



MEDICAL NEEDS POLICY

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Rationale

The number of pupils attending mainstream schools who have specific medical needs is increasing. Many children and young people have their participation in school affected by illness or a specific medical condition. This may result in a minor disruption or it may cause regular or permanent limitation to their access to education. Most children with medical needs are able to attend school regularly and with appropriate support from family and school, can take part in the normal school activities. However, for children with long term, complex or very individualised medical needs, there needs to be careful planning by school, parents/carers, medical and other professionals and where appropriate for the child, to maximise curriculum access, their inclusion and to safeguard the child's health and safety. It is crucial that all involved have an understanding of the policy and procedures the school is operating.

Guidelines

Our school will do all it can to encourage, support and care for children with medical needs in order to ensure they maintain maximum attendance at school and have full access to the curriculum. We recognise that there are an increasing number of conditions such as hay fever, allergies and asthma affecting many school age children and positively welcome all pupils with these conditions. A copy of the procedures around administration of medication and support for pupils with these conditions will be available for staff and parents. We will work with parents/carers of children with complex or long term medical needs to agree and implement individual healthcare plans. We will provide whole school training on health issues affecting all children and appropriate training for staff volunteering to support individual healthcare plans.

Our school will review its procedures around the administration of medication, the development of healthcare plans and support for pupils with asthma in consultation with parents/carers and staff and on a regular basis. This policy and its related procedures provide the framework within which the medical needs of pupils will be managed.

Record Keeping

At the beginning of each school year or when a child joins the school parents/carers are asked whether their child suffers from any medical condition including asthma. Parents are reminded of the vital importance of providing this information to school and of updating the school should there be any changes or new conditions diagnosed. Parents who indicate that their child has asthma will be asked to provide further information regarding their child and the medication they are taking. This information should be updated by parents during the school year as necessary.

Asthma

Children who suffer with asthma need to be able to gain quick access to their inhalers (or spacers in the cases of some younger children). Parents must complete and sign a form to acknowledge that an inhaler has been provided and to give additional details

of their child's condition. Both the inhaler (with child's name clearly displayed) and form are kept in classrooms. Members of staff ensure that inhalers are taken on off-site visits. However, as children with asthma get older it is very much the expectation that they should take the lead on remembering to take their inhalers. It is the parent's/carer's responsibility to check that inhalers are replenished when needed. First aid trained staff are throughout the school. Their training included what to do if a child is suffering an attack.

Anaphylaxis and Administration of Epipens

Anaphylaxis is an extremely dangerous allergic reaction. It can be triggered by foods (e.g. nuts, sea foods) or non-foods (e.g. 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, genitourinary system. In the event of an attack it is important to administer an Epipen as soon as possible and call 999 for an ambulance.

Children's Epipens will be stored in medical boxes within each child's classroom so that they are in a central place and easily accessible from the hall, playground or classrooms. Each Epipen is stored in a plastic tub that also contains the name of the child, her/his photograph, and a copy of the child's individual care plan that has been written by a doctor / member of the 0-19 Nursing Team.

Administration of Medicines

Occasionally, it is necessary for prescribed medicines to be administered at school. Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

Non-prescribed medicines such as Calpol and Piriton will only be administered in exceptional circumstances and where there is a clear and genuine medical need.

If a parent wishes a child to take a medicine during school time they should complete a request form, giving permission for the Head Teacher or her nominee only to administer the medicine. Any member of school staff can be asked to administer the medicines although they cannot be required to do so. Therefore, the Head Teacher will arrange named nominees who are prepared to take responsibility for administering medicine. This list of named persons is included in the medical update for staff (in each classes SEND file) and also on the staff room and office notice boards.

Medicines should be delivered, with instructions, to the school office where it will be kept in a labelled container in the 'Children's Medication' box in the office or in the office fridge if necessary (for antibiotics). The medicine should be in date and clearly labelled with:

- Name of medication

- The owner's name
- Dosage, time and frequency
- The prescribing doctor's name.
- The date of issue
- The expiry date

A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication should never be administered without first checking maximum dosages and when the previous dose was taken. For those children that require emergency medicine, e.g. an Epipen, Buccal Midazolam for epilepsy, a red emergency card with their class name on it will be kept within easy reach in the classroom or in the class teacher's pocket if they leave the classroom, e.g. PE lessons. This red card will be sent via a child (KS2 responsible child) or adult (if child is in KS1) to the school office which will trigger an adult to take the correct medication to the child immediately. The team supporting the child will know whether medication is to be given immediately or after a specific amount of time based on the details within each individual Care Plan. The Head Teacher, or the nominated person to administer the medicine, will require one other person to witness the medication being taken and that all medication instructions have been followed through accurately with the date and time recorded. This person will also be required to fill out the 'Record of medicine administered to an individual child'. Used medication and packaging will be kept to be passed onto paramedics and / or other medical professionals. Details of possible side effects should also be given. It is important that an up-to-date record of the parent's home and work telephone numbers be kept so that they can be contacted at any time. Medicines no longer required will be handed back to the parent.

All medicines will be sent home at the end of each term so that parents/carers can check they are in date and still current (based on increases in age, height or weight). It is the class teacher's responsibility to make sure all medication is returned on the first day of each new term and to contact parents swiftly if this is not done.

