

# Supporting Pupils with Medical Needs Policy

Approved by:	Local Governing body		
Responsible department:	Marsden Junior School		
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# This School is an inclusive community that aims to support and welcome pupils with medical conditions.

Marsden Junior School knows that it has a responsibility to make the School welcoming and supportive to pupils with medical conditions who currently attend and to those who may enrol in the future.

The MJS aims to provide all children with all medical conditions the same opportunities as others at the School. We will help to ensure they can:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic well-being

Pupils with medical conditions are encouraged to take control of their condition. Pupils feel confident in the support they receive from the School to help them do this.

The MJS aims to include all pupils with medical conditions in all School activities.

The MJS ensures 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 MJS understands that certain medical conditions are serious and can be potentially life-threatening, particularly if ill-managed or misunderstood.

# 2. The Medical Conditions Policy is supported by a clear communication plan for staff, parents and pupils to ensure its full implementation

Parents are informed about the Medical Conditions Policy:

- When their child is enrolled as a new student
- Via the School's website, where it is available all year round

All School staff are informed and reminded about the policy:

- At scheduled medical conditions training
- At staff briefings and whole school training
- At staff induction training

# 3. First Aid trained staff understand and are trained in what to do in an emergency for the most common serious medical conditions

First Aid trained staff are aware of the most common serious medical conditions.

Staff at The MJS understand their duty of care to pupils in the event of an emergency. In an emergency situation School staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication. First Aid trained know what to do in an emergency for the pupils in their care with medical conditions.

Training is refreshed for first aiders at appropriate intervals.

Action for staff to take in an emergency for asthma/epilepsy/anaphylaxis and diabetes is relayed to staff at least once a year.

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See appendix 1 – form 1 – Asthma awareness
See appendix 1 – form 2 – Epilepsy awareness
See appendix 1 – form 3 – Anaphylaxis awareness
See appendix 1 – form 4 – Diabetes awareness
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#### 4. All staff understand the School's general emergency procedures

All staff know what action to take in the event of a medical emergency which includes how to contact First Aiders and what information to give them.

Training is refreshed for all staff at least once a year.

Action to take in a general medical emergency is given to staff in training at least once a year.

If a pupil needs to be taken to hospital, a member of staff will accompany them in the ambulance if parents are unavailable or a First Aider will ask parent to meet ambulance at casualty.

Staff should not take pupils to hospital in their own car.

# 5. The School has clear guidance on the administration of medication at the School

## Administration - Emergency Medication

All pupils with medical conditions have easy access to their emergency medication.

All pupils emergency medication is kept in the School Office ie inhalers, Epipens and insulin.

## Administration - general

All use of medication defined as a controlled drug, even if the student can administer the medication themselves, is done under the supervision of the First Aider in the School Office.

The School understands the importance of medication being taken as prescribed.

All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a student taking medication unless they have received written consent from the student's parent.

The First Aider in the School Office is able to administer medication. Training is given to all staff members who agree to administer medication to pupils, where specific training is needed. Our insurers provide full indemnity.

Parents at The MJS understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the School immediately.

All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed.

### 6. The MJS has clear guidance on the storage of medication at the School

#### Safe storage – emergency medication (Epipens)

Emergency medication is readily available to pupils who require it at all times in School Office during the School day. If the emergency medication is a controlled drug and needs to be locked up, the keys are readily available from the First Aider in the School Office.

All Epipens are kept in the School Office.

Pupils are reminded to carry their emergency medication with them.

#### Safe storage – non emergency medication

All non-emergency medication is kept in a secure location in the School Office. Pupils with medical conditions know where their medication is stored and how to access it.

Staff ensure that medication is only accessible to those for whom it is prescribed.

#### Safe storage – general

The School Office ensures the correct storage of medication at MJS.

At appropriate intervals during each year the First Aider in the School Office checks the expiry dates for all medication stored at MJS.

The First Aiders, along with the parents of pupils with medical conditions, ensure that all emergency and non-emergency medication brought into MJS is clearly labelled with the pupil's name, the name and dose of medication and the frequency of dose.

Some medication may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labelled in the School Office. This is in a secure area, inaccessible to unsupervised pupils.

It is the parent's responsibility to ensure new and in date medication comes into MJS on the first day of the new academic year.

### Safe disposal

Parents are asked to collect out of date medication.

If parents do not collect out of date medication, medication is taken to a local pharmacy for safe disposal. The First Aider in the School Office is responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check is done at least three times a year.

