



Supporting Children with Medical Conditions

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ASPIRE POLICY FOR SUPPORTING PUPILS WITH MEDICAL NEEDS

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1 INTRODUCTION

- Aspire Trust will ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that, where possible, they can play a full and active role in school life. To help achieve this, the school has adopted the Department for Education policy on 'Supporting Pupils at School with Medical Conditions', which was issued under Section 100 of the Children and Families Act 2014.
- The aim of this policy is to ensure that the parents of children with medical conditions feel confident that the school will provide effective support and that children feel safe and reach their full potential.
- Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The school will comply with their duties under the Act to make reasonable adjustments to support pupils with disabilities.
- Some children with medical conditions may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) Plan which brings together health and social care needs as well as the provision for their special educational needs. Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan will be linked to or become part of that statement or EHC plan. The Healthcare Plan will be developed with the child's best interests in mind to ensure that the risks to the child's education, health and social wellbeing are managed, and minimises disruption, for children with medical conditions.
- Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with parents, pupils, healthcare professionals (and, where appropriate, social care professionals) and local authorities to ensure that needs of pupils with medical conditions are met effectively.

2 ROLES AND RESPONSIBILITIES

2.1 The Board of Trustees will ensure that:

- arrangements are in place so that children with medical conditions
 - are properly supported
 - can play a full and active role in school life
 - can remain healthy and achieve their academic potential

- staff are properly trained to provide the support that pupils need
- in line with their safeguarding duties, ensure that pupil's health is not put at unnecessary risk from, e.g. infectious diseases
- in those circumstances, they do not have to accept a pupil at time where it would be detrimental to the health of that child or others to do so.

2.2 The CEO will ensure that

- a person is appointed to have overall responsibility for the implementation of this policy
- all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation
- all staff including supply staff who support children with medical needs receive sufficient information to provide appropriate support
- individual Healthcare Plans are developed, monitored and reviewed annually or earlier if evidence is presented that the child's needs have changed. Where appropriate Healthcare Plans will be reviewed at the child's Annual Review
- sufficient staff are suitably trained and achieve the necessary level of competency before they take on responsibility to support children with medical conditions
- sufficient numbers of trained staff are available to support all individual healthcare plans to cover staff absence, contingency and emergency situations
- all staff are trained to recognise the symptoms of an asthma attack (and are able to distinguish them from other conditions with similar symptoms);
- at least one emergency inhaler kit is maintained and readily available at each school site in an emergency situation
- all staff are trained to recognise the symptoms of anaphylaxis
- risk assessments for school visits, holidays, and other school activities outside of the normal timetable are undertaken for children with medical conditions
- all staff are aware that medical information must be treated confidentially
- school staff are appropriately insured and are aware that they are insured to support pupils in this way.

2.3 Appointed Person

The Head of Operations has been appointed to have overall responsibility for implementing the school's policy for supporting pupils with medical conditions. They will ensure that children with medical conditions are appropriately supported, ensure cover for 1:1 in case of absence and briefing supply staff.

2.5 All members of staff may be asked to provide support to pupils with medical conditions, including administering medicines

- All members of staff should know what to do and respond accordingly if they become aware that a pupil with a medical condition needs help
- Although administering medicine is not part of teacher's professional duties, teachers should take into account the needs of pupils with medical conditions that they teach.
- Staff must not give prescription medication or undertake healthcare procedures without appropriate training

2.6 Pupils

- Where appropriate, pupils with medical conditions will be consulted to provide information about how their condition affects them.
- Where appropriate, pupils with medical conditions will be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan.

2.7 Parents have the prime responsibility for their child's health. Parents include any person who is not a parent of a child but has parental responsibility for or care of a child.

- It only requires one parent to request that medicines are administered. As a matter of practicality, this will be the parent with whom the school has day-to-day contact.
- Parents should provide the school with sufficient and up to date information about their child's medical needs. Parents should tell the school of any change in prescription which should be supported by either new instructions on the packaging of medication or by a supporting letter from a medical professional.
- Parents are key partners and will be involved in the development and review of the Healthcare Plan for their child.
- Parents should provide medicines and equipment as required by the Healthcare Plan.

