



# Supporting pupils with Medical and Health needs

## Policy

Most pupils will at some time, have a medical condition that may affect their participation in school activities. For many, this will be short term. Other children have medical conditions that, if not properly managed, could limit their access to education. This policy outlines responsibilities and procedures for supporting pupils at Fishergate Primary School who have medical needs so they are able to have full access to learning and that any necessary administration of medicine is done safely.

### Definition

Pupils' medical needs may be broadly summarised as being of two types:

- (a) Short-term affecting their participation in school activities, for which they are on a course of medication.
- (b) Long-term potentially limiting their access to education and requiring extra care and support (deemed **special medical needs**).

This policy also applies to:

- School age children who are going to be absent from school for 15 school days or more as a result of ill health (including mental health), medical procedure or injury.
- Children who have recurring periods of absence as a result of ill health e.g. cystic fibrosis
- Children who are in hospital

### Statutory Context

The Children's and Families Act 2014, The Health and Safety at Work Act 1974, The Equality Act 2010 and 'Ensuring a good education for Children who cannot attend school because of health needs' May 2013 statutory guidance, place a duty on schools to make arrangements for children with medical conditions.

**Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.**

However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent/carer who is responsible for the child's medication, and should supply the school with information. The school takes advice and guidance from the 'Guidance for Supporting Children and Young People in Schools' (City of York Council 2015) which encourages self- administration of medication when possible.

### General Context

- Medicines should only be taken to school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school day.
- Where possible, parent/carers are encouraged to ask doctors to prescribe medication in dose frequencies that can be taken outside school hours.

### Aims and Objectives:

- assist parent/carers in providing medical care for their children
- ensure staff receive proper support and training where necessary in respect of special medical needs
- adopt and implement the LA policy of Medication in Schools
- arrange training for volunteer staff to support individual pupils
- liaise as necessary with medical services in support of the individual pupil
- ensure access to full education if possible
- monitor and keep appropriate records
- require complete, written and signed instructions from the parent/carer
- provide robust safeguards for receiving, storing and administering prescribed medication

The school will endeavour to have at least one fully qualified first aider on site during the school day. A small first aid kit is situated in every classroom and full first aid kits are situated in the main school office, staff room and Early Years Unit.

### Entitlement

The school accepts that pupils with medical needs should be assisted if possible, and that they have a right to the full education available to other pupils. The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

- choose whether or not they are prepared to be involved
- receive appropriate training
- work to clear guidelines
- have concerns about legal liability
- bring to the attention of management any concern or matter relating to supporting pupils with medical needs.

### Expectations

It is expected that:

- Where parent/carers have asked the school to administer the medication for their child, they must have completed an Administering medicines form and sign consent. School staff will not accept any medication not presented properly. Pupils should not bring in their own medicine. Medication **must** only be brought into school by the parent/carer.
- The school will liaise with the School Health Service for advice about a pupil's special medical needs, and will seek support from the relevant practitioners where necessary and in the interests of the pupil.
- Any medicines brought into school by the staff e.g. headache tablets, inhalers for personal use should be stored in an appropriate place and kept out of the reach of the pupils. Any staff medicine is the responsibility of the individual concerned and not the school.
- Parent/carers are responsible for providing the school with sufficient information about their child's medical condition and treatment or special care needed at school. They should reach agreement on the school's role in helping their child's medical needs.
- Parent/carers' religious and cultural views should always be respected.

- Provide some work for children absent through ill health for up to 15 days. The child will only complete the work if they are well enough and will be provided in collaboration with the parent/carers.
- Apply for teaching from the Physical and Health needs team (PHN) for any absence more than 15 days.
- The governing body has a duty to ensure that their insurance arrangements provide cover for staff to act within the school of their employment; that the procedures outlined in this policy

### **Practice/procedures and record keeping**

We at Fishergate Primary School will:

- check the written instructions received by the parent and confirm with details on the medicine container
- check the prescribed dosage
- check the expiry date of the medicine (Note: it may be helpful to remind parent/carers if the expiry date is approaching)
- check the timing/frequency details
- check record of last dosage given (to avoid double dosage)
- measure out the prescribed dose
- check the child's name on the medicine again
- complete the written record of dosage given, including date, time and signature
- medication should be given in a situation where privacy and confidentiality may be maintained, unless in an emergency. Facilities are often needed for the pupil to rest and recover.
- Absence due to ill health will be monitored and appropriate action taken to have children in school.

