

MEDICAL CONDITIONS AND FIRST AID POLICY (including EYFS)

St Mary's school is an inclusive community that welcomes and supports pupils with medical needs and conditions so that they can play a full and active role in all aspects of school life, remain as healthy as possible and achieve their academic potential. The school endeavours to provide the same opportunities to pupils with medical conditions as to all other pupils and a positive and caring approach to pupils' needs is promoted by the senior leadership team and all staff.

This policy considers a school's legal duties under the Children and Families Act 2014 to decide to support pupils with medical conditions, as well as its duties under the Equality Act 2010. This policy details the school's arrangements to support pupils with short term medical needs and those with long term medical conditions in collaboration with pupils, parents, school staff, Governors and relevant professional healthcare providers and is written with reference to the DfE statutory guidance for "Supporting pupils at School with medical conditions", Dec 2015. In this document 'medical condition' refers to any physical or mental health condition that requires ongoing health professional input.

Responsibility for maintaining, implementing and communicating this policy lies with the Principal. This policy is overseen by the Finance and Operations Committee.

Procedures used by the school to identify all children with medical conditions

Before entry to the school, parents/carers will be asked if their child has any physical or mental health conditions and whether administration of medication will be required at school on the medical questionnaire as part of the enrolment process, and annually thereafter.

On the basis of this information, the Head of Senior/Lower School will decide whether it is advisable to set up an Individual Health Care Plan (IHCP) to ensure that the pupil's medical needs will be met at school. An IHCP is an agreement between parents/carers, the school and health care professionals with regard to the care that a child needs at school and how it will be carried out.

The school follows the procedure detailed in Appendix 1 to ensure that every child with a medical condition has an IHCP in place before they start school. An IHCP is necessary to support the safe management of an emergency or crisis at school. Any exception to the requirement to have an IHCP in place before the child starts school will be at the discretion of the school.

Parents/ carers are required to provide the school with medical evidence from a healthcare professional detailing their child's diagnosis and their expected care requirements whilst at school (this includes children with temporary medical care needs e.g. limb injury requiring the use of a mobility aid or support sling).

Parents/carers are responsible for informing the school of any new diagnosis, or changes to their child's medical condition and agreeing an IHCP, as soon as possible. It is the school's responsibility to act on this information.

Records maintained by the school for all children with medical conditions

The school keeps a register of pupils with medical conditions. This register is held in a central, secure location and updated regularly. Photographs identifying pupils with medical needs is displayed in the staff room.

A copy of medical needs along with any IHCP will accompany the pupil on any school trip/ off-site outing. The IHCP will also accompany the pupil should they need to attend hospital and includes parental permission for sharing it within an emergency setting.

Children with Food allergies

Food Allergy information is shared with school kitchen with a photo ID of each child in school that has an allergy and what that allergy is. Food allergy information is also shared with all school staff. Food allergy lanyards are also used in the lunch hall (at the Lower School) by all pupils with a life-threatening food allergy as well as those with a mild allergy or food intolerance.

Red – severe allergy (Adrenaline Auto-Injector Pen (AAI))

Yellow – allergy or intolerance (no medication needed)

Blue – religious reasons

The school ensures that the pupil's confidentiality is protected in line with the General Data Protection Regulation (GDPR) and will only share this information with relevant members of staff and healthcare professionals as appropriate.

Individual healthcare plans

The school recognises that needs are specific to an individual pupil and that not all pupils with the same medical condition will have the same needs. As such, all pupils with a medical condition require an IHCP.

For more severe/complex conditions, an additional meeting between relevant school staff (including those who will be providing support to the pupil) and the parent/carer will normally be required and may also involve health professionals and the pupil if appropriate. This should ideally take place before the start of the academic year or school term if mid-year entry.

All IHCPs should detail the medication and care requirements at school, what to do in an emergency, parent contact details and details of the child's GP.

For more severe and/or complex medical conditions, the IHCP should also include an individual risk assessment and an assessment of how the condition may impact on the child's learning, behaviour, performance and wellbeing, and plans to mitigate these risks and minimise disruption.

If a pupil has special educational needs or disabilities (SEND), these needs should be made clear in the individual healthcare plan and linked to their SEN or Education, Health and Care (EHC) plan if they have one.

