



# The Clere School

## Supporting Students with Medical Conditions Policy

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### 1. Introduction

In line with the duty, which came into force on 1st September 2014, to support students at school with medical conditions, we are committed to ensuring that<sup>1</sup> all children with medical conditions, in terms of both physical and mental health, are properly supported at The Clere School so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

No child with a medical condition will be denied admission or prevented from taking up a place in our school because arrangements for their medical condition have not been made.

We will ensure that students' health is not put at unnecessary risk from, for example, infectious diseases therefore we will not accept a child in school at times where it would be detrimental to the health of that child or others to do so.

This policy will be reviewed regularly, and it is readily accessible to parents and school staff.

## 2. Policy implementation

The named person, who has overall responsibility for policy implementation, is the Headteacher.

They will

- ensure that sufficient staff are suitably trained; ensure that all relevant staff will be made aware of the child's condition;
- cover arrangements in case of staff absence or staff turnover to ensure someone is always available;
- brief supply teachers;
- carry out risk assessments for school visits, holidays, and other school activities outside the normal timetable;

and

- monitor individual healthcare plans.

### **Procedure to be followed when notification is received that a student has a medical condition**

When our school is notified that a student has a medical condition, we will:

- make arrangements for any staff training or support
- make every effort to ensure that arrangements are put in place within two weeks
- not wait for a formal diagnosis before providing support to students

## 3. Individual healthcare plans

Our school will send home a health questionnaire. Any parent reporting that their child has an ongoing medical condition such as asthma, epilepsy, diabetes or more complex medical condition will be asked to complete an Individual Healthcare Plan (IHP). It is a legal requirement that this is updated annually. At our school, we will ensure that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. We will assess and manage risks to the child's education, health and social wellbeing, and minimises disruption.

Our IHP requires information about:

- the **medical condition, its triggers, signs, symptoms and treatments;**
- the **student'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, e.g. crowded corridors, travel time between lessons;
- specific **support for the student's educational, social and emotional needs** – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- the **level of support** needed (NB If a child is self-managing their medication, this should 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 child'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 child's condition and the support required;
- **arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self- administered by the student during school hours;**
- arrangements or procedures required for **school trips** or other school activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments;
- **what to do in an emergency**, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

## 4. Roles and responsibilities

At our school, those people involved in arrangements to support students at school with medical conditions include:

- Marilyn Robson, Welfare Assistant
- Jennifer Piper – Business Manager
- Rebecca Vaughan – Assistant Headteacher (Pastoral)
- Robin Milner, Headteacher

## 5. Staff training and support

Staff are supported in carrying out their role to support students with medical conditions through appropriate training. Training needs are assessed regularly, and training will be accessed through HTLC.

Any member of school staff providing support to a student with medical needs will have received suitable training.

No member of staff will give prescription medicines or undertake healthcare procedures without appropriate training or instruction (updated to reflect requirements within individual healthcare plans).

## 6. The child's role in managing their own medical needs

Where children are deemed competent to manage their own health needs and medicines by their parents and medical professional, they will be supported to do this. We see this as an important step towards preparing students for the next stage of their education.

## 7. Managing medicines on school premises

### Overview

The administration of medicines is the overall responsibility of the parents. The Welfare Assistant has been delegated the responsibility for ensuring all children are supported with their medical needs whilst on site or off-site activities and this may include managing medicines where appropriate and agreed with parents.

Administration of medicine requirements will be achieved by:

Establishing principles for safe practice in the management and administration of:

- prescribed medicines
- non-prescribed medicines
- maintenance drugs and emergency medicine
- Providing clear guidance to all staff on the administration of medicines.
- Ensuring that there are enough numbers of appropriately trained staff to manage and administer medicines
- Ensuring that there are suitable and enough facilities and equipment available to aid the safe management and administration of medicines, ensuring the above provisions are clear and shared with all who may require them.
- Ensuring the policy is reviewed periodically or following any significant change which may affect the management or administration of medicines.

### Medical Accommodation

The Medical Room will be used for medicine administration and treatment purposes.

The Business Manager has overall responsibility for ensuring that the Medical Room has the following facilities:

- Hot and cold running water
- Several chairs
- Wheelchair
- Fully stocked, locked cabinet and accessible cupboard
- Yellow soft clinical waste bin
- First Aid bag

## **Routine Administration**

### **Prescribed Medicines**

Policy is to manage prescribed medicines (eg; antibiotics, inhalers) where appropriate, following agreement with and receipt of a completed Administration of Medicines & Treatment Consent Form.

