

# MEDICAL POLICY

**Statutory**

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## **Rationale**

Cams Hill School values the abilities and achievements of all its pupils, and is committed to providing for each pupil the best possible environment for learning. We actively seek to remove the barriers to learning and participation that can hinder or exclude individual pupils, or groups of pupils. This means that equality of opportunity must be reality for our children. We make this a reality through the attention we pay to the different groups of children within our school.

This policy is to be read in conjunction with our:

- SEN Policy • Child Protection and Safeguarding policies • Equality and Diversity Policy • Good Behaviour Policy
- Health and Safety Policy.

## **Aims**

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

## **Legislation and Statutory Responsibilities**

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

## **Roles and Responsibilities**

The Governing Body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. They will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

## **Headteacher**

The Headteacher will:

- make sure all staff are aware of this policy and understand their role in its implementation;
- ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations;
- make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way;
- ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

## **Staff**

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach.

## **Parents**

All parents will:

- provide the school with sufficient and up-to-date information about their child's medical needs;

- be involved in the development and review of their child’s IHP and may be involved in its drafting;
- carry out any action they have agreed to as part of the implementation of the IHP, eg provide medicines and equipment.

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

### Equal Opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

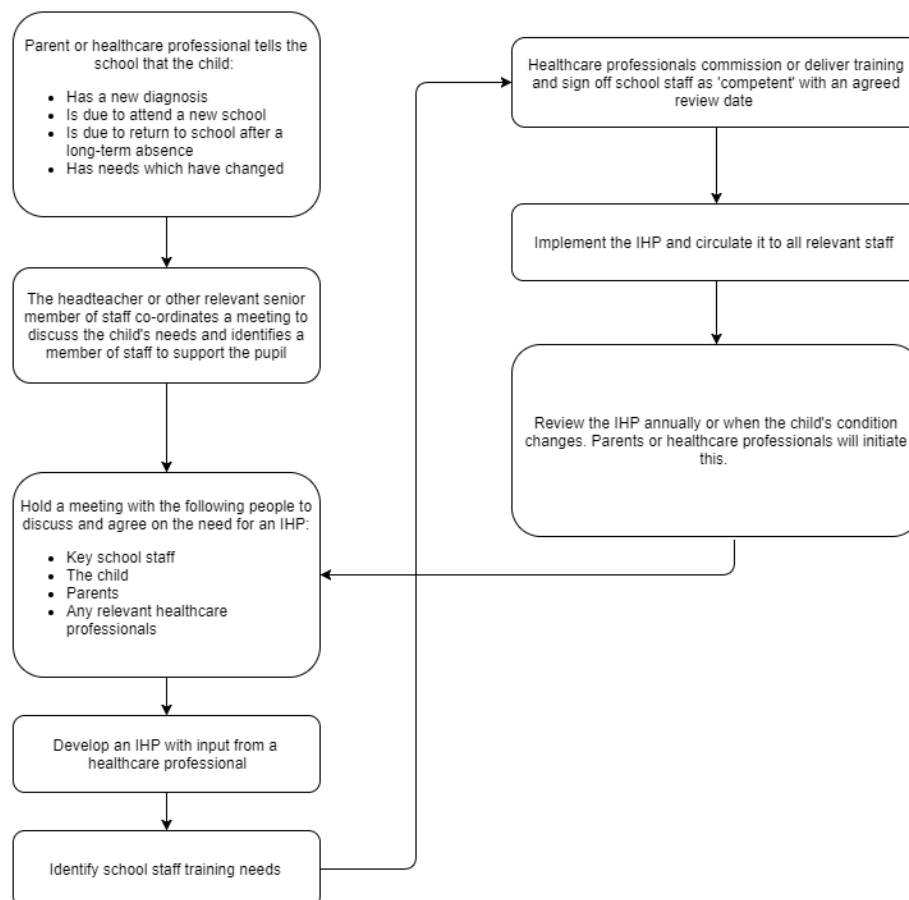
The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

### Being Notified that a Child has a Medical Condition

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.



## Individual Healthcare Plans

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the school's First Aider.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- what needs to be done;
- when;
- by whom.

