



Ark Soane Academy

Supporting students with Medical Needs Policy

2022-23

Purpose:

The purpose is to outline how we meet the needs of students with identified medical conditions. This policy has been updated to take into account statutory guidance April 2014 from the DFE on Supporting Students with Medical Needs (because of the Children and Families Act 2014).

This policy complies with all statutory requirements, especially those relating to the legislation contained in the Equality Act 2010 and the Children and Families Act 2014. This policy was created by the academy SENDCo in collaboration with the Academy Leadership Team, considering the views of students, parents, and relevant other stakeholders.

Date of last review:	June 2022	Author:	Isobel Currie
Date of next review:	June 2023	Owner:	Isobel Currie
Type of policy:	<input checked="" type="checkbox"/> Network-wide <input checked="" type="checkbox"/> Tailored by school	Approval:	Management Team
School:	Ark Soane Academy	Key Contact Name:	Governance Team
Key Contact Email:	governance@arkonline.org	Key Contact Phone:	0203 116 6333

Parents/Carers must have prime responsibility for their son/daughter's health.**They:**

- must provide the Academy with information about their son/daughter's medical condition - parents should give details (where appropriate) in conjunction with the student's GP or paediatrician
- are responsible for supplying information about medicines that their son/daughter needs to take at the Academy, and for letting the Academy know of any changes to the prescription or the support needed
- should authorise and supply appropriate pain killers for their son/daughter's use if he/she suffers regularly from acute pain such as migraine. (Refer to "Medication" for procedure)

The school is responsible for:

- ensuring that students with medical needs receive proper care and support at the Academy, including managing medication
- implementing the Governing Body's policy and for developing detailed procedures, including managing medication
- agreeing arrangements with the student (where he/she has the capacity) or otherwise the parent, who should have access to records and other information about their son/daughter

- ensuring staff volunteering to help students with medical needs receive proper support and training where necessary
- making sure that medicines are stored safely
- day-to-day decisions about administering medication
- making sure that all parents are aware of the Academy's policy and procedures for dealing with medical needs
- agreeing with the parents of a student, with medical needs, exactly what support the Academy can provide ensuring that the individual needs of each student are met with a full assessment of how medical needs impact on the student's learning
- train all teachers so they are able to best support any student with a medical need.

Teachers who have students with medical needs in their group should:

- understand the nature of the condition, and when and where the student may need extra attention, making use of information provided by the student's parents and health professionals
- flag concerns around students and medical conditions to the SENDCO who can liaise with the parent / carer.

All staff have to:

- be aware of the likelihood of an emergency arising and what action to take if one occurs
- be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures
- know who is responsible for carrying out emergency procedures in the event of an urgent situation
- ensure parents are made aware of the need to notify the Academy of student's medical needs, as per the published policy on the website.
- pay full attention to the medical needs of any student and how their needs are best met so they can fully support each student in their learning

OVERALL RESPONSIBILITY

The colleague with named responsibility for overseeing the medical needs and how they are best met is the SENDCO. They are supported by the admin team.

Together they will:

- Coordinate training and information provision for a student with a medical need
- Ensure appropriate risk assessments are undertaken for any student with a medical need who will be on a trip and other activities outside the classroom where this is needed
- Implement and monitor individual healthcare plans (IHCPs) including liaison with external healthcare professionals/agencies as required
- Brief supply teachers as required
- Ensure, in event of staff absence, appropriate cover is in place.

INDIVIDUAL HEALTHCARE PLANS (IHCPs) – see appendix A

Students with identified medical needs which impact on their day-to-day routine or have high levels of risk will have an Individual Health Care Plan. These will be drawn up by the SENDCO to reflect individual need and parents/carers will be emailed or written to using the template for the policy and a digital copy on provision mapper (appendix F).

