



Medical Conditions, Medicines in School and First Aid POLICY

Tollgate Primary School
Tollgate Lane
Bury St Edmunds
IP32 6DG

Plan Owner / Author:	Hannah Brookman
Date of Implementation:	
Date of Current Version:	September 2018
Next Review:	September 2020
Version Number:	1

Document Change History

Version	Author	Date	Change Details
1	Hannah Brookman	September 2018	The individual first aid, asthma and medication in school policies have been combined into one policy.

Medical Conditions

1 Rights

- 1.1 Section 100 of the Children and Families Act 2014 places a duty on the Governing Body and Senior Leadership Team (SLT) to make arrangements for supporting pupils with medical conditions.
- 1.2 Pupils with medical needs have the same right to admission as other children and cannot be refused admission or excluded from school on medical grounds alone.
- 1.3 Adults employed by the school have a common law duty to act in the place of the parent and may need to take swift action in an emergency. This also extends to teachers leading activities off-site and could involve administering medication.
- 1.4 The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply school with all relevant and up to date information.
- 1.5 A medical condition can be broadly summarised as being two types:

Short Term conditions may affect their participation in activities because they are on a course of medication

Long Term conditions have the potential to limit their access to education and require extra care and support.

- 1.6 Some children with medical conditions may be living with a disability. Where this is the case, the governing body must comply with their duties under the Equality Act 2010.
- 1.7 Some children may also have Special Educational needs and may have an Education, Health Care (EHC) plan which brings together health and social care needs, as well as their special educational needs provision. In these cases, guidance should also be taken from the SEN Code of Practice.
- 1.8 If a child is deemed to have a long term medical condition, the school will ensure there are arrangements in place to support the child. We will ensure they can access and enjoy the same opportunities as any other child, in so far as their condition allows.
- 1.9 The school will work with the child, parents/carers and health professionals to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases, this will require flexibility; for example, part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals.
- 1.10 Consideration will be given to how a child is reintegrated into school after long periods of absence.

1.11 We recognise that a First Aid qualification does not mean staff have received appropriate training in supporting children with medical conditions. When necessary, SLT will ensure staff have received appropriate training.

2 Procedures for children with Medical Conditions

2.1 It is the parents or carers responsibility to ensure school have been informed of any medical conditions and that we have all relevant and up to date information regarding the condition.

2.2 All medical conditions and dietary requirements should be listed on a child's admission form. Further details will then be asked for by the class teacher or a member of the SLT.

2.3 If a child is diagnosed with a medical condition during their time in school, then parents need to inform school as soon as possible.

2.4 An Individual health care plan will be written for each child with a medical condition; these include details of any medication and how to support the child.

2.5 If the child requires medication in school, then a 'Request to Administer Medication' form must be completed and signed by a parent.

2.6 All staff must know which members of their class have a medical condition (a class list can be found in the registration wallet). A whole school list is available in the office.

3 Individual Health Care Plans

3.1 Any children with a medical condition that, if not properly managed, could limit their access to education (e.g. children with epilepsy, asthma, allergies, diabetes, autism or ADHD) must have an Individual Healthcare Plan.

3.2 Most pupils with medical needs are able to attend school regularly and take part in school activities. However, staff may need to make some reasonable adjustments to ensure that the pupils can access activities and are not at risk.

3.3 An individual health care plan helps school to identify the necessary safety measures to support pupils with medical needs and ensure that they are not put at risk.

3.4 Parents/guardians have prime responsibility for their child's health and should provide schools with information about their child's medical condition.

3.5 Parents, and the pupil if they are mature enough, should give details in conjunction with healthcare professionals.

3.6 A school nurse may also provide additional background information and practical training for school staff.

3.7 Staff will be made aware of any Health Care Plans. Details will be in the Care Plan folder in the staff room. In the event of illness, these plans will be followed.

3.8 Each class has a full medical list for the members of their class.

4 Medicines in School

4.1 Staff will administer life-saving prescribed medication e.g. inhalers, epi-pens, or when not doing so would be detrimental to a child's attendance. For example, prescribed medication over a long period of time.

4.2 We will only accept prescribed medicines that are in-date, labelled and provided in the original container as dispensed by the pharmacist. All medicines must have a pharmacist's label on and include instructions for administering and dosage. The exception to this is Insulin which must still be in date, but will generally be available inside an insulin pen or pump, rather than the original container.

4.3 All asthma inhalers will be held in a child's classroom so they are readily available for when it may be required.

4.4 School will administer other prescribed medications e.g. antibiotics, if they are required to be given four times a day. Parents must provide the medication in the original container, with an appropriate dispensing vessel. In these instances, medication must be given in at the school office and collected at the end of the day.