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care plan (EHCP). If a pupil has SEN but does not have an EHCP, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The first aider whose role includes the responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

- the medical condition, its triggers, signs, symptoms and treatments;
  - the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, eg crowded corridors, travel time between lessons;
  - specific support for the pupil's educational, social and emotional needs, eg how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
  - the level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring;
  - who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable;
  - who in the school needs to be aware of the pupil's condition and the support required;
  - arrangements for written permission from parents for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
  - separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, eg risk assessments;
  - what to do in an emergency, including who to contact, and contingency arrangements.
- Parents will receive a copy of the IHP with the originals kept by the first aider.

## First Aid Provision and Sick Pupils

The following principles apply to the provision of First Aid at Cams Hill School:

1. The Medical Room is stocked sufficiently for a First Aider to cope with all minor accidents.
2. First Aid-trained staff will follow the procedure in dealing with accidents as detailed later in this Policy.
3. Pupils feeling unwell or in need of medical attention are dealt with in the Medical Room by a First Aider and appropriate action is taken. Cuts and abrasions are dealt with in accordance with the 'HIV preventative protocol'.
4. A record is made of all incidents where first aid is administered (in remote first aid locations and in the Medical Room) to a member of staff, a pupil or another person whilst on the school premises or when on school trips/visits.

5. First aid materials can be found in prominent locations throughout the school and all staff are advised of their position. Listed materials are checked regularly by the First Aider for stock level, use by date, contamination, etc.
6. Adequate and appropriate first aid provision is included for all out-of-school activities. All groups attending an off-site activity will have at least a one-day basic trained First Aider with them. The First Aider will carry a first aid pack that is adequately stocked.
7. For pupils requiring medication during the school day, the appropriate procedures are followed as detailed later in this policy.
8. Spare EpiPens and inhalers are kept in the Medical Room as supplied by parents. All members of staff are trained on how to administer an EpiPen.
9. Risk Assessments are completed for pupils who return to school with crutches/plastered limbs/arms in slings before reintegration into school.
10. The number of certificated First Aiders will always be at least that number required by law.

### **Dealing with Sick Pupils**

The First Aider will be the first point of contact for any pupil feeling unwell. Should the First Aider be unable to deal with that pupil, for example if they are dealing with an emergency situation, another qualified First Aider will stand in.

If a pupil feels unwell during the lesson, the teacher will send the pupil to the Medical Room with a note in their planner advising what time they left the lesson and the reason why. The First Aider will assess the pupil and decide whether the pupil should go home. Should the pupil be able to return to the lesson after 10 minutes, the First Aider will annotate the planner to this effect and send the pupil back to their lesson. Should the pupil need to be sent home, parents will be contacted and asked to collect their child from Main Reception. Pupils in Years 7-9 are not allowed to go home unaccompanied if feeling unwell. Pupils in Years 10 and 11, depending on the type of illness and with parental agreement, may go home unaccompanied. When a parent arrives, the pupil will be brought to Main Reception by the First Aider.

Pupils, other than those with medical conditions, eg diabetes or EpiPen carriers, may not be dealt with in the Medical Room during lesson time unless they have their planner signed by their teacher giving permission for them to be there. This procedure is fully explained to the pupils when they start at the school.

If a pupil becomes ill at either break or lunch time they should report directly to the Medical Room.

### **Managing Medicines**

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child under 16 should be given prescription or non-prescription medicines without their parent's written consent.
- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor.
- Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours.
- Cams Hill School will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container;
- All medicines must be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens should be always readily available to children and not locked away;
- Controlled drugs that have been prescribed for a pupil should be securely stored in a non-portable container and only named staff should have access;

- Controlled drugs should be easily accessible in an emergency a member of staff may administer a controlled drug to the child for whom it has been prescribed providing they have received specialist training/instruction; Controlled drugs are stored in a non-portable, locked safe in the Medical Office
- A record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom is will be kept. Any side effects of the medication to be administered at school should be noted;
- Sharps boxes should always be used for the disposal of needles and other sharps.

## **Medication during the School Day**

### **Prescribed Medication**

When a pupil requires prescribed medication during the school day, a consent form will need to be completed by a parent giving the school permission to administer this. The form can be downloaded from the school website [www.camshill.com](http://www.camshill.com) under 'Care, Guidance and Support/Medical and First Aid or can be requested from the First Aider. No medication other than diabetic medication can be kept in the Medical Room unless this form is completed. It is school policy to only administer prescribed medicines (eg antibiotics) if it is essential that they are given during the school day where it would be detrimental to health if it was not administered during school hours.

