



SUPPORTING STUDENTS AT SCHOOL WITH MEDICAL NEEDS POLICY

Status	Statutory	Date created	December 2015
Any other statutory names for this policy (where applicable)		Date first approved	January 2016
Responsibility for this policy (job title)	Deputy Headteacher	Date last reviewed	January 2019
Governors' Committee with responsibility for its review	Teaching and Learning	Frequency of review	Every three years
Tick here if Bucks Policy attached in its entirety		To be put on the school website? (Yes/No)	Yes
Approval necessary	Full Governing Body		

1 INTRODUCTION

- At Aylesbury High School we aim to ensure that all students with physical and/or mental health medical conditions are suitably supported-so that they can play a full and active role in school life. To help achieve this, we have adopted the Department for Education policy on 'Supporting Students at School with Medical Conditions', which was issued under Section 100 of the Children's and Families Act 2014.
- The aim of this policy is to ensure that the parents¹ of young people with medical conditions feel confident that the school will provide the appropriate support to help keep their child safe and able to reach their full potential.
- Some young people 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 students with disabilities.
- Some young people with medical conditions may also have special educational needs (SEN) and may have an Education, Health and Care Plan (EHCP) which brings together health and social care needs as well as the provision for their SEN. Where the young person has a SEN identified in an EHCP, an Individual Healthcare Plan (IHP - see section 4) may be linked to or become part of that EHCP. The IHP will be developed with the student's best interests in mind to ensure that the risks to their education, health and social well-being are managed to minimise disruption.
- Supporting a young person with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with parents, students, healthcare professionals, local authorities and, where appropriate, social care professionals to ensure that needs of students with medical conditions are effectively met.

¹ Throughout this policy parent(s) will be used to refer to parent(s) or carer(s)

2 ROLES AND RESPONSIBILITIES

2.1 Staff will ensure that students with medical conditions are:

- Appropriately supported
- Able to play a full and active role in school life
- Able to achieve their academic potential

2.2 The Governors will also ensure that:

- Staff are adequately trained to provide the support that students may need
- In line with their safeguarding duties, a student's health is not put at unnecessary risk

2.3 The Deputy Headteacher will ensure that:

- All staff are aware of this policy
- All staff, including temporary staff who support students with medical needs, have access to sufficient information to provide appropriate support
- IHPs are developed, monitored and reviewed annually, or earlier if evidence is presented that the student's needs have changed
- Where appropriate, IHPs will be reviewed at the student's EHCP Annual Review
- Named First Aiders are trained to achieve the necessary level of competency before they take on responsibility to support young people with medical conditions
- Appropriate staff are available to support all IHPs when covering staff absence and emergency situations
- A secure register is kept, by Matron, for students who have been diagnosed with asthma and/or prescribed a reliever inhaler
- At least one emergency inhaler kit is maintained and readily available in an emergency situation, where parental permission has been received
- Risk assessments for school visits, residential trips, and other school activities outside of the normal timetable are undertaken for students with medical conditions, by the Trip Leader
- All staff are aware that medical information must be treated confidentially
- Medical information for each student is destroyed at the age of 25.

2.4 To ensure that young people with medical conditions are appropriately supported, the Student Welfare Coordinator and School Matron have overall responsibility for implementing this policy. They are responsible for keeping information up to date and secure.

2.5 The following procedures have been made for transitional arrangements:

- Visits to Primary Schools by the Personal Support Assistant (PSA), Head of Year 7 to meet the student and talk to appropriate members of staff
- The student visits AHS for Induction Day and/or additional transitional meetings, as appropriate
- Parent meeting to gain comprehensive information

2.6 All members of school staff may be asked to provide support to students with medical conditions.

- Members of staff that have been trained by Matron to administer specific medicines can administer these medicines. This training will be updated annually and a record kept by Matron.
- All members of staff should contact Matron, or reception in her absence, if they become aware that a student 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 students with medical conditions that they teach or escort on a school trip.
- Staff must not give prescription medication or undertake healthcare procedures without appropriate training.

2.7 Where appropriate, students with medical conditions will be:

- Consulted to provide information about how their condition affects them
- Fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their IHP

2.8 Parents have the prime responsibility for their child's health. 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. They are required to provide Matron with sufficient and up to date information about their child's medical needs including any change in prescription, which should be supported by either new directions on the packaging of medication or by a supporting letter from a medical professional. Parents should:

- Bring their child's medication and any equipment into school at the beginning of the academic year such as new asthma reliever inhalers when prescribed
- Replace any medication before the expiry date
- Dispose of expired items to a pharmacy for safe disposal
- During periods of high pollen count, encourage their child, to take their medication before the school day so that their condition can be better controlled
- Keep their child at home when they are acutely unwell
- Ensure that they or another nominated adult are contactable at all times

3 STAFF TRAINING AND SUPPORT

The School will ensure that at least two people have attended 'Supporting Students with Medical Conditions' training to ensure medicines are appropriately managed within the school. Any member of staff who agrees to accept responsibility for administering prescribed medicines to a young person does so voluntarily and will have appropriate training and guidance. Staff training will be:

- Identified during the development or review of IHPs. The family of a young person will often be key in providing relevant information to school staff about how their child's needs can be met.

