



# Overchurch Junior School Medical Policy and Procedures (including First Aid)

Ratified by FGB	
Date ratified by Governors	
Date reviewed	
Next review date	December 2022
Signed: Headteacher	
Signed: Chair of Governors	

## 1. Statement of intent

The governing body of Overchurch Junior School has a duty to ensure arrangements are in place to support pupils with short and long term medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support allowing them to play a full and active role in school life, remain healthy, have full access to education (including school trips and physical education) and achieve their academic potential. It provides a framework for responding to a first aid incident, recording and reporting the outcomes.

Overchurch Junior School believes it is important that parents/carers of pupils with medical conditions feel confident that the school provides effective support for their child's medical condition, and that pupils feel safe in the school environment.

There are also social and emotional implications associated with medical conditions. Pupils with medical conditions can develop emotional disorders, such as self-consciousness, anxiety and depression, and be subject to bullying. This policy aims to minimise the risks of pupils experiencing these difficulties.

Long-term absences as a result of medical conditions can affect educational attainment, impact integration with peers, and affect wellbeing and emotional health. This policy contains procedures to minimise the impact of long-term absence and effectively manage short-term absence.

Some pupils with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have special educational needs and disabilities (SEND) and have an education, health and care plan (EHCP) collating their health, social and SEND provision. For these pupils, compliance with the DfE's "The Children and Families Act 2014" and "Special Educational Needs and Disability Code of Practice: 0 to 25 years" and the school's own SEND Policy will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents/carers.

## **2. Implementation of Appropriate Procedures**

### **2.1 Roles and Responsibilities of the Governing Body and School Leadership**

#### **Team:**

- The governing body is legally responsible for fulfilling its statutory duties under legislation.
- The governing body ensures that no prospective pupil is denied admission to the school because arrangements for their medical condition have not been made.
- The Head Teacher (Mrs Sheridan) and SENDCO (Mrs Isaacs) ensure that arrangements are in place to support pupils with medical conditions.
- The SENDCO, works with the LA, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education. She ensures that the focus is on the needs of each pupil and what support is required to support their individual needs.
- The Head Teacher and SENDCO work together to ensure that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- The Senior Leadership Team, under the guidance of the Head Teacher and SENDCO, ensures that members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- The Head Teacher and SENDCO take responsibility for informing relevant staff of a pupil's condition.
- The Head Teacher is responsible for overseeing the safekeeping and administration of medicines in school and for organising first aid training courses for members of staff.
- The governing body ensures that pupils' health is not put at unnecessary risk. As a result, it holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
- Parents/carers will notify school of their child's medical condition and any changes to the condition. Parents/carers will support school with planning procedures to set up support for the child in school.

### **2.2 Roles and Responsibilities of the School Nurse:**

- The School Nurse, appointed by NHS Wirral, at the earliest opportunity, must notify the school when a pupil has been identified as having a medical condition which requires support in school.
- Support staff to implement Individual Health Care Plans, providing advice and training.
- Liaise with lead clinicians locally on appropriate support for pupils with medical conditions.

### **2.3 Roles and Responsibilities of Clinical Commissioning Groups (CCGs):**

- Ensure that commissioning is responsive to pupils' needs, and that health services are able to cooperate with schools supporting pupils with medical conditions.
- Make joint commissioning arrangements for education, health and care provision for pupils with SEND.
- Provide clinical support for pupils who have long-term conditions and disabilities.
- Ensure that commissioning arrangements provide the necessary ongoing support essential to ensuring the safety of vulnerable pupils.

### **2.4 Roles and Responsibilities of Parents / Carers:**

- Notify the school if their child has a medical condition.
- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Ensure that they, or another nominated adult, are contactable at all times.
- Complete the prescribed medicine form, as appropriate
- Engage in the IHCP process where appropriate.

### **2.5 Roles and Responsibilities of School Staff:**

- There is a team of medically trained staff holding current first-aid certificates. However, a first-aid certificate does not constitute appropriate training for supporting pupils with medical conditions and staff will need training to support the specific medical needs of the child.
- Staff must receive sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Ensuring they follow first aid procedures.
- Ensuring they know who the first aiders in school are.
- School staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, but are not required to do so.
- Staff must take into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Staff must know how to respond accordingly when they become aware that a pupil with a medical condition needs help.
- Staff must not give prescription medicines or undertake health care procedures without appropriate training.
- Supply teachers will be made aware of this policy, the medical needs of any pupils in their charge and have access to IHCPs for children in their charge.
- Completing first aid reports for all incidents they attend on the individual pupil profile on the MIS system.
- Informing the headteacher or their manager of any specific health conditions or first aid needs

## **2.6 Notification of a medical condition:**

- Arrangements will be put in place to support a pupil via transition from KS1 to KS2, transfer from another school, reintegration following absence or diagnosis of a medical condition.
- Appropriate medical advice will be sought from the school nurse and relevant professional services and staff will receive any necessary training.
- Where school is notified of a new medical condition mid-term, school will liaise closely with parents/carers to plan and set up support in school and will endeavour to have all necessary arrangements in place within two school weeks.