Whilst the school is prepared to keep prescribed medication for a pupil to be taken during the school day, it is not the school's responsibility to ensure that the pupil takes this medication at the appointed time. This responsibility lies with the parent and child. Staff are unable to seek out children who have not arrived at the appointed time to take prescribed medication, neither is it the responsibility of the school to monitor dosages taken by pupils. Parents must note in the pupil planner the time and quantity of the last dose of medication to ensure the pupil is not overmedicated.

Any medication and consent form must be handed in to the First Aider before lesson 1 (0830) by the parents.

### **Non-Prescribed Medication**

It is our general policy not to take responsibility for the administration of non-prescribed medication (eg cough mixtures provided by parents). However, on occasion, at the discretion of the First Aider where a pupil requires paracetamol, it is our policy to administer providing written consent from parents has been received. It must be provided in the original container showing dosage frequency and expiry date and be accompanied by a completed consent form. ONLY one dose of medicine will be given during the school day after 12 noon – parents will be contacted if the pupil requests medication earlier than this.

No medication, other than an inhaler and/or EpiPen, should be kept by pupils during the school day.

The school requires parents to collect any unused medication held for their child at the end of each term or periodically if it was a short term dose. Parents can give written/email permission for the pupil to take used medication home Parents are responsible for the correct disposal of unwanted medicines.

### **EpiPen**

Where an EpiPen is prescribed for a pupil the First Aider must be notified immediately .

If a Pupil needs emergency assistance a First Aider will attend immediately. The First Aider will assist and monitor until full recovery. Further monitoring will be dealt with in the Medical Room where parents/carers will be contacted. Alternatively an ambulance will be called immediately. The pupil will be issued with a blue card which should be kept with them at all times.

Pupils are responsible for their own EpiPen and are expected to carry this in their zipped inside jacket pocket at all times. A spare pen is also supplied by the parents and kept in the Medical Office. The onus is on the parents to ensure both pens are 'in date'. All staff are aware of the pupils who carry an EpiPen and the symptoms displayed by that child. All staff receive annual training on how to administer an EpiPen in an emergency

situation. A completed consent form will be required. All pupils who have an EpiPen are required to have an Individual Health Care Plan.

### **Diabetes**

Pupils who are diabetic are issued with a red card at the beginning of the school year which is kept with them at all times. The card enables a pupil to leave a lesson quickly, accompanied by another pupil, to attend the Medical Room. Parents must provide the school with a clear plastic box containing a blood count monitor and equipment, extra snacks and drinks, dextrose tablets, hypo gel, etc which will be kept in the school Medical Office for the pupil's use. The school will keep a written record of blood sugar and units administered every lunch time. All pupils who are diabetic are required to have an Individual Health Care Plan.

### **Asthma**

Pupils with asthma are responsible for their own inhaler and must carry their own inhaler with them at all times during the school day. A spare inhaler in its original prescribed box can be kept in the Medical Room for pupils with severe asthma, and an individual health care plan will be completed. A consent form completed by parents/carers is also required.

### **Risk Assessment**

For pupils who come to school whilst injured we are duty bound to carry out a risk assessment including children who attend school in plaster or on crutches. This risk assessment is to ensure that it is safe for the child to attend school and to make any specific arrangements or adjustments which need to take place to help them access lessons.

In order for this to happen, **the parent must accompany their child to school on the first day that they come in following the injury/medical situation.** The First Aider must be contacted first to arrange an appointment. It is crucial that the pupil is accompanied into school for the risk assessment because, in the unlikely event that it is deemed unsafe for the child to be at school, they will need to be taken home until it is safe for them to return. It is also good practice for the parent to be there to understand the adjustments that the school can make. If a child is sent to school with an injury without pre-arranging a risk assessment meeting, the parent should be contacted to either come into school to complete the risk assessment or take their child home if it is deemed not safe to remain at school.

### **Diarrhoea and Vomiting - Stay at Home for 48 Hours from Last Episode**

As per NHS guidance, if a child has an episode of diarrhoea or vomiting they should stay at home until at least 48 hours after the last episode to prevent spreading any infection to others.

### **Dealing with Accidents**

When a pupil has an accident the First Aider is informed either by another pupil or a member of staff. At the scene, the First Aider will assess the severity of the accident and decide whether the pupil is able to make their way (attended) to the Medical Room. Any cuts and abrasions are dealt with in accordance with the 'HIV preventative protocol'.