The following will be considered when deciding on what information to include:

- The medical condition, its triggers, signs, symptoms and treatments
- The student's resulting needs including medication and how this might need to be managed in the academy setting e.g., crowded corridors, travel time
- Specific support for the student's educational, social and emotional needs
- The level of support needed including emergencies
- Who will provide support, their training need and expectations including cover for their absence?
- Who needs to be aware of the student's condition?
- Arrangements for written permission from parents and the principal for medication to be administered by a member of staff or self-administered
- Arrangements for trips and outside of classroom experiences
- Designated individuals for confidential issues to be raised with
- Emergency provision and contacts

The SENDCO will provide a list of all students in the Academy with medical needs. The list with photographs of the relevant students is placed on the Academy shared area and all staff will be aware of how to access. It will also be on display in the medical room. There will also be an updated handbook with guidance and photos available for staff and a spreadsheet for staff including those that require passes for medication, and toilets.

First Aid arrangements

The Health and Safety (First Aid) Regulations 1981 (Appendix 4) contain no requirement that first aid provision in a school take students into account, only employees and visitors. Nevertheless, the academy has a clear moral and civil law duty to make reasonable provision for students. In practice, therefore, "visitors to the school" are defined to include students. Please also see the Academy first aid policy for further guidance beyond this overview.

Common to all schools we have designated first aiders. Our list of qualified first aiders is published and updated annually. In the event of an injury occurring to a member of staff or visitors to the Academy, the admin team should be informed and a designated first aider sent for, as soon as possible. Colleagues should, of course, use their common sense and avoid interrupting the first-aider's other duties for very minor incidents. In the event of an injury to a student requiring treatment, the admin team will ensure that parents are notified.

The main task of the trained first aider is to take charge of the situation, in the event of a serious injury or illness, and to decide whether an ambulance should be summoned. An ambulance should only be summoned by the designated first-aiders, or EWO, and not by

other members of staff, **unless instructed to do so by the principal (see Appendix E)**. While it is not essential that a responsible adult accompanies a student, who is taken by ambulance to hospital, it is highly desirable if possible. This person would normally be a parent but **on no account should provision of urgently needed medical treatment be delayed pending the arrival at the Academy of parents etc.** Meanwhile the Academy's first aiders are responsible for administering emergency first aid and making an injured party as comfortable as possible. Concern is sometimes expressed about the legal position of first aiders, if they should cause injury to a casualty. An employer is vicariously liable for the negligent actions of employees who are acting within the scope of their employment. Cover against any award of damages in such circumstances is provided by the employer's liability insurance. Staff can be reassured in this respect, whether they are trained first-aiders or not, if they endeavour to act in the best interests of the employer.

Medication

If a child suffers from a particular condition e.g., Asthma, which requires medication, parents/carers must inform the Academy at the earliest opportunity. It will be necessary for parents/carers to complete a protocol giving full details of the medical condition (Appendix B). They will also need to provide the admin team with a supply of the prescribed medication for emergencies. This must be supplied in the original container with the dispensing chemist label attached.

Non-prescription medication can only be held by the Academy for half a term. All medication will be disposed of after this period. If the child requires 'over the counter' medication for longer than half a term, parents/carers will need to obtain a prescription and follow the above procedure. Medicines must be stored securely in the medical room. The Academy has a Controlled Drug Cabinet stored within a locked cupboard in the medical room. It is bolted to the floor and wall within the cupboard and kept always locked. Two members of staff must sign to say when a student has taken any medication which is classified as a controlled drug e.g., Ritalin. A Controlled Drugs Register (Appendix C) is kept detailing the records of medication in and medication out and half-termly audit is done on this register.

The admin team have a recording procedure which keeps individual records for future reference. This information is kept on student files for 6 years after they have left the Academy.

Parents/carers will be made aware of the fact that over-the-counter drugs are kept for a maximum of half a term.

For students with allergies including those requiring EpiPens then an IHCP will be in place and an agreed Medicine record. For high need there will be a process in place to ensure the safety of the young person is central e, g, Asthma, Epi-Pen conditions, or Epilepsy (See Appendixes G-I).

Academy Staff Giving Medication

There is no legal duty which requires academy staff to administer medication; this is a voluntary role. Members of staff who agree to accept responsibility for administering prescribed medication to a student will have proper training and guidance (Appendix D)

Short-Term Medical Needs

Medication should only be brought to the Academy when it is essential. Most students will need to take medication at the Academy at some time in their Academy life. Usually this will be for a short period only. To allow students to do this will minimise the time they need to be absent from Academy.