The school recognises that needs change over time. As such, IHCPs are updated annually, or whenever the pupil's needs change. The school understands that certain medical conditions are debilitating and potentially life threatening, particularly if poorly managed or misunderstood. The school makes sure that all staff understand their duty of care to children and young people in the event of an emergency and that all staff understand the medical conditions that affect pupils at this school. There is an expectation that parents/carers understand the importance of their responsibility to inform the school immediately should their child's needs / condition change.

Which medications can be administered by the school?

The prime responsibility for a pupil's health lies with the parent or carer who is responsible for the pupil's medication and should supply the school with any relevant information and present required medications to the school office as detailed below.

Medication should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. We do not expect parents to ask the school to administer medication unless it is absolutely essential that this takes place in school hours. This will not normally include short-term prescribed medication such as antibiotics, which can be taken at the recommended dose frequencies before school, on returning home and at bedtime. Should antibiotics be prescribed as a 4 dose per day regime, the lunchtime dose can be administered by a suitably trained member of staff in school (First Aid at Work).

Parents should never give their child any medication (this includes cough sweets – Lower School) to bring into school and carry with them during the school day.

Requirements for medications brought to school

Medication should have been dispensed by a pharmacist and brought into school in the original container with the dispensing label attached to the medicine. The label should clearly state the child's name, the name of the medication, dosage, and length of treatment, expiry date, how the medication should be administered and any other required instructions. Any medications not presented in this way cannot be accepted or administered by the school. Liquid medicines should be accompanied by an appropriate 2.5ml / 5ml medicine spoon or oral syringe.

Where parents have asked the school to administer medication, a consent form will need to be obtained from the school office and completed.

We are not able to enter into an agreement to administer non-prescription, over-the-counter medications e.g. Calpol and antihistamines (unless specifically prescribed). The exception to this would be during a school residential visit where separate arrangements are in place and parental consents are obtained.

Administration of medicines on a school residential trip

All medication held at school will be taken together with all IHCPs on residential trips. Prior to a residential visit, parents will be asked to complete a separate consent form for any additional prescription medication that will need to be taken during the trip.

Certain non-prescription medicines will be taken on residential trips by the school to treat minor ailments: headaches, fever, pain, mild allergic reactions and (if a parent expressly asks, medicine for travel sickness on the return journey). No other non-prescription medicines will be administered by staff. The medicine will be administered in accordance with the instructions on the packet if a supervising teacher feels it is needed and they will keep parents informed until the pupil feels well again.

Additional prescribed and non-prescription medicines as detailed above will only be administered on receipt of a signed consent form received from parents prior to each residential visit. A register of all medicines administered will be kept.

Pupils who require regular medication for an ongoing medical condition or those who may require emergency medication will only be given these medications as detailed in the pupil's IHCP, and when parents/carers complete and sign a medication consent form.

The school keeps an accurate record of all the medication administered, including the dose, time, date and supervising staff. Records offer protection to staff and children and provide evidence that agreed procedures have been followed.

The school makes sure that a risk assessment is carried out before an educational visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required. This will require consultation with parent/carers and pupils and may require advice from the relevant healthcare professional to ensure that pupils can participate safely

Guidance for staff who administer medication

The school supports staff who administer medication.

The school ensures that there are members of staff trained to administer routine and emergency medication and undertake procedures to meet the care needs of an individual child.

All staff are aware of the specific members of staff trained to administer medication or medical procedures in an emergency situation.

Storage of medication in school

The school ensures that all medication is stored safely, and that pupils with medical conditions and staff know where they are at all times. All pupil medications, (with the exception of those medicines which need to be stored in a fridge), are stored securely but accessibly in the school office.

Medicines requiring refrigeration are kept in the medical fridge located in the medical room.

The school does not allow pupils to carry their own medication/equipment (except for asthma inhalers and Adrenaline Auto-Injector Pen (AAI) if required)

The school ensures that medication is in date, labelled and in its original container where possible (although insulin will generally be supplied in an insulin injector or pump), and stored in accordance with its storage instructions including temperature. Expiry dates of all medications stored at school are checked by the First Aider every half term and parents are informed when medications need to be replaced prior to their expiry dates.

