

# **THRIFTWOOD**



## **Supporting Pupils with Medical Needs Policy**

**September 2018**

**Thriftwood School and College is committed to offering all pupils an inclusive educational experience which takes account of their permanent or temporary health conditions, and ensures that staff supporting their medical needs have appropriate training where necessary.**

### **Introduction**

Most pupils will at some time have a medical condition, in terms of both physical and mental health, that may affect their participation in school activities. For many this will be short term. Other children have medical conditions that if not properly managed, could limit their access to education. Such pupils are regarded as having medical needs. Most of these children will be able to attend school regularly and take part in normal school activities.

### **Parents and guardians**

- parents are a child's main carers. They are responsible for making sure that their child is well enough to attend school. Children should be kept at home when they are acutely unwell.
- parents are responsible for providing Thriftwood with sufficient information about their child's medical condition and treatment or special care needed at school. They are responsible for informing school of any changes to medical needs or medication.
- with the Headteacher, they should reach agreement on the school's role in helping their child's medical needs.
- Need to ensure that they, or another nominated adult, are contactable at all times.
- where parents have difficulty understanding or supporting their child's medical condition themselves, the School Health Service can often provide additional assistance. However, ideally, the head should seek parents' agreement before passing on information about their child's health to other school staff or external professionals.
- parents' religious and cultural views should always be respected.

### **The Local Academy Committee**

- Is legally responsible for fulfilling its statutory duties under legislation.
- Ensures that arrangements are in place to support pupils with medical conditions.
- Ensures that pupils with medical conditions can access and enjoy the same opportunities as any other child at the school.
- Works with the LA, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education.
- Ensures that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensures that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instils confidence in parents/carers and pupils in the school's ability to provide effective support.

- Ensures that all members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensures that no prospective pupil is denied admission to the school because arrangements for their medical condition have not been made.
- Ensures that pupils' health is not put at unnecessary risk. As a result, it holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
- Ensures that policies, plans, procedures and systems are properly and effectively implemented.

### **The Headteachers**

The Headteachers are responsible for implementing the Local Academy Committee's policy in practice, ensuring staff are aware of this policy and for developing detailed procedures. When teachers or support staff agree to give pupils help with their medical needs, the Head should consent to their doing this, and must ensure that those staff receive proper support and training where necessary. The Headteachers will also regularly (or at least annually) review and assess any training needs in conjunction with the School Nurse who will confirm staff members' proficiency.

Day to day decisions about administering medication will normally fall to the Headteachers if not otherwise described in an Individual Health Care Plan. The Headteachers are also responsible for making sure parents are aware of the school's policy and procedures for dealing with short and long-term medical needs. The Heads are responsible for arranging back-up cover when the member of staff responsible for a pupil with medical needs is absent or unavailable.

### **Teachers and other school staff**

Teachers and support staff who have pupils with medical needs in their class should be made aware of the nature of the condition, and when and where the pupil may need attention, or require necessary adjustments to be made in school activities as a consequence. They should be aware of the likelihood of an emergency arising and what action to take if one occurs. If staff are to administer medication, they may only do so if they have had appropriate training.

Staff identified in an Individual Health Care Plan will be provided with the appropriate support and training to carry out any agreed care or treatment, in conjunction with the appropriate medical professionals. Whole school awareness training on this policy will be carried out and new staff inducted.

## **Other health professionals**

The school will obtain support and advice as necessary from the following in conjunction with meeting the needs of pupils with medical needs:

- the local health authority
- the school nurse
- the general practitioner or consultant (with the consent of the child's parents)
- the community paediatrician

## **The Child's Role**

Wherever possible, children should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff should help to administer medicines and manage procedures for them.

## **Admissions**

No child should be denied admission to Thriftwood or be prevented from taking up a school place because arrangements for their medical condition have not been made. A child may only be refused admission if it would be detrimental to the health of the child to admit them into the provision.

