

Date approved by Trustees: 19/1/17

Date of review:2018

Signed: 

## **Medicines, Medical Conditions and First Aid Policy**

### **Policy Statement**

**Corvus Education Trust Schools are inclusive communities that welcome and support pupils with medical conditions.**

**The trust understands that pupils can suffer from long term, short term, chronic and acute illnesses and will provide for all pupils without exception or discrimination. This includes both physical and mental health conditions.**

**Our trust Schools provides all pupils with any medical condition the same opportunities as others at school, enabling them to play a full and active role in school life, remain healthy and achieve their academic potential.**

We will help to ensure they can:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution

The trust makes sure all staff understand their duty of care to children and young people in the event of an emergency.

All staff feel confident in knowing what to do in an emergency.

The trust understands that certain medical conditions are serious and potentially life threatening, particularly if poorly managed or misunderstood.

The trust understands the importance of medication and care being taken as directed by healthcare professionals and parents. All pupils with medical conditions will have an Individual Healthcare Plan (IHP) written as soon as possible after diagnosis and reviewed at least annually or more often if necessary.

All staff understand the medical conditions that affect pupils at this school. Staff receive training on the impact medical conditions can have on pupils.



This trust ensures all staff receive appropriate first aid training and have easy access to first aid equipment. The main first aid boxes are located in specific areas of each school. All classrooms have a basic first aid kit and full, portable first aid kits are taken on any off site visits.

This school ensures this policy is applied across the curriculum, including PE and Educational Visits.

The named member of school staff responsible for this medical conditions policy, including the administering of medicines and first aid and its implementation is **Mrs Alex Lightbown**

### **Policy Framework**

The policy framework describes the essential criteria for how the trust can meet the needs of children and young people with long term and short term medical conditions and those suffering from unexpected illness or injury at school.

#### **1) Our schools are inclusive communities that support and welcome pupils with medical conditions.**

- This trust is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out of school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- The trust will listen to the views of pupils and parents.
- Pupils and parents feel confident in the care they receive from this school and the level of care that meets their needs.
- The trust will ensure all pupils joining at normal transition times will have arrangements in place to manage their medical condition by the beginning of that term. Any pupil joining the school mid-term will have arrangements in place within no longer than two weeks.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability to learn.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- The whole school and local health community understand and support the medical conditions policy.
- This school understands that all children with the same medical condition will not have the same needs.
- The school recognises that duties in the Children and Families Act 2014 (England only) and the Equality Act (England, Wales and Scotland) relate to children with

disability or medical conditions is anticipatory. This school understands that some children who have medical conditions may also have disabilities and / or special educational needs and this policy may be read in conjunction with the school's SEN policy and the SEN code of practice.

**2) This school's medical conditions policy is drawn up in consultation with local key stakeholders within both the school and health settings.**

- Stakeholders should include parents, pupils, school nurse, school staff, governors, the school employer and relevant local health services.

**3) The medical conditions policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation.**

- Pupils, parents, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels. The policy will be available on the school's website for public view and all staff will be reminded of the policy and how it is implemented at induction and on an annual basis.

**4) All staff understand and are trained in what to do in an emergency at school.**

- All school staff, including temporary or supply staff (and volunteers if and when appropriate), are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency and this is refreshed at least once a year.
- All staff should be familiar with normal procedures for avoiding infection and follow basic hygiene procedures. Staff have access to protective clothing and suitable disposal equipment to safely deal with spillages of blood or other bodily fluids, including the changing of dressings.
- All children with a medical condition at this school have an Individual Healthcare Plan (IHP), which explains what help they will need in an emergency. The IHP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP with emergency care settings. IHPs should be developed in the context of assessing and managing risks to the pupil's education, health and social wellbeing and to minimise disruption. IHPs should consider;

**The medical condition, its trigger, signs, symptoms and treatment**

- The pupil's resulting needs, including medication (its side-effects and storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues

