



# TEMPLE GROVE ACADEMY

## Supporting Children with Medical Needs Policy

Approved Summer 2021  
Review Autumn 2022

### Our school code of conduct is: “Try, Grow, Achieve”

#### Contents

1 Our aims .....	1
2 Medical Conditions .....	1
3 Procedures for medical conditions .....	4
4 Model process for developing individual healthcare plans .....	5
5 Diabetes .....	5
6 First Aid Arrangements .....	5
7 Managing medicines .....	7
8 Controlled Drugs .....	7
9 Unacceptable Practice.....	7
10 Liability and Indemnity .....	8
11 Complaints .....	8

#### 1. Our Aims:

- Ensure each child can access and enjoy the same opportunities at school as any other child.
- Give parents and pupils confidence in the school’s ability to provide effective support for medical conditions in school.

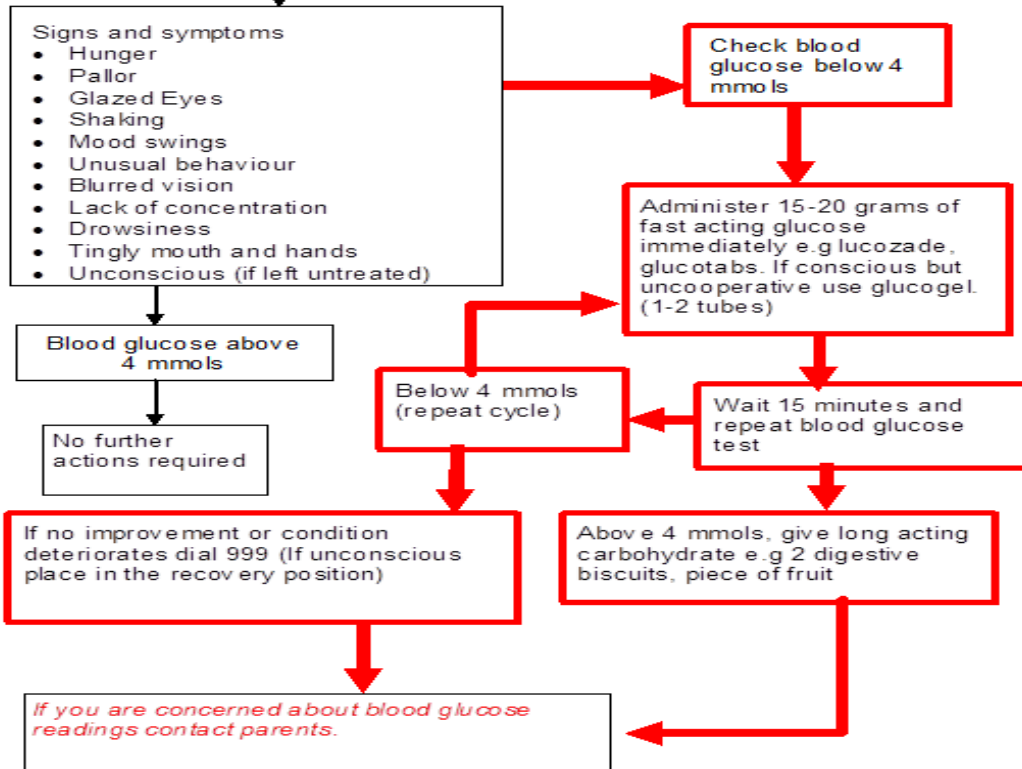
#### 2. Medical Conditions

With regard to the Children and Families Act 2014 and Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (September, 2014), our four schools ensure that arrangements, as appropriate, are made for children diagnosed with, not exclusive but including, medical conditions such as asthma, diabetes and cancer.

Each school completes a Medi-Alert Handbook identifying children who have asthma, diabetes, epilepsy, sickle-cell, allergies (leading to anaphylaxis) and dietary needs. The inclusion manager completes an annual review of the handbook as well as ensuring all relevant staff (teaching and non-teaching) have up to date, bespoke training with regards to meeting these children’s needs.