## **Short term medical needs**

At times, it may be necessary for a pupil to finish a course of medication at school. However, where possible, parents will be encouraged to administer the medicine outside school hours. School staff will not give non-prescribed medication to children except in special cases at the complete discretion of the Headteacher. In the case of children suffering regularly from acute pain, such as a migraine, the parents will authorise and supply appropriate painkillers together with written instruction about when the child should take the medication. A member of staff will supervise the pupil taking medication, keep a log of all medication taken and notify the parents in writing on the day painkillers are taken.

## **Long term medical needs**

The school needs to have sufficient information of any pupil with long term medical needs, provided by either parents or medical health care professionals. The school will then draw up a written health care plan for such pupils, involving the parents and relevant health professional.

For pupils with Asthma, we ask parents to complete a 'School Asthma Card' detailing information about their asthma condition, including triggers, signs to indicate an attack, and reliever treatment.

### **Individual Health Care Plans**

These enable the school to identify the level of support that is needed at school. The plan will set out in detail:

- the nature of the identified condition/s, triggers, signs and symptoms
- the resulting needs, treatment, support and management requirements
- specific support for educational, social and emotional needs arising
- level of support needed including in emergencies
- who will provide the support, expectation of the role, proficiency and training needs and cover arrangements
- who in school needs to be aware of the medical needs of the child
- written permission for the administration / self-administration of medicines
- procedures / risk assessments for trips or out of hours activities to ensure pupil participation
- any confidentiality issues arising and how these will be addressed

Those who need to contribute to the plan are:

- the Headteacher
- the parent or guardian
- the child (if able)
- class teacher
- teaching assistant
- school staff who have agreed to administer medication or be trained in emergency procedures
- the school nurse, the child's GP or other health care professionals.

These Individual Health Care Plans will be held by the Headteacher and reviewed annually or as required if child's needs have changed.

### **Administering medication**

- no pupil will be given medication without the parent's written consent (form 2). This consent will also give details of the medication to be administered, including:
  - name of medication
  - dose

- method of administration
- other treatment
- any side effects
- medication (that has been prescribed) will be signed in upon receipt from parents, and signed out as administered or when sent back home.
- staff will complete and sign medication document given each time they give medication to a pupil. In such circumstances, wherever possible, the dosage and administration will be witnessed by a second adult.
- if pupils can take their medication themselves, staff will supervise this, bearing in mind the safety of other pupils. Written parental consent is necessary for this.
- staff who have training will be able to administer medication
- school will only accept prescribed medicines that are in date, labelled, provided in the original container, including instructions for administration, dosage and storage.
- non-prescription medication may be administered in the following situations:
  - when it would be detrimental to the pupils health not to do so
  - when instructed by a medical professional

### **Refusing medication**

If a child refuses to take medication, the school staff will not force them to do so. The school will inform the child's parents as a matter of urgency. If necessary, the school will call the emergency services.

### **School trips**

Staff supervising excursions should be aware of any medical needs, and relevant emergency procedures. Risk assessments may sometimes indicate the need for an additional supervisor or parent to accompany a particular pupil and should identify the nature of the support required including details of any reasonable adjustments to aid their participation in activities involved. If staff are concerned about whether they can provide for a pupil's safety, or the safety of other pupils on a trip, they will seek medical advice from the School Nurse or the child's GP. See also Residential.

### **Sporting activities**

Children with medical needs will be encouraged to take part in sporting activities appropriate to their own abilities. Any restrictions on a pupil's ability to participate in PE will be included in their Individual Health Care Plan. Some pupils may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary. Teachers should be aware of relevant medical conditions and emergency procedures.