School Visits

In the case of a residential visit the residential first aider will administer first aid and complete a report in line with the procedures of the residential centre. In the case of any day visits, a medical travel kit will be carried in event of need.

Non-Prescription Medication

Academy staff must not give non-prescribed medication to students

Long-Term Medical Needs

The Academy must have sufficient information about the medical condition of any student with long-term medical needs. For students who attend hospital appointments on a regular basis, special arrangements may also be necessary. The Academy draws up a written IHCP for such students.

Administering Medication

No student should be given medication without his or her parent's written consent. If in doubt about any of the procedures the member of staff will check with the parents or a health professional before taking further action.

Intimate or Invasive Treatment

Some Academy staff are understandably reluctant to volunteer to administer intimate or invasive treatment because of the nature of the treatment, or fears of accusations of abuse. Parents must respect such concerns and must not be allowed to put any pressure on staff to assist in treatment unless they are entirely willing. The Primary Care Trust (PCT) will have a 'named professional' to whom the Academy can refer for advice. Where possible, the arrangement should be made for two adults, one the same gender as the student, to be present for the administration of intimate or invasive treatment, this minimises the potential for accusations of abuse. Staff should protect the dignity of the student as far as possible, even in emergencies.

Self-Management

It is good practice to allow students who can be trusted to do so to manage their own medication and staff may only need to supervise this. Students should know where their own medication is stored and who holds the key. A few medicines, such as asthma inhalers, are readily available to students and must not be locked away. Where the Academy locks away

medication that a student might need in an emergency, all staff should know where to obtain keys to the medicine cabinet.

Refusing Medication

If students refuse to take medication, Academy staff should not force them to do so. The Academy should inform the son/daughter's parents as a matter of urgency.

Unacceptable Practice - Under no circumstances must staff

- Stop a student from accessing their inhaler and medication when and where necessary
- Assume that every student with the same condition needs the same treatment
- Ignore the views of the students or the parents or medical opinion
- Send a child with a medical condition home repeatedly or prevent them from taking part in activities (unless recorded in the IHCP)
- Send a student who is ill to the medical room on their own or with someone unsuitable
- Penalise a student for their attendance record if it relates to medical appointments
- Prevent students from eating, drinking or taking toilet breaks if required to manage the medical condition
- Require parents or carers to attend school to administer medicine or toileting

Complaints

Any parent, carer or healthcare professional can request a copy of the Academy Complaints Policy if they wish to complain. The Academy will then follow the policy in dealing with any complaint. We would wish to avoid any complaints and so every opportunity must be taken to avoid this from happening where possible.

APPENDIX A: INDIVIDUAL HEALTHCARE PLAN (IHCP) – paper copy

Name of school/setting

Ark Soane Academy

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the student's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)?

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

APPENDIX B: PARENTAL AGREEMENT FOR SETTING TO ADMINISTER MEDICINE

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	Ark Soane Academy
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	Admin office

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the

school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

APPENDIX C: RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL CHILD

Name of school/setting	Ark Soane Academy
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

**C: RECORD OF MEDICINE ADMINISTERED TO AN INDIVIDUAL CHILD
(CONTINUED)**

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

APPENDIZ D: STAFF TRAINING RECORD – ADMINISTRATION OF MEDICINES (also logged on Medical Needs list)

Name of school/setting	Ark Soane Academy
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer’s signature

Date

I confirm that I have received the training detailed above.

Staff name	Signature	Date

APPENDIX E: CONTACTING EMERGENCY SERVICES

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. your telephone numbers
2. your name
3. your location as follows [Ark Academy Soane, Gunnersbury Lane, W3 8EA]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. put a completed copy of this form by the phone

APPENDIX F: MODEL LETTER/EMAIL INVITING PARENTS TO CONTRIBUTE TO INDIVIDUAL HEALTHCARE PLAN DEVELOPMENT

Dear Parent/carer

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting students at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each student needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, students, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or student support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Isobel Currie | SENDCO | Ark Soane Academy
i.currie@arksoane.org

APPENDIX G: ASTHMA COMPLEMENTARY FORM FOR IHCP

Asthma

Name:	
Date of Birth:	
Emergency Contact:	
GP Name & Surgery:	Specialist Nurse/Doctor:
Contact Number:	Hospital & Contact Number:

I have discussed this care plan with the health representative from school and I am satisfied that it reflects my child's health needs in school.