Parents should:

- bring their child's medication and any equipment into school at the beginning of their placement with Aspire
- replace the medication before the expiry date
- as good practice, take into school a new asthma reliever inhaler when prescribed
- dispose of expired items to a pharmacy for safe disposal
- during periods of high pollen count, encourage their children, who have been prescribed anti-histamines, to take their medication before school so that their condition can be better controlled during the school day
- keep their children at home when they are acutely unwell
- Parents should ensure that they or another nominated adult are contactable at all times

3 STAFF TRAINING AND SUPPORT

- The Head of Operations will ensure that all staff are aware of the Trust's policy for supporting pupils with medical conditions and their role in implementing the policy.
- Any member of staff who agrees to accept responsibility for administering prescribed medicines to a child does so voluntarily and will have appropriate training and guidance.
- Training needs will be identified during the development or review of individual healthcare plans and will be reviewed annually. The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents will be asked for their views but will not be the sole trainer.
- Training will be provided for staff to ensure that they are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. Training for new staff will be provided as and when required.
- Training will be provided by an appropriate healthcare professional so that staff have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative and emergency measures so that they can recognise and act quickly if a problem occurs.

- Only staff with appropriate training will give prescription medicines or undertake healthcare procedures. (A first-aid certificate does not constitute appropriate training in supporting children with medical conditions).
- The school will ensure that an appropriate number of people have attended Supporting Pupils at School with Medical Conditions training to understand County policy and to ensure medicines are appropriately managed within the school. BCC recommend training at least three people to cover sickness, absence or school trips.

4 INDIVIDUAL HEALTHCARE PLANS

A Healthcare Plan clarifies for staff, parents and the pupil the support that can be provided. Individual Healthcare Plans for pupils with medical conditions, (e.g. asthma, anaphylaxis, diabetes, epilepsy) will be drafted with parents/pupils and other healthcare professionals where appropriate. The plan will include:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil'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 pupil'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 (some pupils will be able to take responsibility for their own health needs) including in emergencies. If a pupil is self-managing their medication, then this will be 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 pupil'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 pupil's condition and the support required
- arrangements for written permission from parents and the Head of School for medication to be administered by a member of staff, or self-administered by the pupil 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 pupil can participate, e.g. risk assessments

- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements.

Some pupils may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Healthcare Plans will be reviewed at least annually but some may need to be reviewed more frequently. Where appropriate the Healthcare Plan will be reviewed at the pupil's Annual Review.

Where possible, the pupil's registered mainstream school should provide Aspire with a copy of the Healthcare plan. This will be checked with the parents for accuracy on admission. Where a pupil is dual registered, Aspire will co-ordinate with the mainstream school as and when updates are required.

It should be noted that the above approach does not apply for pupils receiving tuition at home, or at Stoke Mandeville Hospital. For children receiving tuition at home, it is the responsibility of the parent or guardian present to attend to the medical needs of the child. In the case of tuition at Stoke Mandeville, it is the responsibility of medical staff on site.

5 THE PUPIL'S ROLE IN MANAGING THEIR OWN MEDICAL NEEDS

- After discussion with parents, pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. Parents will be asked for written confirmation that their child is mature and responsible enough to manage their own medication. This information will be recorded in the Healthcare Plan.
- Parents should be aware that if their child holds their own medication then school staff will not be recording the doses self-administered;
- If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them; a record of administration will be made.
- If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but will contact the parents and follow the procedure agreed in the individual healthcare plan.
- Pupils attending an Aspire School site should hand in their inhaler on arrival to be kept in the medicine cupboard on reception. Parents will be contacted where a pupil

is seen to be using their asthma inhaler more frequently than usual as this may indicate their condition is not well controlled.

