

BEDFONT PRIMARY SCHOOL



Medical Needs Policy

Bedfont Primary School is committed to preserving the rights of children in accordance with the United Nations Convention on the Rights of the Child. The articles which underpin this policy are:

Article 3

The best interests of the child must be a top priority in all things that affect children.

Article 23

A child with a disability has the right to live a full and decent life with dignity and independence, and to play an active part in the community.

Article 24

You have the right to the best health care possible, safe water to drink, nutritious food, a clean and safe environment, and information to help you stay well.

Reviewed: September 2015

Introduction

At Bedfont Primary School we are committed to working with parents/carers, pupils and health care professionals to ensure the best possible outcomes for children with medical needs.

Some children may have long term medical needs and require medicines to keep them well, for example children with well-controlled epilepsy or cystic fibrosis. Others may require medicines in particular circumstances, such as children with severe allergies who may need an adrenaline injection. Children with severe asthma may have a need for daily inhalers and additional doses during an attack.

The school's policy is drawn up in line with the publication *Managing Medicines in Schools and Early-years Settings* (DfES/Department of Health, 2005), *Hounslow Managing Medicines in Schools and Early Years Settings* and Section 100 of the *Children and Families Act 2014*. The named person for policy implementation is the Headteacher. The school has a separate *Asthma Policy* (2010).

Responsibility of Parents

Parents have the prime responsibility for their child's health and should provide the school with information about their child's medical condition. Parents should obtain details from their child's General Practitioner (GP) or paediatrician, if needed. The school nurse, health visitor or specialist voluntary bodies may also be able to provide additional background information for staff.

Responsibility of Staff

Some staff may be naturally concerned for the health and safety of a child with a medical condition, particularly if it is potentially life threatening. Staff with children with medical needs in their class or group should be informed about the nature of the condition, and when and where the children may need extra attention. The child's parents and health professionals should provide this information.

All staff should be aware of the likelihood of an emergency arising and what action to take if one occurs. Back up cover should be arranged for when the member of staff responsible is absent or unavailable. At different times of the day other staff may be responsible for children, such as lunchtime supervisors. It is important that they are also provided with training and advice.

There is no legal duty that requires school staff to administer medicines. We have a number of staff who are trained in the administration of medicines, epi pens etc and are prepared to do so. We do not administer short term prescriptions e.g. antibiotics or non prescription medicines e.g. Calpol.

Long-Term Medical Needs

It is important to have sufficient information about the medical condition of any child with long-term medical needs. If a child's medical needs are inadequately supported this may have a significant impact on a child's experiences and the way they function in or out of school. The impact may be

direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state. Some medicines may also affect learning leading to poor concentration or difficulties in remembering. The impact could also be indirect; perhaps disrupting access to education through unwanted effects of treatments or through the psychological effects that serious or chronic illness or disability may have on a child and their family.

At Bedfont Primary School we need to know about any particular needs before a child is admitted, or when a child first develops a medical need. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. We will develop a written health care plan for such children, involving the parents and relevant health professionals. This can include:

- details of a child's condition
- special requirement e.g. dietary needs, pre-activity precautions
- and any side effects of the medicines
- what constitutes an emergency
- what action to take in an emergency
- what not to do in the event of an emergency
- who to contact in an emergency
- the role the staff can play

Managing Medicines on School Premises

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child will be given medicines without their parent's written consent.
- Where clinically possible, medicines should be prescribed in dose frequencies that enable them to be taken outside school hours.
- We will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and with instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date but which will generally be available inside an insulin pen or pump.
- All medicines should be stored safely and securely in a non-portable container to which only named staff should have access.
- Children should know where their medicines are at all times and should be able to access them and any associated devices immediately. This is especially important in regard to such devices as asthma inhalers, blood glucose testing meters and adrenaline pens, which should not be locked away. Consideration should be made of this when outside of school premises, e.g. on school trips.

Administration of Medicine

Any member of staff giving medicine should check the pupil's name, written instructions, prescribed dose and expiry date. Once the medication has been checked and the pupil has received the medication, then the necessary individual record card must be filled in immediately. Prior written agreement from parents is required for any medication to be given to a child. No pupils

must carry medication during the school day. The only exception to this is inhalers, which must be available at all times, including when off site or for PE. In Key Stage 2 inhalers are kept in the classroom, in EYFS and Key Stage 1 they are kept in the medical room.

Disposal of Medicines

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal.

Hygiene and Infection Control

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment. Ofsted guidance provides an extensive list of issues that early years providers should consider in making sure settings are hygienic.

Access to Education and Associated Services

Some children with medical needs are protected from discrimination under the Disability Discrimination Act (DDA) 1995. The DDA defines a person as having a disability if he has a physical or mental impairment which has a substantial and long-term adverse effect on his abilities to carry out normal day to day activities.

Under Part 4 of the DDA, responsible bodies for schools **must not** discriminate against disabled pupils in relation to their access to education and associated services. Bedfont Primary School will make reasonable adjustments for disabled children including those with medical needs. We will ensure that such pupils can access the school premises, the curriculum and the provision of written materials in alternative formats

Sporting Activities

Most children with medical conditions can participate in physical activities and extra-curricular sport. There should be sufficient flexibility for all children to follow in ways appropriate to their own abilities. For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a child's ability to participate in PE should be recorded in their individual health care plan. All adults should be aware of issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers. Staff supervising sporting activities should consider whether risk assessments are necessary for some children, be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

Emergency Procedures

Other children should know what to do in the event of an emergency, such as telling a member of staff. All staff should know how to call the emergency services. All staff should also know who is responsible for carrying out

emergency procedures in the event of need. A member of staff should always accompany a child taken to hospital by ambulance, and should stay until the parent arrives. Health professionals are responsible for any decisions on medical treatment when parents are not available.

It may be appropriate in rare cases to transport a pupil to a casualty department without using an ambulance, but this should always be on a voluntary basis. If a member of staff uses their own car for these purposes, they must ensure that they have obtained specific cover from their insurance company. The school will reimburse additional insurance premiums where necessary.

Individual health care plans should include instructions as to how to manage a child in an emergency, and identify who has the responsibility in an emergency, for example if there is an incident in the playground.

Educational Visits

Staff taking pupils off school site must make sure all pupils have a completed Parental Permission form authorising urgent first aid treatment to be given should the need arise.

Any pupil taken ill whilst off the school site but whilst on school business, must be given immediate medical attention and parents/guardian must be informed as soon as possible.

No pupils will be prevented from undertaking any Educational Visit unless it poses a direct threat to their life in comparison to their peers. In these cases parents/carers will be consulted individually.

It may be that an additional supervisor, a parent, or another volunteer might be needed to accompany a particular pupil on a trip. A copy of any health care plan should be taken on visits in the event of the information being needed in an emergency. A first aid kit will be taken on school trips.

Parents of children needing to take travel sickness medication during an educational visit should administer the medication at home before the trip wherever possible. Medication for return/further journeys should be provided in a named envelope/bag with administration directions clearly marked.

Review

This policy will be reviewed every 2 years and updated as necessary.