- Specific support for the pupil's educational, social and emotional needs, for example how absences will be managed, requirements for extra time to complete work, rest periods or additional support including counselling
  - The level of support needed, including in emergencies. If a child is self-managing their own medication, this should be clearly stated with arrangements for monitoring
  - Who will provide this support, their training needs, expectations of their role and confirmation of their proficiency to provide support for the pupil's medical needs from a healthcare professional
  - Who in school needs to be aware of the child's condition and the support required
  - Written permission from parents and the head teacher for medication to be administered
  - Separate arrangements or procedures required for school trips or other school activities outside the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
  - Arrangements for travel to and from school and what should be done if an emergency arises (at this school we request that the parent, or an appropriate representative, delivers and collects the pupil to and from school)
  - Where confidentiality issues are raised by the parent or pupil, the designated individuals to be entrusted with information about the child's condition
  - What to do in an emergency, including who to contact and contingency arrangements
- 5) All staff understand and are trained in the school's general emergency procedures.**
- All staff, including temporary or supply staff, know what action to take in an emergency and receive updates at least yearly. Training is provided at the start of each academic year, and as required throughout the year, and policies and procedures are discussed with temporary and supply staff. Training needs will be identified and discussed at least annually as part of the school's appraisal process. The induction of new staff will include training for supporting pupils with medical needs.
  - Any member of staff providing support to a pupil with medical needs will have received suitable training.
  - If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent or legal guardian arrives, or accompany a child taken to hospital by ambulance. A member of staff must not take a pupil to hospital in their own car.

**6) This school has clear guidance on providing care and support and administering medication and first aid at school.**

- The schools understand the importance of medication being taken and care received as detailed in the pupil's IHP.
- The schools will make sure that there are several members of staff who have been trained to administer the medication and meet the care needs of an individual child. The schools will ensure there are sufficient members of staff trained to cover any absences, staff turnover and other contingencies. The school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- The schools will not give medication to a child under 16 without a parent's written consent except in exceptional circumstances. Medication may only be administered if prescribed by a healthcare professional. Medicines bought 'over the counter' may not be administered, except for a single dose of travel sickness medication required for the return journey of an educational visit and then only upon the explicit written consent of the parent. Parents may be permitted to come into school during school hours to administer a single dose of analgesic and/or antipyretic medicine such as paracetamol or ibuprofen if they feel it is necessary.
- Medicines will only be administered at school when it would be detrimental to the pupil's health not to do so and where it is not clinically possible to arrange doses to be taken solely outside of school hours.
- When administering medication, for example prescribed pain relief or antibiotics, the schools will check the maximum dosage and when the previous dose was given. Parents will be informed.
- Children at the schools will not administer their own medication, unless they have received appropriate training and it is the wish of the pupil and their parent. This will be recorded on their IHP. A member of staff must be present to supervise and be prepared to intervene if necessary to ensure the child's health and safety are not compromised. Whilst pupils will be encouraged to keep themselves healthy, and self-care is to be promoted, this school recognises that some pupil's needs may be complex and some medical conditions can be fatal if not managed well.
- If a pupil refuses to take their medication or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the IHP. Parents will be informed.
- The schools will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site educational visit and the needs of the pupil, associated risks and how these are to be managed will be included in the risk assessment for the visit.
- Parents at the schools understand that they should let the school know immediately if their child's needs change and provide enough information to ensure their needs are met.

**7) This school has clear guidance on the storage of medication and equipment at school.**

- The schools make sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication / equipment is readily available wherever the child is in the school and on off-site activities, and is not locked away. Pupils may carry their emergency medication / equipment with them if this is appropriate or know where and how to access it. Children at the schools know to ask any member of staff and that they may have immediate access to their medication when required. In this school medications are stored safely in the medicines drawer or the medicines fridge (if required to be stored at a controlled temperature) in the school office.
- Pupils can carry controlled drugs if they are competent, otherwise the school will keep controlled drugs stored securely, but accessibly, in a non-portable container with only named staff having access. Staff at the schools can administer a controlled drug to a pupil once they have had specialist training. It is legal for a child who is competent to carry their own controlled drug, but it is an offence for them to pass it to anyone else to use.
- The schools will store medication that is in date and labelled in its original container. The exceptions to this are insulin and adrenalin (auto-injector), which although must still be in date, will generally be supplied in an injector pen or pump. Medication will only be accepted where it is in its original container, complete with dispensing label including the child's name and instructions for administering from a qualified healthcare professional.
- The schools will check all medication held in school on at least a termly basis and all medicines which will expire before the end of the following term will be returned to parents and replacements requested.
- This schools dispose of needles and other sharps in line with local policies. Sharps boxes are held securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

**8) This school has clear guidance about record keeping**

- Parents at the schools are asked if their child has any medical conditions on the admissions form.
- The schools use an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent, school staff, specialist nurse (where appropriate) and relevant healthcare services.
- The schools have a centralised register of IHPs, and an identified member of staff who has responsibility for this register.
- IHPs are reviewed regularly, at least every year or whenever the pupil's needs change.

