

**St. Joseph's Catholic Primary School**  
**Policy for pupils with medical needs and the administration of Medication**

**Mission Statement:**

*We follow in Jesus' footsteps caring for each other, when we work, play and pray.*

This mission statement is also extended to others in the community who work with our pupils to support their well-being in whatever role. The school admissions procedure gives priority to pupils with a statement of special needs, it is recognised that this may include a child with long or short-term medical needs. In addition, at any one time there may be in the school a number of pupils with medical needs, either short or long-term. This policy sets out the provision and duty of care for these children. **We are ensuring that every child has the right to the best health care possible, safe water to drink, nutritious food and a clean safe environment and information to help them stay well. (Article 24)**

**Aims**

- To enable the school to make quality provision for pupils on role who have medical needs, as set out in the DFE Document 0732/2001
- To list procedures to ensure that the medical needs of pupils at St. Joseph's are met.

**Objectives**

- Pupils with medical needs will be integrated as fully as possible into full-time mainstream education.
- Pupils and parents will know the named person who has responsibility for ensuring that medical needs are monitored and met wherever possible.
- A record will be up-to-date of the pupils attendance to ensure that a pupil's educational needs are being met.
- There will be a partnership between home, school and medical professionals to ensure that a pupil's needs are being met.
- The school will be fully informed of a pupil's medical needs in order to made provision for them and in order to ensure their educational needs are met.

**Procedures**

**Where a dose of antibiotic or other medication (for example, eye drops) has to be administered during school hours, the child's parent/guardian must take the responsibility to bring in the medication at the appropriate time and administer it to their child. All Staff are instructed to no longer carry out this duty.**

Where medicine is required to be taken in the daytime or any other medical intervention required during the school day, this is the responsibility of the parent/carer; **drugs and medicines with the exception of inhalers and epi-pens and medically prescribed Antibiotics are not allowed on school premises for the health and safety of other pupils (see Drugs and medicines policy).**

Any child who is unwell or has a temperature should not be sent to school by parents even with Calpol/ paracetamol. There is always a risk of these children passing on the illness to others adults and children. Children are to be sent to school only if they are temperature free and well in themselves.

Where a child is on antibiotics, as a general rule, the child should be sent back to school only after having had at least 48 hours of the course.(This may vary please speak to your doctor for further advice). Parents should always encourage their doctors to prescribe Antibiotics that have to be administered only twice or three times during the day (As set out by the department of health 'Managing medicines in school and early years') this is to avoid, as much as possible, the need for administration of a dose during school hours. All reputable Doctors will adhere to this request.

Where children are on long term medication, such as inhalers or require emergency treatment for allergic reactions this will be administrated by school. Appropriate training will continue to be provided to all staff (as is current practice).

Where a child has a short-term medical need which necessitates absence from school, the parents/carers should inform the school and the school will provide work if the child is well enough so that their education does not suffer.

Where a child has a longer term medical need which necessitates a longer period of absence from the school, the school will communicate with outside agencies to ensure there is a continuity of education at the appropriate level for the child.

Where a child has a medical need which does not prevent their attendance in school but may affect day to day routines or emergency procedures, it is the responsibility of parents/carers to inform the school in as much detail as possible so that the school can make appropriate provision on a day to day or emergency basis. This should be done through the medical information forms

sent home annually for updating and/or through consultation with a senior member of staff. The class teacher and registered First Aider will also be informed of details on a need-to-know basis.

No pupil will be excluded from a school or extra-curricular opportunities because of his/her medical needs unless a risk assessment deems it necessary; in this case, every effort will be made to adapt an opportunity for the child's needs. It is the duty of parents/carers to ensure that the correct medical information is supplied in the case of residential visits on the forms supplied.

If a child has a lengthy absence from school because of a medical need, a case conference involving home, school and medical professionals may be required to discuss the child's reintegration into school. Strategies for re-integration may include a reduced timetable, provision to stay indoors at break times and pupil/staff buddies.

If a child is absent or likely to be absent for SATs tests, the primary responsibility for exam entry remains with the school. The school will negotiate with the LA and any other agencies involved ensuring that the child's interests are addressed in this regard.

### **Special Educational Needs**

Pupils with medical needs may at times need to be entered on the Special Needs register. This should be done with the full consent of parents/carers and in consultation with outside agencies.

### **Confidentiality**

Medical details provided should be treated as confidential and only shared with others with the parent/carers' consent on a need-to-know basis.

### **Contacts**

The First Aiders in school are mainly the Teaching Assistants, this allows for first aiders suitably attached to each year group. It is essential that they have the most detailed medical information available.

### **Impaired Mobility**

Providing the approval of the GP or Consultant has been given there is no reason why children wearing plaster casts or using crutches should not attend school.

Restrictions will be necessary on games or practical work to protect the child or others. Similarly, some relaxation of normal routine in relation to times of attendance or movement around the school may need to be made in the interest of safety.

If a child is being taken on a school journey where medical treatment may be needed and the parent is not prepared to give written instruction and an indemnity on the subject of medical treatment, the school might decide that the pupil should not go on the journey.

**School nurse: Sutton Cottage Hospital Clinic team**

**SENAT/Educational Psychology team: 303 0100**

**CAMHS (Child and Adult mental health): 464 6592**

**Hospital teacher: Good Hope Hospital 424 2000**

**Princess Diana Children's Hospital: Educational Matters James Brindley School Ladywood Birmingham 0121 449 3322**

**Medical matters: Liaison sisters at the relevant hospital**

Other useful agencies might include the many and various support organisations which can be accessed through the internet.

Ratified by the Academy Committee (AC)

Signature \_\_\_\_\_  
Chair of AC

Date \_\_\_\_\_

From Summer 2022