When required, the school keeps Controlled Drugs (e.g. methylphenidate [Ritalin], some strong painkillers marked CD on container) stored securely, with staff being aware where they are at all times and who holds the key to the storage facility, but with only named staff having access.

Parents/carers must collect all medication/equipment annually and provide new and in-date medication at the start of the academic year.

The school does not dispose of any medication. It is the parent/carer's responsibility to dispose of out-of-date medication.

Storage and administration of emergency inhalers and adrenaline pens

The school has clear guidance on the storage and administration of emergency inhalers and adrenaline pens.

The school stores pupil's inhalers and adrenaline pens securely but accessibly in the school office.

Any pupil with an allergy requiring an Adrenaline Auto-Injector Pen (AAI) should provide the school with their child's Allergy Action Plan.

Emergency Medication will only be administered in accordance with a child's IHCP together with an accompanying signed consent form.

Pupils who have been prescribed an Adrenaline Auto-Injector Pen (AAI) must supply the school with an in-date pen, failure to do so will require that the child be kept at home until the school receives the required supply of emergency medication. At the Lower School the pen is kept in the medical room and at the Senior School the pupil would carry this on them.

Pupils who have been prescribed a Salbutamol (Ventolin) inhaler for asthma should provide the school with their child's Asthma Management plan together with an in-date inhaler and an age-appropriate spacer device. At the Lower School these are kept in the pupil's classrooms. If the pupil needs to use their inhaler this is documented on their medical card.

At the Senior School, pupils are responsible to carry their own inhaler. They are encouraged to inform the school office if they have taken their inhaler. Failure to do so will require that the child be kept at home until the school receives the required supply of emergency medication.

The school's supply of emergency asthma inhalers and adrenaline pens are available for pupils who have already been prescribed a ventolin inhaler or adrenaline pen where their own medication is not available or fails. Written parental consent and medical authorisation for use of the school's supply of emergency medication also needs to be given. They are stored in an accessible, secure location, separate from pupil's own prescribed medication.

First aid provision

The school has clear guidance with regards to first aid provision.

St Mary's aims to provide first aid care to all pupils and staff who injure themselves at school or who have become unwell during the school day. First aid is also provided to pupils and staff when they are away from school on day visits or residential visits. St Mary's follow the [Department for Education and Employment \(DfE\) Guidance on First Aid for schools](#).

Although the school has no legal responsibility for the provision of first aid to non-employees on the school premises, it does in practice extend first aid to parents or other school visitors.

St Mary's believes that where practicable, every effort is made to support children staying in school when they sustain a minor injury.

First aiders in school

A list of all staff who have the First Aid at Work (3 day) qualification are displayed in the staff room, medical room and school office along with all staff who have Paediatric First Aid training. Please see appendix 2.

Responsibility for maintaining and monitoring all aspects of the first aid room and first aid provision including maintaining stock levels, lies with the First Aider.

First aid supplies can be found in the in the medical room. First aid kits are placed in all areas of the school where an accident is considered possible or likely i.e. in the PE department, science room art/DT room, Kindergarten and the kitchen. A basic first aid kit can be found in all classrooms. First aid kits are also carried by the playground supervisors and supervising teachers at break times, these kits can be found in the medical room. A first aid kit will be taken with the group when they go on a school visit. The First Aider checks and replenishes all first aid kits as needed.

A member of staff who holds a paediatric first aid qualification will always accompany EYFS children on school trips and outings.

Where possible, it is good practice to manage first aid in the first aid room however, it may be necessary to carry out first aid where the pupil is located.

All staff must make themselves aware of how to contact Ambulance Services in an Emergency by calling 999 from any school phone.

Recording first aid

If a pupil needs medical attention, they should be sent in the first instance to the school office where a qualified member of First Aid staff will assess the level of need. If an accident form needs to be completed the member of staff, who witnessed the accident, will be asked to complete and return to the office.

Serious accidents or injuries must be reported to RIDDOR Incident Contact Centre by the Head of Finance and Operations, Assistant Head of Operations or other Senior Leadership Team member. Online reporting is preferred <http://www.hse.gov.uk/riddor>, however a telephone service remains for reporting fatal and major injuries only - call the incident Contact Centre on 0345 300 9923.