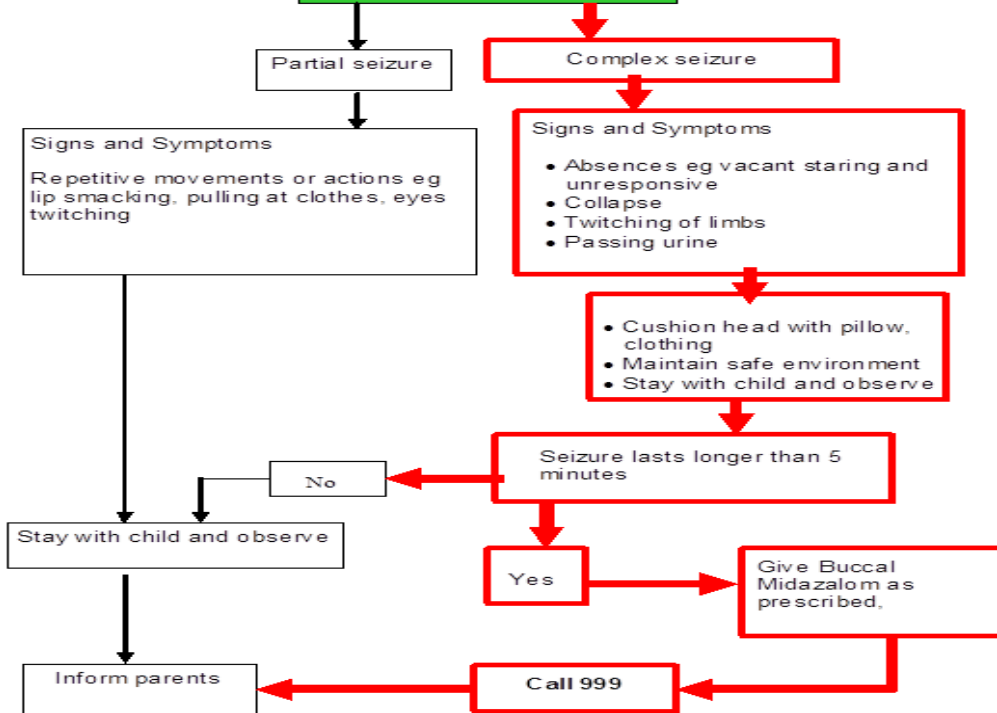
The Medi-Alert Handbook sets out procedures for named medical conditions: asthma, sickle cell disease, epilepsy, anaphylaxis and diabetes.

