

St. Theresa's Catholic Primary School

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Catholic Primary School



SUPPORTING PUPILS WITH MEDICAL CONDITIONS AND FIRST AID POLICY

(incorporating Administering of Medicines Policy)

“We learn together, we play together, we pray together, we grow together in the love of God”

St. Theresa's
Catholic Primary School



Validation Grid

Title	Supporting Pupils with Medical Conditions and First Aid Policy
Author	Barbara Costa
Associate Author	N/A
Committee	Wellbeing
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Chair of Governors

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1. Policy Statement

St. Theresa's Catholic Primary School (St. Theresa's / we / school) has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support allowing them to play a full and active role in school life, remain healthy, have full access to education (including school trips and physical education) and achieve their academic potential.

The school is committed to ensuring that parents / carers feel confident that we will provide effective support for their child's medical condition, and make the pupil feel safe.

The main aims of this policy are:

- To provide individual, appropriate support for all pupils with medical conditions.
- To make reasonable adjustments within the school to ensure pupils with medical conditions are included in daily activities, school trips and sporting events.
- To provide all parents / carers with the confidence that the school will provide effective support for their child and ensure their safety.
- To establish relationships with relevant local health services in the implementation of effective support, as well as valuing the views of parents / carers and pupils.
- To effectively manage absences caused by medical conditions, to limit the impact on a child's educational attainment.

2. Legal Framework

This policy has due regard to legislation including, but not limited to, the following:

- The Children Act 1989
- The Children and Families Act 2014
- The Education Act 2002
- The Education Act 1996 (as amended)
- The Equality Act 2010
- The Health and Safety at Work etc. Act 1974
- The Human Medicines (Amendment) Regulations 2017
- The Misuse of Drugs Act 1971
- The Medicines Act 1968
- The National Health Service Act 2006 (as amended)
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)

This policy has due regard to the following guidance:

- Department of Education (DfE) (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on first aid for schools'
- Ofsted (2015) 'The common inspection framework: education, skills and early years'
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

3. Responsibilities

The Governing Body is responsible for:

- Ensuring the Headteacher implements the Supporting Pupils with Medical Conditions and First Aid Policy and procedures of the school.
- Reviewing this policy and ensuring it does not discriminate on any grounds including, but not limited to: ethnicity / national origin, culture, religion, gender, disability or sexual orientation.
- Handling complaints regarding this policy as outlined in the school's Complaints Policy and Procedure.
- Ensuring that all pupils with medical conditions are able to participate fully in all aspects of school life within reason.
- Ensuring the level of insurance in place reflects the level of risk.

The Headteacher is responsible for:

- The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and procedures of St. Theresa's.
- Ensuring that all relevant staff are made aware of pupils' individual conditions.
- Ensuring that information and teaching support materials regarding supporting pupils with medical conditions, are available to members of staff with responsibilities under this policy.
- Keeping written records of any and all medicines administered to individual pupils and across the school population.
- Making any necessary changes to the policy, as discussed with the Governing Body upon review.
- Ensuring the policy is developed effectively with partner agencies.
- Making staff aware of this policy.
- Liaising with healthcare professionals regarding the training required for staff.
- Making the relevant members of staff aware of a child's medical condition.
- Developing Individual Health Care Plans (IHCPs).

- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
- Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- Contacting the school nursing service in the case of any child who has a medical condition.
- Organising first-aid training.
- Carrying out appropriate risk assessments (Appendix IV) when making reasonable adjustments for pupils with medical conditions, to ensure the inclusion of pupils in activities.
- Arranging appropriate cover in the event of staff absence or turnover to ensure someone is always available, and that supply staff are appropriately briefed.

The First Aid Team Leader is responsible for:

- Taking charge of the day to day health of each child in the school.
- Providing general welfare support for all school users.
- Maintaining all First Aid boxes on site.
- Checking classroom First Aid boxes.
- Liaising with the Inclusion Leader and other staff to help prepare referrals to the School Nurse and other professionals.
- Liaising with the school nurse and parents / carers to update care plans.
- Liaising with the school nurse to organise Epipen training and facilitate communication between nurse and Inclusion Leader.
- Liaising with staff, parents / carers and medical personnel ensuring the Headteacher is updated about all medical and incidental information about pupils.
- Providing assistance with first aid as required including giving out information on request and when necessary on communicable diseases, contagious conditions and ailments.
- Meeting with new parents / carers of children with medical needs.
- Collecting medical information from parents / carers for any residential trip.
- Overseeing the preparation / collection of medicine for residential trips.
- Ensuring training of all First Aiders is kept up to date.
- Maintaining staff and children's medical files.
- Liaising the collection of NHS health forms for any new child.
- Leading termly First Aid team meetings.