## **2.7 Individual Health Care Plans (IHCPs):**

Individual Health Care Plans set out details of long term medical conditions and agreed support for a pupil. The plans are kept in a central file in the medical cupboard and further copies are kept by class teachers and on the management information system. The following details are included:

- The medical condition, along with its triggers, symptoms, signs and treatments.
- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements and environmental issues and any identified special educational needs.
- The support needed for the pupil's educational, social and emotional needs.
- The level of support needed, including in emergencies.
- Whether a child can self-manage their medication.
- Who will provide support where necessary.
- Who needs to be made aware of the pupil's condition and the support required.
- Separate arrangements or procedures required during school trips and activities.
- Where confidentiality issues are raised by the parent/carer(s) or pupil, the designated individual to be entrusted with information about the pupil's medical condition.
- What to do in an emergency, including contact details and contingency arrangements.
- The Medical Lead is responsible for meeting with pupils and parents to set up Individual Health Care Plans (IHCPs) to support children with long term medical needs in school. IHCPs will be reviewed with parents/carers and pupils annually or more frequently if important changes need to be made to a plan.
- The school, healthcare professionals and parents/carers agree, based on evidence, whether an IHCP is required for a pupil, or whether it would be inappropriate or disproportionate. If no consensus can be reached, the Head Teacher makes the final decision.
- Parents are involved in the development and review of their child's Individual Health Care Plan (IHCP) where there is a long term medical condition.
- Parents must agree to carry out any actions contained in the IHCP.

- For children with long term illnesses such as asthma, epilepsy and leukaemia, a individual health plan will be initiated.

### 3. Managing Medicines:

Prescription and non-prescription medicines will only be administered at school:

- In the case of antibiotics, only those prescribed four times a day may be administered at school
- Painkillers, such as paracetamol or ibuprofen, may NOT be brought in to school unless advised by a Health Care Professional to do so.
- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have parents' written consent via the Prescribed Medicines Form.

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. Dosage and timings of any medication administered is recorded on the MIS system.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- 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. 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.

The Headteacher must be informed of any controlled drugs required by children, e.g. equasym. These tablets should be counted and recorded when brought to the office and each time they are administered. The amount received and a reducing quantity is recorded on the MIS system.

Parents may come to the school office to administer medicines if necessary

Some children may self-administer medication, e.g. insulin, if this has been directed by the parents when filling in the prescribed medicine form

If a child refuses to take medicine, staff must not force them to do so. The refusal should be recorded and parents informed

### **Medicines and drugs will not be administered:**

- a) where the timing and nature of the administration are of vital importance and where serious consequences could result if a dose is not taken.
- b) Where some technical or medical knowledge or expertise is required.
- c) Where intimate contact is necessary.
- d) Where school has not received a completed Prescribed Medicine Form

### **3.1 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 Controlled Drugs cupboard in the First Aid room and only named staff have access. Pupils are made aware of where their medication is stored.
- Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.
- The school only accepts medicines that are in-date, labelled, in their original container, and that contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump.
- All medicines are stored safely. Pupils know where their medicines are at all times and are able to access them immediately, whether in school or attending a school trip/residential visit.
- When medicines are no longer required, they are returned to parents/carers for safe disposal. Sharps boxes are always used for the disposal of needles and other sharps.
- The school holds asthma inhalers and a auto-injector device for emergency use. The inhaler and auto-injector are stored on top of the controlled drugs cupboard and their use is recorded.
- Staff may administer a controlled drug to a child for whom it has been prescribed. They must do so in accordance with the prescriber's instructions.

### **3.2 Pupils managing their own needs**

Pupils who are competent will be encouraged to take responsibility for making their way to the first aid room for administration of their medicines under supervision of a trained member of staff. This will be discussed with parents and it will be reflected in their IHCPs.

Pupils are not permitted to carry their own medicines and relevant devices in school, unless insulin dependent diabetics, due to the age of pupils in school. Pupils are made aware of where their medication is stored and encouraged to seek staff support when requiring their medication.

## 4.0 First Aid

This policy is based on advice from the Department for Education on [first aid in schools](#), [health and safety in schools](#) and [actions for schools during the coronavirus outbreak](#), and the following legislation:

- [The Health and Safety \(First Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records

[The School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

### 4.1 Appointed person(s) and first aiders

The school's appointed Medical Lead, Nicola Durney. They are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending pupils home to recover, where necessary
- Filling in a first aid report on the same day, or as soon as is reasonably practicable, after an incident.

