



Christ Church C of E (VA) Primary School Medical Conditions Policy

Policy Statement

Christ Church C of E (VA) Primary School is committed to ensuring that children with health care needs participate fully in all aspects of school life and that their needs for safe care will be met, enabling regular attendance.

The named member of staff who has overall responsibility for ensuring this policy is correctly implemented is Mrs Long the Head Teacher for the school.

This person is also responsible for ensuring that the correct number of staff are suitably trained in first aid.

The school understands that it has a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enrol in the future.

The school aims to provide all pupils with all medical conditions the same opportunities as others at the school.

The school ensures that all staff understand their duty of care to children and young people in the event of an emergency.

The school understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.

The school understands the importance of medication being administered as prescribed.

Pupils with medical conditions are encouraged to take control of their condition.
The school will work in partnership with all school staff, school nurses, parents/carers, doctors.

All medical information is treated with confidentiality.

The school ensures that it has the appropriate level of insurance to deal with medical conditions and emergency situations. If any child is admitted with diabetes the local authority will be informed as the administering of insulin requires a higher level of insurance

Parents should not be expected to attend school to administer medication (but should ensure appropriate forms are completed if they want school to do this) or called to attend to the toileting needs of a child, unless they are unwell.

Children should not be prevented from taking part in any normal school activity due to their medical condition unless requested by or agreed with parents. These should include staying for school lunch.

General medical information

Parents at Christ Church are asked declare if their child has any health conditions or health issues on enrolment and then they are asked to complete a Contact and Medical Information Update form annually.

A Register (by class) is kept detailing children's medical conditions / needs. Copies are kept in the school office and in the Head Teachers Office. Medical needs and conditions are also recorded on the pupil SIMS database.

The named member of staff at the beginning of this policy is responsible to ensure this information is given to the relevant teachers who have a copy of their pupil's medical issues / needs in a marked 'Inhaler cupboard'. The records indicate any conditions that may pose a problem to a child with complex health care needs. Named inhalers should be kept in this cupboard for the children in that class.

During off-site activities a First Aider will accompany the children and will carry a basic First Aid Kit and a mobile phone. All children's inhalers and necessary medication will also be carried.

All staff follow hygiene procedures and have access to protective gloves.

It is the responsibility of parents/carers to provide the school with full information about their child's health care needs.

Risk Assessments

Risk assessments are completed as necessary following advice from the local authority using Evolve (off site visits) and FlameFast.

Procedures for Medicines in School

If a pupil has a short-term medical condition that requires medication during school hours, a medication request form must be completed by parents (**See Appendix 1**) and a medical administration form filled in by staff for the administering of medication (**See Appendix 2**). The head Teacher will use her discretion to decide if the administration of such medication is appropriate.

All medication must have the pharmacists label with the pupil's name, date of birth, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.

Prescribed medication is normally kept in the School Office (or in the Nursery) in accordance with the medicines instructions. If the medicine needs to be refrigerated then it will be stored in the fridge.

All medication is supplied and stored, wherever possible, in its original containers. Medication will be administered by a First Aider or nominated member of staff. Prescribed medication is stored separately for each child and the daily dose and any reaction is recorded in the Medical Folder at the time of administration. Medication must be brought to school by parents/carers; children must not bring any medication to school in their school bags.

The school is unable to administer non prescribed medicines although parents may make arrangements to come into school / nursery if they wish to give these to their child if necessary.

Medicines no longer required are returned to parent/carer for disposal.

If any parent has any complaints regarding this policy they should contact the Head Teacher or Chair of Governors.

Health Care Plans

A Health Care plan will be drawn up with the parents, school nurse or Health Visitor (nursery), and the SENCo or member of management team.

The plan will record important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Health Care Plan if required.

The Care Plan will be reviewed annually (or sooner if a child's needs change).

In accordance with the Health Care Plan, the Head Teacher accepts responsibility for staff to give or supervise children taking long term prescribed medicines.

Staff Training

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

Staff receive training on the impact medical conditions can have on pupils. Staff are given written instructions of the procedures for dealing with children with significant health needs together with an identity photo. These instructions are also displayed in the first aid room and staff room.

Staff are trained by health professionals to deal with children's specific health needs (e.g. Epi-pen for allergic reactions). Training for some staff will be given if needed for specific medication as and when required.

Members of staff providing first aid to children in school hold a first aid certificate. A record of this training is kept by the Health and Safety Officer and renewed when necessary.

There should be at least one trained "First Aid at Work" named person on the premises during school hours. An "Appointed Person" should be on site before and after school.