- Housekeeping from First Aid perspective of the medical room.

All staff are responsible for:

- Taking appropriate steps to support children with medical conditions.
- Where necessary, making reasonable adjustments to include pupils with medical conditions into lessons.
- Administering medication, if they have agreed and are qualified to undertake that responsibility.
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, if they have agreed to undertake that responsibility.
- Familiarising themselves with procedures detailing how to respond when they become aware that a pupil with a medical condition needs help.

Parents / carers are responsible for:

- Keeping the school informed about any changes to their child / children's health.
- Completing a parental agreement (see Appendix II) for school to administer medicine form before bringing medication into school.
- Providing the school with the medication their child requires and keeping it up-to-date.
- Collecting any leftover medicine at the end of the course or year.
- Discussing medications with their child / children prior to requesting that a staff member administers the medication.
- Where necessary, developing an IHCP for their child in collaboration with the Headteacher or Inclusion Leader or other staff members and healthcare professionals.

4. Definitions

"Medication" is defined as any prescribed or over the counter medicine.

"Prescription medication" is defined as any drug or device prescribed by a doctor or nurse.

A "staff member" is defined as any member of staff employed at the school, including teachers.

5. Notification

When the school is notified that a pupil has a medical condition that requires support in school, a meeting is arranged with parents / carers with a view to discussing the necessity of an Individual Healthcare Plan.

Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement is made by the Headteacher based on all available evidence (including medical evidence and consultation with parents / carers).

For a pupil starting at the school in a September uptake, arrangements are in place prior to their introduction and informed by their previous institution.

6. Training of Staff

Teachers and support staff will receive training on the Supporting Pupils with Medical Conditions Policy as part of their induction.

The school adopts a whole-school approach to training, ensuring that all staff employed by the school are aware of this policy and of their role when implementing the policy.

No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility.

No staff member may administer drugs by injection unless they have received training in this responsibility.

Staff will be advised not to agree to taking on the responsibility of administering medication until they have received appropriate training and can make an informed choice.

The school will ensure that, as part of their training, staff members are informed that they cannot be required to administer medication to pupils, and that this is entirely voluntary, unless the supporting of pupils with medical conditions is central to their role within the school.

The First Aid Team Leader will keep a record of training undertaken and a list of staff qualified to undertake responsibilities under this policy.

All permanent Teaching Assistants (TA) and Nursery Nurses will receive First Aid at Work training and / or Paediatric Training, Epipen training and depending on the need of the children, Epilepsy training.

All teachers will receive Epipen training every year.

Members of the Senior Leadership Team may also receive First Aid at Work training.

7. The Role of the Child

Children who are competent will be encouraged to take responsibility for managing their own medicines and procedures, following a discussion with their parents / carers.

Where possible, pupils will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located in an easily accessible location.

If pupils refuse to take medication or to carry out a necessary procedure, parents / carers will be informed so that alternative options can be explored.

Where appropriate, pupils will be encouraged to take their own medication under the supervision of relevant staff.

8. Individual Health Care Plans

Where necessary, an individual health care plan (IHCP) will be developed in collaboration with the pupil, parents / carers, First Aid Team Leader, Headteacher, Inclusion Leader and medical professionals.

IHCPs will be easily accessible to those who need to refer to them, whilst also preserving confidentiality.

IHCPs will be reviewed on an annual basis, or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an education, health and care (EHC) plan, the IHCP will be linked to it or become part of it.

Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the Local Authority (LA) and education provider to ensure that the IHCP identifies the support the child needs to reintegrate.

The school will develop transport health care plans for pupils with life-threatening conditions, which effectively manages home-to-school transport for the pupil.

9. Medicines

Medicines are only administered at school when it would be detrimental to a pupil's health or school attendance not to do so.

No child will be given any prescription or non-prescription medicines without written parental consent, except in exceptional circumstances.

No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.

No medication will be given without first checking the maximum dosages and when the previous dosage was taken. Parents / carers will be informed of any given medication.

Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.

Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed.

Some medication will be stored in the First Aid room (i.e. medicine which needs to be refrigerated).

Medicines and devices such as asthma inhalers, blood glucose testing and adrenaline pens will always be readily available to pupils and will not be locked away; therefore they will be kept in the classrooms.

St. Theresa's cannot be held responsible for side effects that occur when medication is taken correctly.

Any medications left over at the end of the course will be returned to the child's parents / carers.