Signature of Parent/Guardian: _____ Date: _____

Print Name: _____ Review Date: _____

Medical Need: Asthma

What triggers my asthma: <ul style="list-style-type: none">• Pollen• Animal fur• Exercise• Smoke• Change in weather• Illness		
Medication: Name of prescribed medication: Salbutamol inhaler Carries own medication: No Location of medication: Primary Medical room (00-07)		
In an emergency, I give consent for my child to receive a generic reliever inhaler: Yes No		
Signature: _____		Date: _____
Print Name: _____		
Health Care Needs in School:		
Uses a spacer device with the reliever inhaler:	Yes	No
May need to take reliever inhaler before physical exercise:	Yes	No
May need to take reliever inhaler after physical exercise:	Yes	No

Health Care Plan completed by:

Signature:

Actions to Relieve Asthma Symptoms

Never leave someone with asthma symptoms alone

People with asthma usually deal with their own attacks by using a 'reliever' inhaler at the first sign of an attack. Most **relievers have a blue cap** and **preventers have a brown cap**. The preventers should not be used during an asthma attack.

Symptoms of an asthma attack:

- Difficulty breathing;
- Wheezing;
- Difficulty speaking, leading to short sentences;
- Coughing;
- Distress and anxiety;
- A grey-blue tinge to the lips, earlobes and fingernails;
- Exhaustion in a severe attack;
- They may stop breathing and become unresponsive.

Actions:

1. **Keep calm and reassure the casualty.** Get them to take the usual dose of their reliever inhaler; use a spacer if you have one. Ask them to breathe slowly and deeply.
2. **Sit them down** in a position they find most comfortable.
3. **A mild attack should ease within a few minutes.** If it does not, the casualty must take 1 or 2 puffs from the inhaler every 2 minutes until they have had 10 puffs.
4. **Call 999 if the attack is severe** and one of the following has occurred:
 - a. The inhaler has not worked;
 - b. They are getting worse;
 - c. Breathlessness makes talking difficult;
 - d. Is becoming exhausted.
5. **Help them** to continue to use their inhaler as required.
6. **Monitor their vital signs**, until help arrives:
 - a. Breathing;
 - b. Pulse
 - c. Level of response

APPENDIX H: EPI-PEN FLOWCHART AND FORMS

Emergency instruction for an allergic reaction – EpiPen®	
Name of student	
Date of birth	
Allergic to	
ASSESS THE SITUATION	
Send someone to get the emergency kit, which is kept in: Medical room (student will have an Epi Pen in bag)	

IT IS IMPORTANT TO REALISE THAT THE STAGES DESCRIBED BELOW MAY MERGE INTO EACH OTHER RAPIDLY AS A REACTION DEVELOPS.

MILD REACTION

- Generalised itching
- Mild swelling of lips and face
- Feeling unwell / Nausea

ACTIONS

- **Give _____ (antihistamine) immediately**
- **Monitor student until you are happy, he/she has returned to normal and contact parent/carer**

SEVERE REACTION

- Difficulty breathing / choking / coughing
- Severe swelling of lips / eyes / face
- Pale / floppy
- Collapsed / unconscious
- Vomiting

ACTIONS

1. **Give _____ EpiPen® out and send someone to telephone 999 and tell the operator that the student is having an 'ANAPHYLACTIC REACTION'.**
2. **Sit or lay the student on floor.**
3. **Take EpiPen® and remove grey safety cap.**
4. **Hold EpiPen® approximately 10cm away from outer thigh.**
5. **Swing and jab black tip of EpiPen® firmly into outer thigh. MAKE SURE A CLICK IS HEARD AND HOLD IN PLACE FOR 10 SECONDS**
6. **Remain with the student until ambulance arrives.**
7. **Place used EpiPen® into container without touching the needle.**
8. **Contact parent / carer as overleaf.**

