

Medical Needs Policy



Policy

Reviewed: September 2024
To be reviewed: September 2025

St. John's C.E. (C) Primary School

Medical Needs Policy

Rationale

In accordance with our Christian values St. John's C.E. (C) Primary School upholds our statutory duties under The Children and Families Act 2014 by supporting pupils with medical conditions. This policy will ensure support required to meet the medical needs of pupils is of an appropriate and proportionate level; welcoming and supporting young people with medical conditions or needs who currently attend or receive our services now or in the future.

This Medical Needs Policy has been developed by consulting with a wide range of key stakeholders within both CHYPS and health settings. Key stakeholders are:

- Pupils with medical conditions or needs
- Parents
- School/Community Nurse from Locala
- Head Teacher
- SENCO
- First Aid trained members of staff
- All other staff
- Kirklees Council
- NHS Medical practitioners
- The Governing Body
- Catering Provider

St. John's C.E. (C) Primary School recognises the importance of providing feedback to those involved in the development process and is committed to acknowledging input and providing follow up to suggestions put forward.

This is a statutory policy and should be read in conjunction with Kirklees' Children Services School's Medical Needs Policy 2015 and the DfE Supporting Pupils at School with Medical Conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England.

Aims and Objectives

- Ensure no child is excluded or refused admission due to a medical condition (subject to the potential for infectious disease to impact on health of others)
- Provide all children with medical conditions or needs the same opportunities as others
- Endeavour to provide a full education with plans in place to reintegrate any child back into the setting after periods of absence
- Provide, as far as is reasonably practicable, a physical environment that is accessible to children with medical conditions; including such children in consultation about the accessibility to the physical environment
- Work with the Governing Body to highlight the impact medical conditions can have on pupil's learning and provide extra help when pupils need it; embedding the seriousness of how some medical conditions may be life threatening
- Ensure the needs of each child with medical conditions are adequately considered to involve them in structured and unstructured social activities
- Accepting that a child, at some point, may have a medical condition that may affect their attendance or participation in play, school or extra-curricular activities

- Work with parents and other healthcare professionals to put in a place a Healthcare Plan (HCP) to equip all staff and the child with the confidence and knowledge to deal with the medical condition where necessary
- Where a child also has Special Educational Needs provision will be planned and delivered in a co-ordinated way with the HCP
- Endeavour to ensure parents of children with medical conditions or needs feel secure in the care their child receives by educating staff to understand the common medical conditions or needs that affect children and the importance of protecting the dignity of pupils

Practice and Procedures

In line with our statutory duties a designated member of staff has overall responsibility. Aidan Blackburn is responsible for supporting the child with medical needs. This role includes the following:

- Ensuring staff are suitably trained – including further training should the child's condition change
- Commitment to ensure all relevant staff are made aware of the child's condition
- Cover arrangement in case of staff absence or staff turnover to ensure someone is always available
- Briefing for Supply Teachers
- Risk assessments for school visits and other activities outside the normal timetable
- Implementation and monitoring of individual Healthcare Plans

Keeping stakeholders informed

Parents and pupils are informed and regularly reminded about the Medical Needs Policy:

- Via the school's website
- In PSHE classes
- In the prospectus
- Through school communication about results of the monitoring and evaluation of the policy

Staff and other key external stakeholders are informed and regularly reminded about the Medical Needs Policy:

- Through induction training
- At scheduled medical conditions or needs training
- Through key principles of the policy being displayed in prominent staff areas
- All supply staff and temporary staff are informed of the policy and their responsibilities

Appropriate staff instruction and/or training

Staff are aware of the most common serious medical conditions and understand their duty of care to pupils in the event of an emergency. In an emergency situation staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.

All staff who work with groups of pupils receive training and know what to do in an emergency for the pupils in their care with medical conditions or needs. Training is refreshed for all staff at regular intervals with more specific training, ie using an epipen or administering Buccal, refreshed annually.