### **Administration by staff**

The Headteacher will accept responsibility in principle for members of the school staff giving or supervising pupils taking medication during the school day, where those members of staff have volunteered to do so. There is no legal duty, which requires school staff to administer medication; this is purely a voluntary role.

The Headteacher will ensure that staff receive appropriate support and training where necessary. When staff follow proper procedures, they are covered by the school's public liability insurance.

All staff may treat minor cuts/ grazes with antiseptic wipes and cover them with a plaster having checked that the child is not allergic. Staff may also treat minor bruises/ traps etc. by the application of a cold compress on unbroken skin. Any head injury will be recorded on the head injury log situated in the accident folder and a copy of the head injury letter will be kept as a record of communication with parent or carer. Any injury/ accident or illness, which is not routine, will be referred to a first aider and details will be recorded in the schools incident book, which is located in the school office. In the event of a serious injury, parent/carers will be informed immediately and an ambulance called where appropriate. Staff should use protective disposable gloves and take care when dealing with blood or other body fluids and disposing of dressing or equipment.

### **Prescribed medicines**

It is the responsibility of parent/carers to supply written information about the medication their child needs to take in school. Complete written and signed instructions from the parent/carers are required. Staff should check that any details provided by parent/carers are consistent with instructions on the container or on the consent form.

- Medicines must always be provided in the original container as dispensed by a pharmacist and handed directly to the school office together with a completed Administering Medicines form.

- The form will be kept in a file in the school office and a copy will be kept in the child's classroom. After the course of medicine has been given, completed forms will be retained in a file in the school office.
- Each item of medication must include the child and prescriber's details, together with the prescriber's clear and full instructions for administration.
- Medicines that have been taken out of the container as originally dispensed will not be accepted.
- Parental/carer requests for changes to dosage will not be accepted without receiving a new supply, which is correctly labelled, or a written request from the doctor.

**It is the responsibility of parent/carers to ensure that medicines do not exceed their expiry date. Surplus or out of date medication should be collected by parent/carers for safe disposal.**

### **Non-prescribed medicines**

If medication is required, e.g. for headache, toothache, pain relief suitable for the age of the child may be administered by members of staff. Parent/carers will need to complete an Administering Medicines form.

Pupils will only be given medicine that has been purchased and supplied by parent/carers and in a dose according to the instructions on the container. Only one dose will be given in the school day. If a pupil makes a second request, the school will reconsider whether the pupil is well enough to remain in school and consult with parent/carers accordingly. Storage and administration of non-prescribed medicines will be in line with procedures for prescribed medicines. Prior to administering the medicine, staff will ensure that the medication has not passed its expiry date and that according to school records the pupil has not taken any other medication that day.

**Aspirin will not be given to pupils unless prescribed by a doctor.**

### **Teaching away from school**

If a child is to be away from school due to medical needs for more than 15 days, a referral for teaching through the Physical and Health needs teaching team. The parent/carer will need to be on the premises if a child is educated at home. The referral must be supported by medical evidence from a consultant which confirms;

- Why the child is unable to attend school
- This is likely to be for 15 days or longer, preferably indicating an end date

The Specialist Teaching team leader who can provide further information or accept referrals is:

Lynne Johns

Email: lynne.johns@york.gov.uk

Telephone: 01904 551048

### **Mental Health Needs**

For a child with mental health issues there is an expectation that evidence is provided by the Children and Adolescent Mental Health Service (CAMHS). For a child who are receiving support through other Counselling Services, evidence should be supplied from the relevant organisation. However, in order to avoid delays the PHN Needs Team will accept evidence from a GP if the young person is under a consultant but evidence is delayed

The Inclusion leader and/or named person will;

- liaise with the PHN Team to enable them to draw up a Plan to provide education for a child who is likely to be off school for more than 15 school days and for a child with recurrent absence as a result of ill-health
- provide resources for the full curriculum via the parent/carer so that the child can follow the programmes of work as far as they are able.

