

TOTTENHALL INFANT SCHOOL



SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

September 2019

SUPPORTING PUPILS WITH MEDICAL CONDITIONS AND THE ADMINISTRATION OF MEDICINES

Policy Statement:

Tottenham Infant School is an inclusive community that welcomes and supports pupils with medical conditions. We understand that pupils can suffer from long term, short term, chronic and acute illnesses and will provide for all pupils without exception or discrimination. This includes both physical and mental health conditions.

Tottenham Infant School provides all pupils with any medical condition the same opportunities as others at school, enabling them to play a full and active role in school life, remain healthy and achieve their academic potential.

Tottenham Infant School makes sure all staff understand their duty of care to children and young people in the event of an emergency.

All staff feel confident in knowing what to do in an emergency. We understand the importance of medication and care being taken as directed by healthcare professionals and parents.

All pupils with medical conditions will have an Individual Healthcare Plan (IHCP) written as soon as possible after diagnosis with the support of healthcare professionals and reviewed at least annually or more often if necessary.

All staff understand the medical conditions that affect pupils at this school.

Staff receive regular training as and when required on the impact medical conditions can have on pupils. The Headteacher ensures all staff receive appropriate first aid training and have easy access to first aid equipment.

The main first aid boxes are located in the schools medical room. All classrooms have a basic first aid kit and full, portable first aid kits are taken on any off site visits. This school ensures this policy is applied across the curriculum, including PE and Educational Visits.

Policy Framework

The policy framework describes the essential criteria for how the school can meet the needs of children and young people with long term and short term medical conditions and those suffering from unexpected illness or injury at school.

Tottenham Infant School recognises that duties in the Children and Families Act 2014 (England only) and the Equality Act (England, Wales and Scotland) relate to children with disability and/or a medical condition is anticipatory. The school understands that some children who have medical conditions may also have

disabilities and / or special educational needs and this policy may be read in conjunction with the school's SEND policy, Inclusion Policy and the SEND Code of Practice 2014.

1. Introduction

- 1.1 The Governing Body and staff of **Tottenham Infant School** wish to ensure that pupils with medical conditions and/or short or long term medication needs are not excluded but receive appropriate care and support. The Headteacher will accept responsibility in principle for members of staff giving or supervising pupils taking prescribed medication or who need support due to their medical conditions during the day where those members of staff have volunteered to do so.
- 1.2 Tottenham will identify a person responsible for supporting pupils with medical conditions and/or a requirement for the administration of medicines in situations where other members of staff do not volunteer to carry out the task.

2. Parent/Carers' Responsibility

- 2.1 **Please note that parents/carers should keep their children at home if acutely unwell or infectious.**
- 2.2 Parents are responsible for providing the Headteacher with comprehensive information regarding their child's condition and/or medication requirements.
- 2.3 Prescribed medication will not be accepted in school without complete written and signed instructions from the parent (**Appendix 1**)
- 2.4 Medicines that have not been prescribed by a healthcare professional but may assist in the welfare of pupil's needs for minor ailments or injuries (e.g. Calpol) will be accepted and administered by the school only when parental permission has been signed (**Appendix 2**)
- 2.5 Only reasonable quantities of medication should be supplied to the school for the administration by staff (for example, a maximum of four weeks supply at any one time).
- 2.6 Where the pupil travels on school transport with passenger assistants, parents should ensure they have written instructions relating to any medication sent with the pupil, including medication for administration/self-administration during respite care.
- 2.7 It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
- 2.8 For staff administration - each item of medication must be delivered to the Headteacher or Authorised Person, in normal circumstances by the parent, **in a secure and labelled container as originally dispensed**. Each item of medication must be clearly labelled with the following information:

- Pupil's Name
- Name of medication
- Dosage
- Frequency of administration
- Date of dispensing
- Storage requirements (if important)
- Expiry date

3. Responsibility of School

- 3.1 Staff will not give a non-prescribed medicine to a pupil unless there is specific prior written permission from the parents
- 3.2 The school will not accept items of medication in unlabelled containers.
- 3.3 All medicine must be given to the school via the school office and appropriate paperwork must be completed. Teaching and non-teaching staff will not accept medicine from parents via the classroom.

