



# Supporting Students with Medical Conditions

## Policy and Procedures

**Rationale**

Students within the St Neots Learning Partnership who have a medical condition will be appropriately supported to ensure that they have full access to education wherever possible. This includes physical education and opportunities to take part in learning outside the classroom on school trips or at school events.

This policy sets out guidance and the arrangements in place across the partnership to ensure that students with medical conditions are supported appropriately in line with Section 100 of the Children and Families Act 2014.

## **Procedure on notification of a condition**

Medical needs are a focus of transition meetings which take place at the feeder primary schools within the Key Stage 3 team during the summer term prior to transfer. The visiting team feed back medical information to the Lead First Aider who will then attend any relevant medically related meetings prior to the young person joining secondary school. Contact will be made with parents to discuss medication, equipment and current treatment to ensure that arrangements are made for transfer. The young person will be monitored during transition days to ensure that any procedures that have been put in place are secure. Where there is a long term condition an Individual Health Care Plan (IHCP) will be created at the beginning of the new term. This will be reviewed annually as a minimum but may be reviewed sooner if the circumstances of the condition change or the medication alter. Where a young person joins an Academy mid-year, a similar procedure is followed including liaison with the previous school and parents.

## **Individual Healthcare Plans (IHCP's) – see appendix 1**

Where a condition is long term, an IHCP will be created within 2 weeks of either joining an Academy or of diagnosis.

An abbreviated version of an IHCP may be created where a condition is temporary, such as a broken limb, to ensure that appropriate arrangements are in place for the duration of the need.

The day to day responsibility of the IHCP rests with the Lead First Aider in each Academy, however, the ultimate responsibility lies with the Senior Leadership in each Academy and the Governing Body.

IHCP's will be stored on each Academy's computer system and will be password protected to ensure that only authorised staff have access to the information and it therefore remains confidential. Every trained first aider will have access to the information should they need it in the course of their duties and may pass the information on where they have sought permission from a Senior Leader to do so and this course of action is in the best interests of a young person, for example to a trip leader if the young person is taking part in a visit.

A review of an IHCP may be initiated in consultation with the parent(s), by a member of Academy staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the Academy, parents and a relevant healthcare professional who can best advise on the needs of the young person. The young person should also be involved where appropriate. The responsibility for finalising and implementing the plan lies with the Academy.

Where a child has a statement or an EHCP, the IHCP will either be linked to this or become part of it.

## **Roles and Responsibilities**

Each Academy employs a lead first aider who then co-ordinates the work of a team of trained first aiders, for example ensuring that adequate first aid cover is always in place.

The support for each young person with a medical condition will be shared across members of the team to ensure that any staff absence does not affect the care provided by the Academy to the young person.

### **Governing Bodies**

Governing Bodies must make arrangements to support students with medical conditions in school, including making sure a policy for supporting students with a medical condition is developed and implemented. Governing Bodies should also ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support students with medical conditions.

### **Headteachers**

Headteachers should ensure that the school's policy is developed and effectively implemented with partners. This includes ensuring that staff are aware of the policy and of the medical needs of students where appropriate, that sufficient numbers of staff are trained and the Headteacher also has the overall responsibility for the development of IHCP's. Finally they should ensure that school staff are appropriately insured to support students in this way.

### **Academy Staff**

Any member of the staff may be asked to provide support to a student with a medical condition. Any member of school staff should know what to do and respond accordingly when they become aware that a student with a medical condition needs help. School staff should receive suitable training and achieve the necessary level of competency before they take on responsibility to support young people with medical conditions.

### **School Nurses**

School nurses are responsible for alerting the school when a child has been identified as having a medical condition that will require support in school. They may support the lead first aider in writing and implementing the IHCP. School nurses will provide training for staff in conditions such as diabetes, epilepsy, asthma and severe allergic reactions.

### **Other Healthcare Professionals**

This includes GP's and paediatricians who should notify the school nurse when a child has been identified as having a condition that will require support in school. They may also be able to provide support in the writing of an IHCP.

### **Students**

Students will be fully involved in discussions about their medical support needs wherever possible and will contribute as much as possible to the writing of their IHCP.

### **Parents**

Parents should provide the Academy with sufficient and up to date information about their child's medical needs. Parents will be involved in the writing and development of the IHCP for their child. Parents should also provide any medication and equipment and the necessary authorisation for the Academy to use and administer these.

