



Bellfield Infant School

Medical Needs in School Policy

Definition

Pupils' medical needs may be broadly summarised as being of two types;

- a) Short term affecting their participation in school activities (while they are on a course of medication)
- b) Long term potentially limiting their access to education and requiring extra care and support (deemed **special medical needs**)

Rationale

Local Authorities/schools have a responsibility for the health and safety of pupils in their care. In the case of pupils with special medical needs, the responsibility of the school is to make sure that safety measures cover the needs of all pupils in the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The school is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may receive.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. **Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.**

Teachers and other school staff have a common duty to act in loco parentis for all pupils and may need to take swift action in an emergency. This duty extends to teachers leading activities away from the school site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication (e.g. inhaler) and should supply the school with information. The school takes advice and guidance from the appropriate services (e.g. Local Authority) which encourages self-administration of medication where possible. Contact details for our school nurse are available on request from the school office. A copy of this policy is available to parents on our website or from the school office.

Aims

The school aims to:

- assist parents in providing medical care for children;
- educate staff and children in respect of special educational needs;
- liaise with the Local Authority and if appropriate adopt and implement the LA policy of Medication in Schools;

- arrange training for staff who volunteer to support individual children
- liaise as necessary with medical services in support of the individual pupil;
- ensure access to full education if possible;
- monitor and keep appropriate records.

Entitlement

The school accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils.

The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

- to choose whether or not they are prepared to be involved;
- receive appropriate training;
- work to clear guidelines;
- have concerns about legal liability;
- bring to the attention of management any concern or matter relating to supporting pupils with medical needs.

Expectations

It is expected that:

- parents will be encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative (e.g. prescribed medication needs to be administered four times a day);
- when any medication is brought into school it should be presented at the school office by the parents **not the pupil**;
- **prescribed medicine**- the name of the pharmacist should be visible and the label should clearly state; the child's name, the name of the medication, the prescribed dose, the expiry date, written instructions provided by the prescriber on the label or container. Medication presented without this written information will not be accepted by the school. All medicines brought into school are kept in the school office, apart from inhalers and emergency medication (e.g. epi-pens) which are kept in the classrooms.
- **Non-prescribed medicine**- will only be administered with permission from parents in extreme circumstances such as residential trips. Staff will check the medicine has previously been administered without adverse effect and a 'Request for school to administer medication' form must be completed.
- **Staff will never administer medicines containing aspirin unless prescribed by a doctor.**
- **Staff will never administer medication containing ibuprofen to children who are asthmatic.**
- The school will record any prescribed or non-prescribed medication administered by school staff on the 'school record of medication administered' form;
- School staff will consider carefully their response to assist with the administration of medication or the supervision of self-administration of medication and that each request will be considered on an individual basis;

- The school will liaise with the School Health Service for advice about a pupil's special medical needs and will seek support from the relevant health practitioners where necessary and in the best interests of the pupil;
- Any medicines brought into school by the staff, e.g. painkillers, personal inhalers should be stored appropriately, out of reach of pupils. Any staff medicine is the responsibility of the individual concerned and not of the school.

Long- term medical conditions

Where a pupil has a chronic illness, medical or potentially life-threatening condition the school will initiate a health care plan to meet individual needs and support the child. This will be drawn up by health care professionals in consultation with the child's parents or guardians and will contain the following information;

- definition and details of the condition
- special requirements, e.g. dietary needs, pre-activity precautions
- treatment and medication
- what action to take/ not to take in an emergency
- staff training where required
- the role the school staff can play
- consent and agreement

Where a pupil has a long-term medical condition there may be the need to make individual risk assessments and to adapt the critical incident plan e.g. in the event of the rapid deterioration of a pupil with a terminal illness.

Emergency procedures

All staff are aware of procedures when dealing with a medical emergency. This should be supervised by a fully trained first aider.

All staff are aware of pupils having a healthcare plan and understand the need to follow agreed emergency support.

All staff know the guidance on calling the emergency services and this is displayed on staff notice boards and beside telephones.

In the event of an emergency every effort will be made to contact a parent so that they may accompany their child to hospital. If this is not possible a member of staff will accompany the child to hospital in the ambulance and stay until the parent arrives. Healthcare professionals are responsible for and decisions on medical treatment when parents are not available.