## Diabetic Treatment of low blood sugar (Hypoglycaemic Episode)

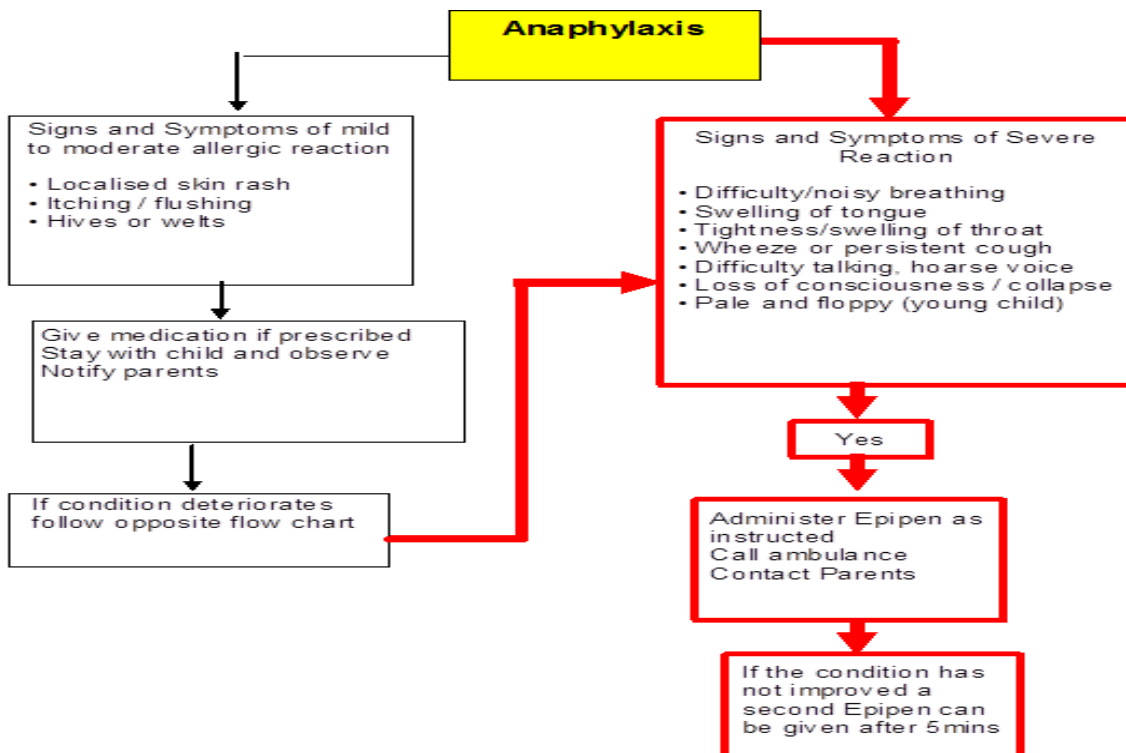


**Always ensure a First Aider is present**

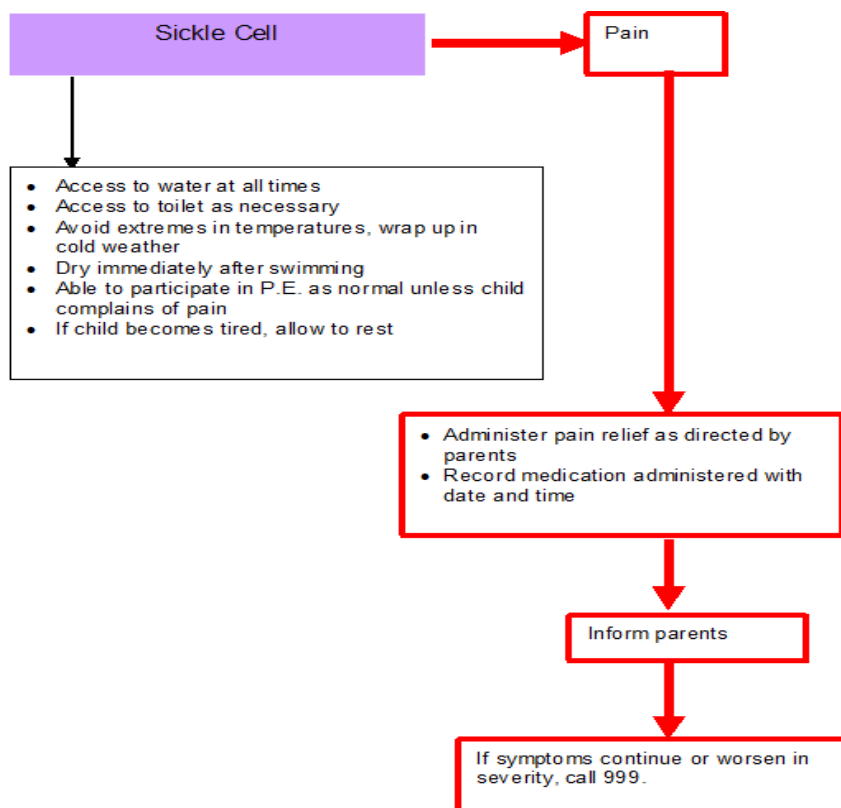
## Treatment of Seizures



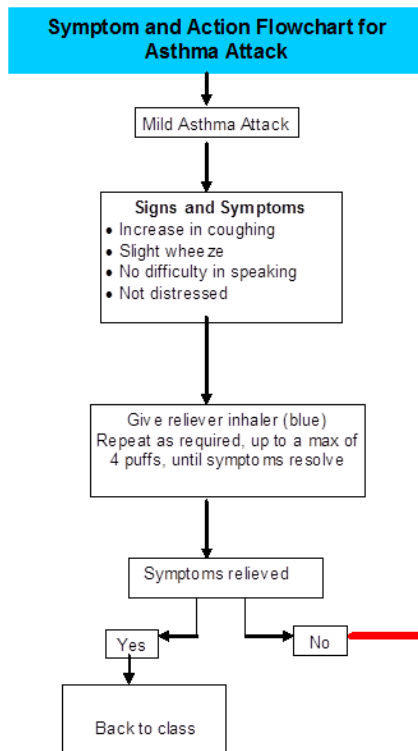
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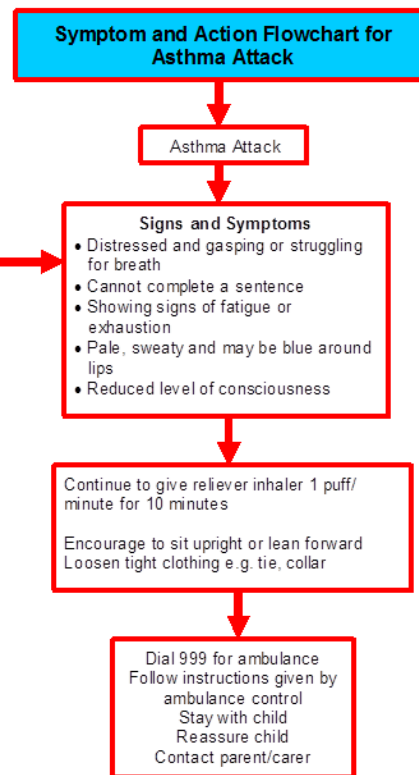
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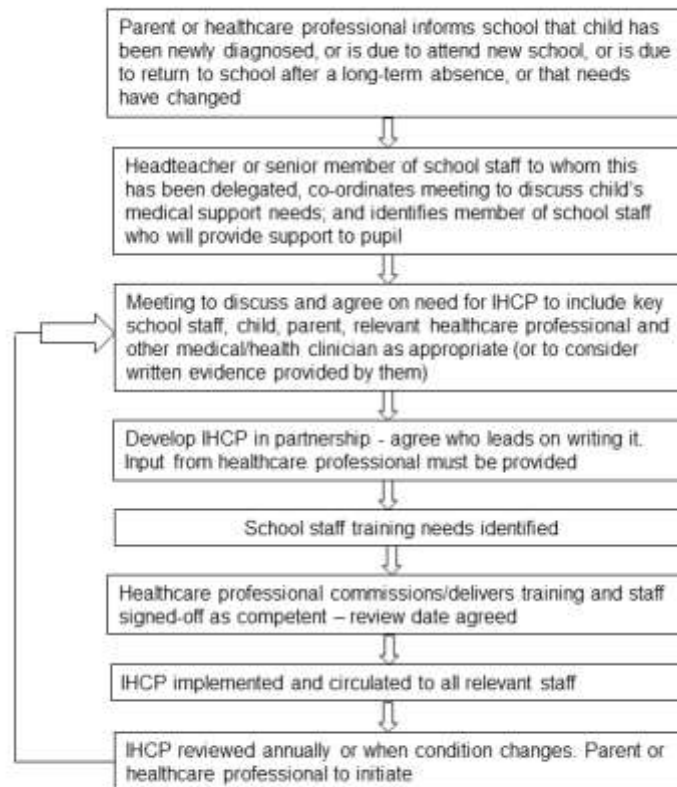
### 3. Procedures for medical conditions

In cases when children are diagnosed with a medical condition that is not named in the Medi Alert Handbook, the school will arrange for an Individual Healthcare Plan to be completed which sets out the following:

- Medical condition (triggers, signs, symptoms and treatments)
- Pupil's resulting needs (medication, dose, side effects, storage of medication)
  - Treatments, time, facilities, equipment testing, access to food and drink, dietary requirements, environmental issues
- Specific support for educational, social and emotional needs (management of absences, extra time in exams, rest periods, additional support and access to counselling/therapeutic support, external or internal)
- Level of support needed (emergency arrangements)
- Adult deployment (who will support, training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional, cover arrangements for when adults are unavailable)
- Staff awareness
- Arrangements for written permission from parents and the Head Teacher for medication to be administered by a member of staff, or self-administered by the child during school hours
- Separate arrangements or procedures required for school trips or other school activities (risk assessments)
- Confidentiality issues
- Emergency arrangements (who to contact, contingency arrangements)

In addition, where appropriate, if a child with a medical condition deemed as high risk, a further risk assessment and revision to the policy will be completed.

#### 4. Model process for developing individual healthcare plans:



#### 5. Diabetes:

In addition to the Medi Alert Handbook, we follow guidance issued by the Independent Diabetes Trust (IDT).

#### 6. First Aid Arrangements:

Procedures for first aid are organised slightly differently within each of our schools.

##### Break times

All TPs are on duty each day and administer first aid.

##### Lunchtimes

All TPs and MMS have access to a First Aid kit on the playground. Minor injuries can be treated in the playground.

Minor abrasions etc., will be treated in the playground by those on duty. More serious incidents, such as, head injuries, bleeding etc., will be attended to by a First Aider inside the building.