## **Confidentiality**

The school will treat medical information confidentially. The Headteacher will agree with the parents who will have access to records and information about a pupil. If information is withheld from staff they cannot be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

## **Storage of medication**

- where practical, the parent or child will be asked to bring in the required dose each day. When the school stores medicine it will be labelled with the name of the pupil, the name and dose of the drug and the frequency of the administration.
- where a pupil needs two or more prescribed medicines, each should be kept in a separate container.
- pupils should know where their medication is stored.
- asthma inhalers are stored centrally in the medical room and taken to outside activities with the child. Pupils in Year 9 upwards carry their own asthma inhaler
- other medicines are kept in a secure place not accessible to pupils
- if the medicine requires special storage eg refrigeration, these guidelines will be followed where possible. When medication is taken out for a school trip, it will be signed out by a member of staff, kept secure within a first aid bag, and then signed back in upon return. Any medication given to a child will be logged.

## **Disposal of medicines**

Parents must collect medicines held at school at the end of the Summer term. Parents are responsible for disposal of date expired medicines.

## **Hygiene/infection control**

Staff should follow basic universal precautions. Staff should use protective disposable gloves and take care when dealing with blood or other body fluids and disposing of dressing or equipment.

## **Emergency procedures**

Allocated staff have appropriate training with updates in First Aid and know how to call the emergency services. A pupil taken to hospital by ambulance will be accompanied by a member of staff until the pupil's parents arrive.

## **Administration of emergency rescue medication for epilepsy and the anaphylaxis procedure**

The administration of medication for these medical conditions requires specific training and procedures. The school will ensure appropriate training to named staff to administer emergency rescue medication following the protocol drawn up by the child's paediatrician. In the event of absence of trained staff, emergency back-up procedures will be followed, and an ambulance called. Parents or carers will be contacted in the event of a seizure or need for the anaphylaxis procedure.

## **Residential visits**

Detailed medical information regarding the pupil is required before a pupil can be taken away for a residential stay. If required, after a risk assessment, a specific protocol will be drawn up in consultation with supervising teacher, parents, pupil, school nurse and child's GP for the administration of routine and emergency medication. This will include the nature of the support required including specific details of any reasonable adjustments to aid their participation in activities involved.

Staff will complete and sign a 'medication given' document each time they give medication to a pupil. In such circumstances, whenever possible, the dosage and administration will be witnessed by a second adult.

## **First Aid and illness**

If a child requires first aid treatment, wherever possible this will be administered by a trained first aider. Any treatment given will be recorded in the 'first aid' log.

If a child becomes ill, they will be taken to the medical room and remain there under supervision whilst waiting for collection by their relative/named contact.

## **Complaints Procedure**

Any concerns regarding the practice in school or college should be raised with the Headteacher.

## **Legislative Framework**

This policy has due regard to legislation including, but not limited to:

- The Children and Families Act 2014
- The Education Act 2002
- The Education Act 1996 (as amended)
- The Children Act 1989

- The NHS Act 2006
- The Equality Act 2010
- The Health and Safety at Work etc. Act 1974
- The Misuse of Drugs Act 1971
- The Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014

This policy also has due regard to the following guidance:

- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfEE (2000) 'First aid in schools'
- Ofsted (2015) 'The common inspection framework: education, skills and early years'



## Individual Health Care Plan

This enable the school to identify the level of support that is needed in school for pupils with long term medical needs. Those who may contribute to the plan are: Headteacher, parent or guardian, pupil, class teacher, school staff who agree to administer medication or who have been trained in emergency procedures and the school nurse, GP or other health care professionals.

Name of Pupil:	D.O.B.:
Description of medical needs:	
Pupil awareness of condition:	
Times when pupil may require additional support, and what this support may be, including symptoms, triggers, treatment / medication. <i>(Access to food / drink or dietary restriction / environmental or specific facility)</i>	
Restrictions and enablement of pupil's ability to participate in any school activity: <i>Reasonable adjustments to be made to enable participation. Social and emotional impact – implications and management:</i>	
Likelihood of an emergency arising and potential nature:	
Separate Risk assessment: Yes / No	

Action to be taken if an emergency arises:

Name of Pupil:

<b>Medication to be administered</b>
Name of medication:
Dose
Method of administration:
Side effects:
Location / Storage of medication:
Other treatments:

Name of staff trained to administer pupils medication / involved in care:

*Training to be held / to be sought from:*

Pupil to administer own medication: Yes / No

For Epilepsy; protocol in place for rescue medication: Yes / No

For anaphylaxis; protocol in place for rescue medication: Yes / No

Health Care Plan to be shared with:

Compiled by:

Date:

Review date:

Headteacher	Parents / guardian

Health Care official: please state name and job title	Pupil

Name of Pupil:

Record of significant events / adjustments during the life of this plan:

Date:

Reported by:

MEDICAL FORM 2

**Form for parents to complete if they wish the school to administer medication or enable pupils to administer own medication**

Pupil name: .....