- 3.4 Medication will be kept in a secure place, out of the reach of pupils. Unless otherwise indicated all medication to be administered in school will be kept in a locked medicine cabinet.
- 3.5 The school will keep records, which they will have available for parents.
- 3.6 If the pupil refuses to take their medication, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day.
- 3.7 In this situation the medication record should note the refusal and the parental contact made.
- 3.8 If a refusal to take medicines results in an emergency, the school's emergency procedures will be followed.
- 3.9 It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased.
- 3.10 The school will not make changes to dosages on verbal parental instructions.
- 3.11 Staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.

Individual Health Care Plans should be drawn up in partnerships between school, parents and a relevant healthcare professional. The aim is to capture the steps to help the pupil manage their condition and overcome any potential barriers in order to get the most from their education. These plans will be reviewed annually or earlier if evidence is presented that the pupil's needs have changed. Where a pupil has a special educational need identified in an EHCP, the IHCP should be linked or become part of the EHC plan.

3.12 For each pupil with a long-term or complex medical condition, the Headteacher, will ensure that an Individual Healthcare Plan (IHCP) is drawn up, in conjunction with the pupil's parents and appropriate health professionals. The IHCP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHCP for sharing this document with emergency care settings. IHCPs should be developed in the context of assessing and managing risks to the pupil's education, health and social wellbeing and to minimise disruption. IHCPs should consider;

- The medical condition, its trigger, signs, symptoms and treatment
- The pupil's resulting needs, including medication (its side-effects and storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues
- Specific support for the pupil's educational, social and emotional needs, for example how absences will be managed, requirements for extra time to complete work, rest periods or additional support including counselling
- The level of support needed, including in emergencies.
- If a child is self-managing their own medication, this should be clearly stated with arrangements for monitoring who will provide this support, their training needs, expectations of their role and confirmation of their proficiency to provide support for the pupil's medical needs from a healthcare professional
- Who in school needs to be aware of the child's condition and the support required
- Written permission from parents and the head teacher for medication to be administered
- Separate arrangements or procedures required for school trips or other school activities outside the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Arrangements for travel to and from school and what should be done if an emergency arises
- Where confidentiality issues are raised by the parent or pupil, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including who to contact and contingency arrangements

School has a centralised register of IHCPs, and an identified member of staff (SENDSCO) who has responsibility for this register.

IHCPs are reviewed regularly, at least every year or whenever the pupil's needs change.

The pupil (where appropriate), parents, specialist nurse (where appropriate), and relevant healthcare services hold a copy of the IHCP.

Relevant school staff are aware and have access to the IHCPs for pupils in their care.
School seeks permission from parents before sharing medical information with any other party.

- 3.13 Some pupils with a medical condition will also require the administration of medicines. The Headteacher will therefore ensure that all appropriate consent forms are completed and appropriate review periods set.
- 3.14 The school will make every effort to liaise with a school nursing service or health visitor to ensure that pupils with medical conditions are supported.
- 3.15 Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary under staff supervision. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in school.
- 3.16 Staff who assist in the administration of medication will be able to receive appropriate training/guidance through arrangements made with the School Nursing Service. All staff, including temporary or supply staff, know what action to take in an emergency and receive updates at least yearly and policies and procedures are discussed with temporary and supply staff. Training needs will be identified and discussed at least annually as part of the school's appraisal process. Any member of staff providing support to a pupil with medical needs will have received suitable training.
- 3.17 The school will make every effort to continue the administration of medication whilst on trips away from the premises; even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be guaranteed. This will be discussed and agreed with parents and healthcare professionals.
- 3.18 All staff will be made aware of the procedures to be followed in the event of an emergency. We will make sure that there are several members of staff who have been trained to administer the medication and meet the care needs of an individual child. We will ensure there are sufficient members of staff trained to cover any absences, staff turnover and other contingencies. The school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- 3.19 Tottenham is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility (see Accessibility plan). We make sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, including extended school activities.
- 3.20 All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti-bullying policy, to help prevent and deal with any problems. They use opportunities such as SSMC and science lessons to raise awareness of medical conditions to help promote a positive environment.
- 3.21 Tottenham understands the importance of all pupils taking part in physical activity and that all relevant staff make appropriate adjustments to physical activity sessions to make sure they are accessible to all pupils. This includes out of school clubs and team sports. All relevant staff are aware that pupils should not be forced to take part in activities if they are unwell and be aware of pupils who have been advised to avoid / take special precautions during activity.
- 3.22 Tottenham ensures pupils have the appropriate medication / equipment / food available during physical activity. Pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other pupil, and that appropriate adjustments and extra support are provided.
- 3.23 All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- 3.24 This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENDCO who will liaise with the pupil (where appropriate), parent and the pupil's healthcare professional.
- 3.25 Tottenham ensures that a risk assessment is carried out before any out of school educational visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