The school uses Healthcare Plans (HCP) to inform the appropriate staff, including temporary and support staff, of pupils who may need support and/or emergency intervention. All staff know who to contact in school in the event of an emergency, how to contact the emergency services and what information to give.

If a child needs to go to hospital a member of staff would accompany them and will stay with them until a parent arrives. Every effort is made to send a member of staff who the child is familiar with. Staff would not be expected to take pupils to hospital in their own car unless it was deemed time-efficient as opposed to waiting for an ambulance. More than one member of staff would accompany the child in a car.

Administration of medication

It is deemed not suitable for children to carry and administer their own medication unless a specific risk assessment requires it. Children know where their medication is stored and how to access it. This is also the arrangement for any off site visit.

Any medication that is self administered, ie inhaler, is done under the supervision of a trained member of staff. Medication can only be administered as prescribed on the dispensing label.

As some medication is not prescribed by a doctor but given on the advice of a pharmacist, such medication is administered at the Head Teacher's discretion.

Any paracetamol/calpol administered should come in a bottle with a clearly visible label outlining the correct dosage for your child's age. Paracetamol/calpol cannot be administered for more than 3 days in a row – this includes any dosage administered at home – as per guidelines on the bottle.

PLEASE NOTE SCHOOL IS NOT ABLE TO ADMINISTER IBUPROFEN THAT HAS NOT BEEN PRESCRIBED BY A DOCTOR, DUE TO POSSIBLE SIDE EFFECTS

All staff are aware that there is no legal or contractual duty to administer medication or supervise a child taking medication unless they have been specifically contracted to. Many members of staff are happy to take on the voluntary role of administering medication. Medication can only be administered under the written consent of the pupil's parent/carers and information being available on dosage, timings, etc.

Parents are informed by staff that if their child's medication changes or is discontinued, or the dose or administration method changes that **they** should notify the school immediately. Parents are informed if their child refuses their medication and this is recorded on the medicines administration form.

Storage of medication

Emergency medication is stored centrally in a green first aid box, labelled with the child's name and photograph, on the top shelf of the office cupboard. **All** staff, volunteers and students are made aware of this upon induction to ensure everyone on site is able to act swiftly in the event of an emergency.

It is Aidan Blackburn's (Headteacher) responsibility to ensure staff are conversant with the correct storage of medication; checking expiry dates, dosage, timings and date of dispensing are documented in the relevant class file and the central medical notes file.

All medication must be supplied and stored, wherever possible, in its original containers and stored in accordance with instructions, paying particular attention to temperature.

All medication that needs to be refrigerated is done so in an airtight container and is clearly labelled. Refrigerators used for storage of medication are in a secure area, inaccessible to unsupervised pupils or lockable as appropriate.

Unused medication that has expired or where the child has left the school is sent home with the parent or disposed of by taking to the nearest pharmacy by Aidan Blackburn to be disposed of in the correct manner.

Sharps boxes are used for the disposal of needles. The school owns a sharps box in the Caretaker's office but any child who requires administration of medication via a needle should have a sharps box prescribed by their GP or Paediatrician.

If a sharps box is required for an off-site visit a named member of staff is responsible for its safe storage and return to a local pharmacy or to the school or to the child's parent – whichever is relevant.

Healthcare Plans and record management

Parents are asked if their child has any health conditions, needs or issues on the new starter forms when the child first joins school. Parents are aware through the prospectus and general dialogue that the school should be kept informed of any changes to the child's medical needs or indeed if a new condition is diagnosed.

St. John's C.E. (C) Primary School uses a HCP to record important details about individual children's medical needs at schools, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the HCP if required. A HCP is completed for all children where additional support is required for the medical condition. This is completed and/or reviewed:

- Upon enrolment
- At the start of the school year
- When a diagnosis is first communicated to school by the parent

When the school receives notification that pupil has a medical condition Aidan Blackburn will be notified to ensure:

- Consultation with parents and review of any medical information they have
- Ensure support is in place; including lunchtimes
- Only trained members of staff (no volunteers) are permitted to administer medicines to the child concerned
- Clarify whether appropriate training is available and how/which health professionals will support this

It is joint responsibility between parents, healthcare professionals, Aidan Blackburn as the school representative and, where appropriate, the child with the medical condition to complete the HCP

together. Parents are expected to provide information from the child's GP and/or consultant. Additional representatives from the school, ie catering provider, may also need to be part of the individual HCP to ensure dietary needs are met. A medicines permission form must be completed for any medication that is required to be administered.

