



## Barnsbury Primary School and Nursery

# Supporting Pupils with Medical Conditions Policy

Governor Responsible:	Full Governing Body
Policy originator:	Headteacher
Status & Review period:	Statutory, Annually
Date of last review:	Summer 2020
Date of next review:	Summer 2024

The school strives to live by the **Values** it promotes. This encompasses all aspects of teaching, learning and conduct in school. We aim for our values to show through everything that is said and done in school by all members of our school community.

We firmly believe that “happy children learn best” and are committed to providing an environment where all pupils and staff feel **valued** and are able to learn and play together in a **caring, happy, co-operative** and safe atmosphere. It is the **responsibility** of children, staff, governors and parents to ensure that high standards are maintained in an atmosphere of mutual **respect, trust**, openness, fairness and consistency.

### 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) (b) Long-term, potentially limiting their access to education and requiring extra care and support

This policy is written in regard to Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. Pupils with medical conditions 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 must ensure the safety of all pupils in their care. To this end, we reserve the right to refuse admittance to a child with an infectious disease, where there may be a risk posed to others or to the health of the child involved. This duty also extends to teachers leading activities taking place off the school site.

The prime responsibility for a child's health lies with the parent, who is responsible for the child's medication and must supply the school with all relevant information needed in order for proficient care to be given to the child. The school takes advice and guidance from a range of sources, including the School Nurse, Health professionals and the child's GP in addition to the

information provided by parents in the first instance. This enables us to ensure we assess and manage risk and minimise disruption to the learning of the child and others who may be affected (for example, class mates).

## **Aims**

- To ensure pupils at school with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.
- The school will listen to the views of pupils and parents.
- The whole school and local community understand and support the medical conditions policy.

## **Procedure**

The Headteacher is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- Sufficient staff are suitably trained
- All relevant staff are made aware of a child's condition
- Cover arrangements in case of staff absence/turnover is always available
- Supply teachers are briefed
- Risk assessments for visits and activities out of the normal timetable are carried out
- Individual healthcare plans are monitored and reviewed (annually)
- Transitional arrangements between schools are carried out
- If a child's needs change, the above measures are adjusted accordingly

Where children are joining the school at the start of a new academic year, these arrangements should be in place for the start of term. Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan (IHP) which details the support that child needs. If the parents, healthcare professional and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

Barnsbury Primary School and Nursery will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. The governing body has made sure that there is the appropriate level of insurance and liability cover in place.

## **Individual Healthcare Plans (IHPs)**

Barnsbury Primary School and Nursery has a centralised register of IHP's and identified members of staff who have the responsibility for the register.

Barnsbury Primary School and Nursery will ensure that the pupil's confidentiality is protected at all times.

The following information should be considered when writing an individual healthcare plan:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- Specific support for the pupil's educational, social and emotional needs
- The level of support needed including in emergencies
- Who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- Who in school needs to be aware of the child's condition and the support required
- Arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate
- Confidentiality
- What to do if a child refuses to take medicine or carry out a necessary procedure
- What to do in an emergency, who to contact and contingency arrangements
- Where a child has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan

Barnsbury Primary School and Nursery meets with the pupil (where appropriate), parent, specialist nurse (where appropriate) and relevant healthcare services prior to any overnight stay or extended day visit do discuss and make a plan for any extra care requirements that may be needed. This is recorded in the pupil's IHP which accompanies them on the visit.

## **Unacceptable Practice**

While school staff will use their professional discretion in supporting individual pupils, it is unacceptable to:

- Prevent children from accessing their medication
- Assume every child with the same condition requires the same treatment
- Ignore the views of the child or their parents / carers; ignore medical advice
- Prevent children with medical conditions accessing the full curriculum, unless specified in their Individual Healthcare plan
- Penalise children for their attendance record where this is related to a medical condition
- Prevent children from eating, drinking or taking toilet breaks where this is part of effective management of their condition
- Require parents to accompany their child with a medical condition on a school trip as a condition of that child taking part.