The First Aider will alert the Head of Year and at least one member of the Senior Leadership Team of the incident in order that they may promptly investigate as appropriate.

For more serious accidents (other than minor cuts and abrasions) an ambulance will be called. Parents will be contacted by the school and, where possible, will accompany their child to the hospital.

Where parents are unable to arrive or be contacted before the ambulance leaves the school, a member of staff will accompany the pupil to the hospital and will remain with the pupil until a parent arrives.

Parents will be:

- given the name of the hospital to which their son/daughter has been taken;



- asked to attend the hospital as a matter of urgency;
- reassured to prevent any unnecessary distress.

In all cases of pupils needing to be ambulated to hospital the First Aider will inform the Headteacher at the earliest opportunity.

An ambulance will be called for **immediately** in these cases:

- any serious head injuries;
- an EpiPen being administered;
- all suspected fractures or serious back injuries;
- first convulsion/fit;
- if there has been any amount of unconsciousness (even for a few seconds) except in the case of any pupil of whom the school is aware and managing.

The school has a defibrillator which is located immediately outside the main entrance.

### **Hygiene and Infection Control**

All staff should be aware of normal precautions for avoiding infections and follow basic hygiene procedures, eg basic hand washing. The medical room has full access to protective disposable gloves and care is taken with spillages of blood and body fluids.

### **Sporting Activities**

Some children may need to take precautionary measures before or during exercise. Staff supervising such activities should be aware of relevant medical conditions and any preventative medicine that may need to be taken and emergency procedures.

### **Educational Visits**

We actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities but are mindful of how a child's medical condition will impact on their participation. Arrangements will always be made to ensure pupils with medical needs are included in such activities unless evidence from a clinician such as a GP or consultant states that this is not possible.

A risk assessment will be complete at the planning stage to take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with parents and pupils and advice from the school first aider or other healthcare professional that are responsible for ensuring that pupils can participate. A copy of the child's individual health care plan should be taken with the child on an Educational Visit.

The teacher responsible for the trip/visit must also ensure that medication such as inhalers and epi-pens are taken on all school trips and given to the responsible adult that works alongside the child throughout the day. A First Aid kit must be taken on all school trips. The Trip Leader must ensure that all adults have the telephone number of Cams Hill School in case of an emergency.

The first aider provisions at the destination of the trip should be included as part of the risk assessment. The party leader must ensure that all necessary medicines are taken on the trip. This will mean checking the medical requirements of the class and ensuring that any child with a specific medical condition has access to prescribed medicine whilst on the trip. First Aid trained staff administering medication to children on school trips should follow the guidelines above.

### **Staff Training and Awareness**

Any member of staff providing support to a pupil with medical needs must have received suitable training. It is the responsibility School First Aider to lead on identifying with other health specialists and agreeing with the Deputy Headteacher responsible for CPL, the type and level of training required, and putting this in place. The

school first aider or other suitably qualified healthcare professional should confirm that staff are proficient before providing support to a specific child.

Training must be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will need to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.

