



## Corpus Christi Catholic Primary School

### Medical Conditions Policy

*Joyfully, unique in Jesus' family we learn to use our special gifts  
to love, serve and make the world a better place.*

Medical Conditions Policy			
Approval		Chair	
		Board of Governors	
<b>Chairperson</b>	Anna Murphy Sullivan	<b>Headteacher</b>	Simon Lennon
<b>Date of last review</b>	March 2020	<b>Date of review</b>	June 2023
<b>Date of next review</b>	June 2026	<b>Maintenance</b>	FGB Committee

*'I will restore you to health and heal your wounds declares the Lord' Jeremiah 30:17*

### **Introduction:**

Corpus Christi school is an inclusive community that supports and welcomes pupils with medical conditions. The school understands that all children with the same medical condition will not have the same needs. The school is committed to providing a physical environment that is fully accessible to children with medical conditions and to ensure that children with medical conditions can access the curriculum. Parents and carers are asked if their child has any medical conditions on the enrolment form. When children change from one class teacher to another at the end of the year, information regarding their medical condition and medication will be passed on.

### **Aims**

Corpus Christi aims to ensure that:

- all staff understand their duty of care to all children and know what to do in an emergency
- parents/carers and children feel confident in the level of medical support they receive in school
- children requiring medication have access to it
- medicines are administered under adult supervision
- all staff are made aware of any medical conditions (as necessary), and any support needed is in place for the children in their care

### **Training**

- The school will ensure that staff supporting children with a medical condition receive suitable training and ongoing support through consultation with parents/carers, the School Nurse and any other relevant healthcare professionals. The person named responsible by the Headteacher is Eithne Boyce. Staff will receive training on what to do in an emergency at least annually
- Children will also be trained in what to do in an emergency where appropriate

### **Emergencies**

- Staff will be trained to identify and reduce any triggers to medical conditions
- The school will review any emergencies to see if they could have been avoided and to see if any changes to policy need to be made
- In the case of a medical emergency, the school will call for medical assistance and the parent/carer (or named emergency contact) will be notified. Staff will stay with a child until a parent arrives or accompany the child in an ambulance to hospital
- The Governing Body will support any member of staff who assists with a medical incident in a reasonable good faith attempt to prevent or manage an emergency situation, regardless of outcome

### **Individualised Care**

- The Inclusion Team is responsible for ensuring that Individual Healthcare plans are in place, through consultation with the School Nurse (Maria Coombs) any other relevant healthcare professional, parents/carers and where appropriate, the child
- Where a child has an Education Healthcare Plan (EHCP) the Individual Healthcare Plan will form part of the EHCP
- Individual Healthcare plans are reviewed at least annually
- Healthcare Plans are developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social well-being and minimises

disruption

- In the event of a one off injury (e.g. broken leg) parents/carers should arrange an appointment with a member of the Inclusion Team to ensure appropriate measures are in place for the child.

### **Administration of medication of Prescribed Medication**

The correct forms must be completed before medication is administered. Permission may be given by a parent/carers via an Individual Health Care Plan or Education Health Care Plan for complex health needs, Epipen Action Plan or a Food Allergy Action Plan. For commonly prescribed medicines e.g. asthma inhaler, paracetamol, Ibuprofen, simplified authorisation forms are required, compiled by a trained member of school staff in partnership with parent or carer. In exceptional circumstances and by prior arrangement with the head teacher, deputy headteacher, assistant head or class teacher, essential prescribed medication will be administered, providing written authority has been received from the parent or legal guardian (see appendix 1). First Aiders and authorised staff can administer medications if they are:

- designated by the Headteacher / Deputy Headteacher
- trained by a School Nurse for specific meds e.g. Epipen, Buccolam or other nurse specialist e.g. Diabetes
- trained by a School Nurse for general awareness on medicines administration
- willing to do so

If the school agrees to assist parents and carers to administer a medicine to their child, the medicine must be provided in its original container/packaging and must have been dispensed by a pharmacist and must have a label showing:

- name of child
- name of medicine
- dose
- method of administration
- time/frequency of administration

The instruction leaflet with prescribed medicines should show:

- any side effects
- expiry date (school will only accept in-date medications)

The form to record the medication administered by staff is shown at appendix 2. The school will also provide a medicine record form for each medication and parents/carers must complete and sign one of these forms if they leave medicine at school. For complex health needs the medication, dose, time and other instructions should be clearly detailed on the health care plan. Epipen, Diabetes and Food Allergy Action Plans will have precise instructions on medication and delivery. For other conditions the medication dose, time and other instructions should be clearly detailed on the medication record form. If medicines are prescribed 4 times a day, the school will administer one dose. Parents/Carers may come into school to administer if they wish once agreed with a member of the Inclusion or SLT team.