### **Local Authorities**

Local authorities are commissioners of school nurses for schools and academies. They have a duty to promote cooperation between partners to improve the well-being for young people in relation to their physical and mental health. Where students would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements.

## **Staff Training and Support**

The lead first aider in each Academy will be responsible for ensuring that first aiders are given an opportunity to requalify in good time and also that specific training opportunities are offered to all staff where appropriate. This will include training in conditions such as epilepsy, diabetes, asthma and severe allergic reactions.

Training will be reassessed annually at the beginning of each year and only specified and trained first aiders will be permitted to administer prescribed medication.

Staff will be briefed on medical conditions and procedures at the beginning of each academic year. Staff joining an Academy during the year will receive a medical briefing as part of their induction process.

Students with potentially severe medical conditions will have their photographs displayed in secure staff rooms with details of what to do in an emergency providing parents given their permission for this.

## **Students Managing Medical Needs**

Wherever possible, students will be allowed to carry their own medicines and relevant devices as many of them with long-term conditions are used to managing their own medication. If it is not appropriate for a child to self-manage their medication then trained first aiders will help to administer medicines and manage procedures for them.

Students must only bring in the required amount of medication for the day. Where a parent has allowed their child to carry a non-prescription medication, for example paracetamol, the student must complete a slip and place it in the designated box so the lead first aider is aware of what has been taken. Again, the student must only bring in the appropriate amount of medication for one day.

If a student refuses to take medication or carry out a necessary procedure, staff can not force them to do so and will then follow the procedure agreed in the IHCP. Parents will be informed so that alternative options can be considered.

## **Managing Medicines on the Academy Premises**

No student will be given prescription medicines without written permission from their parent or carer, except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parent or carer. In such cases, every effort will be made to encourage the student to involve their parents whilst respecting their right to confidentiality. Non-prescription medications will not be given to students, even if the parents provide written permission, unless there are exceptional circumstances. Parents will be asked to complete a form relating to the medication if there is no IHCP in place (for example for short term conditions) which they sign to give the trained personnel the authorisation to administer the medication.

Each Academy will only accept prescribed medicines that are in-date, labelled, provided in the original container or blister pack as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date but is generally available inside a pump or pen, rather than its original container.

All medicines will be stored safely. Most medicines will be stored in a locked facility. Depending on the nature of the medicine this will either be a safe, a lockable fridge or lockable cupboard. Keys will be held by the lead first aider and spare keys will be available from a key safe facility in the absence of the lead first aider or in an emergency.

Asthma inhalers, blood glucose testing meters and adrenaline pens will be readily available from the first aid room.

A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, however, they are not allowed to pass it to another student. Each Academy will store any controlled drugs in a safe and only trained first aiders will administer this medication.

When medicines are no longer required the parent will be contacted to arrange for safe disposal. Where three attempts to contact the parent over a period of not less than 4 weeks and collection has not taken place, any medicines will be disposed of appropriately (2 members of staff to the nearest pharmacy and a signature obtained from the pharmacist to confirm the disposal). Sharps boxes should always be used to dispose of needles and other sharps. These should be disposed of at a doctors surgery and a signature obtained.

Written records will be kept of all medicines administered to students and kept until the child's 25<sup>th</sup> birthday.

## Emergency Procedures

Emergency protocols will be detailed in each IHCP. Staff briefings and student assemblies will be held at least annually to ensure they know what to do in an emergency. This will include basic first aid information and how to contact a first aider.

If a young person needs to go to hospital, a member of staff will stay with the student until the parent arrives, or accompany them on an ambulance journey to hospital, again until the parent arrives.

To be followed in the event of an **accidental or suspected overdose**:

- If possible, find the box from which the medication was taken or the name of any tablets taken.
- Attempt to find out how many tablet, caplets etc. has been taken by the student
- Compare this to the maximum dose and the maximum dose in 24 hours.
- Isolate the student for their privacy and in case of medication causing the student to vomit, have a seizure or other physical reaction.
- Call 999 / 112 and ask for the ambulance service and tell them "possible overdose".
- Call the student's parents and inform them of what happened and that an ambulance has been called for their child.
- If a first aider has been called direct to the student for them to help with the student.
- If the student has a seizure, time how long it lasted, and take care you don't get hurt by flying arms and legs. Protect their dignity.
- If they vomit, look for undigested tablets so the crew can be updated with the number the student took and what has been brought back up.
- Send for staff to assist with directing the ambulance service to the student.
- Monitor the student until the ambulance service arrives.
- Pass the medication to the ambulance staff with SIMS details.. name, address etc.

