



Aletheia
Academies Trust



Rainham Mark Grammar School Policy

Supporting Students with Medical Needs and the Administration of Medication Policy

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[The Children and Families Act 2014](#) includes a duty for schools to support children with medical conditions.

Where students have a disability, the requirements of the Equality Act 2010 will also apply. Where students have an identified special need, the SEN Code of Practice will also apply.

All students have a right to access the full curriculum, adapted to their medical needs, and to receive the on-going support, medicines or care that they require at school to help them manage their condition and keep them well. It is recognised that medical conditions may affect social and emotional development as well as having educational implications.

Rainham Mark Grammar School will build relationships with healthcare professionals and other agencies in order to effectively support students with medical conditions.

This policy is based on the Department for Education's statutory guidance: [Supporting Pupils with Medical Conditions at School](#)

Roles and Responsibilities

The Governing Body is responsible for determining the school's general policy and ensuring that arrangements are in place to support students with medical conditions.

The Headteacher is responsible for:

- Overseeing the management and provision of support for students with medical conditions;
- Ensuring that sufficient, appropriately trained numbers of staff are available to implement the policy and deliver IHCPs, including to cover absence and staff turnover;
- Ensuring that staff are appropriately insured and are aware that they are insured.

Rainham Mark Grammar School has designated a named person (Dani Stewart) responsible for students with medical conditions. This person is responsible for:

- Informing relevant staff of medical conditions;
- Arranging training, which will be provided by qualified healthcare professionals, for identified staff;
- Assisting with risk assessment for school visits and other activities outside the normal timetable;
- Developing, monitoring and reviewing IHCPs;

- Working together with parents, students, healthcare professionals and other agencies.

Teachers and support staff are responsible for:

- The day-to-day management of the medical conditions of students they work with, in line with training received and as set out in IHCPs;
- Working with the named person, ensuring that risk assessments are carried out for visits and other activities outside the normal timetable.

N.B. Any teacher or support staff member may be asked to provide support to a student with a medical condition, including administering medicines. However, no member of staff can be required to provide this support. Staff must not give prescription medicines or undertake health care procedures without appropriate training.

Parents are responsible for:

- Providing the school with sufficient and up-to-date information about their child's medical needs
- Being involved in the development and review of their child's IHCP and may be involved in its drafting
- Carrying out any actions they have agreed to as part of the implementation of the IHCP e.g. provide medicines and equipment and checking that the school has in date supplies of any such medication or equipment.

Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHCPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the named person. Training will be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils; fulfil the requirements in the IHCPs and help staff to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures.

The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents will be asked for their views. They should provide specific advice, but should not be the sole trainer.

Procedure When Notification is Received that a Student has a Medical Condition

The named person will liaise with relevant individuals including, as appropriate, parents, the individual student, health professionals and other agencies, to decide on the support to be provided to the student. Where appropriate, an IHCP will be drawn up. Appendix A outlines the process for developing IHCPs.

This covers notification prior to admission, procedures to cover transitional arrangements between schools or alternative providers, and the process to be followed upon reintegration after a period of absence or when pupils' needs change. For children being admitted to Rainham Mark Grammar School for the first time with good notification given, the arrangements will be in place for the start of the relevant school term. In other cases, such as a new diagnosis or a child moving to Rainham Mark Grammar School mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

Rainham Mark Grammar School does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers.

Individual Healthcare Plans (IHCP)

An IHCP will help to ensure that the school effectively supports students with medical conditions. An IHCP will be written for students with a medical condition that is long term and complex.

It will clarify what needs to be done, when and by whom and will include information about the students' condition, special requirements, medicines required, what constitutes an emergency and action to take in the case of an emergency. Staff trained to deliver specific support for the student's condition will be indicated in the IHCP.

Where a student has SEN but does not have an EHCP, their special educational needs will be mentioned in their IHCP.

IHCPs will be reviewed annually, or earlier if evidence is provided that a student's needs have changed. They will be easily available to all who need to refer to them, whilst preserving confidentiality.

