

FEDERATION OF ST. NICHOLAS C OF E MIDDLE SCHOOL, PINVIN,
AND PINVIN C OF E FIRST SCHOOL
AND
COLLABORATION WITH HIMBLETON CE FIRST SCHOOL



MEDICAL NEEDS POLICY

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| Date approved at FGB | 11.12.18 |
| Statutory/ school policy | DfE statutory |
| Review period | Annual |
| Date of next review | Autumn 2019 |

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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 at Himbleton Church of England First School are fully committed to ensuring 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.

We also acknowledge that no parent should have to give up working because the school is failing to support their child's medical needs.

Definition:

Pupil's medical needs may be broadly summarised as being of two types:

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

Rationale

Local Authorities and schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

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. However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off 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 and should supply the school with information.

It is our aim to provide a clear policy that is understood and accepted by all staff, parents and children, providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that for such children, attendance is as regular as possible.

Roles and Responsibilities

The Role of the Head Teacher and Governing Body

The ultimate responsibility for the management of this policy lies with the Head Teacher and the Governing Body. They will ensure that sufficient staff have received suitable training and are competent to take on responsibility to support children with medical conditions

The Role of the Head Teacher

The Head Teacher will manage the policy on a day-to-day basis and ensure all procedures and protocols are maintained. She will also liaise with the Designated First Aider & School Secretary to ensure accurate and up to date records are kept for children with medical needs.

The Head Teacher will ensure that all staff are aware of this policy and that they understand their role in its implementation. She will ensure that all staff who need to know are aware of a child's condition.

The Head Teacher has ultimate responsibility for the development of individual Health Care Plans.

It is the responsibility of the Head to ensure school staff are appropriately insured and aware that they are insured to support pupils

The Role of Staff ~ Staff 'Duty of Care'

All adults caring for children, including teaching and non-teaching staff have a common law duty of care to act like any reasonably prudent parent. 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.

Adults 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 support. 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 school through attending training provided and reading individual 'Health Care Plans' devised for individual children.

In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, staff will refer to the Head Teacher for judgement about what support to provide. Decisions will be made based on the available evidence and will usually involve some form of medical evidence and consultation with parents.

The Role of Parents

Parents have prime responsibility for their child's health and are required to provide the school with up-to-date information about their child's medical needs.

In consultation with the family and if appropriate, advice will then be sought from those health professionals involved with the child, in order to determine the level of support needed on a daily basis when their child attends school. This could include consulting:

- a General Practitioner (GP) or Paediatrician
- the school doctor or nurse
- a health visitor or a specialist voluntary body

If, after consultation, it is considered appropriate, parents will work with the Designated First Aider to develop their child's individual Health Care Plan.

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

Individual Health Care Plans

The main purpose of a Health Care Plan is to identify the level of support that is needed at school for an individual child. It clarifies for staff, parents and the child the help the school can provide and receive. These plans are reviewed annually as a minimum or earlier if there is a change to the child's

needs. They are developed with the child's best interests in mind and may include the following information:

- ☐ 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

See appendix A for assistance in the preparation of individual Health Care Plans

A copy will be given to parents. A copy will also be kept on the notice board upstairs and will be accessible to all staff caring for the child. The Head Teacher will ensure that all staff, including those working temporarily in school, are aware that the child has a Health Care Plan.

Managing Medicines in School

There is no legal duty which requires school staff to administer medication, this is a voluntary role. While teachers have a general professional duty to safeguard the health and safety of their pupils and to act in 'loco parentis', that is, to act as any reasonably prudent parent would, this does not imply a duty or obligation to administer medication.

Whenever possible, either the Head Teacher or the Designated First Aider will take responsibility for administering medicine.

Staff managing the administration of medicines and those who administer medicines will receive appropriate training and support from health professionals.

The policy of this school is to only administer medicine or medical care to those pupils who have a medical condition, that if not managed, could prove detrimental to their health or limit access to education. The Head Teacher accepts responsibility, in principle, for school staff administering or supervising the taking of prescribed medication or medical care during the school day only where it is absolutely necessary.

Storing Medicines

Medicines must be stored in the pharmacist's original container and clearly labelled with the child's name, the dosage and instructions for administration. This will be kept locked in the Medicine Cabinet in the Little Office.

Medication requiring refrigeration is stored in a closed plastic container in the school fridge upstairs in the staffroom.

Emergency medications such as Epi-pens and asthma inhalers are readily available in the classrooms at all times. Children should know where their medications are kept within the classroom and the class teacher will be responsible for ensuring they are taken outside for PE and off-site for trips.

Parents are ultimately responsible for checking the expiry dates on their children's medicines and replacing as necessary. The Designated First Aider will also monitor expiry dates.

Prescribed Medicines

School will only accept medication from a parent in its original container. It must be clearly marked with the child's name and be accompanied by an 'Administration of Medicine in School Form'

Medication will be handed back to parents (not to a child) at the end of the school day.

Following written consent, any member of staff administering medicines to a pupil should check:

- the child's name
- name of medication
- the prescribed dose
- expiry date
- written instructions provided by the prescriber on the label or container

If in doubt about any procedure, staff will not administer the medicine before checking with parents or health professional before taking further action.

A written record must be kept following administration of medicines to pupils by writing it in the Medicine Record Book (orange book), kept in the First Aid cabinet in the Little Office.

If a child refuses to take a medicine, staff will not force them to do so, but will immediately notify parents/ carers of the refusal

Non-Prescribed Medicines

School staff are not able to administer non-prescribed medicines

Emergency Procedures

All staff are aware of procedures when dealing with a medical emergency. These should be supervised by a trained First Aider and Head Teacher or in her absence, the Senior Teacher.

All staff are given a list of pupils who have an individual Health Care Plan and understand the need to follow agreed emergency support.

All staff know that when calling the emergency services, the need to refer the pupil's individual Health Care Plan when relaying medical information.

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, the Head Teacher, and in her absence the Senior Teacher plus the Designated First Aider will accompany the child to hospital by ambulance and stay until the parent arrives. Health care professionals are responsible for any decisions on medical treatment when parents are not available

Children with Long Term or Complex Medical Needs

Where a child's needs are particularly complex and could affect their ability to access the full curriculum or participate in other areas of school life, then special arrangements will need to be made. Each child's needs are assessed and specific arrangements made as appropriate. This may be by providing specialist equipment or aids, making modifications to the learning environment or providing some dedicated adult support.

Staff Training

The school will ensure that staff are appropriately trained in order to support children with medical needs. Arrangements are made with the appropriate agencies to deliver training as required eg Epi-pen training.

Physical/Sporting Activities

All children with medical conditions will be encouraged to participate as fully as possible in physical activities and extra-curricular sport. We recognise that for many, physical activity can benefit their overall social, mental and physical health and well-being. Staff will be sensitive to their individual needs and sufficient flexibility will be incorporated into lesson planning for all children to be included 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. This will include a reference to any issue of privacy and dignity for children with particular needs.

Educational Visits & Residential Trips

Every effort is made to encourage children with medical needs to participate in visits. Consideration is always given to the adjustments which need to be made to enable them to participate fully and safely.

The Teacher in Charge will have ultimate responsibility during educational visits and residential trips. However, all staff supervising the children will always be fully aware of any medical needs and relevant emergency procedures. A copy of individual Health Care Plans will be taken on visits and residential trips in the event of the information being needed in an emergency. If appropriate, additional arrangements will be made concerning medication and additional adult support.

Appendix A