10. Administering Medication

Administration of medicines by any member of the school personnel is undertaken purely on a voluntary basis and individual decisions will be respected. However, appropriate training will be provided before any member of the school personnel who has volunteered and accepted this role to be familiar with all administration of medication procedures.

Medicine will only be administered that have been prescribed by a doctor, or some other authorised person and where it would be detrimental to a child's health if the medicine were not administered during the day. Medicine that is required to be taken 4 times a day will be administered. Medicine that needs to be taken 3 times a day will not be administered as it can be administered by the parent before and after school, and in the evening.

Non-prescription

These treatments / medicines must not be given, including aspirin / paracetamol, unless, in the case of residential trips, there is a letter of consent. Otherwise, non-prescription drugs will not be administered by members of staff. Parents / carers can make arrangements at lunch time to administer the medication to their child.

Prescription

Children may receive prescribed medicines as long as medicine is brought in by parents / carers, in a labelled container accompanied by a signed parental agreement form.

Asthma inhalers must be kept in class. In the event of school trips, children in Y5 and Y6 children should carry their own inhalers and for the younger children, the designated First aider should be responsible for the inhalers (or appropriate medication).

All children are supervised when using inhalers and clearly labelled spare inhalers are kept in the medical room. If a child uses their inhaler, this should be recorded by a member of staff on the medication form.

Any time medicine has been administered to a child, it must be recorded (Appendix III).

The date, time, drug, dosage and the child's name must be written on the reverse of the parental agreement form (Appendix II). It must be signed and countersigned.

Only a qualified First Aider will administer medication.

11. Epilepsy

All staff are to be informed of children who are epileptic and are to be aware of action to be taken. For care of a child who is having a seizure the care plan must be followed. The First Aid Team Leader is responsible for ensuring all First Aiders are familiar with individual children's care plans and medical details.

If a child with no past history of epilepsy has a seizure, emergency services must be contacted immediately and then the child's parents / carers.

The school will arrange specialist training for staff on a yearly basis.

12. Provision of First Aid

The designated First Aiders are all the permanent TAs, and some members of the Senior Leadership Team, a list of whom can be found in the staff handbook and in the Medical Room.

Details of first aid training can be found in the medical room.

It is the Headteacher's responsibility to ensure First Aiders receive up to date training.

The designated person responsible for checking and maintaining the contents of the first aid boxes is the First Aid Team Leader. First aid boxes can be found in the medical room, staff room, kitchen and school office.

If an ambulance is required, the emergency 999 service should be used. It may be appropriate on some occasions to transport a member of staff or pupil to a casualty department without the ambulance service but it should be noted that this should always be on a voluntary basis.

In cases of serious injury, responsibility of the appointed First Aider ends when the patient is handed over to the parent / guardian / carer only.

In serious injuries, persons / children should be transported to hospital by ambulance as the patient's condition could worsen.

No attempt to move an injured person should be made until appropriate examination and assessment has been completed.

13. First Aid Box and Pouch

According to the Health and Safety Executive, First Aid Boxes will contain for employees' use, when required:

- Guidance card
- Individually wrapped sterile plasters (assorted sizes) appropriate to the type of work environment
- Individually wrapped triangular bandages
- Safety pins
- Medium sizes individually wrapped un-medicated wound dressings
- Sterile large pads with attachments
- Sterile eye pads
- Disposable plastic gloves are available. Plastic bags are available for the disposal of soiled dressings.

All First Aiders carry a first aid pouch. It is the responsibility of the First Aiders to ensure they check their pouches on a weekly basis.

14. Performing First Aid

The Headteacher will ensure that an annual risk assessment of first aid needs is undertaken, appropriate to the circumstances of the school and the supporting of pupils with medical conditions.

The Headteacher is responsible for organising first aid training.

TAs and Mealtime Supervisors are all required to undertake first-aid training.

The school has first aid boxes located in the following places: staff room, kitchen, school office and medical room. These boxes contain a sufficient number of suitable provisions to enable the administration of first aid.

First aiders will be made aware of any pupils with medical conditions and treat them accordingly, should the need for first aid arise.

First aiders will give immediate help to casualties with common injuries and those arising from specific hazards or medical conditions at the school, and ensure that an ambulance or other professional medical help is called where appropriate.

15. Emergencies

Necessary medical attention must be given as first priority and the safety of all ensured.

Medical emergencies will be dealt with under the school's emergency procedures. (Appendix I).

Where an IHCP is in place, it should detail:

- What constitutes an emergency.
- What to do in an emergency.

Pupils will be informed in general terms of what to do in an emergency, such as taking a red cross to a member of staff.

If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents / carers arrive. Parent / guardians / carers or next of kin must be contacted as soon as possible.