First Aid

If a child is injured during the school day they will be seen by a qualified first aider. Minor incidents are dealt with by the class teacher at their discretion. If they are concerned at all they should contact the first aider. The incident will be recorded on the Medical Incident sheet. If the child is considered fit to return to class or play they will be allowed to do so, if not they will be returned to class and their parents / carers informed.

If a child feels unwell i.e. feels sick or has a tummy ache, they will be seen by a first aider and then monitored by class teacher/support staff (Key Worker in Nursery) for a short time. If they recover they will be encouraged to continue their day as normal or if not their parents will be informed.

If a child suffers a bump or knock to any part of their head, a Head Bump letter will be completed and sent home. The incident will be recorded on the accident incident sheet. A first aider will deliver these to the child's teacher to ensure that staff are aware that an incident has occurred. These will be given to the child at the end of the day to take home to their parents.

Any lunchtime Head Bump letters will be taken by the dinner supervisors to the classes at the start of afternoon school and the children will be checked.

The school will always call parents if any child continues to feel unwell.
For any emergency or significant incident / injury the Emergency Procedures will be followed.

In the event of a significant accident or incident, the local authority would be informed.

At all times the school will err on the side of caution and will inform parents of any incidents.

Emergency Procedures / Ambulance

Guidance for calling an ambulance in an emergency is displayed in the main office (**See Appendix 3**).

Details will be recorded in the accident book when an ambulance has been called. The school will err on the side of caution and call an ambulance when any doubt arises.

A child taken to hospital by ambulance is accompanied by a member of staff if the child's parent/carer cannot be contacted. The member of staff will remain with the child at the hospital until the parent/carer arrives.

Conditions

Asthma

Christ Church School recognises that asthma is a widespread, serious but controllable condition and the school welcomes all pupils with asthma. At the beginning of each school year or when a child joins the school, parents/carers are asked if their child has any medical conditions including asthma on their enrolment form.

All parents/carers of children with asthma are consequently sent an Asthma Form (**Appendix 4**) which gives details of individual medication and the treatment required.

From this information the school keeps and monitors an asthma register which is available to all staff.

We maintain a "No Smoking" policy across the whole school site.

The School ensures that all staff (including supply teachers, support staff and lunchtime staff) have a clear understanding of what to do in the event of a child having an asthma attack.

The school ensures that pupils with asthma can and do participate fully in all aspects of school life, including art lessons, PE, science, visits, outings or field trips and other out-of-hours school activities.

Teachers will remind pupils whose asthma is triggered by exercise to take their reliever inhaler before the lesson.

If a pupil needs to use their inhaler during a lesson they will be encouraged to do so.

Staff recognise that pupils with asthma need immediate access to reliever inhalers at all times. All inhalers are kept in the child's classroom in a clearly marked cupboard so that the children and staff can immediately find them. The children should be able to use them independently but will be assisted by school staff whenever required.

Staff will ensure that all children's inhalers are taken on any school trips or offsite activities.

Parents / cares will need to check the expiry dates on the asthma pumps.

It is the responsibility of parents/carers to provide the school with full information about their child's health care needs and update the school with any changes.

Anaphylaxis

Children that may be susceptible to allergic reactions will be recorded on the medical registers. If a child has ever had a severe reaction or Anaphylaxis Shock a Care Plan will be completed. All staff need to be aware of any factors that might trigger a reaction.

We ensure that dinner supervisors and kitchen staff are aware of children's specific allergies and photographs of these children supplied to kitchen staff along with a list of allergies.

Staff and children are requested not to bring nuts into school as these are a known allergic trigger for many children.

If an Epi-pen is required these will be kept in a marked cupboard in the school office and or designated area in the Nursery. In a container marked with Child's name and photograph.

Staff receive training from the school nurse in the use of Epi-pens.

It is the responsibility of parents/carers to provide the school with full information about their child's health care needs and update the school with any changes.

Diabetes / Hypoglycaemia

No children currently have a diabetes diagnosis but the following procedures will be followed as and when required.

Children that are diagnosed with Diabetes or Hypoglycaemia will be recorded on the Medical Registers. If a child has an episode a Care Plan will be completed. If specific sugary drinks or foods are required these will be kept in a marked area in the School office. If any medication is required this will be kept in the School Office or in the Nursery in accordance with the medicines instructions, dependant on any possible temperature requirement.

The local authority must be notified if a diabetic child starts at the school and requires insulin administered.

It is the responsibility of parents/carers to provide the school with full information about their child's health care needs and update the school with any changes.

Epilepsy

Children that are diagnosed with Epileptic seizures will be recorded on the Medical Registers. All staff need to be aware of any factors that might trigger a seizure. A Care Plan will be completed. If medication is required it will be kept in a marked area in the school office or Nursery as deemed necessary for that child.