#### 7. The School has clear guidance about record keeping

## **Enrolment forms**

Parents are asked if their child has any health conditions on the pupil data sheet, which is filled out at the start of Year 3. Parents of all new pupils are asked to provide this information on enrolment forms.

#### **Healthcare Plans**

The MJS uses a healthcare plan to record important details about individual children's medical needs at MJS, their triggers, signs, symptoms, medication and other treatments. These healthcare plans are held in the School Office.

A healthcare plan, accompanied by an explanation of why and how it is used, is sent to MJS by medical professionals for pupils with a long term medical condition. This is sent:

- At the start of the School year
- At enrolment
- When a diagnosis is first communicated to the School

If a pupil has a short-term medical condition that requires medication during school hours, a medication form plus explanation is sent home for completion.

Parents are regularly reminded to inform the School Office if their child has a medical emergency or if there have been changes to their symptoms, or their medication and treatments change. This is to ensure the healthcare plans can be updated accordingly.

#### **School Medical register**

Healthcare plans are used to create a centralised register of pupils with medical needs.

8. The MJS ensures 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

# Physical environment

This school is committed to providing a physical environment that is accessible to pupils with medical conditions.

### **Exercise and physical activity**

The MJS understands the importance of all pupils taking part in sports, games and activities.

The MJS ensures classroom teachers and PE staff make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.

Teachers and PE staff are aware of pupils in their care who have been advised to avoid or take special precautions with particular activities.

The MJS ensures PE staff are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these triggers.

#### **Education and learning**

The MJS ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures appropriate adjustments and extra support are provided.

Staff are aware of the potential for pupils with medical conditions to have Special Educational Needs (SEN). Pupils with medical conditions who are finding it difficult to keep up

with their studies are referred to the SEN Co-ordinator. The school's SEN Co-ordinator consults the student, parents and student's healthcare professional to ensure the effect of the student's condition on their school work is properly considered.

# 9. Each member of the School and health community knows their roles and responsibilities in maintaining an effective medical conditions policy

This School works in partnership with all interested and relevant parties including all School staff, parents, employers and community healthcare professionals to ensure the policy is planned, implemented and maintained successfully.

The following roles and responsibilities are used for the medical policy at this School and MJS. These roles are understood and communicated regularly.

#### **Employer**

The employer has a responsibility to:

- Ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips.
- Make sure the medical policy is effectively monitored and evaluated and regularly updated.
- Ensure that our insurance provides indemnity to staff who volunteer to administer medication to pupils with medical conditions.

### **Principal**

The Principal has a responsibility to:

- Ensure the school is inclusive and welcoming and that the Medical Conditions Policy is in line with local and national guidance and policy frameworks.
- Liaise between interested parties including pupils, school staff, Special Educational Needs Co-ordinators, pastoral support/welfare officers, Support for Learning assistants, parents and governors.
- Ensure the policy is put into action, with good communication of the policy to all.
- Ensure every aspect of the policy is maintained.
- Ensure information held by the school is accurate and up to date and that there are good information sharing systems in place using student's healthcare plans.
- Ensure student confidentiality.
- Assess the training and development needs of staff and arrange for them to be met.
- Ensure all supply staff and new teachers know of the Medical Conditions Policy and how to access this on the website.
- Update the medical policy at least once a year according to review recommendations and recent local and national guidance and legislation.
- Arrange regular training for School staff in managing the most common medical conditions in the School

## All School staff

All staff have a responsibility to:

- Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.
- Understand the Medical Conditions Policy.
- Know which pupils in their care have a medical condition.
- Allow all pupils to have immediate access to their emergency medication.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- Ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom.
- Be aware of pupils with medical conditions who may be experiencing bullying or need extra social support.
- Ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- Ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

#### **Teaching staff**

Teachers have a responsibility to:

- Ensure pupils who have been unwell catch up on missed school work.
- Be aware that medical conditions can affect a student's learning and provide extra help when pupils need it.
- Liaise with parents, the student's healthcare professional and Special Educational Needs Co-ordinator if a pupil is falling behind with their work because of their condition.

#### First aiders

First aiders have a responsibility to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards within the School.
- When necessary ensure that an ambulance or other professional medical help is called.
- Check medication held in the School annually for expiry dates and dispose of accordingly.
- Administer medication to pupils as prescribed.

#### **Special Educational Needs Co-ordinator**

SENCO's have a responsibility to:

- Help update the school's Medical Conditions Policy.
- Know which pupils have a medical condition and which have special educational needs because of their condition.
- Ensure teachers make the necessary arrangements if a student needs special consideration or access arrangements in exams or coursework.
- Ensure healthcare plans are completed and reviewed annually

#### Local doctors and specialist healthcare professionals

Individual doctors and specialist healthcare professionals caring for pupils who attend the school have a responsibility to:

- Where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours.
- Ensure the child or young person knows how to take their medication effectively.
- Ensure children and young people have regular reviews of their condition and their medication.
- Provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the student and their parents).