16. Reporting Accidents

Any accident must be fully recorded using the school's reporting system.

Accident forms must be completed for all accidents however minor.

The accident book will be monitored for patterns and to ensure preventative measures are put in place, where appropriate.

Significant accidents, as defined in the Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR) 2013 will be reported by the Headteacher to the Health and Safety Executive (HSE) without delay.

<http://www.hse.gov.uk/riddor/report.htm>

In the event of a fatal or serious injury, nothing at the site of the accident must be moved, except for helping the injured, until an examination has been carried out.

Any other accidents will be recorded in the school accident book. The school health and safety officer (Headteacher) must also be informed of injuries and dangerous occurrences.

All accidents will be investigated; the length of time dedicated to each investigation will vary depending on the severity of the accident. Where necessary, corrective action will be taken; any changes in procedures will be communicated to staff.

The school will follow the HSE advice (Incident Reporting in schools (accidents, diseases and dangerous occurrences – Guidance for employers) for reporting accidents.

The First Aid team leader is responsible for bringing any concerns or patterns to the attention of the Headteacher and / or Designated Safeguarding Lead.

17. Accidents Involving External Bleeding

Normal first aid procedures should be followed; normal procedures entail staff adherence to their first aid training.

First Aiders should wear disposable gloves when dealing with bodily fluid.

When bleeding has stopped, blood should be washed off surrounding skin with plenty of water without disturbing the wound.

Splashes of blood into the eyes or mouth of another person should be washed out immediately with plenty of water.

Contaminated surfaces should be washed thoroughly.

In the case of small cuts, whenever feasible, person should wash the affected area him / herself with water and cover the wound with a dressing provided.

18. Cut and Puncture Wounds

Free bleeding should be encouraged and the part washed with running water and then dressed.

19. Parental Consent

The written approval of parents / carers must be obtained when there is a significant risk of injury before children participate in any activity. This will also be required for any outings and trips (please see Educational Visits Policy).

20. Reasonable Adjustments

The school will meet its duties under the Equality Act 2010.

The school will make reasonable adjustments for pupils with medical conditions, including the provision of auxiliary aids.

With consideration to day trips, residential visits and sporting activities, the school will make reasonable adjustments to promote flexibility and encourage pupil participation.

The school will conduct risk assessments (Appendix IV) prior to the arrangement of any of the above, to ensure planning arrangements take into account the inclusion of pupils with medical conditions.

21. Avoiding Unacceptable Practice

The school understands that the following behaviour is unacceptable:

- Assuming that pupils with the same condition require the same treatment.
- Preventing pupils from easily accessing their inhalers and medication.
- Ignoring the views of the pupil and / or their parents / carers.
- Ignoring medical evidence or opinion.
- Sending pupils home frequently or preventing them from taking part in activities at school.
- Sending the pupil to the medical room or school office alone or with an unsuitable escort, if they become ill.
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

22. Insurance

Teachers and / or TAs / Mealtime Supervisors who undertake responsibilities within this policy are covered by the school's insurance.

Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Headteacher.

23. Complaints

The details of how to make a complaint can be found in the school Complaints Policy (found on the school website). <https://www.st-theresas.barnet.sch.uk/>

Appendix I

Contacting Emergency Services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- Your telephone number – 020 8346 88261
- Your name.
- Your location as follows:
**St. Theresa's Catholic Primary School, East End Road,
Finchley, London N3 2TD**
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and state that the crew will be met and taken to the patient.

Appendix II

Parental Agreement for St. Theresa's to Administer Medicine

The school will not give your child medicine unless you complete and sign this form.

Name of child

Date

Year Group

Medical condition or illness

Medicine

Name / type of medicine

(as described on the container)

Expiry date

Dosage and method

Timing

Special precautions / other instructions

Are there any side effects that the school / setting needs to know about?

NB: Medicines must be in the original container as dispensed by the pharmacy

Daytime phone no. of parent / carer

Name and phone no of GP

The information on the previous page is, to the best of my knowledge, accurate at the time of writing and I give consent to school / setting staff administering medicine in accordance with the school / setting policy. I will inform the school / setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature (Parent / Carer)

Print name

Date

Appendix III - Record of Medicines administered to children

Name of School: St. Theresa's Catholic Primary School

Date	Child's Name	Time	Name of Medicine	Dose Given	Reaction	Signature of staff	Counter sign

Appendix IV – Risk Assessment Proforma

All employers must conduct a risk assessment.

School name: _____ Date of risk assessment: _____

What are the hazards?	Who might be harmed and how?	What are you already doing?	Do you need to do anything else to control this risk?	Action by who?	Action by when?	Done