Procedures for the Development of an Individual Healthcare Plan

When a pupil has a long term or complex medical need that requires specialist medication or protocols, the school will work with the parent to agree an individual healthcare plan for that child.

Where appropriate, the drawing up of the healthcare plan will involve school/community nurse, health visitor. Advice will be sought from health practitioners e.g. GPs, consultants, specialist nurses, physiotherapists etc. The healthcare plan is a confidential document, however it must be displayed and accessible to those who may urgently need to refer to it. At Silsoe School plans are displayed in the office and will be signed by the parent and the school. They will also be within the medication boxes in the library (current site) or medical room (new site). Each teacher is responsible for sharing it with staff members in their team. Each healthcare plan will

be different, because each child's circumstances will be different. The following list describes some of the possible actions that could be included in a plan:

1. After filling in a request form, the child may go to a hospital that has a hospital school. If the child has an Educational Health Care Plan (EHCP) the school will provide information to ensure that the child's educational needs are met at a level appropriate to her/his medical condition.
2. A child may have a long-term absence and be at home. If this absence is likely to exceed 15 days, the Education Welfare Team may become involved and home tuition could become a possibility.
3. It is possible that a healthcare plan might also include an element of part-time attendance at school.
4. The health care plan will support the child to be in school full time with appropriate support to manage their medical condition.

Accidents

- All bumps to the head are taken very seriously. Parents will be informed immediately if a child has had a serious bump where the skin has broken or is marked. Serious bumps will be recorded in the accident book. If the bump is minor, parents will still be informed via a first aid letter in book bags.
- If a child suffers a minor accident, a member of staff will administer first aid and comfort the child. Parents will be notified of the incident through a first aid slip in book bags. In some cases, teachers or TAs will speak to parents / carers at the end of the day.
- In a more serious accident where a child may become unconscious, bleed profusely, or damage their limbs, an ambulance will be called, first aid administered and parents informed.
- Parents of any child exhibiting signs of health deterioration will be informed.

Roles and Responsibilities:

Governing Board

The Governing Board has the general responsibility for defining, monitoring and reviewing the school policy with respect to the support of pupils with medical needs. Governors will consult the Head Teacher and school staff in the formulation of this policy.

Head Teacher

The Head Teacher is responsible for the operation of the policy on the support of pupils with medical needs. She will ensure that there are appropriate procedures in place for the administration of medication, including those for agreeing with parents/carers exactly what support the school can provide to pupils with more complex medical

conditions. The Head Teacher can authorise a named member of staff to manage these procedures. This member of staff would then become the 'Authorised Person'. The Head Teacher/authorised person will make sure that parents/carers and staff are aware of the school policy on supporting children with medical needs. The Head Teacher/authorised person will make sure that staff receive relevant information on specific medical support needs of individual pupils on a need to know basis. The Head Teacher/authorised person will ensure that staff are appropriately trained. The Head Teacher/authorised person will ensure that appropriate links are maintained with specialist health professionals.

Parents/Carers

Parents/carers are responsible for informing the school of any medical conditions their children suffer from and that the school has sufficient information to manage their child's medical needs while at school. If their child has a more complex medical condition, they should work with the school to develop a healthcare plan which will include an agreement on the role of the school in managing any medical needs and potential emergencies. Whilst school will make every effort to remove unnecessary medically related barriers to attending school, parents/carers should not expect that a child can attend school if he/she is infectious or contagious and should not return until they have been clear of the sickness and/ diarrhoea for 48 hours. Parents/carers should agree to make arrangements to collect children from school if they present such conditions while at school.

Staff

Staff should inform a senior member of staff if they become aware that a child has a medical condition. Staff should ensure that they seek information/guidance regarding the medical needs of pupils with whom they work from designated school staff.

All staff should know about the likelihood of an emergency arising in connection with the children with whom they are working. All staff should know what to do should an emergency arise in connection with the children with whom they are working.

Staff should know how to summon the emergency services and what the school's recording procedures are in such a situation. Staff members are entitled to appropriate training. Class teachers are responsible for notifying all adults who regularly come into contact with their class about pupils medical needs. Teachers employed to cover P.P.A. (planning, preparation and assessment) time for regular class teachers should find out information regarding the medical needs of pupils within classes they regularly teach. It is the SENDCo's responsibility to maintain an up-to-date 'Health Needs' summary sheet at the front of the register and it is each teacher's responsibility to ensure this is readily available for all staff who work in their classroom. Should a Supply Teacher take responsibility for a class without opportunity for liaison with the class teacher, other year group staff should ensure they are informed of medical needs of pupils in the class. The Supply Teacher should also read the medical / allergy information in the SEND file on each teacher's desk. Head of the Inclusion Unit is the responsible person for children with long term needs.

Other Health Professionals

A range of health care professionals, including the school nurse, the child's General Practitioner, specialist staff within the Primary Care Trust and the Community pharmacists, may have a role in the medical care of a pupil.

This role may be:

- to provide advice in the construction of an individual healthcare plan
- to provide advice and/or support in an emergency situation
- to provide training for staff in specific protocols
- to support school nurses in their work within schools.

REVIEW

The Head Teacher and teaching staff will review this policy in June 2020. Any amendments will be presented to the Governing Board for approval.