It is the responsibility of parents/carers to provide the school with full information about their child's health care needs and update the school with any changes.

Guidance on Infection Control

Hand washing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting, and respiratory disease.

Soap and warm water should always be used. Hands must be washed after using the toilet, before eating or handling food, and after handling animals. Cuts and abrasions should be covered where necessary.

Coughing and sneezing easily spreads infections. Children and adults should be encouraged to cover their mouth and nose with a tissue. Hands should be washed after using or disposing of tissues. Spitting is not permitted.

Personal protective equipment (PPE) such as disposable latex free plastic gloves and plastic aprons must be worn where there is a risk of splashing or contamination with blood / body fluids (e.g. for nappy or pad changing). Correct PPE should be used if handling cleaning chemicals.

Cleaning of the environment, including toys and equipment, should be frequent and thorough. Cleaning of blood and body fluid spillages including urine, faeces, saliva, vomit, nasal and eye discharges should be cleaned up immediately. When spillages occur, a cleaning product that combines both detergent and disinfectant should be used. Mops must not be used for cleaning up blood and body fluid spillages – use disposable paper towels and discard clinical waste as described below. Children's soiled clothing should be bagged to go home, never rinsed by hand.

Clinical waste must always be segregated from domestic waste. Used nappies/pads, gloves, aprons, and soiled dressings are placed in the clinical waste bins situated in the locked cupboard in the boys toilet in KS 1 the school. This is collected regularly.

If the skin is broken following a bite, sharp instrument or scratch, the wound should be cleaned thoroughly. Depending on the severity of the injury it may be necessary to contact the GP or go to hospital. If the skin is broken as a result of a bite, parents should be advised to take their child to the doctors so the wound can be examined by medical professionals.

Animals may carry infections so hands should always be washed after handling. Staff should always check if any child has a known allergy to animals. A risk assessment should be carried out if a visit to a farm or similar establishment is being planned.

Some medical conditions make children vulnerable to infections that would rarely be serious in most children. In the case of any children that the school are aware have a vulnerability to infections, the parent/carer should be informed promptly and further medical advice sought.

Female Staff – Pregnancy

If a pregnant woman develops a rash or is in direct contact with someone with a potentially infectious rash, this should be investigated by a doctor. Infectious risks may include Chicken Pox, Shingles, German Measles, Slapped Cheek and Measles.

Immunisations

Parents should be encouraged to ensure that their child's immunisations are up to date.

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Request to administer medication

Name of child.....

Class Male / Female

I authorise the Head Teacher or nominated member of staff to administer the following prescribed medicine:-

Name / type of medication (as described on the container)

.....

At or..... times a day,

for Days

Has your child shown any side effects since taking this medicine?

.....

If so, what are they?

Please give a brief description of why your child needs this medication.

.....

.....

Signed: (parent)

Appendix 1

Appendix 2

Ambulance Procedures

When the decision to call an ambulance for a child has been made, these procedures should be followed: -

- A responsible adult stays with the child
- The person calling the ambulance needs to have a verbal report on the child's condition to pass onto the operator, who then gives advice on dealing with the child until the ambulance arrives
- If necessary, a red triangle should be sent to summon help in dealing with the other children (e.g. in the gym or playground)
- As soon as the ambulance has been summoned, the Parents/Carers should be contacted
- If they can get to the school quickly, they can go with the child to the hospital
- If not, they should be asked to go straight to the hospital
- The child's details should be copied out for the paramedics
- The gates should be unlocked and someone should wait there to meet the ambulance
- If Parent/Carers have not arrived, a member of staff should accompany the child to hospital and wait with the child until they arrive
- Schools Accident & Incident Form (SAIR) to be completed in the event of the child needing an ambulance due to an accident at school
- The other children should be reassured and kept informed at a level appropriate to their age and understanding.

Appendix 3

Asthma Form

Name of child: _____ Class _____

Name of Drug: _____

When is it required At home: _____

At School: _____

What are your child's triggers ? _____

Does your child tell you when he/she needs medicine Yes* No*

Does your child have / need an asthma pump in school ? Yes* No*

Number of puffs required: _____

Can your child use the inhaler independently? Yes* No*

Does your child need to use a spacer? Yes* No*

What signs can indicate that your child is having an attack ? _____

What action should be taken in a severe attack: _____

Has your child ever been hospitalised due to an Asthma attack: Yes* No* If so:

How frequently? _____

For how long? _____

I give my permission for my child to use his / her* asthma inhaler at School:

1. Whenever necessary: _____

2. Every Lunchtime: _____

3. Other times: _____

Signed: _____ Date _____
(Parent / Carer)

*Please tick or delete as appropriate

Please note: Parents must ensure that their child's Asthma pumps are in date and checked regularly.