



Medical Policy including First Aid and supporting children
with medical needs 2024-2025

Pear Tree Mead Academy
Part of the Passmores Co-operative Learning
Community

Aims

- To provide guidance for staff when administering First Aid and medicines
- To always involve pupil/parents/carers/other professionals in planning and decision making whenever possible.
- Safeguarding Duties. The Governing Body will ensure that no pupil's health will be put at risk from, for example infectious diseases.
- The Governors will monitor this policy and ensure that policies, procedures and systems are properly implemented.
- Pupils, staff and parents understand how our school will support pupils with medical conditions and how we will administer first aid.
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips, sporting activities and curricular activities.
- To ensure that the focus is on the individual child and how their medical condition impacts on their school life.
- To ensure that first aid administration is correct and suitable.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupil's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs) • Monitoring first aid provision and supplies.

Outcomes

- That all staff is aware of what the guidance is when dealing with medicines and their administration.
- That all children's health and safety is paramount at all times.
- That the Governing Body is aware of, and undertakes its duties in regard to pupils with medical needs.
- That pupils receive the correct first aid when required.

Children with medical needs

- We understand that some children will require medicines to help with allergies, asthma, diabetes etc.
- We understand that most children are able to attend school regularly and take part in normal activities, although sometimes this will be with support.

Legislation and statutory responsibilities

- This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.
- It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

This policy also complies with our funding agreement and articles of association.

Administering medicines

- No child will be given medicines without parental permission.
- If staff members feel they are unsure about the procedure they should obtain more guidance from the head teacher. This may mean contact with parents or health care professionals.
- The whole school (including EYFS) will keep written records each time a medicine is administered. The Medicine administration log will be used for this
- Two staff members will be present during administering of medicines to ensure accuracy and assistance if needed.
- Medicines should only be taken to school when essential; that is where it would be detrimental to a child's health if the medicine were not administered during the school 'day'. The recommendation is that this is limited to medicines prescribed for four times a day or more or a health professional as prescribed a dose at a specific time of day.
- If it will support the child to attend school will administer pain relief and anti allergy medication as directed by the parent on a short term basis .
- Medicines will have to be in in the original container as dispensed by the pharmacy. This needs to include the prescriber's instruction for administration, personal details, in date, storage details and dosage.
- We will not accept medicines that have been taken from their original container or where changes have been made to dosage, personal details, in date, storage details or how to administer. With the exception of a doctor putting it in writing.
- If medicines are to be taken three times a day then this can be safely administered in the morning, after school and at bedtime. This means that the school does not need to administer.
- Parents have to complete a permission form before medication is given
- Before administration, verify the name and dosage with another member of staff.
- We will not accept medicine that is out of date or has not been prescribed for that child.
- School staff should not administer any medicines unless the form 'Issuing medicine to a child during school time' has been filled in. As a general rule, medicines issued to children during school time should be restricted to pupils who suffer from a chronic complaint and could not otherwise attend school. However, medicines can be given where there is a compelling need to administer short term medication for a serious complaint.
- All first aid waste must be disposed of in the special bin in the office.
- When dealing with an accident, discourage other children or adults to crowd round.

Refusing Medicines

- If a child refuses medicines, they will not be forced. This will be noted in the records.
- Refusals will be a part of the EHCP or medicine permission guidance.
- Parents will be informed if the child has refused medication.

Short-Term Medical Needs

- These medicines may be in the form of antibiotics or lotions. These will be given to ensure attendance of the pupil at school is not affected. We will also administer if it is going to be detrimental to the child's health not to. These will be administered in accordance with the guidelines above.

Long-Term Medical Needs

- The SEN Code of Practice 2001 advises that a medical diagnosis or disability does not necessarily imply a SEN status. It is the child's educational needs that should be considered primarily.
- We will find out all needs before a child is inducted in the school or when they develop a medical need.
- We take into consideration that some needs may include attending hospital appointments in a regular basis and special arrangements may be necessary.
- EHCP will be written to assist these children.
- If the condition is linked to diet, then a special dietary referral form will be completed and passed to staff and the school kitchen.

Educational healthcare plans

The headteacher has overall responsibility for the development of EHPs for pupils with medical conditions. Individual health care plans (EHCP) –help staff to identify safety measure and support.

This can be supported by a Risk assessment. This also ensures children and others are not put at risk.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an EHCP. It will be agreed with a healthcare professional and the parents when an EHCP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

EHCPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the EHCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the Headteacher will consider the following when deciding what information to record on EHCPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements
- Some children with disabilities are protected from discrimination under the Disability Discrimination Act (DDA) 1995. This means that the school will not discriminate against disabled pupils in relation to their access to education and associated services. This will include trips, clubs and activities.
- Access for disabled children is in place. Please see the Inclusion Policy.

Record Keeping

- If information regarding the administration of medicine changes, parents are responsible for passing this information onto the school.
- If insufficient information is given regarding the administering and contact is unable to be made with the parent, the school is under no obligation to administer.
- All medicines need to follow the requirements set out in the prescription drug section.
- All medicines that are administered to children will be recorded on the medicine log sheet, held at the office. This includes the name of the staff member administering, time and dose.