- 3.26 This school works in partnership with all relevant parties including the pupil (where appropriate), parent, governing body, staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully. The governing body should ensure parents are aware of the school's complaints policy and procedures should they be dissatisfied with the support provided to their child.
- 3.27 The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year. In evaluating the policy, we seek feedback from stakeholders including pupils, parents, school healthcare professionals, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services, governors and the school employer. The views of pupils with medical conditions are central to the evaluation process.

First Aid and Welfare

First-Aid Boxes

The contents of a First-Aid box are now determined by risk assessment. As a guide, where work activities involve low level hazards, a suggested minimum stock of first-aid items would be:

- a leaflet giving general guidance on first aid (e.g. HSE's leaflet Basic advice on first aid at work – see Q10);
- 20 individually wrapped sterile plasters (of assorted sizes), appropriate to the type of work (you can provide hypoallergenic plasters if necessary);
- two sterile eye pads;
- four individually wrapped triangular bandages, preferably sterile;
- six safety pins;
- two large, individually wrapped, sterile, un-medicated wound dressings;
- six medium-sized, individually wrapped, sterile, un-medicated wound dressings;
- at least three pairs of disposable gloves (you can find more advice at www.hse.gov.uk/skin/employ/gloves.htm).

The first aid needs assessment should identify if additional materials and equipment are required, for example scissors, adhesive tape, disposable aprons, hypoallergenic plasters.

First Aid Kits must not contain medicines.

Travelling First-Aid Kits

Before undertaking any off-site activities, the headteacher should assess what level of first-aid provision is needed. The HSE recommend that, where there is no special risk identified, a minimum stock of first-aid items for travelling first-aid container is:

- 6 individually wrapped sterile adhesive dressings
- one medium sized sterile un-medicated dressing (approx. 10 cm x 8 cm)
- one triangular bandage (preferably sterile, but if not, sterile covering appropriate for serious wounds should be included)
- 6 safety pins
- individually wrapped moist cleansing wipes
- disposable gloves

Hygiene/Infection Control

All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should have access to single-use disposable gloves and hand washing facilities, and should take care when dealing with blood or other body fluids and disposing of dressings or equipment.

The following advice has been prepared by the Borough Environmental Health Officer and the Employment Medical Advisory Service concerning the necessary hygiene precautions to protect first-aiders from Hepatitis B and the AIDS virus. These measures should be the norm and not just confined to persons who are known to be infected. It is important that all staff, teaching and non-teaching are aware of these precautions.

- Always cover your cuts and other skin abrasions with a waterproof dressing
 - First-Aiders should thoroughly wash their hands in soapy water before and after treating a casualty
 - Great care must be taken not to puncture yourself with hypodermic needles or other sharp instruments
 - If called upon to give mouth-to-mouth resuscitation, mouth pieces should be available for use when carrying out this procedure
 - Disposable gloves and aprons should be used when dealing with open wounds and body fluids
- If despite all efforts, a needle stick or other inoculation injury, or bite or scratch is sustained, encourage the wound to bleed, wash area with soap and water, cover with waterproof plaster and seek medical attention.

Disposal of Clinical Waste

Small quantities of tissue paper or biodegradable paper towel contaminated with urine, faeces or blood can be flushed down the toilet if there is no danger of blocking it.

