**Introduction**

Many children at some time have a medical condition that could affect their participation in school activities. At Strathburn we wish to ensure that children with medical needs receive care and support in our school.

**Roles and Responsibilities**

The ultimate responsibility for the management of this policy lies with the Head Teacher.

# Anyone caring for children, including teachers and other school staff have a duty of care to act like any reasonably prudent parent/carer. This duty extends to staff leading activities taking place off site, such as visits, outings or field trips and may extend to taking action in an emergency.

Teachers/child care practitioners who have children with medical needs in their care should understand the nature of the condition, and when and where the child may need extra attention.  All staff (teaching and non-teaching) should be aware of the likelihood of an emergency arising and be aware of the protocols and procedures for specific children in school through attending training provided and reading medical profiles as well as risk assessments.

**The Role of Parents/Carers**

Upon entry to school, parent/carers will be asked to complete admission forms requesting medical information (Form A).

Parents/carers have prime responsibility for their child’s health and should provide school with up to date information about their child’s medical conditions, treatment and/or any special care needed.

If their child has a more complex medical condition, they should work with the

school and other health professionals to develop an Individual Healthcare Plan which will include an agreement on the role of the school in managing any medical needs and potential emergencies.

It is the parent/carers responsibility to make sure that their child is well enough to attend school. If a child has had sickness or diarrhoea then they should not attend school for 48 hours after the last bout.

We annually send out data sheets for parents/carers to check and amend to ensure all our records are up to date.

**Communicating Needs**

A medical list containing class lists together with an outline of any medical condition and actions to be taken is given to individual teachers. This information is also available on SEEMIS.

Individual Health Plans for children that require them are kept with the child’s medication to ensure accessibility for all staff caring for the child.

Primary 1: Children admitted into Primary One are screened by a Health Support Worker for height and weight and health interviews will be carried out by the School Nurse on selected children only. Hearing and vision are no longer checked in school; however vision is checked in nursery.

**First Aid**

The Pupil Support Assistants have attended a one day first aid course.

Staff will act in the best interests of sick and/or injured pupils at all times. We can treat minor cuts and abrasions. In the case of more serious injury or illness we will contact the child’s parent or an emergency contact, with a view to the child being collected and taken to the most appropriate place for treatment. If hospital treatment is required and a parent/carer is not available, 2 members of staff will take the child to hospital and stay with the child until the parent/carer arrives.  If the child is required to travel in an ambulance a member of staff will accompany the child in the ambulance if their parent/carer is unavailable. All head bumps are recorded and a copy sent home to parents. Parents are also contacted if necessary.

**Physical Activity**

We recognise that most children with medical needs can participate in physical activities and extra curricular sport. A member of the Management team will carry out a risk assessment for any children who have medical needs to ensure their safe participation in all physical activity. This risk assessment will be shared with the class teacher, parents/carers and the child. The class teacher will ensure that it is shared with all members of staff (teaching/non teaching) working with the child.

**Administration of Medicine**

For safety reasons no tablets or medicines should be brought to school. In exceptional circumstances, we can arrange for the administration of prescribed medicine, provided the appropriate pro forma is fully completed.

All medication that has to be administered in school is logged by a member of staff and countersigned by a secondary member of staff. All medications administered in school will be logged for record keeping purposes. Controlled medication will be kept in a locked cupboard. Epi pens and inhalers are always accessible. Medicines will never be given to children to take home.

The school follows Aberdeenshire’s policy on Supporting Children with Medical Needs and identifies that if staff think too much medication has been administered or medication has been administered to the wrong child then they must ask the child to spit out where relevant, record the extra dose on the record of medication sheet, and notify parents/carers immediately. In addition, if a child spits out or refuses medication, it must be recorded in the record of medication form, and parents/carers must be notified immediately.

**Dental Inspection**

Aberdeenshire Community Dental Service inspect P1 and P7 children in schools as part of the National Dental Inspection Programme. Parents will be informed in writing approximately one week before the inspection date.

**Head Lice**

Please check your child’s head regularly and notify the school if you find head lice. Current advice on the treatment of head lice is available from your local pharmacist.

**School Visits**

When preparing risk assessments staff will consider any reasonable adjustments they might make to enable a child with medical needs to participate fully and safely on visits.

Sometimes additional safety measures may need to be taken for outside visits and it may be that an additional staff member, a parent/carer or other volunteer might be needed to accompany a particular child. Arrangements for taking any medicines will need to be planned or as part of the risk assessment and visit planning process. A copy of all the medical needs of pupils should be taken on trips and visits in the event of information being needed in an emergency.

**Residential Visits**

Parent/carers of children participating in residential visits will need to complete a consent form giving details of all medical/dietary needs. Administration of medicine forms need to be completed prior to departure and all medication which needs to be administered during the course of the visit should be handed into the school office the week before the trip is due to depart. All medicines must be clearly labelled with the child’s name and correct dosage. Some generic medicines will be taken by the First Aider for use as necessary on the trip providing written consent is given by the parents/carers.

Reviewed: October 2019

Reviewed: August 2022