##### Major incidents

Any heavy bleeding, head injuries or suspected breaks leading to the pupil becoming distressed, in the first instant, need to be referred to a First Aider on duty in the playground, then the child accompanied inside the building if safe to move. Once inside the building or if the First Aider with the child outside deems it to be necessary, arrangements for dialling 999 must be put into practice.

Accident forms are filled out as appropriate.

If a child is feeling sick/unwell during lesson time, class teachers should make sure there is water available for them, along with fresh air and a bowl as appropriate. Please advise parents/carers at the end of the day.

If a child is seriously unwell in lesson time the Class Teacher or TP needs to contact a first aider. A list of first aiders can be found in classes, in the staff room and around the building. Any decisions regarding contacting parents/carers to request a child is sent home should be approved by the Head / Deputy Head Teacher / Inclusion Leader.

##### Dialling 999 – process

Identification of lead person who manages the situation from the point of phone call, arrival of ambulance services and the actions that arise from that.

Lead person contacts parents/carers.

Lead person writes up incident which is placed in child's file.

A First Aider stays with the child throughout the incident.

#### **Recording of accidents:**

If a child needs medical attention then it is to be recorded in the school's own accident book. If a child goes directly to hospital then the incident must be recorded on KCC's electronic accident/incident reporting form HS157.

#### **Dealing with bodily fluids and spillages (Blood, mucus, vomit & diarrhoea etc)**

Spillages of blood and body fluids may present an infection risk to others and must be dealt with immediately.

The equipment you will need:

- Protective clothing - disposable gloves, apron and face visor or goggles if there is a risk of splashing.
- NADCC granules to sprinkle on the spill
- Absorbent paper towels to mop up the spill
- Yellow clinical waste bag/bin to dispose of the used materials
- Mop and bucket to clean the area after the spillage has been cleaned up

#### **Procedure for dealing with spillages in nurseries and schools:**

- Vomit, urine and faeces must be cleaned away immediately using hot water, detergent and disposable paper towels or cloths.
- Wear disposable aprons and gloves.
- Dispose of all materials in a leak proof bag
- It is advisable that carpeted areas are shampooed as soon as possible after decontamination
- Soiled clothing, including with blood, should be placed in a plastic bag sealed for transporting. They can be safely washed in a washing machine on a standard cycle. A cool pre-wash cycle will help to dispel any blood prior to a hot wash.
- Wash hand thoroughly on completion.

#### **Location of First Aid Boxes:**

First aid boxes can be found within each classroom.

There is a first aid supplies cupboard outside of the main office and a locked medical cupboard.

### **7. Managing medicines**

Prescription medicines can be administered at school as long as parental consent is obtained and:

- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have parents' written consent (use of a localised agreement – Appendix 1)

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept medicines that are:

- In-date
- Labelled with the child's name and class
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

### **8. Controlled drugs**

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

#### **9. Unacceptable practice**

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

#### **10. Liability and indemnity**

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The details of the school's insurance policy are:

#### **11. Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the Head Teacher and/or Inclusion Leader in the first instance. If they cannot resolve the matter, they will direct parents to the Trust complaints procedure.

The Inclusion Leader is responsible for:

- Ensuring this policy is updated and maintained
- Ensuring that adequate numbers of first aiders are trained in their respective schools
- Ensuring that existing first aiders receive further CPD when their training expires

Guidance may also be found here:

Supporting Pupils at School with Medical Conditions - December 2015:

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Statutory framework for the early years foundation stage 3 April 2017:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/596629/EYFS\\_STATUTORY\\_FRAMEWORK\\_2017.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/596629/EYFS_STATUTORY_FRAMEWORK_2017.pdf)

#### **Appendix 1**

**Localised Agreement  
between  
Temple Grove Academy Primary  
and  
Parent / Carer XXXX**

**Parental agreement for school/setting to administer medicine**

The school/setting will not give your child medicine unless you complete and sign this form.

Name of School/Setting.....  
Date.....  
Child's Name.....  
Group/Class.....  
Name and strength of medicine.....  
Expiry date.....  
How much to give ( i.e. dose to be given).....  
When to be given.....  
Any other instructions.....  
Number of tablets/quantity to be given to school/setting.....

**Note: Medicines must be the original container**

Daytime phone no. of parent or adult - Contact.....  
Name and phone no. of GP.....  
Agreed review date to be initiated by [*name of member of staff*]:.....

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent's signature: .....Print Name:.....

If more than one medicine is to be given a separate form should be completed for each one.