4.5 If a child has an injury to a limb, or has recently had surgery, and requires pain relief (e.g. paracetamol or ibuprofen) then the school may administer this. This will be at the discretion of the SLT. If it is agreed, then procedures outlined in this policy will be followed.

4.6 If a child with a medication in school is going off-site, then all their medication will be taken off-site and carried by a member of staff. The child will be told which staff member has their medication.

4.7 In all cases, parents must complete a 'Request to Administer Medication' form. A copy of this is held in the school office and another is kept alongside a child's medication.

5 Recording Procedures for Administering Medication

5.1 Before administering medication, staff must check the details on the medication and the Individual Health Care Plan.

5.2 If a child requires life-saving medication, then one adult is able to administer or supervise a child administering the medication. For example, a salbutamol inhaler, or epi-pen.

5.3 If the child requires medication which is not life-saving, then two adults must be present when it is administered.

5.4 Staff must record when a medication is given on a 'Medication Administered Log'; they must record the date, time, name of child, medication given, and dosage given. This must be signed by the adult. If two adults have been present, then both adults must sign the log.

5.5 Staff must inform parents/carers if a child has had their emergency medication (e.g. inhaler).

6 Storage and Disposal of Medicines

6.1 All medicines must be clearly labelled with a pharmacy label.

6.2 Asthmatics will have their inhalers kept in their classrooms.

6.3 Emergency Inhalers can be found in named locations around school.

6.4 It is the parents' responsibility of the parents to collect unused medicines from the school and dispose of them accordingly.

6.5 Any medicines left at school must be disposed of through a local pharmacy.

6.6 Any children leaving school must be given all medication to take with them.

6.7 The main school office has a locked medicine cabinet; all non-emergency medications must be stored here.

6.8 If a medication is being given for a short period of time e.g. antibiotics, then these must be given to the main school office each morning by the parent and collected at the end of the day.

6.9 All staff medicines must be kept out of reach of children; either in the staff lockers, toilets or the staffroom fridge depending on storage instructions.

First Aid

7 First Aiders

7.1 The Appointed Person is Hannah Brookman

7.2 At least one member of staff will hold the First Aid at Work qualification (valid for 3 years)

7.3 There will always be a member of staff who holds a Paediatric First Aid qualification at every Nursery session and at The Den (before and after school provision)

7.4 A number of other staff will hold relevant first aid qualifications e.g. First Aid in School. This number is decided based on the needs of the school.

8 First Aid Kits

8.1 There are first aid kits kept in the MDSA cupboard, Early Years Cupboard (Butterfly Class), The Den, at the sink by the door onto the field and in the Nursery.

8.2 First Aid kits are checked regularly by Hannah Brookman. All staff have access to the first aid supplies and can restock a first aid kit as needed.

9 Accidents and illness

In the case of a pupil accident, the procedures are as follows:

9.1 If in class, then a member of staff will deal with the accident and injury.

9.2 At playtime, children make their way to the open door where a first aider will be based. The first aider will take the child in and treat the injury.

9.3 First Aiders will wear gloves when treating an injury/illness and will dispose of all waste in the bodily fluid bin found in the MDSA cupboard.

9.4 If the child has had a bump on the head/injury to the face, they must be given a letter detailing the injury and the first aid given. This must be signed by the first aider and class teacher. If parents are informed by a phone call or verbally then this needs to be recorded on the accident recording form.

9.5 Small injuries (scratches, grazes) do not need recording on a letter to be sent home. These will be recorded on the school record of accident forms.

9.6 If the injury is significant, then a trained first aider must be called.

9.7 Parents will be informed by the class teacher, or SLT, of significant accidents and the treatment given.

9.8 Any injury where medical attention is recommended must be recorded on an Incident Report Form. Hannah Brookman should be informed of any incidents where medical treatment is recommended.

9.9 Any significant injuries must be reported to the Governing Body on a termly basis.

9.10 The decision to send unwell children home will be the responsibility of the class teacher or SLT.

9.11 If it is an emergency, then:

- Arrange for the emergency services (999) to be summoned if necessary
- Arrange for parents to be informed immediately

- Arrange for the child/adult to be transported to the Accident and Emergency department by car, taking another adult as the driver

10 Off site visits

10.1 On all **off-site visits**, a first aid kit will be taken.

10.2 A qualified first aider must be present on any visit off-site

10.3 In the case of a **residential visit**, the residential first aider will administer first aid. Reports will be completed in accordance with the procedures at the residential centre and in line with school policy.

10.4 Any medication must be taken on all off-site visits

11 Recording accidents and injuries

11.1 All accidents and injuries must be recorded on the school accident log.

11.2 The date, time, child's name, location of accident, what happened, the injury and treatment given must be recorded. The staff member who gave the first aid must sign the entry.

11.3 If an injury requires medical attention then Hannah Brookman is notified and the first aider completes an Incident Report Form providing more details on the accident and injury.