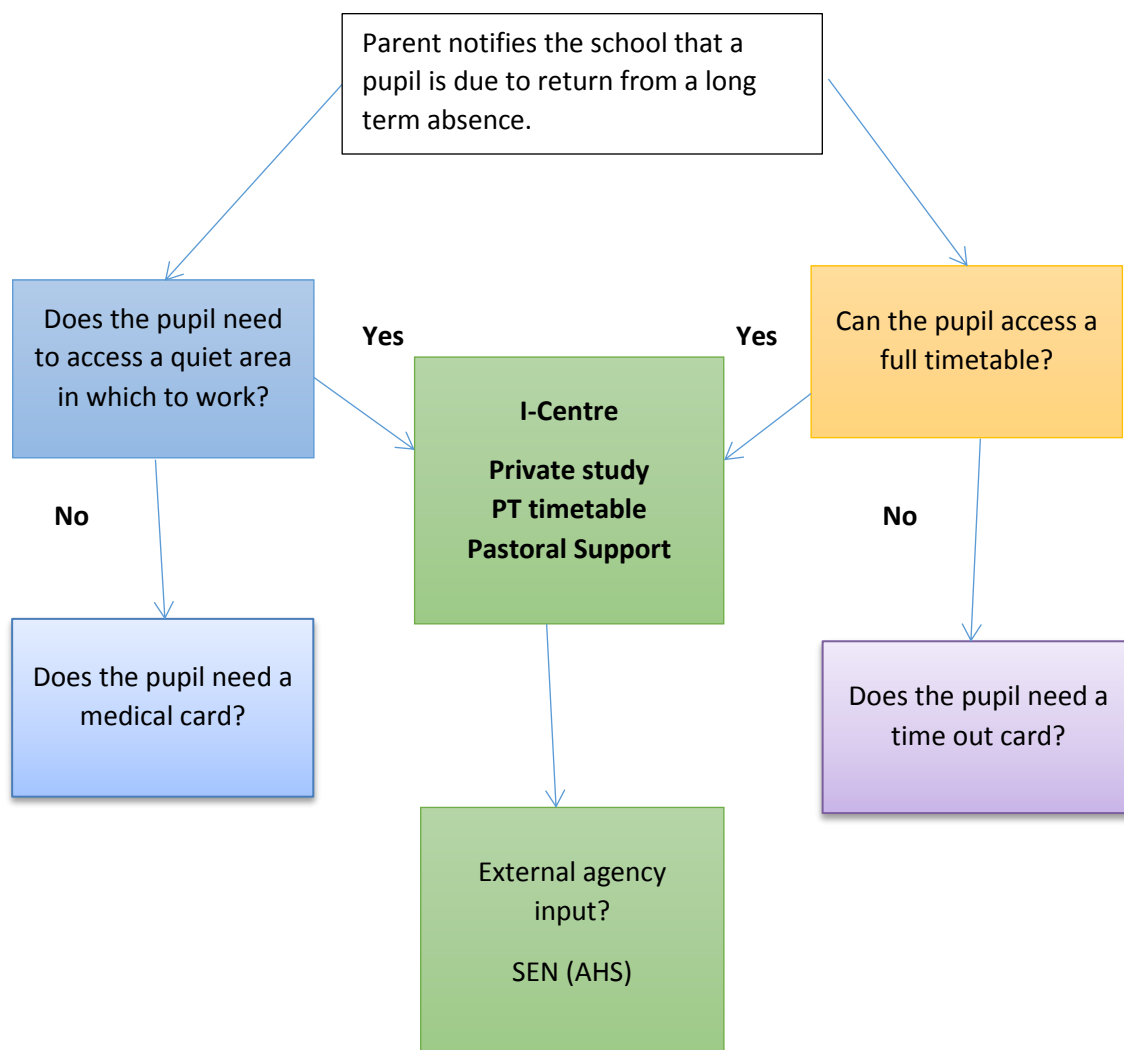
Staff should not give prescription medicines or undertake health care procedures without appropriate training.

Parents can be asked for their views and may be able to support school staff by explaining how their child's needs can be met but they should provide specific advice, nor be the sole trainer.

In addition to the training mentioned above, information on those pupils who have significant medical needs (including those with diabetes, epilepsy and severe asthma/allergies) is displayed in all office/ workroom areas.

### Return to School Following Long Term Absence

Parents are expected to notify the school when a pupil is due to return from a long term absence. The Head of Year will prepare a reintegration plan, including if necessary a phased return, with the parent/carer, consulting other staff as required such as: The Inclusion Manager (Personalised Curriculum), SENCO, Medical Officer and any external agencies. A personalised timetable based on individual need will be prepared as appropriate. A Student Risk Assessment will be completed if required together with completion of an Individual Medical Care Plan or review of an existing plan to ensure all information is current. Staff training needs will be addressed as required.



## **Guidance for Parents**

Parents are requested to inform the First Aider of any specific health problems relating to their children that may include EpiPen user, epilepsy, ADHD, diabetes and severe asthma. Parents are also encouraged to ensure the school has correct contact information in case of emergency. The form can be found on the school website under Information - Downloadable Forms - Download Change of Contact Details.

Parents of any pupil who attends the Medical Room with a frequency which causes concern will be contacted either by the Head of Year or the First Aider.

We do not encourage children to miss lessons or to stay indoors during break or lunchtimes, so before a child is sent back to school after an illness, parents must ensure that their child can cope with the whole school day.

The school website [www.camshill.com](http://www.camshill.com) has a medical page, under the heading Care, Guidance and Support, for general information which is updated frequently throughout the year.