RIDDOR will be notified by the school if any of the following incidents occur:

- a work-related death
- specified injuries including fractures, serious burns and loss of sight
- over seven-day incapacitation of a worker as a result of injuries following an accident
- an accident-causing injury to pupils, a member of the public or others requiring hospital treatment
- occupational diseases
- a specified dangerous occurrence, or near-miss event which did not result in an injury, but injury was possible

Notification to parents of first aid provision

The school will always contact parents if a pupil suffers anything more than a minor injury, if they become unwell or if there are any concerns about their health.

Parents are always notified on the same day about:

- Any head Injury (apart from the most minor), including injuries to face, nose or eyes

Treatment of common injuries

Head injury

For a head injury, unless the injury is obviously severe, pupils are initially given treatment in the form of a cold pack and rest, under observation, for a minimum of 10 minutes. This period may be extended as appropriate, according to the response of the pupil.

The First Aider will ring the pupil's parent to tell them of the incident and ask them to continue monitoring at home.

If the injury appears severe, or the pupil exhibits symptoms of head injury or concussion, parents are contacted immediately to come and fetch them for urgent medical attention. The First Aider in charge will decide as to whether to call the emergency services.

Diarrhoea and/or Vomiting

If a pupil experiences the symptoms of diarrhoea and/or vomiting, they will be taken to the first aid room to rest in the care of one of the First Aiders until a parent or carer can collect her.

Should your child suffer from diarrhoea and/or vomiting, in line with Government and NHS guidelines, your child should be kept at home and not return to school until 48 hours after the last episode of diarrhoea or vomiting has occurred.

On school visits accompanying staff carry sick bags and tissues for cases of vomiting.

Procedure for cleaning up body fluids.

What is a body spillage?

Within the school environment it could be urine, blood, vomit or faeces.

How should it be dealt with?

A member of the school maintenance team should be contacted immediately via the school office.

In the event of the maintenance team being off site, the incident may need to be dealt with by another member of staff. This will be decided by a member of the SLT.

Special cleaning kits – including Personal Protective Equipment can be found in the following locations:

Lower School

Main School - Medical room
Studio block - Art cupboard

Kindergarten

Disabled toilet

Senior School

Medical room

Raised Temperature

If a pupil experiences a raised temperature, she will be taken to the first aid room to rest in the care of one of the First Aiders, the temperature will be checked with a thermometer and where appropriate a parent or carer will be asked to come and collect them.

If your child has a raised temperature or is feeling unwell, please keep them at home until they feel better.

Control of Infections & Contagious Diseases

The school relies on parents to assist them in keeping all pupils safe by reporting any cases of infectious or contagious diseases and to keep their child at home until their doctor has confirmed that they are no longer infectious or contagious.

The school follows the [Public Health Agency guidance 2020](#) when advising whether or not it is safe for a child with an infection to attend school.

999 Protocol

In an emergency situation following an accident or injury the nearest member of staff will ring 999, and then notify the First Aider in charge and either the Principal or Head of Lower/Senior School that this has been done.

If a 999 call is made, the pupil's parents will be rung immediately afterwards, to notify them and ask them to come as soon as possible, either to school or to A & E.

Training

The school promotes staff training in supporting pupils with medical conditions.

All staff are aware of the medical needs and conditions policy, emergency procedures.

The school ensures that all staff, including temporary staff, are aware of the 'Medical Conditions and First Aid Policy' and their role in implementing the policy as part of induction.

All staff know which named members of staff should be called on in the event of a medical emergency and should remain with them until a parent or carer arrives. Pupils should not be taken to hospital in staff cars.

All members of staff have a duty to be aware of the medical information of all pupils for whom they are regularly responsible.

The school has a sufficient number of trained first aiders

The school ensures they carry out risk assessments as appropriate and have sufficient numbers of trained first aiders, considering factors such as the size of the school.

All first aiders are trained in the management of common medical emergencies and basic life support, including cardiopulmonary resuscitation (CPR) and anaphylaxis training, this is refreshed at least every three years.

The school has access to defibrillators. Training of how to use them is included in the basic first aid training all staff receive.

