



Medical Treatment of Children Policy

May 2017

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Throughout this policy, the term “parent/carer” refers to those adults having parental responsibility for a child.

1.0 Roles and Responsibilities

The Head Teacher is responsible for this policy and its implementation. On an operational basis, the responsibility for leadership, organisation and review of this policy will be undertaken by the Deputy Head Teacher.

2.0 Suggested Audience

All teaching staff and relevant school leaders.

3.0 Related Policies

This policy should be read alongside a suite of other school policies, which should also be referred to:

- The First Aid Policy
- The Educational Trips Policy
- Staff Handbook

4.0 School Mission Statement

Eden Primary is an inclusive, tolerant, broad-minded and warm-hearted school that intends to play a central role in the community it serves and amongst which it sits. Our aim is to foster in our pupils:

- a love of learning
- a sense of pride and responsibility for their place in society
- an understanding of Judaism and its role in partnership with other faiths
- a love of nature
- an ability to value all people equally
- the ability and desire to achieve their potential in all things

Our approach to medical treatment, like all aspects of the school, will reflect our mission and vision, in that it will be considerate, caring, individually targeted and responsible.

5.0 Introduction

5.1 The school is committed to giving all its children full opportunity to access the curriculum. Every effort will be made to ensure that children with medical needs experience the best possible care whilst at the school. This policy provides a sound basis for ensuring that children

with medical needs receive proper care and support at school. In addition, the school has adopted the guidance published by the DfE/Department of Health entitled 'Supporting Children with Medical Needs: a good practice guide'. This publication may be accessed at - http://www.teachernet.gov.uk/_doc/4422/med.pdf

- 5.2 All medical information received by the school will be treated confidentially. Information required to ensure the safety and care of individual children will be disclosed as appropriate to staff of the school. Such procedure will be discussed with the child and parent/carer for their agreement, prior to the disclosure.

6.0 Children with Long-term Medical Needs

- 6.1 Children with long-term medical needs entering the school from nurseries or pre-schools will usually be identified through discussions with their nursery and through information provided by the child's parent or carer, such information will be checked with the parent/carer to ensure appropriate records are kept, and appropriate provision can be made via an Individual Healthcare Plan
- 6.2 Parents/carers are requested to contact the school in confidence with any information that they feel it will need, in order to care most effectively for their child. Parents/carers will be required to complete, in confidence, an Individual Healthcare Plan to identify all medical needs and accompanying support. This may require endorsement from the child's doctor or appropriate hospital department.
- 6.3 Parents/carers are responsible for informing the school as soon as possible of any medical issues that arise during their child's time in the school or any changes to an existing medical issue..

7.0 Medicines in School

- 7.1 While all staff have a duty to take reasonable care for the health and safety of children at the school (including the oversight and management of a child's care plan/care package, which must be up to date and received on time) there is no contractual obligation for staff to administer medication. Where staff do agree to participate in this duty, it should be recognised that these duties are a voluntary action.
- 7.2 Provided that staff act in accordance with the school's policies and procedures, they will normally be fully covered by the school or Governing Body's Public Liability Insurance. These procedures make it clear that only authorised and appropriately trained staff can administer medication to children, or supervise the self-administration of medicine

by children. In general, the consequences of not taking action are likely to be more serious than those of trying to assist in an emergency.

- 7.3 Medication will only be accepted in the school if a doctor has prescribed it. Parents/carers must inform their child's teacher if their child has been prescribed a controlled medication - e.g. Methylphenidate (e.g. Ritalin, Equasym). Controlled drugs are subject to the prescription requirements of Drug Regulations and the prescribing doctor is responsible for informing the patient when a drug belongs to this group. Controlled drugs are most unlikely to be prescribed to children at the school, except Methylphenidate.
- 7.4 It is expected that parents/carers will normally administer medication to their children at home. Medication will not be accepted anywhere in the school without complete written and signed instructions from parents/carers, including written medical authority if the medicine needs to be altered in any way - e.g. the crushing of tablets.
- 7.5 Only reasonable quantities of medication should be supplied to the school by a parent/carer - no more than one week's supply - and this must be recorded in the Medication Administration Records File. It is the responsibility of parents/carers to collect and dispose of any medicines held in at the school, at the end of each term.
- 7.6 Each item of medication must be delivered in its original container and handed directly to a member of staff in the School Office.
- 7.7 Each item of medication must be clearly labelled with the following information:
- Child's name
 - Name of medication
 - Dosage
 - Frequency of dosage
 - Date of dispensing
 - Storage requirements (if important)
 - Expiry date (if available)
- 7.8 The school will not accept items of medication which are in unlabelled containers.
- 7.9 Unless otherwise indicated, all medication to be administered in the school will be kept in a designated, clearly-identified, locked cupboard.