EMERGENCY CONTACT DETAILS

Parent / carer 1	
Parent / carer 2	
Other	

Signed SENDCO: _____

Mr Smith

Signed Parent/carer: _____

Print Name: _____

Date: _____

<i>Date</i>	<i>Time</i>	<i>Given by</i>	<i>Observation/evaluation of care</i>	<i>Signed</i>

CHECK EXPIRY DATE OF EPIPEN® EVERY FEW MONTHS

APPENDIX H: EPILEPSY COMPLEMENTARY FORM FOR IHCP

Name of student	
Date of birth	
Tutor group	

Initial medication prescribed	
Route to be given	

Usual presentation of seizures
When to give medication
Usual recovery from seizure
Action to be taken if initial dose not effective

This procedure is agreed with parents' consent. Only staff trained to administer seizure medication will perform this procedure. All seizures requiring treatment in school will be recorded. This procedure will be reviewed annually unless change of recommendations instructed sooner.

This information will not be locked away to ensure quick and easy access should it be required.

SEIZURE MEDICATION CHART

Student name	
Medication type / dose	
Criteria for administration	

<i>Date</i>	<i>Time</i>	<i>Given by</i>	<i>Observation/evaluation of care</i>	<i>Signed</i>

APPENDIX I: DIABETES COMPLEMENTARY FORM FOR IHCP

Diabetes – Type 1

Name:	
Date of Birth:	
Emergency Contact: Ms Harrak (mum) – Mr Ghacham (dad) –	
GP Name & Surgery:	Specialist Nurse/Doctor:
Contact Number:	

I have discussed this care plan with the health representative from school and I am satisfied that it reflects my child's health needs in school.

Signature of Parent/Guardian: _____ Date: _____

Print Name: _____ Review Date: _____

Medical Need: Diabetes – Type 1

<p>Blood Glucose Testing:</p> <p>During the school day they should be between</p> <p>Is able to self-test Need supervision when testing Needs a trained member of staff to do the testing</p> <p>Carries own monitoring equipment:</p> <p>Location of monitoring equipment:</p>
<p>Insulin Injections:</p> <p>Needs insulin injections during the school day:</p> <p>Name of prescribed medication:</p> <p>Carries own mediation:</p> <p>Location of medication:</p> <p>Location of Sharps Box:</p>
<p>Health Care Needs in School:</p> <ul style="list-style-type: none">•

Health Care Plan completed by:

Signature: _____ Date: _____

Actions for diabetes

Never leave someone who is having a diabetic emergency

Diabetes is a lifelong medical condition where the body cannot produce enough insulin. Sometimes people who have diabetes may have a diabetic emergency, where their blood sugar becomes either too high or too low. Both conditions are potentially serious and may need treatment in hospital.

Hypoglycaemia – Low Blood Sugar – below 4mmol/L

Too much insulin can cause low blood sugar or a hypo. This often happens when someone with diabetes misses a meal or does too much exercise.

What to look out for:

- Weakness, faintness or hunger
- Confusion and irrational behaviour
- Sweating with cold, clammy skin
- Rapid pulse
- Trembling

How to treat:

1. Have a sugary drink or snack – small glass of fizzy drink, handful of sweets or 4-5 energy tablets
2. Test blood after 10 minutes – if still below 4mmol/L, treat again and retest in 10 minutes
3. Eat a main meal (containing carbohydrates)

Hyperglycaemia – High Blood Sugar – over 10mmol/L

Too little insulin can cause hyperglycaemia. If your blood sugar levels are high you will need to monitor the levels closely and test regularly until they have become more stable.

What to look out for:

- Warm, dry skin
- Rapid pulse and breathing
- Fruity sweet breath
- Really thirsty
- Drowsiness, leading to unresponsiveness if not treated

How to treat:

- Drink plenty of water or sugar free fluid
- Adjust insulin dose to allow blood sugar levels to drop

Emergency symptoms:

If you have high blood sugar levels and the following symptoms seek medical attention straight away. These could be a sign of more serious complications from high blood sugar:

- Feeling sick,
- Tummy pains and diarrhoea
- Rapid, deep breathing
- Fever
- Signs of dehydration
- Difficulty staying awake