Lower School: Medical room
Creative Arts block

Senior School: School hall
Entrance to turrets

The school reserves the right to seek professional advice/specialist training from relevant healthcare professionals where it is deemed appropriate to do so.

Inclusive whole school environment

The school is committed to providing, as far as practicable, an accessible physical environment for pupils with specific medical needs and medical conditions. This includes out-of-school activities.

All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's behaviour and anti-bullying policy, to help prevent and deal with any issues.

The school uses opportunities such as personal, social, health and economic education (PSHE) and science lessons to raise awareness of medical conditions to help promote a positive environment.

The school listens to the views of parents/carers and pupils, ensuring that pupils with medical conditions feel safe at school and confident in receiving an appropriate level of care that meets their medical needs.

If and when appropriate, pupils with medical conditions are encouraged and educated to take control of their treatment in preparation for self-care in later life.

No pupil with a medical condition will be sent home more than necessary or excluded from activities or facilities because reasonable adjustments have not been made by the school.

No pupil will be prevented from eating/drinking or taking toilet or other breaks needed in order to manage their medical condition.

The school recognises that any measures to identify pupils with medical conditions for their safety should be proportionate and consider confidentiality and emotional wellbeing.

The school is committed to ensuring children's emotional needs are met. This is done through clear guidance and strong supportive pastoral care.

The school ensures that arrangements are made for pupils with medical conditions to participate in all aspects of the curriculum where reasonably possible.

The school ensures that the needs of pupils with medical conditions are adequately considered so that they can participate fully in all structured and unstructured activities, extended school activities and residential visits.

The school understands the importance of all pupils taking part in physical activity (including out of school clubs and team sports). All relevant staff should make reasonable adjustments to physical activity sessions in accordance with a pupil's individual healthcare plan. This may involve ensuring that pupils have the appropriate medication/equipment/food with them during physical activity.

The school understands the impact a medical condition may have on attendance and learning.

School staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.

Where a pupil has frequent absences or a prolonged absence due to a medical condition, it is expected that parents/ carers will work with the school and healthcare providers to ensure relevant information is available as part of a coordinated care/support approach.

The school learns from incidents and complaints

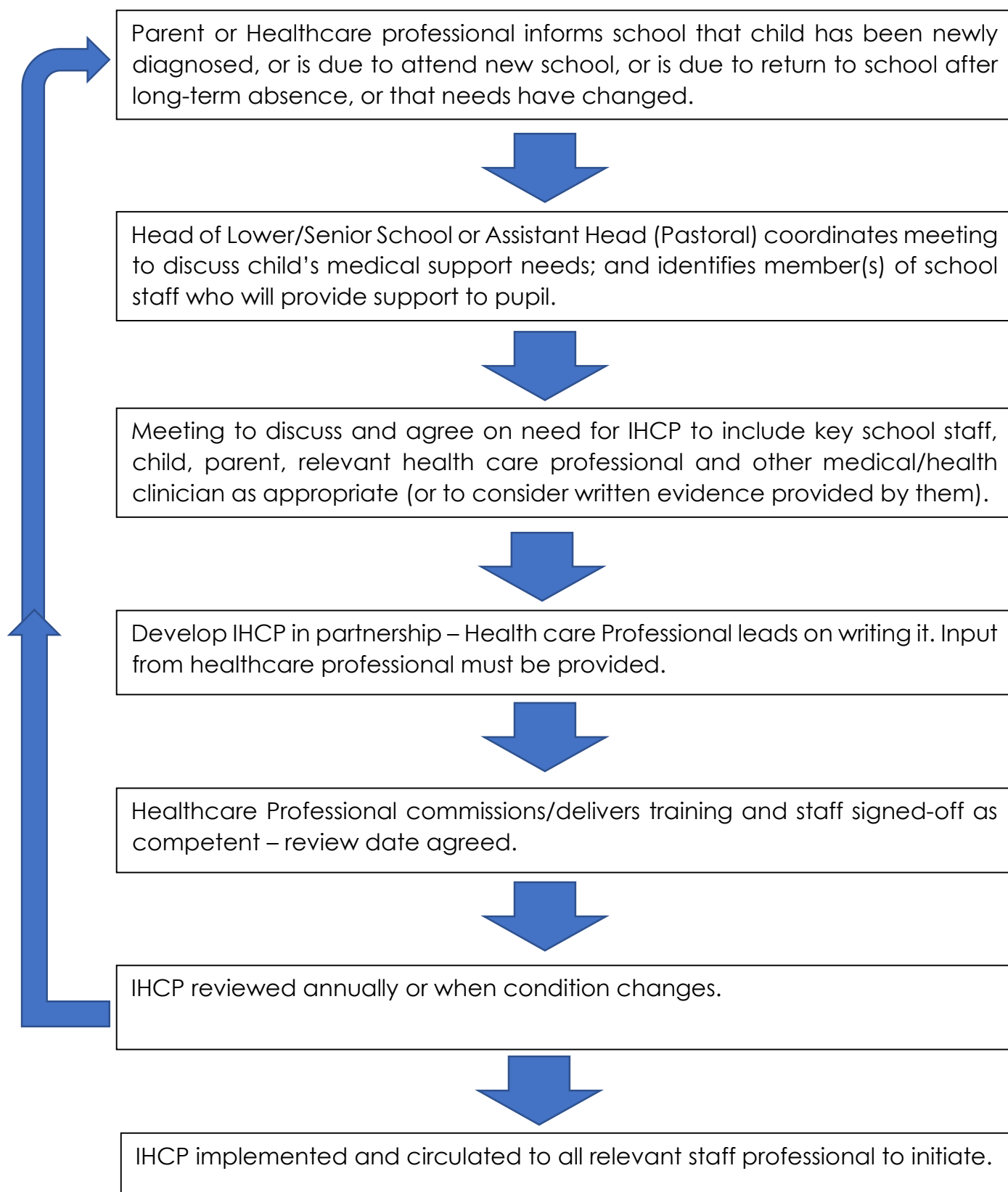
The school investigates all serious incidents related to this policy and reports these to the Head of Finance and Operations or Assistant Head of Operations. Learning from these incidents is shared with staff and used to inform any subsequent revisions to this policy.