First Aid Treatment

- The first aid resources are kept in the reprographics cupboard and a first aid box is located in every classroom and the swimming pool.

- All school employees may treat children for minor ailments and accidents. Children may not give any treatment to other children.
- Any member of staff who has attended a First Aid course that is in date is regarded as a First Aider.
- Most staff are trained as first aiders.
- All EYFS staff are trained to hold the paediatric first aid qualification.
- First aid kits are available in all classrooms with the age-appropriate contents.
- When first aid is administered staff complete the accident book and/or a first aid slip. These slips are taken home by the child.
- There is a designated monitor for all first aiders onsite (currently the Deputy Head). This is updated and course rebooked when needed.
- At lunchtimes all MDA's have minor first aid kits whilst on duty. If a child has an injury that needs further tending, they will be sent into the hall with a first aid card and, when necessary, another child. An MDA will accompany the child if the injury is more severe. In the case of a break, the child will not be moved but the MDA will alert the office where assistance will be provided.
- We have designated members of staff that are on duty at all times. Extra staff are available at children's play and lunch times.
- A fully stocked first aid kit must be taken on school outings. Any inhalers and EpiPen's for specific children must also be taken.
- When children are unwell, they can sit outside the office. A First Aider should then take responsibility for the child's welfare.
- A first aid sign is located in every classroom, indicating who the first aiders are within each class and where medical equipment is stored.
- At the time of admission to school, parents written permission for obtaining emergency medical advice / attention is sought.
- The Head teacher is the senior first aider and is called if further first aid advice is needed.
- All Head injuries are seen by a member of the SLT
- When children have had minor injuries, we will (when we deem necessary) verbally inform the parents at the end of the day.
- If the injury is deemed more serious, we will inform the parents immediately. They will then decide what the best action to be taken is. At this point they may choose to take them home or for further medical assistance. We will make clear to parents our recommendation if it is to seek further advice. These incidents are completed on additional first aid form aswell as the regular first aid slip to go home: more serious incidents include:
 - Head Injury
 - Face Injury – Cut or bruise
 - An injury where there is discomfort, but after monitoring it does not improve. A foot / leg injury where the student cannot weight bear.
 - Any part of the body where a phone call home had been made and we are recommending the parent seek further medical advice.
- Accidents and injuries that require visits to hospital are recorded and notified to RIDDOR (if needed).

- Some more serious accidents are reported to Essex, the Head Teacher will deem when this is necessary.

Educational Visits and sporting activities

- Parents/carers must work closely with and support the school to enable these activities to take place.
- We will highly encourage children to participate in visits/sporting activities and risk assessments and EHCP will be required.
- If the risk is deemed high then the child may need to have an assistant in the form of their parent, volunteer or extra member of staff.
- The staff leader will be responsible for collating this information and passing it onto other members of staff. They will ensure that an EHCP is adequate with relevant emergency arrangements.
- If staff are not confident that the safety or well-being of a child will be met on the visit/sporting activity, then a meeting with parents and possible health care providers will be had.
- All medication will be checked and taken with the leader when off site. For older children it might be appropriate for them to carry their own medication e.g. inhaler.
- Medication will be stored in a sealed container with the children's name clearly labeled.
- If medication is administered off site, then the logbook will still be completed.
- At least one first aider will be present at all off site events.
- First aid provision will be taken off site and the minimum requirements are stocked first aid box and a person appointed to be in charge.
- For more information on Education Visits please refer to the E.V policy.

Children with medical conditions

- Children with medical needs have an individual health plan written and this is reviewed termly. They have a risk assessment completed if needed.
- Children with allergies will have an allergy management plan. This is written by the parent and shared with staff.
- No child with medical conditions is excluded from any part of the school curriculum.
- Every child with medical conditions has access to extracurricular activities, including overnight stays and trips abroad. These are risk assessed.
- The school works with the local authorities and health services to make sure the needs of children with medical conditions are met.
- If needed the class that the child is in will be educated on the child's medical condition and what to look for and what to do in an emergency. Medical professionals / Parents can support the school to do this.

