



St Luke's CE Primary School  
Supporting Medical Conditions & Administration Policy 2023/2024  
St Luke's Christian ethos underpins all aspects of its policy and practice

### St. Luke's CE Primary School

Where children flourish, are happy and succeed. Living their life to the full.  
Believe and Achieve



Working together to be happy; to flourish; to succeed through our Christian Values of friendship, love, patience, forgiveness, trust and respect.

***"I have come that they may have life and have it to the full." John 10:10***

***The Children and Families Act 2014 places a duty of care on governing bodies of maintained schools to make arrangements for supporting children at their school with medical conditions. This policy has also been written and is compliant with 'Supporting pupils at school with Medical Conditions' (December 2015) legislation. Some children with medical conditions may be disabled and our school complies with their duty under the Equality Act 2010. Some children may have an Education Health and Care Plan (EHC) which dovetails their education, health and social care needs.***

***Medicines at St. Luke's will only be administered when a pupil's health and/or school attendance would be affected if it was not. Medicines will only be administered if it has been prescribed by a medical professional. Any medication administered by the school must be supported by prior written agreement from parents / carers or guardians.***

## **Overview:**

- At St. Luke's CE Primary, we will ensure that pupils with medical conditions (both relating to physical and mental health) are properly supported so that they have full access to education, including school trips and physical education.
- The governing body must ensure that arrangements are in place to support pupils at St. Luke's who have a medical condition.
- The governing body will also ensure that school leaders consult with health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

## **Introduction:**

We acknowledge that parents/carers must feel confident that St. Luke's staff will provide effective support for their child and help the pupil to feel safe.

We will be mindful of the social and emotional implications which may be associated with medical conditions e.g. self-consciousness, bullying, anxiety or depression. Long-term absences due to health problems affect children's attainment, their ability to re-integrate into school and their general health and emotional well-being; we will ensure effective re-integration support for a child with long-term absence and will also aim to effectively manage short term/frequent absences due to medical appointments.

## **The role of the governing body and school leaders**

The governing body should ensure that a child with a medical condition can access and enjoy the same opportunities at school as any other child. Some medical conditions at school will affect the child's quality of life and may be life-threatening. They should ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

Arrangements should give parents/carers the confidence that St. Luke's staff can give effective support, show an understanding of how their child's condition may impact on their ability to learn and increase the child's confidence and promote self-care. Our governors will also ensure that staff are properly trained to support children with medical conditions. No child with a medical condition can be denied admission or prevented from taking up a place in school (Admissions Code 2012) but school does not have to accept a child in school at times when it would be detrimental to the health of that child or others to do so e.g. infectious diseases.

The governing body remains legally responsible for fulfilling the statutory duty of the guidance issued in April 2014 as this aligns with their wider role of safeguarding within school.

1. The Deputy Head Teacher/SENDCO - Mrs Gail Cropper, in conjunction with the Head teacher will have the delegated duty of meeting the arrangements to support children with medical conditions; she will liaise with pupils, parents/carers and health professionals. In addition, she will ensure that sufficient staff are suitably trained to meet the needs of the individual child.

2. At St. Luke's, we are committed to ensuring that all relevant staff are made aware of a child's medical condition. School will ensure that any outside providers e.g. Sports Coaches, Swimming Instructors are also informed of a child's medical condition. Supply staff will be made aware of the

child's needs and informed as to where help and support can be obtained from, should the child feel unwell

3. Cover arrangements in case of staff absence will be in place: the class teacher, Head teacher or Deputy Head's pre-empt attendance on courses and plan for appropriate nominated cover to be in place (this will usually be the class Teaching Assistant where available for consistency) and in the case of staff sickness/absence the Deputy Heads/Headteacher will ensure that cover is in place. In the event of all adults being out of school for a pupil with daily injections eg. insulin, the child's parent/carer will be notified in advance and asked whether they could attend school to supervise the procedure.

### **Short Term Medical Needs**

Pupils may need to take medication at school at some point during their life. This will mostly be for a short period. At St. Luke's we request that any prescribed medication that is to be administered 3 times a day is not bought in to school, but rather taken at home – before school, after school and before bedtime. The only exception to this, on occasion, is if the pupil attends After School Club and the parent is unable to administer the 'after school' dose. School staff will then give this to the pupil before After School Club begins.

If the dosage is 4 times a day, then school will administer a dose during the day at the parents request. All medicines are to be brought in through the front entrance via the office. These medicines should be clearly labelled, stating the details prescribed by the child's doctor and also be in original packaging. Parents should also complete and sign a consent form at the office and note the dose on the form themselves. This is copied and kept in the office and also sent to class.

Once the form is completed, the child is given a yellow band to wear with the time that the medicine is due to be administered written on it.

The medicine is then kept at the school office in the cupboard or in the after school club fridge in the staffroom. This can only be accessed by school staff and not pupils in both cases.

Each class has a medication file and the dose is written on a separate form in this file per pupil. A copy of the parent signed medicine consent form is then attached.

