Inwoods Small School inc. EYFS

MEDICAL POLICY

Last Review Date	1 Aug 2025
Policy Endorsed by	Trustees & School Management Committee
Policy is Maintained by	Inwoods Coordinator
Next Review Date	August 2026
Review Body	School Management Committee

Aim

The aim of the policy is to ensure that all children at Inwoods with medical conditions are fully supported. This policy will explain how children will be supported so they can fully participate in school life. Pupils with medical needs will not be discriminated against or denied access to activities. All medical information will be treated as confidential and processed in accordance with the school's Data Protection Policy. We follow the following Government Guidance;

- Supporting Pupils at School with Medical Conditions
- <u>Health protection in schools</u> to ensure procedures are in place to take appropriate action when children are ill.
- We also comply with the <u>EYFS statutory framework 2025</u>. High standards of cleanliness and hygiene are expected at all times to help prevent illness and the spread of infection.

The good health and safety of children is a shared responsibility between parents and staff. This policy will be made available for parents on the school's website, or can be requested from the school Coordinator

Roles and Responsibilities

- School Management Committee: Oversee implementation of this policy.
- **School Coordinator (Kate Power):** Ensure staff are trained, policies are followed, IHPs are in place.



- **Staff:** Understand their role in supporting pupils.
- Parents: Provide up-to-date information and medication.
- Healthcare Professionals: Provide medical guidance.

Individual healthcare plans (IHPs)

The School Management Committee (SMC) has overall responsibility for the development of IHPs for students with medical conditions. These are developed in partnership with the teachers, parents & relevant healthcare professionals.

In most cases, unless explicitly stated by the parents the care plan shall be shared with the teachers. This helps to increase awareness and allow efficient responses to a child's needs.

Plans will be reviewed at least annually, or earlier if there is evidence that the student's needs have changed.

Plans will be developed with the child's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all children with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a student has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The SMC and School Coordinator will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupils's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues
- Specific support for the child's educational, social and emotional needs. For example, how absences will be managed, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a child is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional, and cover arrangements for when they are unavailable



- Who in the school needs to be aware of the student's condition and the support required
- Arrangements for written permission from parents (and if necessary, the Co-Chairs of the SMC) 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 outside of the normal school timetable that will ensure the student can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including who to contact, and contingency arrangements

Staff

Training will be provided for staff where the administration of medicine requires medical or technical knowledge. Training will be reviewed annually or when a pupil's needs change. The records of these trainings will be maintained and reviewed regularly.

Staff must not be under the influence of alcohol or any other substance which may affect their ability to care for children. If staff are taking medication which may affect their ability, those staff should seek medical advice and only work directly with children if the medical advice confirms that the medication is unlikely to impair that staff member's ability to look after children properly. Staff medication on the premises must be securely stored in the locked medicine cabinet.

Anaphylaxis Protocol for all staff

The school has two adrenaline auto injectors stored within a clearly labelled first aid box located within the Big Barn classroom. This is accessible to all staff who are given training on how to use the kit. These emergency EpiPens will be administered only if recommended by paramedics in the exceptional case of a child having a severe anaphylactic shock for the first time.

For children who join the school with a diagnosed anaphylactic condition, an Individual Healthcare Plan shall be created in coordination with the parents. This shall detail potential triggers, allergies and how to discern between a minor or major reaction. The school, in combination with the parents, will ensure that the medication will be kept to to date.

The school follows the 'Guidance on the use of adrenaline auto-injectors in schools - GOV.UK' (2017) and staff are trained to deal with emergency situations accordingly.

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Special Diets & Needs

The children at Inwoods bring their own packed lunch and so many of the dietary needs are managed by parents. The school does provide a mid morning snack and so makes sure that any dietary requirements are supported in this provision. If the dietary needs are severe, an IHP is created to ensure they are supported in their condition.