- Provided to ensure that staff are competent and have confidence in their ability to support students with medical conditions and to fulfil the requirements as set out in IHPs.
- 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.
- Given to staff who may be required to administer prescription medicines or undertake healthcare procedures².

4 SHORT TERM MEDICAL CONDITIONS

If a student has a temporary medical condition then they must see Matron as soon as they return to school. Matron will complete a risk assessment to ascertain if any actions are required to ensure that the student is both safe in school and able to access the curriculum. Matron will then communicate any information with teaching staff and the appropriate tutor and Head of Year. If the student needs temporary support in accessing learning then Matron will refer the student to the SENDCo.

5 INDIVIDUAL HEALTHCARE PLANS (IHP)

An IHP for students with medical conditions, clarifies for staff, parents and the student the support that can be provided. The IHP will include:

- 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 or possible access arrangements in examinations
- The level of support needed (some students will be able to take responsibility for their own health needs) including in emergencies
- If a student is self-managing their medication and how this will be monitored (see section 5)
- Who in the school needs to be aware of the student's condition and the support required
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate
- Confidentiality issues which are raised by the parent/young person and the designated individuals to be entrusted with information about the young person's condition
- What to do in an emergency, including who to contact and contingency arrangements

² A first-aid certificate does not constitute appropriate training in supporting young people with medical conditions

6 THE STUDENT'S ROLE IN MANAGING THEIR OWN MEDICAL NEEDS

- After discussion with parents, students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. Parents will be asked to sign the 'Parental request for student to carry medicine for students with life threatening conditions' form³ to acknowledge that their child is mature and responsible to manage their own medication.
- 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 student to self-manage, then designated staff will help to administer medicines and manage procedures for them; a record of administration will be made.
- If a student refuses to take medicine or carry out a necessary procedure, staff will not force them to do so but will contact a parent and follow the procedure agreed in the IHP.
- Parents will be contacted where a student is seen to be using their asthma inhaler more frequently than usual, as this may indicate their condition is not under control.
- Provided parents have signed the appropriate form, students can carry life-saving prescribed medication. All other prescribed medication will be located in the medical office with the appropriate form signed by parents, for quick self-administration.

7 MANAGING MEDICINES ON SCHOOL PREMISES

- All medicines brought into school must be given to School Matron.
- Medicines will only be administered at school when it would be detrimental to a young person's health or school attendance not to do so.
- Students will only be given prescription or non-prescription medicines after parents have completed a consent form⁴.
- 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.
- 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.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

7.1 Short-Term Medical Needs

Some young people may need to take medicines during their time in school. This will usually be for a short period only, perhaps to finish a course of antibiotics, to minimise the time that

³ All forms related to this document can be found under medical information on the School's website

⁴ Except in exceptional circumstances where the medicine has been prescribed to the young person without the knowledge of the parent. In such cases the school will encourage the student to involve their parent while respecting their right to confidentiality.

they need to be absent. Antibiotics prescribed to be taken three times a day can be administered outside school hours but Matron will support young people who have been prescribed antibiotics that need to be taken **four** times a day.

7.2 Controlled Drugs

- Some medicines prescribed for students (e.g. methylphenidate, known as Ritalin) are controlled by the Misuse of Drugs Act, 1971.
- Matron will keep controlled drugs in a locked cabinet, to which only named staff have access. There is a system in place to ensure that these items can be easily accessible in an emergency⁵.
- Designated staff who have received appropriate training by a specialist health care professional, may administer a controlled drug to the student for whom it has been prescribed in accordance with the prescriber's instructions.
- 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.
- 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.

7.3 Non-prescription Medication

Parents will be asked to sign a consent form 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.

7.4 Pain Relief

Students sometimes ask for pain relief at school, i.e. paracetamol tablets.

- The school holds a supply of paracetamol, which will be issued to those students on request, as appropriate.
- Matron will hold non-prescription analgesics eg ibuprofen on behalf of students on request. The medication must be brought into school in the original packaging and a consent form signed.
- A student under 16 will never be given aspirin-containing medicine unless prescribed by a doctor.
- When a student requests pain relief, staff will first check maximum dosages and when the previous dose was taken. Parents will be contacted for confirmation. If parents are unavailable, a dose will not be given before 12:30.

8 RECORD KEEPING

- The school will keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted.

⁵ Full details are not listed here to main security of such items.