The school responds to all concerns and complaints related to implementation of this policy, in line with the school's complaints policy.

Reviewed/Approved: November 2022
Next Review: Autumn 2023

Appendix 1

Process for Developing Individual Health Care Plans (IHCP)



Appendix 2

Please see below the staff with specific First Aid qualifications	
Miss Cheeseman	Paediatric (maternity leave)
Ms Gray	Paediatric & Emergency First Aid at Work
Mrs Howard	Paediatric & Appointed Person First Aid
Miss Iddon	Paediatric
Mrs Violet	Paediatric
Mrs Turner	Paediatric
Miss Pyke	Paediatric
Miss Martins	Paediatric
Mrs Millard	Paediatric (maternity leave)
Mrs Connelly	Paediatric
Miss Humphrey	Paediatric
Mrs Mill	Paediatric
Miss Clarke (Lower School)	First Aid at Work (3 day) & Paediatric
Mrs Adamson (Lower School)	First Aid at Work (3 day)
Mrs Polley (Senior School)	First Aid at Work (3 day)
Mrs Moye (Senior School)	First Aid at Work (3 day) (maternity leave)
Mr Segade Vieito (Senior School)	First Aid at Work (3 day)
Miss Natalie Crewe	First Aid at Work (3 day)



Appendix 3

REQUEST FOR SCHOOL TO ADMINISTER/SUPERVISE TAKING OF MEDICATION

Pupil's Name: Class/Year Group:

Condition / Illness:.....

Name/Type of Medication:
.....

For how long will child be required to take medication?

Date treatment started: Dose required:

Frequency of dose:Time last administered:

Additional information / instructions (before/ after food, interaction with other medicines, possible side effects, storage instructions)
.....

Parent's Signature:Date:.....

Office Use – to be filled in by member of staff administering medication and witnessed by another member of staff.

Administered by: Time:

Witnessed by:

If the medication is required for additional days please complete the form overleaf and sign where necessary.

I have been informed of the time my child was administered their medication.

Parent's Signature:Date:

Continuation of medication for additional days

Date	Dose given	Time given	Member of staff who administered	Member of staff who witnessed	Parent's signature