- 7.10 The school will provide parents/carers with details of when medication has or has not been administered to their child. It remains the responsibility of the parent/carer to contact the school office at the end of each day to receive this information.
- 7.11 Where it is appropriate to do so, children will be encouraged to administer their own medication under staff supervision. For safety reasons, children are not allowed to carry medication, with the exception of inhalers. The school reserves the right to insist that these items are also handed in if the child is not believed to be responsible enough to keep them on their person. All medicines must be handed to a member of staff nominated by the Head Teacher.

Where staff are to administer medicine, this will be done by 2 members of staff in order to check dosage etc.

- 7.12 It is the responsibility of parents/carers to notify the school if there is a change in medication or dosage requirements, and also if the child's need for medication is discontinued.
- 7.13 Staff who volunteer to assist in the administration of medication will receive appropriate training/guidance through arrangements made with the *School Nurse Service or equivalent*.
- 7.14 To ensure that, as far as is possible, all pupils have access to all activities and areas of school life, a thorough risk assessment will be undertaken to ensure the safety of all children and staff. No decision about a child with medical needs attending/not attending a school trip will be taken without prior consultation with the parents/carers.

8.0 Illness in School

- 8.1 If a child becomes ill in a lesson and the teacher feels that medical treatment is required, the child should be sent to the *school office*, accompanied by another child or support staff if necessary.
- 8.2 The school has a strict policy that no medication will be given orally or externally unless it is a known condition and written permission has been given by the parent/carer. Parents/carers may be contacted, depending upon the nature of the medical problem.
- 8.3 If the teacher feels that a child is too ill or injured to be moved, then a designated First Aid member of staff will be called. First Aid should be administered, as appropriate. If it is thought that follow-up treatment is

required, the parent will be contacted or a letter sent home with the child.

- 8.4 In more serious cases, where hospital attention is deemed necessary, the school will contact parents/carers, who will be expected to take their child to hospital.
- 8.5 In an emergency, an ambulance must be called and the parent/carer contacted by the school. In the absence of a parent/carer, a member of staff will accompany the child to the hospital and remain there until the parent/carer arrives.
- 8.6 If a parent/carer cannot be contacted, the school will act 'in loco parentis' and give permission for any emergency treatment.

9.0 School Off-site Visits

- 9.1 Sufficient essential medicines and appropriate Healthcare Plans will be taken, and controlled by the member of staff leading the trip.
- 9.2 If it is felt that additional supervision is required during any activities - e.g. swimming, the school/setting may request the assistance of the parent/carer.

10.0 Specific Medical Issues

- 10.1 The school welcomes all children and encourages them to participate fully in all activities.
- 10.2 The school will arrange for appropriate training /advice for all staff on the practical aspects of management of:
- Asthma attacks
 - Diabetes
 - Epilepsy
 - An anaphylactic reaction
 - Allergies
- 10.3 The school will keep a record of children who may require such treatment by means of an Individual Healthcare Plan
- 10.4 The school expects all parents whose children may require such treatment to ensure that appropriate medication has been provided to

the school, together with clear guidance on the usage of the medication.

11.0 Monitoring and Review

The nominated postholder (Deputy Head) will work closely with other staff to ensure the implementation and full development of this policy and provision. This person will regularly monitor and review this policy and make an annual written report to the Governing Body.

12.0 Approval by Governing Body and Review Date

12.1 Aware of its responsibilities in this important area, the Governing Body approves the implementation of these systems and fully supports the Head Teacher and his staff in this area.

12.2 These guidelines will be reviewed on an annual basis by the nominated postholder and a summary report will be produced, outlining any changes and progress made.

Policy approved:

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(Chair of Governing Body)

Date:

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Date of Policy review:

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