#### **Pupils**

The pupils have a responsibility to:

- Treat other pupils with and without a medical condition equally.
- Tell their parents, teacher or nearest staff member when they are not feeling well.
- Let a member of staff know if another student is feeling unwell.
- Treat all medication with respect.
- Know how to gain access to their medication in an emergency.
- Ensure a member of staff is called in an emergency situation.

#### Parents\*

The parents of pupils have a responsibility to:

- Tell the school if their child has a medical condition.
- Ensure the School has a complete and up-to-date Healthcare plan for their child.
- Inform the School about the medication their child requires while taking part in visits, outings or field trips and other out-of-School activities.
- Tell the School about any changes to their child's medication, what they take, when and how much.
- Inform the School of any changes to their child's condition.
- Ensure their child's medication and medical devices are labelled with their child's full name.
- Provide the School with appropriate spare medication labelled with their child's name.
- Ensure medication is within expiry dates.
- Keep children at home if they are not well enough to attend the School.
- Ensure their child catches up on any school work they have missed.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional.

\*The term 'parent' implies any person or body with parental responsibility such as foster parent or carer.

# Where a student is returning to school following a period of hospital education or alternative provision (including home tuition)

This School will work with the Local Authority, education provider, parents, school's governing body, all school staff, catering staff, healthcare professionals and student to ensure that they receive the support they need to reintegrate effectively.

#### Appendix 1 - Form 1

#### Asthma awareness for School staff

# What to do in an asthma attack

- Keep calm.
- Encourage the child or young person to sit up and slightly forward.
- Make sure the child or young person takes two puffs of reliever inhaler (usually blue) immediately preferably through a spacer.
- Ensure tight clothing is loosened.
- Reassure the child.
- Ring First Aider mobile numbers to come to the student.

# If there is no immediate improvement

• Continue to make sure the child or young person takes one puff of reliever inhaler every minute for five minutes or until their symptoms improve.

#### The First Aider will call 999 or a doctor urgently if:

- The child or young person's symptoms do not improve in 5–10 minutes.
- The child or young person is too breathless or exhausted to talk.
- The child or young person's lips are blue.
- They are are in doubt.

Ensure the child or young person takes one puff of their reliever inhaler every minute until the ambulance or doctor arrives.

It is essential for people who work with children and young people with asthma to know how to recognise the signs of an asthma attack and what to do if they have an asthma attack.

## Common signs of an asthma attack are:

- coughing
- shortness of breath
- wheezing
- tightness in the chest
- being unusually quiet
- difficulty speaking in full sentences
- sometimes younger children express feeling tight in the chest as a tummy ache.

#### After a minor asthma attack

- Minor attacks should not interrupt the involvement of a student with asthma in School.
- When the student feels better they can return to School activities.
- The parents/carers must always be told if their child has had a severe asthma attack.

#### Important things to remember in an asthma attack

- Never leave a student having an asthma attack.
- If the student does not have their inhaler and/or spacer with them, send another teacher or student to their classroom or assigned room to get their spare inhaler and/or spacer. The MJS has Salbutamol inhalers, kept by the First Aider team, for emergency use.
- In an emergency situation School staff are required under common law, duty of care, to act like any reasonably prudent parent.
- Reliever medicine is very safe. During an asthma attack do not worry about a student overdosing.
- Send another student to get another teacher/adult if an ambulance needs to be called.
- Contact the student's parents or carers immediately after calling the ambulance/doctor.
- A member of staff should always accompany a student taken to hospital by ambulance and stay with them until their parent or carer arrives.

#### Appendix 1 – Form 2

#### **Epilepsy awareness for School staff**

### **Complex partial seizures**

#### **Common symptoms**

- The person is not aware of their surroundings or of what they are doing
- Plucking at their clothes
- Smacking their lips
- Swallowing repeatedly
- Wandering around

# Ring First Aider mobile numbers for a First Aider to come to the student

#### Call 999 for an ambulance if...

- You know it is the person's first seizure
- The seizure continues for more than five minutes
- The person is injured during the seizure
- You believe the person needs urgent medical attention

### Do...

- Guide the person from danger
- Stay with the person until recovery is complete
- Be calmly reassuring

#### Don't...

- Restrain the person
- Act in a way that could frighten them, such as making abrupt movements or shouting at them
- Assume the person is aware of what is happening, or what has happened
- Give the person anything to eat or drink until they are fully recovered
- Attempt to bring them round