6 MANAGING MEDICINES ON SCHOOL PREMISES

Pupils will only be given prescription or non-prescription medicines after parents have provided written consent (except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases the school will encourage the pupil to involve their parents while respecting their right to confidentiality).

When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will be used for the disposal of needles and other sharps.

Medicine brought into school must be given to the appointed person for each site (see Appendix 1)

6.1 Prescribed medication

The school will only accept prescribed medicines that are in-date, labelled, provided in the original container 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 will be available inside an insulin pen or a pump, rather than in its original container

- Parents should note the expiry date so that they can provide a new prescription as and when required.
- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

Short-Term Medical Needs

Many children will need to take medicines during the day at some time during their time in the school. This will usually be for a short period only, perhaps to finish a course of antibiotics, which will minimise the time that they need to be absent.

Antibiotics prescribed three times a day can be taken out of the school day. The school will support children who have been prescribed antibiotics that need to be taken **four** times day.

6.2 Controlled Drugs

- Some medicines prescribed for pupils (e.g. methylphenidate, known as Ritalin) are controlled by the Misuse of Drugs Act, 1971. A pupil who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another pupil for use is an offence.
- The school will keep controlled drugs in a locked non-portable container, to which only named staff have access but will ensure they are easily accessible in an emergency.
- School staff may administer a controlled drug to the child for whom it has been prescribed in accordance with the prescriber's instructions.
- A list of staff who have agreed to administer medication and have received training is listed in Appendix 1.
- A record will be kept of any doses used and the amount of the controlled drug held in school, i.e. total number of doses (tablets) provided to the school, the dose given and the number of doses remaining.
 - where the dose is half a tablet then this will be cut using a tablet cutter at the time that the medication is required
 - half tablets will be retained but not issued at the time of the next dose; a fresh tablet will be cut
- A controlled drug, as with all medicines, will be returned to the parent when no longer required to arrange for safe disposal. If this is not possible, it will be returned to the dispensing pharmacist.
- Some pupils with epilepsy are prescribed rectal diazepam or buccal midazolam. Staff will not administer these medications without written authorisation from a parent, and until they have received appropriate training from a relevant professional.

6.3 Non-prescription Medication

Non-prescription medication will only be given in exceptional circumstances and only with the expressed permission of the Head of School.

Parents will be asked to provide written consent confirming that the medicine has been administered without adverse effect to the child in the past and that they will inform the school immediately if this changes.

6.4 Pain Relief

Pupils sometimes ask for pain relief (analgesics) at school, i.e. paracetamol tablets or

liquid.

- Parents will be contacted to give verbal consent to administer paracetamol – no medication will be given without this.
- The school holds a supply of paracetamol based pain relief, which will be issued to those pupils on request, whose parents have given consent.
- The school will hold non-prescription analgesics on behalf of pupils on request. The medication must be brought into school in the original packaging and written consent given.
- Pupils are **not** permitted to carry their own analgesics.
- The school will only administer paracetamol to those pupils requesting analgesics; generally non-prescription ibuprofen will not be given.
- If ibuprofen is the analgesic of choice then pupils/parents will be advised that a dose could be taken before school (ibuprofen is effective for six hours); if required the school will 'top up' the pain relief with paracetamol.
- A child under 16 will never be given aspirin-containing medicine unless prescribed by a doctor.
- A record will be made of all doses given.

7. RECORD KEEPING

- The school will keep a record of all medicines administered to individual pupils, stating what, how and how much was administered, when and by whom in a **bound book**. Any side effects of the medication to be administered at school will be noted.
- A second person will witness the administration of controlled drugs.
- A record of administration of medicine will not be recorded where the pupil has taken responsibility for their own medication, e.g. asthma inhalers and take their medication, as and when it is required.
- A record will be made where medication is held by the school but self-administered by the pupil.

8. SAFE STORAGE OF MEDICINES

- Medicines will be stored strictly in accordance with product instructions - paying particular note to temperature and in the original container in which dispensed.