Written instructions and discussion with parents or legal guardians should take place prior to taking a child who is receiving medication on an activity away from the school premises. Medication will be taken with staff on school trips. *When going on a school trip, all children requiring an epipen must take two epipens with them?* Any medical needs will be considered on risk assessments. School staff will count ADHD and controlled medications with the parent and document the amount received on side 2 of the medication record form.

## **Parent/carer responsibilities**

The parent or carer is required to:

- notify the school if there is a change in the medication, health status or health care provider
- provide a new authorisation form to reflect any changes

Only parent / carer and authorised school staff will have access to personal health information. Where a child is receiving on-going treatment, parents/carers will be requested to provide a contact number of a medical authority able to act or advise in an emergency. If the administration of prescription medicines requires technical/medical knowledge then individual training should be provided for staff from a qualified health professional. Training should be specific to the individual child concerned. Parents/carers must ensure that the school has correct information about the medical condition of any child with long-term medical needs. Parents/carers of children who need to use an inhaler are requested to obtain a second inhaler from their doctor, which can be kept safely at school at all times. The inhaler should be clearly labelled with the name of the child and the instructions for use. School illness exclusion guidelines are shown at appendix 3.

## **Confidentiality**

Health conditions will not be displayed where they can be viewed by anyone other than authorised staff. A record will be made to certify that the name/visual check has been made and that the dosage has been checked. The School will file medication records at the end of the year, if a student leaves the school or when a medication is discontinued.

## **Storage of Medication**

School has inhalers stored in the child's classroom for emergency usage. This can be administered by a first aider in an emergency to any child, with the permission of a member of the senior leadership team. Unfinished medication should be returned to the parents or legal guardian for safe disposal. All medicines placed in the care of the school will be kept in a secure place to which children do not have access. The only exceptions to this is in the case of asthma inhalers and epipens which should be readily available for the children concerned.

Children are encouraged to take responsibility for their own medicine from an early age. A good example of this is children using their own asthma reliever. Parents/carers must still complete a medicine record form, noting that the child will self-administer and sign the form. The school will store the medicine appropriately. Parents will be asked to collect all medicines at the end of each term. Medicines that have not been collected by parents at the end of each term will be safely disposed of. When a child refuses medicine the parent or carer will be informed the same day. Medicines are stored in the cabinet or fridge in the Medical Room in the main building and in the Medicine cabinet or fridge in the annexe. It is the parent/carer responsibility to ensure all medication in school is within its expiry date.

The governing body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

Unacceptable practice includes:

- preventing children from their inhalers and medication and administering where necessary
- assuming children with the same medical condition requires the same treatment
- ignoring parental, child or medical professional views
- sending children home frequently, unless specified in a healthcare plan


- penalising children for absences due to their medical needs
- preventing children from drinking, eating, toileting or taking breaks due to their medical condition
- preventing children from participating in aspects of school life

### **Complaints about medical provision**

Any parent/carer who feels they may have a complaint about the medical provision in Corpus Christi School should address that complaint to the Headteacher, who will address the complaint and feedback to the parents or carers or Chair of Governors if applicable. If they remain dissatisfied they may contact BCP, The Town Hall, Bourne Avenue.

### **Infection Control**

During a time of a contagious virus such as Coronavirus, and other exceptional circumstances, variations to the behaviour management policy will apply.

