

COPPICE PRIMARY SCHOOL

Medical Policy

Date	Review Date	Endorsed by	Approved by	Link Governor
November 2024	September 2025	FGB	Governing Body	Andrew Naismith

Aspire, Believe & Achieve











Policy last reviewed: November 2024
Policy written by: Clare Pike and Kym Arnold-Brown

Signed: *Date:*_____

MANAGING MEDICINES AND SUPPORTING CHILDREN WITH MEDICAL NEEDS / FIRST AID & MEDICAL ROOM

This policy is in line with DFE 'supporting pupils at school with medical conditions' December 2015.

Introduction

1. Our aim is to ensure that all children with medical conditions, in terms of both physical and mental health are appropriately supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

1.1 We recognise that children may require on-going support, medicines or care while at school to help them manage their condition and keep themselves well.

1.2 At Coppice Primary School we receive and fully consider advice from healthcare professionals and listen to and value the views of parents and pupils. We recognise the social and emotional implications associated with medical conditions and will support children and families to achieve the best outcomes possible.

1.3 Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Some may have special educational needs (SEN) and may have a Statement, or Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision.

1.4 The Headteacher, governors and staff of Coppice Primary School wish to ensure that children with medication needs receive appropriate care and support in order to play a full and active part in their school life.

Roles and Responsibilities

2. The Head Teacher - ensures that the school's medical policy is developed and effectively implemented with partners. That school staff are aware of the policy and understand their role in its implementation.

2.1 The Head teacher retains overall responsibility for the development of health care plans. However, the day to day management of healthcare/medical plans has been delegated to the SENCo/ First Aid Coordinator working in partnership with parents, healthcare professionals and where appropriate social care professionals.

2.2 The Head teacher makes sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

2.3 The Headteacher will liaise with the SENCo and First Aid Coordinator to monitor the effectiveness of medical provision. This will help identify any further training/advice needed for staff supporting children with medical conditions. It will ensure sufficient trained numbers of staff are available to implement the policy and will adapt to any new situations to promote best outcomes for children.

School Staff

2.4 Any member of school staff may be asked to provide support for pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.

2.5 School staff undertaking medical duties will receive sufficient training to undertake medical tasks and will achieve the necessary level of competency before they take on responsibility to support children with medical needs.

2.6 Staff should not give prescription medicines or undertake healthcare procedures without appropriate training.

2.7 The First Aid Coordinator is responsible for arranging staff training and ensuring that all relevant staff are made aware of the child's medical condition. Risk assessments will be carried out for school trips, residential stays and other school activities.

2.8 Where a child is returning to school following a period of hospital education or alternative provision school staff will work closely with parents and other partners to ensure a successful and smooth reintegration.

2.9 The School Nurse takes the lead in writing healthcare/medical plans and will meet with parents and staff to devise and review them, providing training and advice where necessary.

2.10 Specialist health care professionals may provide advice on developing health care plans and support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

2.11 Coppice Primary School acknowledge the Environmental Protection Act 1990 and have in place a strategy for dealing with the segregation and safe disposal of nappies, other soiled items and personal protection equipment such as gloves and disposal plastic aprons.

Pupils

2.11 Pupils are often best placed to provide information about how their condition affects them and should be fully involved in discussions as much as possible about their medical support needs. This will include encouraging children who are competent in managing their own medicines and procedures as reflected in their health care plans.

Parents

2.12 Parents should provide the SENCo/First Aid Coordinator with the most up-to-date information about their child's medical needs.

2.13 Parents should work in partnership with the school and health care professionals to develop and review the health care plan.

2.14 Parents should carry out any actions identified on their child's health care plan and/or medical requirements e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

2.15 Parents will ensure they adhere to the following school guidelines:

Provide complete written and signed instructions for any prescribed medication as without this the school cannot administer them.

Keep their children at home if acutely unwell or infectious for the recommended period of time.

Provide reasonable quantities of medication at a time (for example, a maximum of four weeks supply at any one time).

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.

Renew any medication when supplies are running low and ensure that the medication supplied is within its expiry date.

Deliver each item of medication to the First Aid Coordinator 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

Notify the school/ in writing if the pupil's need for medication has ceased.

2.16 Abide by the rule that the school cannot administer any medicines that have not been prescribed by a doctor.

Local Authority

2.17 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.

2.18 Local authorities provide advice, support and training to ensure that support specified within healthcare/medical plans is delivered effectively.

2.19 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.

The Governing Body

2.20 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.

2.21 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.

Training

3.1 Whole staff awareness training regarding supporting children's medical needs will be carried out at the beginning of academic year.

3.2 New members of staff and volunteers will have this training as part of their induction package.

3.3 The school undertakes annual Epipen training and diabetes training matched to the individual child's health care plan.

Administering Medicines

4.1 Medicines should only be administered in school when it would be detrimental to a child's health or school attendance not to do so.

4.2 A child under the age of 16 should never be given medicine containing aspirin unless prescribed by a doctor.

4.3 Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours.