- Pupils know where their medication is stored and are able to access them immediately or where relevant know who holds the key.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available and not locked away.
- A few medicines require refrigeration. They will be kept in a clean storage container, clearly labelled, and stored in the Staff Room refrigerator, which is not accessible to pupils. A temperature log of the refrigerator will be taken during the period of storage. (recommended temperature is between 2C & 8C)
- Medication will never be prepared ahead of time and left ready for staff to administer.
- An audit of pupil's medication will be undertaken every half term disposing of any medication that is no longer required.
- It is the parent's responsibility to ensure their child's medication remains in date. The school will not remind parents when their child's medication is due to expire.

7 DISPOSAL OF MEDICINES

- Parents are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. The return of such medicines to parents will be recorded;
- Parents should also collect medicines held at the end of the summer term, or the end of the pupil's placement. If parents do not collect all medicines, they will be taken to a local pharmacy for safe disposal;
- Sharp boxes will always be used for the disposal of needles.

8 HYGIENE AND INFECTION CONTROL

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures.

8.1 STEP HAND WASHING TECHNIQUES



9 DAY VISITS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES

- The school will actively support pupils with medical conditions to participate in school trips and visits or in sporting activities;
- The school will make reasonable adjustments for the inclusion of pupils in such activities;
- Some children may need to take precautionary measures before or during exercise, and may need access, for example, to asthma inhalers. Staff supervising sporting activities will be made aware of relevant medical conditions, and will consider the need for a risk assessment to be made.
- The school will consider the reasonable adjustments that can be made to enable pupils with medical needs to participate fully and safely in visits. These arrangements will be included in the risk assessment for the event.
- One member of staff accompanying the visit will be asked to take on the lead role for administering medicines or healthcare procedures. Individual Healthcare Plans, medicines, equipment and consent forms will be taken on school visits.
- Medicines administered must be witnessed and recorded.

10 LIABILITY AND INDEMNITY

The Trustees will ensure that the appropriate level of insurance is in place for staff providing support to pupils with medical conditions and appropriately reflects the level of risk.

The school will contact their insurers to extend their cover should a medical intervention fall outside the conditions covered by this policy.

11 COMPLAINTS

Parents/pupils should discuss any concerns directly with the school if they become dissatisfied with the support provided. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

12 SCHOOL PROCEDURES FOR MANAGING MEDICINES

- i Medicines should be handed into reception on arrival. The designated member of staff will ensure consent has been provided to administer the medication.
- ii The designated person will check that the
 - medicine is in its original container as dispensed by a chemist and details match those on the form;
 - label clearly states the child's
 - first and last name
 - name of medicine
 - dose required
 - method of administration
 - time/frequency of administration
 - patient information leaflet is present to identify any side effects;
 - medication is in date
- iii The designated person will ensure the medicine is stored appropriately
 - Medicines requiring refrigeration will be kept in the fridge in a clean storage container
 - A daily temperature of the fridge will be taken and recorded.
- iv The designated person will administer medication at the appropriate time.
- v The following procedure will be followed:
 - The pupil will be asked to state their name – this is checked against the label on the bottle, authorisation form and record sheet.

- The name of the medicine will be checked against the authorisation form and record sheet.
 - The time, dosage and method of administration will be checked against the authorisation form and record sheet.
 - The expiry date will be checked and read out.
 - The medicine is administered.
 - The record sheet is signed by the designated person and the witness (*Controlled medication must be witnessed by a second adult*)
 - Any possible side effects will be noted.
 - The medicine is returned to appropriate storage.
- vi If a child refuses to take their medicine, staff will not force them to do so. Staff will record the incident and contact parents. If a refusal results in an emergency, the emergency procedures detailed in the Healthcare Plan will be followed.
- vii If the designated person has concerns about a procedure or a medication that they are being asked to administer they will not administer the medicine, but check with the parents or a health professional before taking further action.