	<p style="text-align: center;"><b>Appendix 1</b>  <b>Corpus Christi Catholic Primary School</b></p> <p style="text-align: center;"><b>Parental Permission Form</b>  <b>Administration of Prescribed Medicines</b></p>
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In order for your child to receive medicines (e.g. antibiotics, inhalers, Epi-pens) whilst at school, you need to complete and sign the form below. This form needs to be completed, signed and dated on every day the medicine is to be given. Please bring medicines when your child attends the school and take them home again

when your child leaves. (The only exception could be spare inhalers/Epi-pens supplied by parents/carers in case of emergency). **All medicines must have the pharmacists label clearly showing the name of the medication, child's name, frequency of administering, prescribed dosage and date prescribed.**

**To be completed by parent/carer:**

Full Name of Child:.....

Name of parent/carer.....

Full Name of prescribed medicine to be given.....

**Last dose given by parent/carer:**

Date..... Time..... Amount Given.....

**First dose due:**

Date..... Time..... Amount Given .....

**Second dose due:**

Date..... Time..... Amount Given.....

**Signed by parent/carer**.....

**Date**.....

**For Inhalers/Epi-pens only:**

I give permission for staff to administer the inhaler / Epi-pen (supplied by me)  
child.....(Name of child)

As instructed in writing by me and to record its use.

**Signed by parent/carer**.....



**Appendix 2**  
**Corpus Christi Catholic Primary School**  
**ADMINISTRATION OF PRESCRIBED MEDICINES**

To be completed, dated and signed by member of staff administering medicine/lotion and countersigned by manager/deputy at time of administration. Parent/carer to sign and date

form at end of day/session.

Full Name of Child.....

Full Name of prescribed medicine/lotion given.....

**Date and time of first dose given**.....

Amount Given.....

Given by (name of staff member).....

Signed by staff member.....

Date/Time.....

Countersigned by manager/deputy.....

Date/Time.....

**Date and time of second dose given**.....

Amount Given.....

Given by (name of staff member).....

Signed by staff member.....


Date/Time.....

Countersigned by manager/deputy.....

Date/Time.....

**Signed by parent/carer**.....

Date.....

	<p style="text-align: center;"><b>Appendix 3</b> <b>Corpus Christi Catholic Primary School</b> <b>School illness exclusion guidelines</b></p>
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**Please check your child knows how to wash his/her hands thoroughly, to reduce risk of cross-infection. School attendance could be improved for all if children and families wash and dry their hands well 5 or more times a day.**

Chickenpox	Until blisters have all crusted over or skin healed, usually 5-7 days from onset of rash.
Conjunctivitis	Parents/carers expected to administer relevant creams. Stay off school if unwell.
Nausea	Nausea without vomiting. Return to school 24 hours after last felt nauseous.
Diarrhoea and/or vomiting	Exclude for 48 hours after last bout if it is caused by a viral illness (e.g. not caused by reflux or eating too quickly etc). Please check your child understands why they need to wash and dry hands frequently. <b>Your child would need to be excluded from swimming for 2 weeks.</b>
German measles/rubella	Return to school 5 days after rash appears but advise school immediately as pregnant staff members need to be informed.
Hand, foot and mouth disease	Until all blisters have crusted over. No exclusion from school if child only has white spots. If there is an outbreak, the school will contact the Health Protection Unit.
Head lice	No exclusion, but please wet-comb thoroughly for first treatment, and then every three days for next 2 weeks to remove all lice.
Cold sores	Only exclude if unwell. Encourage hand-washing to reduce viral spread.
Impetigo	Exclude until treated for 2 days and sores have crusted over.
Measles	Exclude for 5 days after rash appears.
Mumps	Exclude for 5 days after swelling appears.
Ringworm	Exclude until treatment has commenced.
Scabies	Your child can return to school once they have been given their first treatment although itchiness may continue for 3-4 weeks. All members of the household and those in close contact should



receive treatment.

Scarletina	Exclude for 5 days until rash has disappeared or 5 days of antibiotic course has been completed.
Slapped cheek	No exclusion (infectious before rash).
Threadworms	No exclusion. Encourage hand-washing including nail scrubbing.
Whooping cough	Exclude until 5 days of antibiotics have been given. If mild form and no antibiotics, exclude for 21 days.
Antibiotics	First dose must be given at home, and first 24 hour doses must be given by parent or carer.
Viral infections	Exclude until child is well and temperature is normal (37 degrees).