



# **Supporting Students**with Medical Conditions Procedure

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### Rationale

Students within Longsands Academy 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 procedure sets out guidance and the arrangements in place within the Academy 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 transition team during the summer term prior to transfer. The visiting team feedback medical information to the First Aid & Wellbeing Officer who will then ensure that any further information required will be sought from the primary school, parent/carer and medical professional 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 alters. Where a young person joins the 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 the Academy or of diagnosis.

A risk assessment will be created where a condition is temporary, such as a mobility concern due to a broken leg, 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 Medical Needs TA and the First Aid & Wellbeing Officer in the Academy; however, the ultimate responsibility lies with the Senior Leadership of the Academy and Astrea Academy Trust.

IHCP's will be stored on the Academy 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**

Longsands Academy employs a First Aid & Wellbeing Officer who then, alongside the Administration Manager, ensures that a member of the current first aid team is available to provide cover.

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.

### Governance

Longsands Academy Local Education Consultative Committee (LECC) must ensure the academy 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. The Academy should also ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support students with medical conditions. This policy will be reviewed by the LECC every two years or where revision is appropriate.

# **Principal**

The Principal should ensure that the school procedure is developed and effectively implemented with partners. This includes ensuring that staff are aware of the procedure and of the medical needs of students where appropriate, that sufficient numbers of staff are trained and the Principal also has the overall responsibility for the development of IHCP's.

# **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 First Aid & Wellbeing Officer in writing and implementing the IHCP. The school nursing team are no longer able to provide training for schools around 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 First Aid & Wellbeing Officer in the Academy will be responsible for updating the first aid training records and highlighting to SLT when refresher training is due.

Staff will be briefed on medical conditions and procedures at the beginning of each academic year as a part of their annual Safeguarding Training. Staff joining the Academy during the year will receive a medical briefing as part of their induction process and more specific training will be provided to identified staff when this becomes necessary.

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 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 cannot 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 (for example for short term conditions) which they sign to give the first aid team the authorisation to administer the medication. Parents may also give permission by email providing they have given their child's full details, information about the medication and the dose and the medication must be provided to school in the original packaging.

The 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 stored by the First Aid & Wellbeing Officer who will put them into an agreed storage space should she be away from her desk.

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

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. The 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 are disposed of via our contracted waste disposal.

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:

- o If possible, find the box from which the medication was taken or the name of any tablets taken.
- Attempt to find out how many tablets, caplets etc. have been taken by the student
- o Compare this to the maximum dose and the maximum dose in 24 hours.
- o Isolate the student for their privacy and in case of medication causing the student to vomit, have a seizure or other physical reaction.
- o Call 999 and ask for the ambulance service and tell them "possible overdose".
- Call the student's parents/carers and inform them of what happened and that an ambulance has been called for their child.
- o If the student has a seizure, time how long it lasts, and take care you don't get hurt by flying arms and legs. Protect their dignity.
- o 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.
- o Pass the medication to the ambulance staff with SIMS details. i.e. 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.

- o If possible, find the box from which the medication was taken or the name of any tablets taken.
- Attempt to find out how many tablets, caplets etc. have been taken by the student
- Sit the student down.
- If the student has breathing difficulties, ask them 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. Ensure that the defibrillator is brought to the
  scene
- o 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 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.
- o Pass the medication to the ambulance staff with SIMS details. i.e. 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 First Aid & Wellbeing Officer 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 secure container during trips and visits.

The 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**

The Academy possesses a defibrillator and a number of staff are trained to use this equipment (see appendix 2).

All students who have an asthma diagnosis or who have been prescribed an inhaler are eligible to use the emergency inhalers held in the Academy. Written parental permission will be sought on entry to the school (or as soon as a diagnosis is made) to enable us to administer this medicine and a list of students for whom permission is held will be retained by the First Aid & Wellbeing Officer 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, medical evidence will be sought by the attendance team;
- 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 only prescription medication can be given;
- prevent young people from participating, or create unnecessary barriers to young people participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

# Appendix 1



# **Individual Health Care Plan (IHCP)**



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 stat	tement of Educational Needs of	or an Educational Health	V/NI
Care Plan?			Y/N
(If the student does not have	e a Statement of Educational N	leeds or an Educational	Y/N
Health Care Plan) Does the s	student have any Special Educa	ational Needs?	17 N
What are they?			
How are they met in			
school?			
Medical Details:			
Evidence of medical	Please supply a letter of diag	nosis or a letter with any diag	gnosis listed from the
condition:	agency dealing with treatme	nt(s). (A copy should be attac	hed 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 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	m and medication register t	o be filled in if medications are to be administered by
school staff)		
Permission given:	Y/N	Date:
(Circle and date permission wa	ıs received, Attach permissio	on letter / form to this care plan)
Name of Medication:		
Possible side effects		
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-	V/NI	
medicate?	Y/N	
Do they need monitoring	\/\n	
during medicating?	Y/N	
What method of monitoring	\/\n	
during medicating?	Y/N	
What method of monitoring		
is required? (e.g. looking at		
dosage reading on a syringe		
/ measuring out medication		
from a bottle)		
-		
Who will supply this		
support? (TA in class or other		
times of day / First Aider /		
another member of staff /		
nurse, to attend the school /		
physiotherapist /		

	Τ		
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	Y/N		
dietary requirements?	1/10		
What are they?			
Do they need rest periods	Y/N		
during the day?	T/IN		
How long for?			
How often are they likely to			
need them?			
Additional Support:			
(Will they need support			
catching up with classwork	Y/N		
they have missed due to the			
condition?)			
Who will provide this?			
Do they need access to	\//N	Are they having	V/51
counselling?	Y/N	counselling?	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? (Staf	f in school are trained in ae	eneral First Aid Any additional	training needs relevant to a
specific young person will be u			training needs relevant to a
What training may be		ncy	
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 Address:			
Surgery:			
Any other relevant Health			
Professional:		Role:	
Name:			
Contact Details:			
Address:			
Telephone No. (s)			
Email Address:			
Transport arrangements:			
(How does the student come			
to school?)			
Does the transport company	V/N	Who are the transport	
need to know the details of	Y/N	company?	

the individual Health Care Plan?			
Name:			
Contact Details:			
Have parent/carer(s) given			
permission for the company			
to know about the condition	Y/N		
/ share the IHCP with them?			
Parent signature giving consen	t for this to hannon:		
Signed:	t 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? (Form tutor, head of			
year, First Aid & Wellbeing			
Officer, First Aid Team, SEND			
Team, Attendance manager			
/ Officer, Student Support			
Officer, SLT, Subject			
teachers, others)			
Parental permission for			
those staff to be advised:		Date:	
Signed:			
Trips and Events:			
What arrangements /			
Adjustments should be			
made for trips? (e.g.			
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? (e.g. Sports day,			
collapsed curriculum days)			
Parental Consent:	L		
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.	. •	•	-
Signed:		Date:	