- The pupil (where appropriate), parents, specialist nurse (where appropriate), and relevant healthcare services hold a copy of the IHP. Other school staff, including MSAs, are aware and have access to the IHPs for pupils in their care.
- The schools make sure that the pupil's confidentiality is protected.
- The schools seek permission from parents before sharing medical information with any other party.
- The schools meet with the pupil (where appropriate), parent, specialist nurse (where appropriate), and relevant healthcare services prior to any extended day visit to discuss and make a plan for any extra care requirements that may be needed. This is recorded on the pupil's IHP which will accompany them on the visit.
- The schools keep an accurate record of all medication administered, including the dose, time, date and supervising staff.
- The schools make sure that all staff providing support to a pupil have received suitable training and ongoing support, to make sure they have the confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse / school nurse / other suitably qualified healthcare professional and / or the parent. The specialist nurse / school nurse / other suitably qualified healthcare professional will confirm their competence, and this school keeps an up to date record of all training undertaken and by whom.

**9) The schools ensure that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.**

- The schools are committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. The schools are also committed to an accessible environment for out of school activities.
- The schools make sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, including extended school activities.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti-bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- The schools understand the importance of all pupils taking part in physical activity and that all relevant staff make appropriate adjustments to physical activity sessions to make sure they are accessible to all pupils. This includes out of school clubs and team sports.

- The schools understand that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid / take special precautions during activity, and the potential triggers for a pupil's condition when exercising and how to minimise these.
- The schools make sure that pupils have the appropriate medication / equipment / food available during physical activity.
- The schools make sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition. This school will not penalise pupils for their attendance if their absence relates to their medical condition. Following absence, reintegration back into school will be properly supported so pupils with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short term absences, including those for medical appointments are effectively managed as per the school's attendance policy.
- The schools will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCo who will liaise with the pupil (where appropriate), parent and the pupil's healthcare professional.
- Pupils at our schools learn what to do in an emergency.
- The schools make sure that a risk assessment is carried out before any out of school educational visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

**10) The schools are aware of the common triggers that can make common medical conditions worse or can bring on an emergency. This school is actively working towards reducing or eliminating these health and safety risks and has a written schedule or reducing specific triggers to support this.**

- The schools are committed to identifying and reducing triggers both at school and on out of school visits.
- School staff have been given training and written information on medical conditions which includes avoiding / reducing exposure to common triggers. It has a list of the triggers for pupils with medical conditions at this school, has a trigger reduction schedule and is actively working towards reducing / eliminating these health and safety risks.
- The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe during the whole school day and on out of school activities. Risk assessments are carried out on all out of school activities, taking into account the needs of pupils with medical conditions.

- The schools review all medical emergencies and incidents to see how they could be avoided, and changes school policy according to these reviews.

**11) Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.**

- The schools work in partnership with all relevant parties including the pupil (where appropriate), parent, governing body, staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- The governing body should ensure parents are aware of the school's complaints policy and procedures should they be dissatisfied with the support provided to their child.

**12) The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.**

- In evaluating the policy, The schools seek feedback from stakeholders including pupils, parents, school healthcare professionals, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services, governors and the school employer. The views of pupils with medical conditions are central to the evaluation process.

***This policy has been reviewed in consultation with the following parties and using the following sources of information:***

***Diabetes UK – Schools Pack May 2014***

***Department for Education – Supporting Pupils at School with Medical Conditions: 1<sup>st</sup> September 2014 and December 2015***

***Norfolk School's Guidance – Health, Safety and Wellbeing Team: 15<sup>th</sup> October 2014***

***Dr. Devendra Mahatme MB ChB (1985) Leeds DRCOG MRCP (Watton Medical Practice): April 2015***

***Carol Morton – Health Visitor Watton Medical Clinic: April 2015***

***Heather Jenkins & Claire Bridger – School Nursing Team: April 2015***

***Shauna Leggett – Physiotherapist June 2016***

***Parent & Pupil Surveys: July 2015***