HCPs are kept in a centralised register in the school office cupboard. Aidan Blackburn has responsibility for this register. Copies of the plan are also stored in the relevant class file. Aidan Blackburn is responsible for following up any missing information or anything that is unclear incomplete. Every child with a HCP has their plan reviewed annually from a discussion with parents to ensure everything is up to date and any relevant changes are recorded. The school and the parents keep a copy of the HCP.

All members of staff, including supply teachers, have access to the HCP and when a new member of staff, ie to cover staff absence, is working with a child with a specific HCP they are made aware of it and have access to the details.

St. John's C.E. (C) Primary School protects the child's confidentiality by ensuring only staff members have access to the HCP and any details displayed in staff areas are generic to ensure a child with medical needs receives emergency care without disclosing confidential information.

Healthcare Plans are used by the school to:

- Inform the appropriate staff about the individual needs of a child with a medical condition in their care
- Remind children with medical conditions or needs to take their medication when they need to
- Identify common or important individual triggers for children with medical conditions or needs that bring on symptoms and can cause emergencies; using the information to reduce the impact of common triggers
- Ensure local emergency services have a timely and accurate summary of a child's current medical management and healthcare in the event of an emergency
- Remind parents of children with medical needs to ensure medication kept at school for their child is within its expiry date; including spare medication

Administering medication

Every child who requires medication to be administered in school, short term or long term, must have written consent in the form of a medicines in school's form that has been completed by the parent. If a child requires regular/daily administration of medication then this will be outlined in the HCP.

Any medication given to a child is recorded in the relevant class file detailing the staff member's name, time, date, the child's name, name of medication, dose and any other necessary comments. If a child refuses medication this is also recorded and parents are informed. All staff who volunteers to administer medication are provided with specific training by a healthcare professional where necessary. The school keeps a list of those who are first aid trained and the expiry date of their qualification.

Kirklees Education Safeguarding Team state the following:

Before any medication is given to a child:

1. The child's Healthcare Plan along with any instructions must be checked against the medication to be given
2. The child's name must be checked against the medication and the child's identification photograph
3. The medication is checked to ensure the correct medication is being administered
4. The dosage is checked to ensure the correct amount is given
5. **The above is checked again by a second responsible adult**
6. Both members of staff involved in administration are appropriately trained to do so

Absence and reintegration

The school recognises that children with medical conditions and needs will have times away from school for appointments, consultations, etc. or due to illness resulting from their condition. The school reinforces the protocol for the Attendance Policy but ensures ongoing support is provided to parents of children with medical conditions or needs. Daily monitoring, open dialogue, advice and meetings with the Head Teacher are arranged as necessary to ensure the child is properly supported, with work sent home, as required. On return to school after a prolonged absence the Class Teacher is responsible for monitoring the child and reporting to the office if any concerns are raised. Reintegration meetings are held with <named person> to ensure the HCP is still relevant and up to date; with any new information collected if required. Support during absence and/or reintegration may also be sought from the School Nurse and other professionals if necessary.

Inclusive environment

School is committed to providing, as far as is reasonably practicable, a physical environment that is accessible to children with medical conditions or needs. This includes consultation with the child as part of the assessment process. The school recognises that this sometimes means changing activities or locations.

Children with medical conditions or needs are actively supported to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school as required. This includes off site visits.

Staff are made aware of how a child's medical condition will impact on their participation in certain activities but will carry out risk assessments so that reasonable adjustments can be made to enable children with medical needs to participate fully in activities and visits. The views of parents, children and healthcare professionals are sought when carrying out risk assessments.