Containers must be clearly marked as follows:

- The child's name
- The product name
- The expiry date
- The dosage
- The name of the issuing pharmacist or doctor
- Storage details

### **Non-prescribed medicines**

On occasions when children require paracetamol, our policy is to administer, providing that written consent from the parents has been received and administration is in accordance with guidance provided in the Health Guidance for Schools document.

Children under 16 years old are never to be administered aspirin or medicines containing Ibuprofen unless prescribed by a doctor.

Responsibility for decision-making about the administration of all non-prescribed medicines will always be at the discretion of the Headteacher or the Assistant Headteacher with responsibility for the Pastoral and Welfare Team who may decide to administer under certain miscellaneous or exceptional circumstances e.g. hayfever tablets, stings/insect bites.

### **Maintenance drugs**

Policy is to manage the administration of maintenance drugs (e.g. Insulin, Ritalin) as appropriate following consultation and on receipt of a completed Administration of Medicines & Treatment Consent Form.

### **Non-Routine Administration**

#### **Emergency Medicine**

The school's first aiders manage the administration of emergency medicines such as (for example):

- Injections of adrenaline for acute allergic reactions.
- Midazdam Buccal liquid for major fits.

In all cases, professional training and guidance from a competent source will be received before commitment to such administration is accepted as well as a completed Individual Health Care Plan with signed parental / carer consent.

Epipens should be carried by the student and they are being regularly checked by a lead first aider. Adrenaline pens will be kept in named bags in medical room if this is specified through the student's IHCP with signed parental / carer consent.

## **Procedure for Administration**

Any student required to have medicines will require a completed IHCP.

When medicines are administered, a Record of Prescribed Medicines sheet will be completed each time the medicine is administered, and this will be kept on file with the medication in a locked cabinet in the medical room.

If a child refuses to take medication, the parents will be informed the earliest available opportunity.

## **Storage**

The storage of medicines is the overall responsibility of the Welfare Assistant, who will ensure that arrangements are in place to store medicines safely, including refrigerated storage when required.

The storage of medicines will be undertaken in accordance with product instructions and in the original container in which the medicine was dispensed.

It is the responsibility of parents to ensure that the medicine container is clearly labelled and enclosed with a signed and fully completed IHCP

Containers must be clearly marked as follows:

- The child's name
- The product name
- The expiry date
- The dosage
- The name of the issuing pharmacist or doctor
- Storage details

It is the responsibility of the parents to provide medicine that is in date.

## **Disposal**

It is not the school's responsibility to dispose of medicines. Expired medication will be returned to parents in a sealed envelope for safe disposal with the exception of Epipens, where parents will be notified and asked to bring an up to date pen into school.

## **8. Record keeping**

We will ensure that written records are kept of all medicines administered to children.

We recognise that records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents will be informed if their child has been unwell at school.

## **9. Emergency procedures**

### **Emergency Arrangements – Medical Condition**

When a medical condition causes the child to become ill and/or requires emergency administration of medicines, then an ambulance will be summoned at the earliest opportunity.

### **Crutches and/or Leg Braces**

All students who attend school on crutches or using a leg brace, provided to them by their GP or Consultant, whether on a temporary or permanent basis will require an assessment to be completed prior to their start date or return after injury. The assessment is to ensure that the student's return will be safe with appropriate adjustments and that they will not injure themselves further or cause injury to others.

Parents of students using crutches should telephone the school, as soon as possible, either on admission or return after injury and agree a date with the Welfare Assistant for an assessment to take place before the child returns.

### **Asthma**

The Clere School acknowledges the advice and guidance of the National Asthma Campaign and the guidance on the user of emergency salbutamol inhalers in school.

The school recognises that asthma is a widespread, serious but controllable condition affecting many students at the school. The school welcomes all students with asthma and students will be able to achieve their full potential in all aspects of school life. All relevant colleagues will be given training on asthma management and will be expected to update this.

- All students with asthma will have an AAP and/or Careplan which highlights all the students' medication requirements and individual triggers.
- Spare inhalers for individual children will be stored in a labelled container in the medical room – these are supplied from home.
- Colleagues will receive updates and if appropriate training, to ensure that they have a clear understanding of asthma and what to do in the event of an asthma attack.
- Students will be encouraged to understand the condition so that they can support each other.
- A list of students with asthma is produced annually, made available to colleagues, confidentially and this information is provided on SIMS.
- All students who have asthma where parental consent has been obtained will be able to have use of the school's emergency asthma kit. This is located in the medical room. Should this need arise, parents will be informed, and the replacement of the student's own inhaler made a priority.

Minor attacks should not interrupt the student's involvement in the school day, and they should return to activities when fully recovered.