At lunchtime the EFYS children will be supervised by a paediatric first aid trained member of staff

Procedure for the Administration of Medicine

- Any parent arriving at Inwoods with medication is to be asked to go to their child's key teacher.
- If any medication is to be given during the school day (both prescription and non-prescription), parents and/or caregiver must give staff their written, signed permission and instructions. Forms for this purpose are kept in the staff office and must be signed by a paediatric first-aid-trained staff member once medication has been given.
- All medication is logged, stored securely, and administered by trained staff.
- Medications must be stored in accordance with the product instructions and in the
 original container in which they were dispensed. They must include the prescriber's
 instructions for administration. Medication is stored either in the medicine cabinet in
 the Big Barn classroom, or if necessary, in the fridge in a clearly labelled container
 with specific instructions.
- Children who use asthma inhalers, EpiPens and diabetic pens will have these kept on top of the medicine cabinet in the Big Barn clearly labelled. They will not be locked away, and made available when required. Medication will be accessible in emergencies.
- Where appropriate, pupils will be supported to become competent in managing their own health needs and medication
- At the end of the school day, medications are to be returned to the parent along with the signed permission slip stating the time the medication was administered. The school must keep a written record each time a medicine is administered to a child.
- The <u>Early Years Foundation Stage Statutory Framework (2025)</u> states that prescription medicines should not be administered unless they have been prescribed by a doctor, dentist, nurse or pharmacist.
- Before agreeing to admit a child with a serious chronic condition (e.g. anaphylaxis), the school's insurers must be consulted. Once the child is enrolled, his or her parents must regularly explain and update to all staff all medical and emergency procedures. These children will be supported with Individual Health Care Plans.
- Staff supporting pupils with medical conditions are covered by the school's public liability insurance.

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Sanitorium

Parents and staff must keep each other informed if the child becomes unwell, either at home or at school. If a child becomes ill at school, a parent is to be called and told to collect the child. While the child is waiting to be collected they will be looked after by a member of staff who will ensure they are comfortable. If a child is unwell and waiting to be collected, they are made as comfortable as possible by the teachers, where they can be supervised but as separate as possible from the other children. In the event that a child is seriously ill and showing signs of potentially vomiting or having diarrhoea, then they will be taken to the sanatorium at Brockwood Park School which is equipped with water and toilet facilities.

Emergency Procedures

In the case of medical emergencies, staff will follow the school's normal emergency procedure which is to call 999, immediately inform another staff member, and seek out a first aid trained member of staff. If a child needs to be taken to hospital, staff will stay with the child until the parent or guardian arrives, or accompany the student to hospital by ambulance.

A medical emergency is any injury or reaction that requires urgent medical treatment at a hospital or by paramedics. Severely broken bones, serious injury by a sharp object and excessive bleeding all constitute an emergency.

In the situation where a child has a pre-existing condition such as asthma or allergies a 'medical emergency' shall be clearly defined in a student's Individual Healthcare Plan. This can include (but is not limited to) anaphylactic shock, an asthma attack and an allergic reaction.

Unacceptable practice

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

- Prevent child from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child 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 unless this is specified in their IHPs
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments



- Prevent children 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 children, including with toileting issues (in the case of medical emergencies and where it would require more than reasonable adjustments from the school for a child to remain under its care, the school might have to ask the parents to take care of the child at home until it becomes manageable)
- Prevent children 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 children to administer, medicine in school toilets

Guidance for staff leading school trips

Staff members on school trips are acting *in loco parentis*, however, if there is any concern about a child's health then medical advice will be sought as soon as possible.

As part of the planning of the trip all staff involved are aware of the medical needs of the children attending, especially concerning medical conditions or potentially serious conditions (e.g. sting allergy) including diabetes and asthma.

Any medicines administered must be recorded. A check will be made to ensure that the student is not allergic to a drug administered.

It is important to understand that the staff members on a trip are not obliged to offer a medical 'opinion' and, if at all concerned, will seek advice from the appropriate medical service nearby.

If the trip involves travelling abroad, advice will be sought at an early stage from the GP about travel vaccination, etc. This will be obtained before information about the trip is passed on to parents.

Complaints

Parents with a complaint or concern about the school's actions in regard to their child's medical condition should discuss these directly with the school's Coordinator. If they cannot resolve the matter, they will direct parents to the school's complaints procedure.

Review

This policy is reviewed annually or when legislation changes.