



St Chad's Catholic Primary School

Policy for Supporting pupils at school with Medical Needs

This policy has been written to comply with statutory guidance issued in April 2014. Section 100 of the Children and Families' Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

At St Chad's School we are committed to promoting and supporting the health, welfare and education of all children.

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.

Almost all children will suffer from an ailment at some time in their school life. It is important to distinguish between those short term conditions and those that are long term and may require medication and support in school to ensure full access to the curriculum.

Short Term Illness:

If a child is unwell while at school parents will be telephoned to collect them. If a child seems unwell before school they should remain at home. (If a child has had vomiting or diarrhoea they should remain at home for 48hrs after the last attack). When a child is in school they need to be well enough to participate fully in all aspects of the school day including play time, P.E. etc. Children may miss activities only when there is an injury e.g. a broken limb and this must be covered by a letter and discussed with the Head Teacher so needs can be met. This does not apply to long term conditions.

Advice needs to be sought by parents when an illness is considered to be contagious and the recommended period for absence from school must be followed to protect the health of other pupils and ensure a full recovery. Advice available from GP or www.nhs.uk/symptomcheckers. The school will ask for a child to be collected if they attend school with a contagious illness.

Long Term Medical Conditions:

- St Chad's School is committed to meeting the needs of all pupils and will work in conjunction with Health Services to establish the most suitable way to address the diverse needs of those children with significant and long term medical needs.
- Parents have prime responsibility for their child's health and need to provide the school with relevant information before the child starts school or when the condition first develops. Details from the GP, Health visitor and paediatrician should be obtained by the parent and passed on to school as appropriate. The school will seek advice from the School Health Service and specialist bodies as relevant.
- It is paramount that a child's medical needs are met effectively and safely and that staff feel confident and competent in managing them. To achieve this St Chad's School will work with outside agencies to support the children and to provide staff training, for example, regular training in the use of the Epi Pen. Head teacher to arrange and records to be kept.
- The Head and/or Deputy will be responsible for informing staff of a child's needs while ensuring appropriate levels of confidentiality. This includes briefing of any part time or temporary staff.
- Risk Assessments will be carried out to enable access to all areas of the curriculum including school visits and extra curricular activities.
- Consideration will also be given to how children will be reintegrated back into school after periods of absence or after transferring from another setting.
- School will also be aware that a child with a medical condition may be vulnerable to teasing or bullying. This is wholly unacceptable and the school will act to prevent any distress to a child.
- During a prolonged home confinement, the SENCo will liaise with Springboard (or other agencies) to provide home schooling.

Individual Healthcare plan

- An Individual Health Care Plan will be drawn up in consultation with parents, school, medical professionals and child where appropriate. These will be kept with permission to administer medication paperwork by the Head teacher.
- The plan should be reviewed at least annually or earlier if there is a change in the child's condition or treatment.

- Information on a IHP might include: triggers, signs and symptoms, needs, medication, special consideration eg diet or injections. It should also cover social and emotional needs and emergency procedures.
- Named individuals should be recorded for day to day support

Procedures for the Administration of Medication

There is no legal obligation for a member of staff to administer medication. However, in the event of a child needing prescribed medication (in order to be able to attend school) the school will meet with parents and agree a course of action. Direction will be taken from the parent, recorded in writing and a specific member of staff allocated to that particular responsibility ("Named Administrator"). Staff will only be asked to administer medication when they have had appropriate training and support.

- Medication that falls into this category will be stored in a locked safe in the Medical Room, which has key pad entry (or Foundation Stage block as appropriate). This does not include medication such as inhalers and Epi pens which are needed in an emergency.
- Parents must provide written permission for the administration of medicine and the prescribing doctor's instructions as to medical indication and dose must be left in school. The medication must be in the original container.
- The Head/deputyhead teacher must agree to the administration within school and this is to be recorded.
- The "Named Administrator" of the medication must keep a record of dose and time of any medication given. This is recorded in the Medication Dispensary Book, all logs are to be signed and dated.
- The "Named Administrator" of the medication will be responsible for ensuring the medication is stored securely.
- The "Named Administrator" should also ensure that medication is taken on any trips off the school premises.
- Asthma inhalers are stored in the Medical Room so that children can gain access and administer own inhalers under supervision as required.
- Parents must ensure that an up to date inhaler labelled with the child's name is in school every day. It is not sufficient to rely on a sibling's inhaler.

- The school will not allow a child who suffers from asthma on a trip if an inhaler is not available, unless they have signed the Emergency Asthma Consent Form. When off the premises the inhaler should remain with the child.
- Lists and photographs of children with long term medical needs or who suffer severe allergic reactions are displayed and distributed to each member of staff, (Lists are updated every time a new condition is disclosed.)
- Instructions for use of the Epi Pen are with the Epi Pen boxes that are stored in the Medical Room.
- If an Epi Pen needs to be administered two people should be present, one to calm the child another to administer the dose. An ambulance must be called immediately by another adult.
- Children with diabetes will have the opportunity to test blood glucose levels in the Medical Room with supervision. Any snacks must be readily available to the child at any point in the school day.

Some children with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEND) and may have a EHCP, or Education, Health and Care (EHC) plan which brings together health and social care needs.

Emergency Asthma Procedures

- Emergency asthma inhalers will only be administered to children who have been diagnosed (by a doctor) with asthma and prescribed a reliever inhaler. Parents must give written consent before the inhaler can be administered.
- A register of all children who are diagnosed asthmatic and whose parents have signed the consent form will be kept beside the inhalers.
- Only trained staff can administer the inhaler, and a record of use must be completed in the Medical Dispensary Book and parents informed immediately.

Emergency Procedures:

- **STAFF MUST NEVER TAKE A CHILD TO HOSPITAL IN THEIR OWN CAR**
An ambulance must always be called in the case of:
- A severe allergic reaction

- A severe asthma attack. A severe asthma attack is one when the symptoms do not improve sufficiently in 5-10 minutes, the child is too breathless to speak, the child is becoming exhausted or looking blue
- A diabetic child who is having a hypoglycaemic reaction and fails to recover 10-15 minutes after receiving sugar or becomes unconscious
- A first, repeated or prolonged seizure, a fit as a result of an injury
- Any other injury regarded by the First Aiders as requiring hospital treatment. If in doubt do telephone for an ambulance.

A form detailing information needed when phoning for an ambulance will be available by the telephone.

In an emergency ring 999 first then inform parents.

The adult accompanying the child should take the Medical form from the office with them in the ambulance. They should then wait with the child until the parent arrives.

Further attempts to contact parents will be undertaken by office.

Confidentiality and Responsibility

The head and staff will treat all medical information confidentially. Access to the information will be agreed with parents. If information is withheld or not given accurately the school, its staff and governors cannot accept responsibility for incorrect administration of treatment.

J. Mooney

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