date