- A record of administration of medicine will not be recorded where the student 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 student.

9 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.
- Students 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 a refrigerator, which is not accessible to students.
- Medication will never be prepared ahead of time and left ready for staff to administer.
- An audit of a student's medication will be undertaken every term disposing of any medication that is no longer required.
- It is the parent's responsibility to ensure their young person's medication remains in date. The School will not remind parents when their young person's medication is due to expire.

10 DAY VISITS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES

- The School will actively support students with medical conditions to participate in trips or other external school activities.
- The school will make reasonable adjustments for the inclusion of students in such activities.
- Some young people 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 students 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. IHPs, medicines, equipment and consent forms will be taken on school visits.
- Medicines are administered, witnessed and recorded. This form is added to the file on return from the visit.

11 SCHOOL'S ARRANGEMENTS FOR CHRONIC CONDITIONS

11.1 Asthma

- An inventory of all students with asthma will be compiled
- IHPs will be created

- Staff will be informed of who currently has asthma via the Intervention Sheet.
- Procedures for students who have been prescribed reliever inhalers:
 - Emergency salbutamol inhalers and spacers are kept in the medical cupboard in the medical office
 - Emergency salbutamol inhalers will only be given to students previously diagnosed with asthma whose reliever inhaler is not in school or whose inhaler has run out, who are on the register and whose parents have signed the consent form
 - Trained staff will know how and when to use the emergency salbutamol inhaler.
 - Parents will be asked to sign to give permission to administer an emergency dose(s)
 - Parents will be informed of any emergency dosages given

11.2 Anaphylaxis (Severe Allergic Reaction)

- Staff will be informed of students who are currently diagnosed with an acute allergy via the Intervention Sheet.
- Trained staff will be aware of the symptoms of anaphylaxis, including practical information on when and how to use the adrenaline auto-injector
- An IHP will be developed which includes the arrangements to be made in food technology, practical science lessons and the canteen to control exposure to allergens
- Auto-injectors will be kept readily available and should be carried by the student
- Personal emergency epipens stored at School are kept in the medical cupboard in the medical office
- Epi-pens will be administered following the requirements of the IHP - where possible these will be self-administered, if not by a trained member of staff
- If an epipen is administered, 999 will be called and parents notified
- A record of the medication will be written in the medicines book

11.3 Epilepsy

- An IHP will be developed
- Trained staff will be able to identify the symptoms and triggers for epilepsy.
- If designated members of staff are not available to deliver emergency medication, an ambulance will be called. Details will be recorded on IHP.
- A medical room with a bed will be kept available so that if needed the student will be able to rest following a seizure
- The School will enable students to take a full part in all outings and activities
- The School will make necessary adjustments e.g. exam timings, coursework deadlines, timetables
- The School will liaise fully with parents and health professionals
- The administration of medication will be recorded as appropriate
- If appropriate, a record will be kept of the student's seizures, so that any changes to seizure patterns can be identified and so that this information can be shared with the student's parents and healthcare team
- Medicines will be stored in a medical cabinet in the medical room
- All medicines taken will be recorded in the medicine book

11.4 Diabetes

- An IHP will be written.
- Students diagnosed with Type 1 diabetes will be supported by staff who have specifically agreed to this responsibility and have received training and support from the Diabetic Nurses Team
- If required a suitable private place will be provided for students to carry out blood tests and administer doses, e.g. Medical Room
- Students will not be prevented from eating, drinking or taking toilet breaks whenever they need to in order to manage their medical condition effectively
- If a student has a hypo, they will not be left alone or moved. They will be supported in accordance to their IHP.

12 LIABILITY AND INDEMNITY

The Governing Body will ensure that the appropriate level of insurance is in place for staff.

13 COMPLAINTS

Parents/students 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.

14 SCHOOL PROCEDURES FOR MANAGING MEDICINES

Medicines should be brought to the school office/medical room by parents or students. Matron will ask the parent to sign the relevant consent form or check the form downloaded from the school's website. Matron will check that the:

- Medicine is in its original container, as dispensed by a chemist and the details match those on the authorisation form and record sheet
- Label clearly states the young person's first and last name, the name of the medicine, the dose required and the method and frequency of administration
- Patient information leaflet is present to identify any side effects
- Medication is in date; this will be checked and read out
- Medicine is logged in the record book and stored appropriately
- Medicines that require refrigeration will be kept in the fridge in a clean storage container
- Temperature of the fridge is taken and recorded
- Medication is administered at the appropriate time

When administering medicine will:

- Ask the student to state their name – this is checked against the label on the bottle, the authorisation form and the record sheet

- Check the time, dosage and method of administration against the authorisation form and record sheet
- Administer the medicine
- Sign the record sheet
- Note possible side effects
- Return the medicine to the appropriate storage