- provide information about the child's capabilities and educational progress e.g. special educational needs and disability (SEND) within 5 working days
- ensure that children who are unable to attend school because of health needs are kept informed about school social events and extracurricular activities that may be appropriate for them to attend. They should also encourage and facilitate liaison and communication with peers.
- liaise with the Teaching Team to formulate a plan for the child to return to school and ensure that peers are involved in supporting this return.

### **Sporting activities**

The school will ensure that members of staff and visiting coaches are aware if any child requires medication either as a precautionary measure before taking part in PE or during the activity itself. Inhalers will routinely be taken into PE or other physical activity. Pupils with medical conditions will be encouraged to take part in sporting activities appropriate to their own abilities. Any restrictions on a pupil's ability to participate in PE will be included in their individual health care plan. Some pupils may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary. Teachers should be aware of relevant medical conditions and emergency procedures.

### **Educational visits**

The school is aware of its responsibilities under the Equalities Act 2010 and will make every effort to continue the administration of medication to a child whilst on trips away from school premises. Staff will be made aware of children's medical needs, procedures for the administration of medication and relevant emergency procedure. Concerns about a child's safety or the safety of others will be discussed with parent/carers and advice sought from medical professionals where appropriate.

### **Long- term medical needs / individual health care plan**

Where there are long- term medical needs requiring medication, the child is already likely to have an individual health care plan. The plan will be reviewed with the parent/carers at least once a year or when circumstances change. Where a child is diagnosed with long-term medical needs whilst at Fishergate Primary School, the school will then draw up a written health care plan for such pupils, involving the parent/carers and relevant health professional. Individual health care plans enable the school to identify the level of support that is required at school. Those who may need to contribute to the plan are

- The Headteacher and Inclusion leader
- The parent/carers
- The child (if appropriate)
- The class teacher
- Teaching assistant
- School staff who have agreed to administer medication or be trained in emergency procedures
- The school health service, the child's GP or other health care professionals.

### **Storage**

Medicines will be kept in the school office, or in the case of a nursery/reception child, the Early Years' Unit, with the relevant forms. If necessary, they may be stored in the fridge in the school office or the Early Years Unit. Epipens will be kept out of reach, but accessible in the relevant classroom.

### **Inhalers/ Spinhalers**

Asthma inhalers will be kept within the classroom, in a designated container which is recognised by all staff and the children concerned.

**Diabetic children** are able to keep their requirements in the classroom or staffroom to allow immediate access.

### **Refusing medication**

If a child refuses their medication, staff will not force them to take it but will note it in the records and immediately provide parent/carers with details. Similarly, if for any other reason the medication has not been administered, parent/carers will be informed.

### **Hygiene/ Infection control**

All staff are aware of basic hygiene precautions for avoiding infection before and after the administration of medicines. Staff will have access to protective disposable gloves. Extra care will be taken when dealing with spillages of blood or other bodily fluids and when disposing of dressings or equipment.

### **Emergency procedures**

All staff have received basic First Aid training and know how to call the emergency services. Allocated staff have undertaken intensive First Aid training and are designated First aiders in school. A Pupil taken to hospital by ambulance will be accompanied by a member of staff until the pupil's parent/carers arrive.

### **Examinations**

If a Year 6 child is not in school due to ill health during the SATs, the school will make alternative arrangements if appropriate. If the child is absent for less than 15 days including SATs week, the decision regarding examinations will be made by the Headteacher.

### **Monitoring & Evaluation**

The Headteacher will monitor the day-to-day implementation of this policy and if any changes are required will consult with the Governing Body to effect those changes to the policy. The views of parent/carers, children (as appropriate) and staff will be taken into account when evaluating the effectiveness of this policy.

### **Linked Policies**

This policy should be read in conjunction with the school's other policies on Health & Safety, Safeguarding, Intimate care.

**Date November 2020**

**Reviewed March 2025**