## **Roles and Responsibilities**

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

### The Governing Body

- Must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented
- Must ensure sufficient staff receive suitable training and are competent to support children with medical conditions
- Must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

### The Head Teacher

- Should ensure all staff are aware of this policy and understand their role in its implementation
- Should ensure all staff who need to know are informed of a child's condition
- Should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured
- Is responsible for the development of IHPs
- Should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse

### School Staff

- Any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so
- Should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions
- Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

### School Nurses

- Are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school
- May support staff on implementing a child's IHP and provide advice and liaison

### Other healthcare professionals

- Should notify the school nurse when a child has been identified as having a medical condition that will require support at school
- May provide advice on developing healthcare plans
- Specialist local teams may be able to provide support for particular conditions (eg. asthma, diabetes)
- Should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP

## Parents

- Must provide the school with sufficient and up-to-date information about their child's medical needs
- Are the key partners and should be involved in the development and review of their child's IHP
- Should carry out any action they have agreed to as part of the IHP implementation

Barnsbury Primary School and Nursery ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities, see accessibility plan.

## Returning to school following a period of absence

When a pupil is returning to school following a period of hospital education or alternative provision (including home educating), Barnsbury Primary School and Nursery will work with the local authority and education provider to ensure that the pupil receives the support they need to reintegrate effectively.

## Administration of medicines

Only essential medicines will be administered during the school day. Essential medicines are only those prescribed by a doctor and required to be taken 4 times a day. Parents must submit medical request form (available on ParentMail) before any medicine is administered. All medicines given during the school day must be in their original container with the prescription label attached. Controlled drugs can also be administered, subject to all other conditions as described in the Policy.

All medicines administered at Barnsbury must be accompanied by written instructions from a parent and/or prescriber specifying the medicine, strength, formulation, dose, the times (or frequency) and/ or circumstances it is to be given. A new form must be completed if there are any changes eg different dose, strength, times. A verbal message is not acceptable. A new supply of correctly prescribed and labelled medicine must be provided by the parent.

If staff are responsible for administering the medicine(s) a record of administration should be kept. The record should include; ♣ the name of the child / young person ♣ date of birth ♣ medicine details (name, formulation, strength) ♣ dose administered ♣ date & time of administration ♣ name of the person administering the medicine.

When administering medication, for example pain relief, we will check the maximum dosage and when previous dose given and parents will be informed. We will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.

Essential medicines will be administered on Educational Visits, subject to the conditions above. A risk assessment may be needed before the visit takes place. Staff supervising the visit will be responsible for safe storage and administration of the medicine during the visit.

Before administering any medicine, staff must check that;

- the medicine belongs to the child,
- the dosage they are giving is correct,
- written permission has been given.

Any child refusing to take medicine in school will not be made to do so, and parents will be informed about the dose being missed. All doses administered will be recorded on the Record Sheet attached to medication form (located in the medical room). Children self-administering asthma inhalers will complete record sheet in pouch with inhaler each time they use it.

If a pupil misuses their medication, or anyone else's, their parent will be informed immediately and the school's disciplinary procedures are followed.

All medicines will be stored safely. Medicines needing refrigeration will be stored in the medical room fridge. Some medicines (inhalers, etc.) will be kept in the child's classroom. All medicines must be clearly labelled.

Parents are asked to collect all medications/equipment at the end of each school term and to provide new and in-date medication at the start of each term.

Barnsbury Primary School and Nursery will dispose of needles and other sharps in line with local policies. Sharps boxes are kept securely in the medical room, this box will be collected and disposed of in line with local authority procedures.

Controlled drugs or prescribed medicines will be kept in the locked cabinet in the medical room. Access to these medicines is restricted to staff members only.

Any child requiring an EpiPen should have 2 in school. One should be carried by the pupil at all times and the other kept in the medical room. The second EpiPen should be stored in the medical room in a box with a photo of the child on the front, clearly labelled and include an emergency plan along with Cetirizine if provided.

The school will provide a red bum bag for the pupil to carry their EpiPen in and around school.

Inhalers are kept in the classroom. Children have access to these inhalers at all times. All inhalers must be marked with the child's name. All children with an inhaler must take them on educational visits, however short in duration. Inhalers should be taken with the child if they are to leave the classroom e.g. playtime, P.E., after school clubs.

### **Intimate or invasive treatment**

Intimate or invasive treatment in some settings, staff are understandably reluctant to volunteer to administer intimate or invasive treatment because of the nature of the treatment, or fears about accusations of abuse. It would be appropriate for parents to ask their child's consultant whether a different treatment, which is less intimate or invasive, could be used. Parents and responsible person must respect such concerns and should not put undue pressure on staff to assist in treatment. Wherever possible for schools of young people to arrange for two adults, to be present for the administration of intimate or invasive treatment – this will often ease

practical administration of treatment as well as minimise the potential for accusations of abuse. Staff should protect the dignity of the child as far as possible.