To be followed in the event of a **reaction to a medication** not previously known to cause a reaction in the child.

- If possible, find the box from which the medication was taken or the name of any tablets taken.
- Attempt to find out how many tablet, caplets etc. has been taken by the student
- Sit the student down.

- If it is causing breathing difficulties ask the student to attempt to swallow. If they can't swallow or they find it difficult to swallow then this means that the airway is being restricted. Lay the student down in the recovery position and be prepared to resuscitate.
- If the student can swallow give nil by mouth (unless otherwise stated on the box)
- Find the medication box and check this is the medication they took and not something else either with it or they took an overdose.
- Call 999 / 112 and ask for the ambulance service and tell them "Severe reaction to medication"
- Send for staff to assist with directing the ambulance service to the student.
- Monitor the student until the ambulance service arrives.
- Pass the medication to the ambulance staff with SIMS details.. name, address etc.

## Off-site Procedures

Off-site procedures will be detailed in each IHCP. All trips have a designated first aider to ensure that any basic first aid needs can be covered. The trip leader is responsible for forwarding a list of students to the lead first aider at least one week prior to a trip taking place to ensure that the trip leader can be briefed on any medical conditions. Where a student has an IHCP, consideration will be given as to whether a trained first aider needs to accompany the trip, if this is not already the case. Consideration may also need to be given as to whether a specific risk assessment should be carried out.

Medications will be stored in a locked container during trips and visits.

Each Academy will make reasonable adjustments to ensure that all students are able to participate in trips and events throughout their school career.

## Defibrillators and Asthma Inhalers

Both Academies possess a defibrillator and a number of staff are trained to use this equipment (see appendix 2). The ambulance service are aware of where these are situated.

All students who have an asthma diagnosis or who have been prescribed an inhaler are eligible to use the emergency inhalers held in each Academy. Written parental permission will be sought annually to enable us to administer this medicine and a list of students for whom permission is held will be retained by the lead first aider and will also be placed inside the emergency asthma kit. A number of staff are trained to administer an emergency asthma inhaler (see appendix 2).

## Unacceptable Practice

Although school staff should use their discretion and judge each case on its merits with reference to the child's IHCP, it is not generally acceptable practice to:

- prevent young people 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, or ignore medical advice or opinion (though this may be challenged);
- send young people with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, **unless this is specified in their IHCP**;

- send a young person who has become ill to seek first aid unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- prevent a young person from drinking, eating or taking toilet or other breaks whenever they need 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 child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs;
- call a parent to ask for permission to give a student any form of medication;
- prevent young people from participating, or create unnecessary barriers to young people participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

## **Complaints**

A separate partnership complaints procedure is available on request from either Academy.

DRAFT

Date of initial Meeting \_\_\_/\_\_\_/\_\_\_

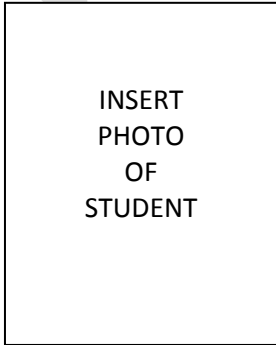
Attendees: \_\_\_\_\_  
(Who had input into the writing of the IHCP)

Additional information provided by:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Writer of the IHCP: \_\_\_\_\_

Name of child:

Date of Birth: \_\_\_/\_\_\_/\_\_\_



Address:

Tutor group:

School:

Doctor

Surgery:

Surgery address:

**Does the student have a Statement of Educational Needs or an Educational Health Care Plan? Y / N**

If the student hasn't a Statement of Educational Needs or an Educational Health Care Plan:

**Does the student have any Special Educational Needs? Y / N**

**What are they?**

**How are they met in school?**

**Medical Details:**

**Evidence of medical condition:**



Please supply a letter of diagnosis or a letter with any diagnosis listed from the agency dealing with treatment(s).

A copy should be attached to this IHCP.