#### **Tonic-clonic seizures**

#### Common symptoms:

- the person goes stiff,
- loss of consciousness
- falls to the floor

#### Do...

- Protect the person from injury (remove harmful objects from nearby)
- Cushion their head
- Look for an epilepsy identity card/identity jewellery
- Aid breathing by gently placing the person in the recovery position when the seizure has finished
- Stay with them until recovery is complete
- Be calmly reassuring

#### Don't...

- Restrain the person's movements
- Put anything in their mouth
- Try to move them unless they are in danger
- Give them anything to eat or drink until they are fully recovered
- Attempt to bring them round

# Call 999 for an ambulance if...

- You know it is the person's first seizure
- The seizure continues for more than five minutes
- One seizure follows another without the person regaining consciousness between seizures
- The person is injured
- You believe the person needs urgent medical treatment.

### Appendix 1 - Form 3

#### Anaphylaxis awareness for staff

#### **ANAPHYLAXIS**

#### Symptoms of allergic reactions:

#### Ear/Nose/Throat - Symptoms:

runny or blocked nose, itchy nose, sneezing, painful sinuses, headaches, post nasal drip, loss of sense of smell/taste, sore throat/swollen larynx (voice box), itchy mouth and/or throat and blocked ears.

#### **Eye - Symptoms:**

watery, itchy, prickly, red, swollen eyes. Allergic 'shiners' (dark areas under the eyes due to blocked sinuses).

#### Airway - Symptoms:

wheezy breathing, difficulty in breathing and or coughing (especially at night time).

#### Digestion:

swollen lips, tongue, itchy tongue, stomach ache, feeling sick, vomiting, constipation and or diarrhoea.

#### Skin:

Urticaria - wheals or hives-bumpy, itchy raised areas and or rashes. Eczema -cracked, dry, weepy or broken skin. Red cheeks. Angiodema - painful swelling of the deep layers of the skin.

### Symptoms of Severe Reaction/ Anaphylaxis:

These could include any of the above together with:

- Difficulty in swallowing or speaking.
- Difficulty in breathing -severe asthma
- Swelling of the throat and mouth
- Hives anywhere on the body or generalized flushing of the skin
- Abdominal cramps, nausea and vomiting
- Sudden feeling of weakness (drop in blood pressure)
- Alterations in heart rate (fast Pulse)
- Sense of Impending doom (anxiety/panic)
- Collapse and unconsciousness

#### **TREATMENT**

- Ring Frist Aider mobiles and send student/member of staff to Pastoral Office to ask for a First Aider to come to student.
- Send a student or member of staff to the Pastoral Office to collect 2<sup>nd</sup> Epipen and to ask them to ring for an ambulance and parents.
- If student conscious keep them in an upright position to aid breathing. If unconscious then place in recovery position.
- Trained member of staff to administer Epipen as per training. Record time of giving.
- If no improvement within 5 minutes then 2"d Epipen to be administered. Keep used Epipens and give to paramedics when they arrive.



#### Appendix 1 - Form 4

#### Diabetes awareness and treatment for staff

#### What is it?

Abnormal fluctuations in blood sugar can lead to someone with diabetes becoming unwell and, if untreated, losing consciousness.

There are two conditions associated with diabetes - hyperglycaemia (high blood sugar) and hypoglycaemia (low blood sugar).

Hypoglycaemia is the more common emergency which affects brain function and can lead to unconsciousness if untreated.

#### Signs and symptoms:

# Hypoglycaemia:

- Hunger
- Feeling 'weak' and confused
- Sweating
- Dry, pale skin
- Shallow breathing

# Hyperglycaemia:

- Thirst
- Vomiting
- Fruity/sweet breath
- Rapid, weak pulse

#### First aid aims

# Hypoglycaemia:

- Raise blood sugar level as quickly as possible
- Get casualty to hospital, if necessary

#### Hyperglycaemia:

• Get casualty to hospital as soon as possible

#### **Treatment**

# Hypoglycaemia:

- Sit casualty down
- If conscious, give them a sugary drink, chocolate or other sugary food
- If there's an improvement, offer more to eat or drink. Help the casualty to find their glucose testing kit to check their level. Advise them to rest and see their doctor as
- soon as possible.
- If consciousness is impaired, do not give them anything to eat or drink. Dial 999 for an ambulance

### Hyperglycaemia:

#### Call 999 immediately

#### **Further actions**

If the casualty loses consciousness

- Open airway and check breathing
- Place them in recovery position
- Prepare to give resuscitation