Our school's appointed person and first aiders are displayed prominently around the school and on the MIS system.

## 4.2 First aid procedures

### In-school procedures

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of the on – call qualified first aider, if appropriate, who will provide the required first aid treatment
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- The first aider will also decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a pupil is too unwell to remain in school, a second opinion must be sought from the Medical Lead, then parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents
- If emergency services are called, a member of the Office staff will contact parents immediately
- The first aider/relevant member of staff will complete a first aid report on the MIS system on the same day or as soon as is reasonably practical after an incident resulting in an injury

**During coronavirus:** first aiders will follow Health and Safety Executive (HSE) guidance for [first aid during coronavirus](#). They will try to assist at a safe distance from the casualty as much as possible and minimise the time they share a breathing zone. Treating any casualty properly will be the first concern. Where it is necessary for first aid provision to be administered in close proximity, those administering it will pay particular attention to sanitation measures immediately afterwards including washing their hands.

### Off-site procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit
- Information about the specific medical needs of pupils held on the IHCPs.
- Parents' contact details

Risk assessments will be completed by the Headteacher / Visit Lead prior to any educational visit that necessitates taking pupils off school premises.

## **5. First aid equipment**

A typical first aid kit in our school will include the following:

- Regular and large bandages
- Eye pad bandages
- Triangular bandages
- Adhesive tape
- Safety pins
- Disposable gloves
- Antiseptic wipes
- Plasters of assorted sizes
- Scissors
- Cold compresses
- Burns dressings

No medication is kept in first aid kits.

First aid kits are stored in:

- The medical room
- All class rooms

## **6. Record-keeping and reporting**

### **6.1 First aid and accident recording**

- An first aid form will be completed on the MIS system by the first aider/relevant member of staff on the same day or as soon as possible after an incident resulting in an injury
- As much detail as possible should be supplied when reporting an accident including location, type of injury, date, time, nature of injury and how it happened and medical intervention
- Records held regarding first aid administered and accidents will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

## 6.2 Reporting to the Local Authority

The Medical Lead will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

The Medical Lead will report these to the Local Authority using an M13 Accident Report as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

➤ Death

➤ Specified injuries, which are:

- Fractures, other than to fingers, thumbs and toes
- Amputations
- Any injury likely to lead to permanent loss of sight or reduction in sight
- Any crush injury to the head or torso causing damage to the brain or internal organs
- Serious burns (including scalding)
- Any scalding requiring hospital treatment
- Any loss of consciousness caused by head injury or asphyxia
- Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours

➤ Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident)

➤ Where an accident leads to someone being taken to hospital

➤ Near-miss events that do not result in an injury, but could have done. Examples of near-miss events relevant to schools include, but are not limited to:

- The collapse or failure of load-bearing parts of lifts and lifting equipment
- The accidental release of a biological agent likely to cause severe human illness
- The accidental release or escape of any substance that may cause a serious injury or damage to health
- An electrical short circuit or overload causing a fire or explosion

## 6.3 Notifying parents

The Medical Lead will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

## 6.4 Reporting to Ofsted and child protection agencies

The Head Teacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.

The Head Teacher will also notify Local Authority of any serious accident or injury to, or the death of, a pupil while in the school's care.

### **Unacceptable Practice:**

The following practice is deemed as unacceptable:

- Assuming that pupils with the same condition require the same treatment.
- Preventing pupils from easily accessing their inhalers and medication.
- Ignoring the views of the pupil and/or their parents/carers.
- Ignoring medical evidence or opinion.
- Sending pupils home frequently for reasons associated with their medical condition, or prevent them from taking part in activities at school, including lunch times, unless this is specified in their IHCP.
- Penalising pupils with medical conditions for their attendance record, where the absences relate to their condition.
- Making parents/carers feel obliged or forced to attend school to administer medication or provide medical support, including for toilet issues. The school will ensure that no parent/carer is made to feel that they have to give up working because the school is failing to support their child's needs.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.
- Making a parent/carer attend a school trip to either administer medication or support their child to enable them to access an educational experience.

### **Liability and Indemnity:**

- The school provides an appropriate level of insurance which covers staff when following the procedures laid out above. The governing body ensures that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.
- The school holds an insurance policy covering liability relating to the administration of medication.

### **Complaints Procedures:**

- In the first instance, any complaint should be raised with Mrs Sheridan, Head Teacher.
- Should the complaint not be resolved at this stage, parents/carers may refer to the school's complaints procedure which is available on the school's website.

### **Monitoring and Review:**

This policy will be monitored by the SENDCO and Medical Lead and reviewed annually by the relevant governor's committee. The policy will be amended in the light of any legislative changes as appropriate.