### **Diabetes**

The Clere School acknowledges the advice and guidance of the British Diabetic Society. It is recognised that diabetes is a widespread condition affecting many people and welcomes all students with the condition, recognising its responsibility in caring for them. All relevant colleagues will be given training on diabetes management as part of their first aid training.

- All students with diabetes will have an IHCP
- Parents are asked to provide spare supplies, eg; glucose tablets, biscuits, glycolgel etc in a named box to be kept in a locked cupboard in the medical room
- All First Aid trained colleagues have a clear understanding of diabetes and are able to recognise common signs and symptoms associated with the condition.
- Colleagues are informed each year of those students who have diabetes and this information is provided on SIMS

### **Anaphylaxis**

The Clere School acknowledges the advice and guidance of the Anaphylaxis Society. It is recognised that allergic shock (anaphylaxis) is a serious condition that may affect a number of students across all phases of the school and recognises the responsibility it has in dealing with students' allergies appropriately.

All students with potential anaphylaxis will have an IHCP

- There is a information with up to date photographs of students who carry Epipens on Staff Portal.
- All First Aiders will have an understanding of what it means to be allergic, whether it be a reaction of the skin, airborne, contact ingestion or injection. They will be able to recognise and respond to a student who may be having an anaphylactic reaction including the administering of emergency adrenaline pen.
- Colleagues will receive regular updates as appropriate to ensure that they have a clear understanding of what to do in the event of an allergic shock.
- Spare medication will be labelled and stored appropriately in a container in the medical room, as appropriate. The container can be taken off site on school trips.
- All colleagues will be informed of those children who have this condition.
- The allergy will show SIMS alongside the child's photo and an allergy warning sign.

### **Epilepsy**

The Clere School recognises that epilepsy is a condition which affects students at the school and welcomes students with epilepsy, ensuring through this policy that students will be able to achieve their full potential in all aspects of life. All First Aiders need training on epilepsy management and what to do in the event of a seizure. First Aiders will update and train all staff as appropriate.

The school works in partnership with the School Nursing Service and parents to provide a continuation of care for those students who suffer from the condition.

### **Paracetamol**

It is a legal requirement that we have parent's written permission to administer any pain relief medication.

Paracetamol is a widely used drug for controlling pain and reducing temperature. Despite its prevalence, it can be very dangerous if taken inappropriately. Overdose requires immediate medical attention.



It is not recommended that students carry paracetamol around school with them.

- If, on occasion, a student needs to take paracetamol for pain relief, the Welfare Assistant will liaise with parents and make this judgement based on what symptoms are being displayed.
- If a student complains of pain as soon as they arrive at school and asks for painkillers, we would be reluctant to give paracetamol straight away as there should be at least four hours between any two doses of medicines containing paracetamol.
- The student is first encouraged to get some fresh air/have a drink/something to eat/sit in the shade (as appropriate) and paracetamol is only considered if these actions do not work.
- Only standard paracetamol tablets may be administered. Combination drugs which contain other drugs besides paracetamol, will not be administered.
- Paracetamol is stored safely as all other medicines and will not be kept in first aid boxes (with the exception of residential visits).
- Students can only be given one dose during the school day as follows: 1x 500 mg tablet for children who are 12 or under or 2 x 500 mg tablets for children over 12.

If this does not relieve the pain, we will contact the parent or emergency contact.

The person administering the paracetamol will record this in the medicine log and will sign to record that the drug has been dispensed.

If a student becomes unwell during a residential visit, it may be appropriate to administer paracetamol. The guidance above is followed but on a residential visit, it may be appropriate to administer more than one dose. Dosage will be strictly according to the amounts above, no less than 4 hours apart. Should paracetamol fail to alleviate the symptoms and/or should colleagues have any concerns about a student's condition, they will not hesitate to get professional medical attention.

## 10. Day trips, residential visits and sporting activities

We always actively support students with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

As a school, we believe it to be unacceptable practice to

- prevent children 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 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, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room 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 students 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 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; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

## 11. Liability and indemnity

Maintained schools and academies with a SLA with HCC will be insured as long as all appropriate training and risk assessment has taken place.

Proprietors of academies should ensure that either the appropriate level of insurance is in place or that the academy is a member of the Department for Education's Risk Protection Arrangement (RPA).

## 12. Complaints

If you have a complaint about how your child's medical condition is being supported in school, please contact the Welfare Assistant in the first instance. If this does not resolve the situation, then the matter can be referred to the Assistant Headteacher (Pastoral). If this does not enable a resolution, then the matter can be referred to the Headteacher.