Date of Birth: .....

Name of Medication: .....

For how long will your child be taking this medication? ..... Condition or illness:

..... **Full directions for use:-**

Dose and method: ..... Time of dose:

(eg lunchtime) ..... Is your child going to self-

administer: Yes / No (please circle)

Special Precautions: ..... Side Effects:

..... Procedures to take in an

emergency: .....

.....

.....

Doctor's Details:

Doctor's Name: ..... Doctor's Address:

..... Doctor's Telephone:

.....

**I will deliver the medicine to my child's tutor, in the original packaging (with prescription details printed on).**

I will inform the school if the medication changes.

Parent/Carer signature: .....

Date: ..... Heateacher

signature: .....

Date: .....

**THE SCHOOL WILL NOT GIVE YOUR CHILD MEDICINE UNLESS YOU COMPLETE AND SIGN THIS FORM, AND THE HEADTEACHER HAS AGREED THAT SCHOOL STAFF CAN ADMINISTER THE MEDICATION.**

# School Asthma Card

To be filled in by the parent/carer

Child's name

Date of birth

Address

Parent/carer's name

Telephone – home

Telephone – work

Telephone – mobile

Doctor/nurse's name

Doctor/nurse's telephone

This card is for your child's school. Review the card at least once a year and remember to update or exchange it for a new one if your child's treatment changes during the year. Medicines should be clearly labelled with your child's name and kept in agreement with the school's policy.

## Reliever treatment when needed

For wheeze, cough, shortness of breath or sudden tightness in the chest, give or allow my child to take the medicines below. After treatment and as soon as they feel better they can return to normal activity.

Medicine	Parent/carer's signature
<input type="text"/>	<input type="text"/>

## Expiry dates of medicines checked

Medicine	Date checked	Parent/carer's signature
<input type="text"/>	<input type="text"/>	<input type="text"/>

## What signs can indicate that your child is having an attack?

Parent/carer's signature  Date

Does your child tell you when he/she needs medicine?

Yes  No

Does your child need help taking his/her asthma medicine?

Yes  No

What are your child's triggers (things that make their asthma worse)?

Does your child need to take any medicines before exercise or play?  Yes  No

If yes, please describe below

Medicine	How much and when taken
<input type="text"/>	<input type="text"/>

Does your child need to take any other asthma medicines while in the school's care?  Yes  No

If yes, please describe below

Medicine	How much and when taken
<input type="text"/>	<input type="text"/>

## Dates card checked by doctor or nurse

Date	Name	Job title	Signature
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## What to do in an asthma attack

- 1 Make sure the child takes one to two puffs of their reliever inhaler, (usually blue) preferably through a spacer
- 2 Sit the child up and encourage them to take slow steady breaths
- 3 If no immediate improvement, make sure the child takes two puffs of reliever inhaler, (one puff at a time) every two minutes. They can take up to ten puffs
- 4 If the child does not feel better after taking their inhaler as above, or if you are worried at any time, call 999 for an ambulance. If an ambulance does not arrive within ten minutes repeat step 3.

Asthma UK Adviceline Ask an asthma nurse specialist  
 0800 121 62 55 [asthma.org.uk/adviceline](http://asthma.org.uk/adviceline) 9am–5pm, Monday–Friday

Asthma UK Summit House, 70 Wilson Street, London EC2A 2DB  
 T 020 7786 4900 F 020 7256 6075

[asthma.org.uk](http://asthma.org.uk)



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