First-Aid swabs can be disposed of in sanitary towel bins. Material that cannot be disposed of in this way, or larger quantities of first-aid swabs, should be sealed in a yellow plastic bag. This should then be placed in a yellow plastic sack ready for collection.

Spillages of Body Fluids

Spillages of blood, vomit, urine and excreta should be cleaned up as quickly as possible. Other persons should be kept away from the contamination until it is effectively dealt with.

1. Keep other persons away from the area until the spillage has been dealt with.
2. Wearing disposable plastic gloves and apron prepare a dilution of 1 part household bleach to 10 parts of water. As bleach can be damaging to skin immediately wash off any skin splashes with running water.
3. Cover spillage with disposable paper towels to limit the spread of the spillage or the bleach.
4. Pour the diluted bleach gently onto the covered spillage.
5. Carefully wipe up the spillage with more disposable paper towels soaked in the bleach. In the event of floor spillages, ensure that the floor is dried thoroughly after the clean-up operation to avoid slipping accidents.
6. Place towels, gloves, apron and waste in a yellow plastic bag. Yellow bags should be used only for contaminated paper and waste.

First Aid/Medical Rooms

The Health and Safety (First-Aid) Regulations 1981 require a first-aid room to be provided where there are 400 or more employees or if the employees are engaged in high-risk activities. The Education (School Premises) Regulations 1981 require only that accommodation for medical and dental examination and the treatment of pupils is available during school hours. The accommodation does not have to be for the sole purpose of administering first-aid or medical examinations, but should contain a wash basin and be close to a toilet.

Where establishments have a first aid room the following conditions should be met:

- the room should be readily available at all times
- the room should be large enough to take a couch with space for people to walk around it, and a chair.
- the room's entrance should be wide enough to accommodate a stretcher, wheelchair or carrying chair.
- the room should contain suitable facilities and equipment, have an impervious floor covering, and should be effectively ventilated, heated, lighted and maintained.
- all surfaces should be easy to clear. The room should be cleaned each working day and suitable arrangements for refuse disposal should be provided.
- suitable facilities (for example one or more chairs) should be provided if persons requiring treatment have to wait. These should be maintained and kept clean.
- the room should be clearly identified as a first-aid room (white cross on a green background)
- a notice should be attached to the door of the first-aid room clearly showing the location of the first-aider/appointed person should the room be unattended at any time.
- the room should have access to a toilet, hot and cold running water, drinking water (tap or bottled), paper towels and soap.
- a record book for recording incidents attended by a first-aider or appointed person.

4 Local Authority

- 4.1 Local authorities have a duty to commission school nurses and to promote cooperation between relevant partners with the view to improving the wellbeing of children.
- 4.2 Local authorities provide advice, support and training to ensure that support specified within healthcare plans is delivered effectively.
- 4.3 Local authorities have a duty to make arrangements when it is clear that a child will be away from school for 15 days or more (whether consecutive or cumulative across the school year) because of health needs.

5 The Governing Body

- 5.1 The Governing body will ensure that this policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils at school with medical conditions.
- 5.2 The Governing body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. This includes ensuring staff have adequate training.

6 Unacceptable practices

- 6.1 Tottenhall Infant School follows Department for Education guidelines which state schools must make explicit the following unacceptable practices:
- Preventing children from accessing their medication
 - Assuming every child with the same condition requires the same treatment
 - Ignoring views of the child and parent (although this may be challenged)
 - Sending children with medical conditions home frequently or preventing them from staying for normal school activities , unless this is specified in the health care plans
 - If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable
 - Penalising children for their attendance record if absences are related to their medical condition e.g. hospital appointments
 - Preventing children from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition effectively
 - Requiring parents to attend school to administer medication or to provide medical support to their child, including with toileting issues

- Preventing children from participating in any aspect of school life.

7 Complaints Procedure

7.1 Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school

7.2 If any reason this does not resolve the issue a complaint should be made via the school's complaint procedure. Please request a copy of this from the school office.

This Policy will be reviewed annually

September 2019