The medicine is administered by first aiders and is also witnessed by another member of staff. Both staff members then sign the class file to say that the pupil has been given the medicine and the dose has been checked. The yellow wrist band is then removed from the child by the adult giving the medication.

Only staff are allowed to administer this medication – pupils are not allowed to take it themselves or keep it with them during the day. The medication is then collected at the end of the school day and passed back to the parent.

The class log of administration will continue to be kept for each dose that the pupil needs to take and then archived once the course of medication is complete.

## **Long term Medical Needs**

If a pupil has a long term or complex medical need, school will work with the child, parents/carers and medical professionals to support them to receive a full education.

If the child has significant hospital stays or periods of illness, the school will be flexible in their approach and may involve part time attendance, online learning through Microsoft Teams, alternative provision arranged by the Local Authority or a combination teaching and learning that suits that particular pupil. Care and consideration will also need to be given to how the pupil will be reintegrated back into school after periods of absence.

School will require up-to-date information about any long-term medical conditions or needs. This should be in conjunction with the parents/carers and where possible, the health professionals who are currently supporting that child. Parents should inform school about any medical condition before a child starts school, or when a pupil develops a condition.

For children with such needs, a health care plan will be written in consultation with parents and any relevant health care professionals to see about daily medication and anything else staff should be aware of. A Health Care Plan is essential where conditions may fluctuate or there is a high risk of emergency intervention. They are helpful where medical conditions are long-term and complex. This should also detail what to look out for in an emergency and what staff training may be required. Health Care Plans will be reviewed at least annually or more frequently if evidence is provided that the child's needs have changed. St. Luke's currently uses the Health Care Plan format provided through Rochdale Additional Needs (RANS). Where a child does not have an EHC Plan, their SEN will be mentioned in their individual healthcare plan. Consideration will be given to how the child can manage their condition and overcome any potential barriers to getting the best from their education. School will assess and manage the risk to the child's education, health and social well-being.

The administration of any long-term medication should be recorded on the pupils file, along with the parental consent form. Any long-term allergies are also kept in the staffroom so that everyone is aware.

In all of the above instances, it must be remembered that, in spite of any form of disclaimer, the Head Teacher will continue to ensure that the school exercises its duty of care.

## **Staff training**

Staff will not give long-term prescription medicines or undertake health care procedures without appropriate training from medical professionals working with that child. Training will be sufficient to ensure that staff are competent and have confidence in their ability to deliver. Training will also offer the knowledge and understanding of the medical condition they are being asked to deal with, their implications and preventative measures.

For very specific individual needs the staff member will need to be trained and signed off as competent by a lead medical professional. All relevant staff will be made aware of the child's individual medical condition. Two or more staff will be trained to support an individual child's needs so that in the event of absence, there is always someone else trained. Where possible, several staff will be trained, particularly if the pupil attends Before/After School Club.

Support from healthcare professionals will be sought to advice on training that will help ensure that all medical conditions affecting pupils in the school are understood fully. These include, auto-injector training (Epipen & Jext), Asthma training, diabetes training and Rescue Med training (for

epilepsy) currently. Where possible, the maximum number of staff are trained on each area, so that as the child moves up through school there are staff in each year group who know how to administer the medication. This training is updated annually.

The Deputy Head will also ensure that Lunchtime Supervisors and Kitchen Staff are kept up-to-date about a child's medical condition. Lists of medical conditions are kept with the child's picture and the emergency contact telephone number if it becomes necessary. New staff to school will be inducted into their role and the whole area of safeguarding children covered upon taking up their post at St. Luke's. This will also highlight individual pupils needs and will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs. Students coming to St. Luke's (e.g. work experience, College and University students) are expected to meet with the Head prior to starting their placements at school and are asked to give details of any medical conditions they may have which the Senior Leadership Team at school should be aware of.

### **Managing medicines and storage on site**

Parental consent is needed for administration of all medication to children under the age of 16 - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents.

No child under 16 should ever be given medicine-containing aspirin unless prescribed by a doctor. Medication should never be administered without first checking maximum dosages and when the previous dose was taken.

Short term or occasional medication is stored in the office or the staffroom fridge (see above short-term medical needs)

Wherever possible, following discussion with parents/carers, children with long term conditions should be taught how to administer their own medicines if they are capable of doing this with staff supervision. They should know where their own medication is kept in the classroom and should be able to use these correctly eg. diabetes injections or asthma inhalers/spacers. Where a child is too young or not capable to administer their own medicines, relevant staff will help to administer medicines and manage procedures for them.

Asthma inhalers/spacers and Auto injectors such as Epipens or Jext are stored in the pupil's individual classroom where, should the pupil need them in an emergency, they are accessible to the pupil and adults in the room.

All medicines in school must be in date and checked regularly. Asthma inhalers and auto injectors are checked termly for dates by staff in school and records are kept in the Deputy Head's office. Asthma records of pupils with blue preventer inhalers are also kept in the Deputy Head's office and these state dose and what to look out for. Copies are also kept in classrooms so that staff have access quickly to know how many puffs of the inhaler the pupil should have.