**Evidence supplied?**      Y/N      **Date supplied:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Location the Evidence has been stored**

**Medical condition(s)**

**How it affects them in school (and on a trips out of school time)**

**Triggers** (What causes the condition to start affecting the student / worsen the problem?)

**Signs and symptoms** (What does the condition look like? and how does the student feel?)

**Treatment regime:** (incl. physiotherapy, Occupational Therapy, Speech Therapy etc.)

**Medication taken (prescribed or otherwise)**

(Note: Written permission form **and** medication register to be filled in if medications are to be administered by school staff)

Permission given Y / N ? Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ (circle and date permission was received, Attach permission letter / form to this care plan)

Name of medication

Possible side effects

1.

**How is the medication administered?**

(Orally - swallowed, placed in buccal cavity in mouth, injection, rectally, applied to skin...)

When is it taken?

(Before food, on an empty stomach, with food, times of the day, before activity, after activity...)

Contra-indications (does it react with other medications, food substances or drinks? Do they have to stay out of the sun?)

Can the student self-medicate? Y / N

Do they need monitoring during medicating? Y / N

What method of monitoring is required?

(eg. looking at dosage readings on a syringe / measuring out medication from a bottle)

Who will supply this support?

TA in class or other times of day / First Aider / other member of staff / nurse, to attend the school / physiotherapist / Occupational Therapist / other?

Daily Care requirements

***During a normal day what support will the student require?***

List, from arriving in school in the morning through going home in the afternoon.

*Do they have any special dietary requirements? Y / N*

*What are they?*

*Do they need rest periods during the day? Y / N*

*How long for?*

*How often are they likely to need them?*

***Additional Support***

*Will they need support catching up with classwork they have missed due to the condition?* Y / N

*Who will provide this?*

*Do they need access to counseling?* Y/N

*Are they having counseling?* Y / N

*Who is this with?*

*Contact details:*

Address:

Telephone no.

Fax No.

Email address:

**Facilities required:**

Equipment required:

Reason

Environmental issues:

Does the weather affect them? Can slippery floors cause a problem?, distances between lessons? Other?

Is staff training required?

Staff in school are trained in general First Aid. Any additional training needs relevant to a specific young person will be undertaken where appropriate.

What training may be needed?

Who would need to be trained?

When would that need to be arranged for?

Who will provide this training & where can training be sourced from?

**Action to be taken in event of an emergency or crisis (Attach any protocols from Doctor / Hospital / clinics)**

How would the emergency manifest? How would it be recognised as an emergency?

How is it managed / treated?

How are absences from school managed?

**Exam Access Arrangements:**

If we can arrange it what would the student need to be adapted, provided or arranged for exams? (possible arrangements include: Extra time, rest breaks,

**Contact details**

**Parent / Carer**

Name:

Name:

Address

Address

Telephone no.(s)

Telephone no.(s)

**Alternate family contact (persons allocated by parent / carer)**

Name:

Address

Telephone no.(s)

**Doctor**

Surgery:

Surgery address:

**Any other relevant Health Professional**

Name

Role:

Contact Details

Address:

Telephone No.(s)

Email Address

**Transport arrangements**

How does the student come to school?

Does the transport company need to know the details of the Individual Health Care Plan? Y / N

Who are the transport company?

Name:

Contact details:

Have parent(s) given permission for the company to know about the condition / share the IHCP with them?

Y / N

Parent signature giving consent for this to happen \_\_\_\_\_ date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Who in school needs to be aware of the student's condition and support required? And what information do they need to know?**

Group Tutor, Head of School, Mr Moore (First Aider and Medical Needs Administrator), First Aiders, SEN Team, Attendance officers, Student Support, Lead Cover Supervisor, SLT, others)

Parental permission for those staff to be advised:

Signed: \_\_\_\_\_ date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Trips and Events**

What arrangements / adjustments should be made for trips?

Eg. Wheelchair accessible minibus with staff trained to secure wheelchair in the minibus, cool storage for medication,

What arrangements should be made for events in school?

Eg. Sports day, collapsed curriculum days

I give my permission for the above care plan to be held at the Academy and carried out by staff at the school.

I agree that in the event of an ambulance being called for my child a copy of this may be given to the ambulance personnel to assist with treatment.

I agree to keep the academy updated as to any change in the condition and to provide up to date protocols as and when issued.

**Parental Consent**

Signed \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_