The school recognises the following unacceptable practices as outlined by the DfE and does not:

- **Prevent children from easily accessing their inhalers and medication and administering their medication where necessary**
- **Assume that every child with the same condition requires the same treatment**
- **Ignore views of the child, parents or medical advice or opinion (although this may be challenged)**
- **Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual HCP**
- **Send the child to the school office unaccompanied by a suitable adult if they become ill**

- Penalise children for their attendance record if their absences are related to their medical condition, ie hospital appointments
- Prevent pupils from drinking, eating, or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because school is failing to support their child's medical needs
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child

Inclusion and Equality

In line with our duties under the Equality Act (2010) and as set out in our Equality Policy we are committed to providing a teaching environment conducive to learning. Everybody is valued, respected and challenged regardless of race, gender, religion, social background, culture or disability. Under this duty parents and pupils have the right to discuss their concerns about the support a child with medical conditions or needs receives directly with the school if they are dissatisfied. If, for whatever reason, this does not resolve the issue then a formal complaint via the school's Complaints Policy should be made. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted. Ultimately, parents and pupils are able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

Policy Monitoring and Review

This policy is written in accordance with the DfE's Statutory Policy Review Cycle and is reviewed annually by Aidan Blackburn or when there are any changes to the statutory guidance that warrant it. It may also be reviewed earlier should it no longer comply with school practice or the legal requirements of the school.

Each classroom has a copy of the policy; accessible by all stakeholders. An electronic copy is stored on the shared network under 'Policies and a copy is available on the school website. Governors have access to a complete set of policies housed in the Head Teacher's office.

Policy produced by ..Aidan Blackburn..... Date: 05.09.24...

Approved by (Chair of Governors): Date :

Review Date: January 2023

If you need further copies of this document, or would like the document in another format, such as enlarged print, audio tape or another language, please contact the Bursar in school.

Telephone: 01924 325323

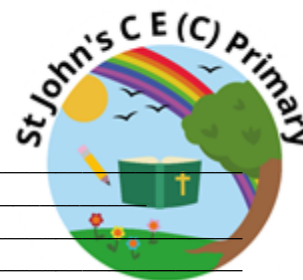
Email: office@stjohnsdewsbury.co.uk

St John's CE (C) Primary School

FORM 3A

Parental agreement for school/setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form and the school/setting has a policy that staff can administer medicine.



Name of School/Setting: _____
Name of child: _____
Date of Birth: _____
Group/Class/Form: _____

Medicine

Name/Type of Medicine (as described on the container): _____
Date dispensed: _____
Expiry date: _____
Agreed review date to be initiated by (name of member of staff): _____
Dosage and method: _____
Timing: _____
Special Precautions: _____
Are there any side effects that the school/setting needs to know about? _____
Self Administration: Yes/No (delete as appropriate)
Procedures to take in an emergency: _____

Contact Details

Name: _____
Daytime Telephone No: _____
Relationship to Child: _____
Address: _____

I understand that I must deliver the medicine personally to (agreed member of staff) _____
I accept that this is a service that the school/setting is not obliged to undertake.
I understand that I must notify the school/setting of any changes in writing.

A. UNDERSTANDING THAT THE SCHOOL CANNOT FORCE THE CHILD TO TAKE THE MEDICINE

I understand that if my child refuses to take his/her medicine, the school cannot force him/her to do so as this is a service that school is not obliged to carry out. I will be informed if this occurs. I also understand that the medicine must be brought to school in the original container that it was dispensed in and handed in by me personally to the staff in the office.

Name: _____ (please print)

Signature: _____

Relationship to child: _____

Date: _____

B. AGREEMENT FOR THE SCHOOL TO GIVE OR SUPERVISE THE MEDICATION

I have agreed that _____ (name of child) will be given medication as outlined above. This agreement will continue until the agreed review date.

Name: _____ (please print)

Signature: _____

Relationship to child: _____

Date: _____

Copies to: pupil's file
 office file