Signature of Trustees Date

Signature of Headteacher Date

SUPPORTING PUPILS WITH MEDICAL NEEDS – Appendix 1

Aspire delivers education at five different sites, and provides tuition both in the home and at Stoke Mandeville Hospital. Where tuition is delivered in the pupil's home, or at hospital, their medical needs should be met by the parent/guardian or relevant medical professional. Information specific to each site is detailed below:

Blueprint

The Blueprint site accommodates two groups of pupils:

- Pupils who have either been permanently excluded, or are at risk of permanent exclusion, who are in place of their mainstream school.
- Pupils who are unable to attend mainstream school and are receiving home tuition as a result of their health needs. Part of the home tuition service may include working in small groups at the Blueprint site. Pupils with health needs are defined as:
 - Pupils who are physically ill, injured or recovering from medical interventions
 - Pupils with mental health problems
 - School-age mothers/mothers-to-be

Pupils in the two groups are accommodated in separate parts of the building and do not require the same level of intervention and supervision. Our approach to supporting these pupils therefore differs.

Blueprint - school

- The person responsible for the administration of medicines is **Kirsty McKendrick**.
- Medication should be handed in on arrival to the member of staff on duty at the front door, who will hand it to the person responsible for the administration of medicines for storage.
- The person responsible for the administration of medicines will be responsible for ensuring relevant parental consent is held to administer the medication.
- Medication (and first aid supplies) is kept in the reception office, in the cupboard behind the desk clearly marked with the green first aid sign.
- Controlled medication is stored in the drawer under the Reception office desk. The keys are available from the person responsible for the administration of medicines.
- The Administration of Medicines record book is stored in the drawer under the Reception office desk.

Blueprint - home tuition rooms

- We do not, as standard, draft or update individual health care plans for students attending the Blueprint home tuition rooms. As part of the referral process, we should have received medical evidence detailing the pupil's medical needs.

- Self-administered emergency medication, such as inhalers, should be kept with the pupil whilst on site.
- In the event that a pupil requires first aid, supplies are available from the reception office (see notes above).

CSEC

- The person responsible for the administration of medicines is **Amanda Newman**.
- Medication should be handed in on arrival to the member of staff on duty at the front door, who will hand it to the person responsible for the administration of medicines for storage.
- The person responsible for the administration of medicines will be responsible for ensuring relevant parental consent is held to administer the medication.
- Medication, including controlled medication, is stored in the fixed, lockable box in the reception office. The keys are held by the person responsible for the administration of medicines.
- The Administration of Medicines record book is stored in the fixed, lockable box in the reception office. The keys are held by the person responsible for the administration of medicines.

TWG

- The person(s) responsible for and the administration of medicines are **Jason Guy** and **Lizzi Farthing**
- Medication should be handed in on arrival to the member of staff on duty at the front door, who will hand it to the person responsible for the administration of medicines for storage.
- The person responsible for the administration of medicines will be responsible for ensuring relevant parental consent is held to administer the medication.
- Medication, including controlled medication, is stored in the fixed, lockable box in the Learning Support Room.
- The Administration of Medicines record book is stored in the Learning Support Room.

Shortenills

- The person responsible for the administration of medicines is **Sally Barnes**
- Medication should be handed in on arrival to the member of staff on duty at the front door, who will hand it to the person responsible for the administration of medicines for storage.
- The person responsible for the administration of medicines will be responsible for ensuring relevant parental consent is held to administer the medication.

- Medication, including controlled medication, is stored in the lockable cabinet in the reception office. The keys are held by the person responsible for the administration of medicines and site administrator.
- The Administration of Medicines record book is stored in the lockable cabinet in the reception office.

Orchard House

Placements at Orchard House are short term and enable students to access core subjects within a small, inclusive setting. Students are referred to Orchard House with the support of their clinicians at CAMHS (the Child and Adolescent Mental Health Service). Young people attend Orchard House for one to two sessions a week, a session being either a morning or an afternoon, depending on their needs.

- As part of the referral process, we should have received medical evidence detailing the pupil's medical needs.
- Self-administered emergency medication, such as inhalers, should be kept with the pupil whilst on site.
- In the event that a pupil requires first aid, supplies are available from the office.