4.4 All medicines must be prescribed by a doctor and in the original container. They must be in date, labelled with the child's name, instructions for administration, dosage and storage. The exception being insulin which still must be in date but will generally be available to schools inside an insulin pump or pen, rather than in the original container.

4.5 All medicines will be stored safely. Children and staff will know where their medicines are kept and must be able to access them immediately. Medical plans, medicines and equipment will accompany children on all trips.

4.6 Staff may administer a controlled drug to the child whom it has been prescribed by a doctor. A record will be kept and instructions will be followed.

4.7 Non prescribed medicines will be administered in school where it is felt that it will be detrimental to the pupil's attendance or wellbeing to leave school. Should a child present as unwell, with the verbal consent of parent/carer by way of a telephone call, a member of staff shall administer over the counter medication to the child in line with their symptoms and maximum dosage will be checked before administration. A second adult should witness parent permission along with the administering of the medication and a written record will be kept to include the date and time at which the medication was administered.

4.7a The school will hold the following medications: calpol (paracetamol), piriton (anti-histamine), Ventolin Asthma pump and an emergency EpiPen

4.7b Where a child with additional Health Needs presents as unwell over the counter medication will not administered by staff and parent/carer will be asked to attend school to administer instead.

4.7 c Members of staff authorised to administer over the counter medication: Kym Arnold-Brown, Chloe O'Brien, Juliet Cox, Michael Fernandez, Clare Pike, Ashley Witherington, Claire Higbee, Ian Jeffery.

4.8 Medicines no longer required will be returned to parents to arrange for safe disposal or disposed of in the medical waste bin. Sharps boxes are available in the medical room for the safe disposal of needles.

4.9 If children refuse to take medicines, 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.

4.9a Prescribed Inhaler's are administered to children for whom have written parental consent for the use of the inhaler, where asthma has been diagnosed or where an inhaler has been prescribed by a doctor due to a cough. Should a child present to a staff member showing signs of difficulty in breathing and they do not have an asthma reliever in school, they should sit down in a comfortable position and be encouraged to take some long deep breaths. It is imperative that a staff member takes charge of the situation and tries to calm the child. If the child's condition deteriorates an ambulance must be called.

Inhalers and spacers are located in the classroom (EYFS & Year 1) and in the office (Year 2 – Year 6) for children that need them, out of the reach of children but with open access to all staff. Spent inhalers are to be disposed of in the medical waste bin located in the medical room.

Unacceptable practice

Coppice Primary 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 Medical Policy 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.

Complaints Procedure

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

6.2 If 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, a copy of this can also be found on the school website.

Healthcare/medical plans

7.1 Healthcare/medical plans ensure that the focus remains on the individual child's needs and consider how their medical condition impacts on their school life.

7.2 Healthcare/medical plans provide clarity of what actions need to be taken, when they need to be carried out by and whose responsibility these actions are.

7.3 When the school is notified that a pupil has a medical condition, the First Aid Coordinator will meet with parents and healthcare professionals. Decisions will be made as quickly as possible regarding transition arrangements, staff training or support and these actions will be kept under review according to the needs of the individual child. All healthcare/medical plans are reviewed annually.

First Aid

8.1 The First Aid procedure at Coppice Primary School is in operation to ensure that every child, members of staff and visitors will be looked after in the event of an accident. It is emphasised that the team consists of First Aiders and not trained doctors or nurses. A qualified First Aider has completed relevant First Aid training which is renewed every three years.

Accidents will be dealt with in our Medical Room and all children seen will be recorded on Smart Log, an electronic accident report book. Smart Log will populate the time and date that first aid was given and the child's class and name. Staff will complete the nature on of the injury and action taken, specifying accident, injury or illness and also providing as much detail as possible. Smart Log will send an automatic incident report to parents/carers via the registered email address.

Cuts, bruises or minor injury should be treated in accordance with staff's First Aid training. For a more serious bump to the head, parents/carers should be called to assess their own child. If a child received an injury to the face, i.e. an injury to the eye, lip or neck, then the parents/carer should be contacted in case there is swelling or bruising visible before the end of the school day. Should a child present unwell during the school day, they should be assessed initially by their teacher providing they are First Aid trained and if necessary they should be accompanied to the school office.

A full history should be taken from a child, to include:

- What they have or have not had to eat and drink this morning for breakfast or lunch
- If they told their parent/carer that they felt unwell
- If they have been sick in the last 24hrs

Each child should be assessed individually and if required have their temperature taken.

If a child presents with a temperature of 38C or above, they should be assessed to see if that child is showing any signs or symptoms of being unwell. This can include: dry mouth, pale skin, beads of sweat visible, cold, and clammy or feeling hot or faint. Should a child complain of a tummy ache they should be encourages to sip water, take a visit to the toilet and if near lunch time, maybe see how the child is after having their lunch, this will be based on a child/ren's individual case.

In an emergency situation when an ambulance has been called, a parent/carer should always be contacted as soon as possible.

This policy will be reviewed annually.