- A paediatric team / parents provide training and support to the nominated school, so school staff have the skills and confidence they need to look after a child with specific medical conditions.
- No parent is relied on to go into school to treat their child's medical conditions. Although parents are phoned for advice as needed. Regular communication is key.
- Every child with Type 1 diabetes is allowed to inject insulin, in public or private, depending on their wishes. A private area is designated for this. Equipment is kept in a lockable container and extra insulin is kept in the fridge.
- Every child with medical conditions has an individual healthcare plan (IHP), which details exactly what their needs are and who will help them.
- Parents of children with medical conditions provide up-to-date information about their child's needs and all the supplies needed to manage their medical condition in school.
- The school is aware that each child with medical conditions has individual needs.
- All school staff know what to do in case of emergency and at least two people are trained in how to care for a child with medical conditions. Planned staff absences are coordinated so that there is always one trained person in school. The school and parents have agreed on a clear method of communication that is effective for discussing medical conditions.
- Children with Type 1 diabetes are never left alone when hypo or prevented from eating or drinking to prevent or treat a hypo.
- Children with medical conditions are never left alone when unwell or prevented from eating or drinking if needed or taking medication.
- Children with Type 1 diabetes are never prevented from blood testing or taking insulin and are able to look after their equipment themselves.
- When children with medical conditions have exams, specific plans are included in that year's IHCP and agreed between the school, the child and their parents.
- Children with medical conditions are not frequently sent home or penalised for poor attendance when absence is related to their conditions.
- Every child with medical conditions is listened to and their views taken into account.
- HCP'S, AMP'S are kept available for all staff in classrooms and shared areas.

Allergies

- When a child enters the school, they are able to disclose a medical condition or allergy.
- When an allergy is declared an allergy management plan AMP and an ISS dietary form are sent home.]
- If an allergy is declared, no school dinners will be provided until a special menu is created and this is signed and agreed by the parent. (This can take up to 4 weeks to prepare).
- If food is being used in class eg. Snack or food tasting or for cookery. Two people must check the ingredients against the AMP.
- AMP's are kept in class and in the Health and Safety office

- Dietary forms and special menus are kept by the kitchen staff and in the Health and Safety Office.
- Epi Pens are kept in a central place (staff room) due to needing to be available to children at any time of the day.
- Allergy management plans include the allergy, the reaction and the action needed to be taken by staff.

Roles and Responsibilities

Parents and carers

- The definition of the term parents can be found in 576 Education Act 1996. It is a person that holds parental responsibility for a child.
- Parents are responsible for providing the school with clear and full medical needs, treatments and medication for their child.
- Parents and the school are jointly responsible for reaching an agreement on how to support the child. Parental agreement needs to be agreed before this information is shared with the rest of the staff.
- Only one parent needs to consent to a medical request. If parents disagree then it is a matter that needs to be taken to the courts.
- We will aim to contact and interact with the parent that we have day-to-day contact with.
- If the child is 'looked after' by the local authority there may be a care order or voluntarily accommodation put into place, the local authority hold parental responsibility. They will decide what the actions are for that child. They will then be contacted for more information regarding their medications and well-being.
- If parents struggle to pass information or lack understanding of the treatment, then local health care services will become involved.
- Parents are responsible for keeping their child at home if they are acutely unwell.
- It is the parent's responsibility to keep a record of medicines provided to the school and replace when expiry date is near.
- Parents are responsible for collecting medicines at the end of the day and safely disposing of the containers.

The Employer

- We have a Health and Safety policy in place and have the guidance of the Health and Safety at work Code of practice no 29 Administration of medicines and procedures for dealing with certain medical conditions.
- The school has adequate insurance to cover any staff member in case of an injury whilst at work.
- If an allegation of negligence is made it is likely that the employer is liable not the member of staff. Insurance needs to fully cover these actions.
- The school is responsible for making sure that staff have appropriate training to support medical needs. (Refer also to the Inclusion Policy).

- Employers have clear systems of transferring medical information about children to the rest of the school.

The Governing Body

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions.

- The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.
- Policy and procedures are in place and are passed through Governors for approval. They have general responsibility.
- This will be steered and developed by the Head Teacher, staff and parents.
- The governors will make arrangements to support children with medical conditions in school and ensure that school policy is clear and implemented.

Head Teacher

- Responsible for putting the policy into place and ensuring it adhered to by all staff.
- Day to day decisions will normally fall to the Head Teacher or a staff member they delegate this to.
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- To ensure that all information about children is passed to the relevant staff members. They will decide who has specific responsibility for the care role and administering their medication. This person will then liaise with parents and other professionals.
- Head teacher and parents are responsible for reaching an agreement on how to support the child. If this is not possible then medical professionals may be contacted e.g. health visitor, G.P
- Supply teachers will always be briefed.

Teachers and other staff

- Will be given medical information for any child they have in their care.
- This information will be given by the leadership team of the school.
- To read, understand and follow this policy and the procedures.
- Staff should be given EHCP's and follow these accurately.
- Responsible for seeking more information if they are unsure of procedures and medical needs.
- Should be responsible for seeking advice and support if they are not confident when dealing with medical requests and administering medicines.
- Should have appropriate training and guidance if they are to administer medicines. They should be aware of any possible side effects and what to do if they occur.
- Cover arrangements will be made wherever possible to ensure that someone is always available to support the child.
- School staff may be asked to provide support for pupils with medical conditions, including the administering of medications-although they cannot be made to do so.

- Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.
- Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.
- Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- Staff must know who the children in their care have medical needs. E.g., lunchtime, breakfast club, interventions, and classroom-based staff.
- Two members of staff must check AMP's and food before letting children cook or eat any of the food.

Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

We follow advice of Public Health England, the NHS and HCS on illness and diseases, their symptoms, and recommendations on school attendance.