COVID 19 – For intimate or invasive care full PPE is required, this includes eye protection, face mask, gloves and apron. All available from the medical room in the main school office. Dispose of these items in the yellow medical bins only.

**Auto-Injector**– Any trained member of staff can administer an Auto Injector in an emergency.

The Auto-Injector (cap off) should be pushed against the child's thigh, through clothing if necessary. The Auto-Injector should be held for a count of 10 seconds before being withdrawn. An Ambulance must be called for a child who may require an Auto-Injector. Cetrizine may be given if slight tingling of the lips occurs following ingestion of possible irritants for nut allergy sufferers. Cetrizine is a liquid medicine stored with the Auto-Injector. If symptoms are more severe, the Auto-Injector should be given immediately. An ambulance must be called immediately. Parents should be contacted after this call has been made.

**Defibrillator** – Any adult can use the defibrillator called Rescue SAM, this is kept in the medical room in the main school office on top of the medicine cabinet. Easy to follow verbal instructions as soon as turned on. Paddles attached in a plastic wallet to the machine and expiry date checked regularly.

The Supporting Pupils with Medical Conditions policy is regularly reviewed, evaluated and updated annually.

### **First Aid**

The headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of first aiders are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Reporting specified incidents to the HSE when necessary (see section 6)

Staff School staff are responsible for:

- Ensuring they follow first aid procedures
- Completing accident reports for all incidents they attend to
- Informing the Headteacher or their manager of any specific health conditions or first aid needs

### **First aid procedures**

In-school procedures in the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek assistance by asking someone to call the school office.
- The staff member, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives.

- The staff member will also decide whether the injured person should be moved or placed in a recovery position.
- If the staff member judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the staff member will recommend next steps to the parents.
- If emergency services are called, a member of the office team will contact parents immediately.
- The staff member will complete an accident report form found in the office on the same day or as soon as is reasonably practical after an incident. An OSHENS report may also be required depending on the severity of injury or accident.

<i>Type of Accident</i>	<i>Example</i>	<i>Action</i>	<i>When</i>
Minor	<ul style="list-style-type: none"> <li>• Grazes</li> <li>• Minor bumps to the head</li> </ul>	<ul style="list-style-type: none"> <li>• Treated in the playground / office</li> <li>• A courtesy call to parents to inform that pupil has had a minor bump to the head. Bumped head sticker given to pupil to wear.</li> </ul>	The same day
Possibly requiring medical / dental treatment	<ul style="list-style-type: none"> <li>• Severe cuts lacerations.</li> <li>• Impact injury (bang or blow) to the head (the head is defined as whole head &amp; face)</li> </ul>	<ul style="list-style-type: none"> <li>• Details logged by staff member in accident book in medical room in office.</li> <li>• A courtesy call to parents to inform that pupil has had a bump to the head and pupil given bumped head sticker to wear.</li> <li>• Oshens -SCC Health and Safety Event Report completed on-line by the person accident first reported to. (Please print a copy and file in the pupil file in the school office)</li> </ul>	The same day
Severe	<ul style="list-style-type: none"> <li>• Major injuries e.g. Broken bones</li> <li>• Pupil becomes unconscious</li> <li>• Pupil has seizure</li> </ul>	<ul style="list-style-type: none"> <li>• Details logged</li> <li>• Oshens - SCC Health and Safety Event Report completed on-line by the person accident first reported to. Headteacher completes. (Please print a copy and file in the pupil file in the school office)</li> <li>• Reported to H &amp; S executive under Riddor.</li> </ul>	24 hrs



Off-site procedures When taking pupils off the school premises, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils
- Parents' contact details Risk assessments will be completed by the class teacher and checked by the educational visits' coordinator prior to any educational visit that necessitates taking pupils off school premises. There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

### **Record keeping and reporting**

First aid and accident record book

- An accident form will be completed by the staff member who dealt with pupil on the same day or as soon as possible after an incident resulting in an injury
- As much detail as possible should be supplied when reporting an accident, including all of the information included in the accident form
- A copy of the accident report form will also be added to the pupil's educational record by the office.
- Records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

### **Complaints**

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure (please see Parental Complaints Procedure Policy)