School has a defibrillator on site (for sudden cardiac arrest, when the heart stops beating) and this is located in the office at the front of the building. Cardiac arrest can happen to people at any age and without warning. When it does happen, quick action (in form of early CPR and defibrillation) can help save lives. Several members of staff have already received training on how to use this equipment.

At times of transition to other schools e.g. at the end of Nursery, Year 6 and other in-year transitions, school staff will ensure that the receiving setting has been notified about the child's medical condition and, if they have an Individual Healthcare plan, this will be sent on to the new setting. Any medication held by St. Luke's will be returned to the parent/carer as the child leaves.

## **Accidents & Record Keeping**

Written records are kept of all medicines administered to children (see section on short term medical needs and long term medical needs).

Accident books are also kept as records and these are carbon copies so parents have a slip as well. All pupil accidents are recorded in these books and there are four across school for quick access – Year R, KS1, KS2 and Before/After School Club. The books are written in by the first aider who has dealt with the accident and the slip is given to the pupil (in the older years) or passed to the class teacher (younger years) for the parent to see what has happened.

First Aid boxes are located at all the main playground entrances around school and are kept stocked by the lead first aider. There is a list of first aiders across the building and all classes have an assigned first aider. Lunchtime staff are also first aid trained. Training is repeated as and when necessary, but within the time of the certificate.

If the pupil receives a bump to the head and there is a phone call home, the pupil is given a purple wristband to wear to show that they have bumped their head to all staff. Staff will then monitor the pupil closely to make sure that they do not have any symptoms such as nausea or a headache. If they do, a first aider will see them again and call the parent back.

In an emergency situation or accident the member of staff phoning for the ambulance must know the school's address and navigational directions to St. Luke's. If the child needs to go to hospital, a member of school staff will stay with them until the parent/carer arrives or accompany the child to hospital by ambulance.

Records offer protection to staff and children and provide evidence that agreed procedures have been followed.

## **Invasive Procedures/Intimate Care**

Some children require specific types of treatment eg the administration of rectal Valium, assistance with catheters, or the use of equipment for children with tracheotomies. Only staff who are willing and have been appropriately trained are to administer such treatment. This must be in accordance with instructions issued by the paediatrician or GP.

First Aiders will be the main staff to administer short term medication, although any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so

Where it is known in advance that a child may be vulnerable to life threatening circumstances the school will have in place an agreed plan of action detailed in the child's healthcare plan. This includes the holding of appropriate medication and appropriate training of those members of staff required to carry out the particular medical procedures. The individual health care plan should detail an emergency action plan for such situations after liaising with parents/carers and appropriate medical professionals. This will also have implications for educational work in other

areas of school, such as forest school and also visits off site. There may be occasions when individual children have to be excluded from certain activities if appropriate safeguards cannot be guaranteed following a risk assessment. (Also see below section on day trips, residential visits and sporting activities).

Intimate care for pupils should be attended to by two members of staff at all times. School has three disabled toilets and one of these has a height adjustable changing bed and ceiling hoist. These are located at the Reception end of the building, in the Think Room off the hall and also within the shared area at the opposite end of the building. Changing facilities are provided and staff treat every pupil with dignity and respect.

### **Day trips, Residential visits and Sporting activities**

For school visits and other out-of-school activities e.g. sports fixtures, risk assessments will be in place (the School Healthcare Plan may be sufficient in most cases) but each individual child will be considered on the grounds of their medical condition. Children with medical conditions will be encouraged to participate fully and safely in these activities. Consultation with parents/carers of a child with a medical condition, and/or Healthcare professional, prior to the visit will be made. This is to discuss what reasonable adjustments could be made to allow the child to participate, unless evidence from a clinician states that this is not possible. School staff accompanying the children on these visits will ensure that other adults in contact with the children e.g. to guides, activity leaders are informed where relevant about the individual child's needs. Depending on the need of the pupil, a member of the family or a carer will also be asked to attend the trip to support the pupil whilst off the school premises.

For school residential visits e.g. PGL in Year 6, school will ensure that a trained member of school staff is in attendance at all times to administer medication not covered by Centre Staff. Also, in the case of residential trips, a parent or family member will be asked to stop with their child overnight to ensure that they have all the necessary medicines administered in the evening, during the night or in the morning.

First Aid bags for coach trips are stored in the front office and the lead first aider will distribute these to staff for school trips. They are also responsible for keeping these well stocked.

Further information on school trips can be found in the Rochdale LA Policy and Guidance for Schools on Outdoor Education Visits and Off- Site Activities.

### **Complaints procedure**

Should a parent, carer or pupil be dissatisfied with support provided they should, in the first instance, come to school and discuss their concern directly. If this does not resolve the issue, they should make a formal complaint via the school's complaints procedure.

**Date of policy:** October 2023