Educational Visits

This school actively encourages children with medical needs to participate in trips and visits. Staff will aim to facilitate reasonable adjustments to enable pupils with medical needs to participate fully and safely on visits. Risk assessments will be used to highlight any potential difficulties and ensure procedures are in place to support pupils. Additional staff/adults will be considered for this purpose.

Prior to an overnight school trip parents must complete and up to date medical questionnaire about the pupil's current general health and medication. Prescribed medication will be administered after parents have completed a 'Request for school to administer medication' form parents are invited to provide written consent to enable staff to act 'in loco parentis' and

administer 'over the counter' medicines such as Calpol if required. Where this consent is refused parents are asked to discuss alternative support measures with staff should their child feel unwell during the trip.

Accompanying staff will be aware of any medical needs and relevant emergency procedures. A copy of healthcare plans will be taken on all visits as well as any emergency medication that may be required.

Staff Training

Bellfield Infant School holds training on common medical conditions once a year; this is delivered by the school nurses or relevant healthcare professionals. A log of staff training is kept and reviewed every twelve months to ensure new staff receive training.

Staff training is provided to support the administration of emergency medications such as Epi-pens. The school keeps a register of staff who have undertaken relevant training.

Bellfield Infant School has several appointed trained first aiders, paediatric first aiders, as well as two first aiders at work. Training is reviewed regularly and updated every three years.

Policy into practice

There is a need for proper documentation at all stages when considering the issue of support for pupils with medical needs in school (e.g. health care plans, documentation on the administration of medicines- short term and long term)

Appendix of specific medical conditions

Appendix 1- Asthma (please see Department of Health 'Guidance on the use of emergency salbutamol inhalers in schools', September 2014)

Whilst recognising that asthma is a widespread, potentially serious (but controllable) condition Bellfield Infant School encourages pupils with asthma to achieve their potential in all aspects of school life.

Parents have a duty to inform school staff if their child is asthmatic. If preventative or emergency medication is required parents must complete an asthma form. Inhalers should be provided and labelled with the pupil's class and name. The inhalers are kept in a basket in the child's classroom. It is the parent's duty and responsibility to check that inhalers are working, within the expiry date and have not run out. At Bellfield Infant School we have asked all parents to provide an additional inhaler for emergency use should the first inhaler malfunction or run out. It is the parent's responsibility to provide the additional inhaler.

Inhalers accompany children whenever they are on off-site visits.

Children with asthma must have immediate access to inhalers when they need them and know where they are kept. A spacer device may be required and the pupil may need support to use this.

A record book to record the frequency of use of an inhaler can be found in each class inhaler basket. This should be completed for all pupils where usage exceeds normal daily administration.

Parents should be notified when a child has used an inhaler excessively or more regularly than normal.

Pupils with asthma are listed on the school medical needs register found in the Pastoral filing cabinet in the SEN room.

Leaders of after school clubs are notified of pupils having asthma and inhalers are sent to all after school clubs.

The school has emergency asthma kits situated around the school site and an emergency kit which is available for off site visits. The emergency kit may only be used by pupils who have been diagnosed with asthma and whose parents have given consent. If parents do not give consent for the use of the emergency kit they are asked to sign to say they take responsibility for their child's health. The emergency kit would only be used in a circumstance when a pupil's inhaler malfunctions or has run out and they do not have an additional inhaler available in school. Parents must give consent for their child to use the emergency asthma kit, once the kit has been used it is discarded and school purchase a new kit.

Appendix 2- Head Injuries

Pupils who sustain a head injury must be reviewed by a trained first aider in school. If a pupil has a visible wound, swelling or adverse reaction parents will be informed and are welcome to come into school to assess their child personally. Where there are no residual effects the pupil may remain in school whilst being observed. A head injury advice sheet must be completed and sent home with the routine accident record slip.

Appendix 3- Epilepsy, Anaphylaxis and Diabetes

Parents have the duty and responsibility to notify the school if their child has any of these conditions and should provide details of any treatment and support they may require in school. Relevant healthcare professionals will liaise between parents/guardians and school personnel to ensure staff are aware of, and trained to provide, and relevant or emergency support or treatment. An individual healthcare plan will usually be compiled, detailing the course of action to be taken.

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