Individual healthcare plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate.

Where a child is returning to school following a period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

The Child's Role in Managing their own Medical Needs

If, after discussion with the parent/carer, it is agreed that the child is competent to manage their own medication and procedures, they will be encouraged to do so. This will be documented in the individual healthcare plan.

Wherever possible children will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-medication quickly and easily. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so. Parents will be informed so that alternative options can be considered.

Administering Medicines

Written consent from parents must be received before administering any medicine to a student at the school.

Medicines will only be accepted for administration if they are: prescribed; 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 be in date but will generally be available as an insulin pen or pump, rather than in its original container.

Medicines should be stored safely. Students should know where their medicines are at all times.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be contacted.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

Emergency Medication for Anaphylactic Shock

Pupils with a known allergy, for example, to wasp stings, food allergies and medications, should have an Individual Health Care Plan (IHCP), with an emergency action plan, completed by their healthcare professional (where possible).

Where an adrenaline auto-injector has been prescribed, the pupil's parent/carer should ensure that one in-date adrenaline auto injector (e.g. an Epi Pen) is kept in the school. The pupil should carry an auto injector on their person at all times during the school day. The second auto-injector should be kept in the School Office in a named container and be available for administering if the pupil goes into anaphylactic shock.

Controlled Drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

Activities Beyond the Usual Curriculum

We will actively support pupils with medical conditions to participate in day trips, residential visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible. When carrying out risk assessments, parents/carers, students and healthcare

professionals will be consulted where appropriate.

Emergency Procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHCPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

Unacceptable Practice

The following items are not generally acceptable practice with regard to students with medical conditions, although Rainham Mark Grammar School will use discretion to respond to each individual case in the most appropriate manner:

- Preventing students from accessing their inhalers and medication easily and administering their medication when and where necessary;
- Assuming that every student with the same condition requires the same treatment;
- Ignoring the views of the student or their parents, or ignoring medical evidence or opinion, (although this may be challenged);
- Sending students with medical conditions home frequently or preventing them from staying for normal school activities, including lunch, unless this is specified in their IHCPs;
- Penalising students for their attendance record if their absences are related to their medical condition - e.g. hospital appointments;
- Preventing students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- Preventing students from participating, or creating unnecessary barriers to students participating in any aspect of school life, including trips.

Supporting Children with Health Needs who cannot Attend School

Initially, the school will attempt to make arrangements to deliver suitable education for children with health needs who cannot attend school. Each case will be reviewed with regard to the individual circumstances of the child and family. These arrangements could include sending work home or setting work via Google classroom. Parents and pupils will be consulted about these arrangements. Pupils and parents will be offered a meeting before returning to school to discuss reintegration (such as phased return, additional requirements).

If the school can't make suitable arrangements, Medway/Kent LA will become responsible for arranging suitable education for these pupils. Decisions will be made as to if arrangements are suitable and the criteria for support being met.

In cases where the local authority make arrangements, the school will:

- Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the pupil
- Share information with the local authority and relevant health services as required
- Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully

When reintegration is anticipated, work with the local authority to:

- Plan for consistent provision during and after the period of education outside the school, allowing the pupil to access the same curriculum and materials that they would have used in school as far as possible
- Enable the pupil to stay in touch with school life (e.g. through newsletters, emails, or invitations to school events)
- Create individually tailored reintegration plans for each child returning to school
- Consider whether any reasonable adjustments need to be made

Record Keeping

The Governing Body will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school.

IHCPs are kept in a readily accessible place which all staff are aware of.

Meditracker is used to record electronically when medicines are administered and to notify parents of this.

Liability and Indemnity

Rainham Mark Grammar School insurers advise that the employers' and public liability covering the school meets the needs of the school in relation to the matters covered by this policy. Where necessary, risk assessments must be in place.

Complaints

An individual wishing to make a complaint about actions regarding the school's actions in supporting a student with medical conditions should discuss this with the Inclusion Lead in the first instance.

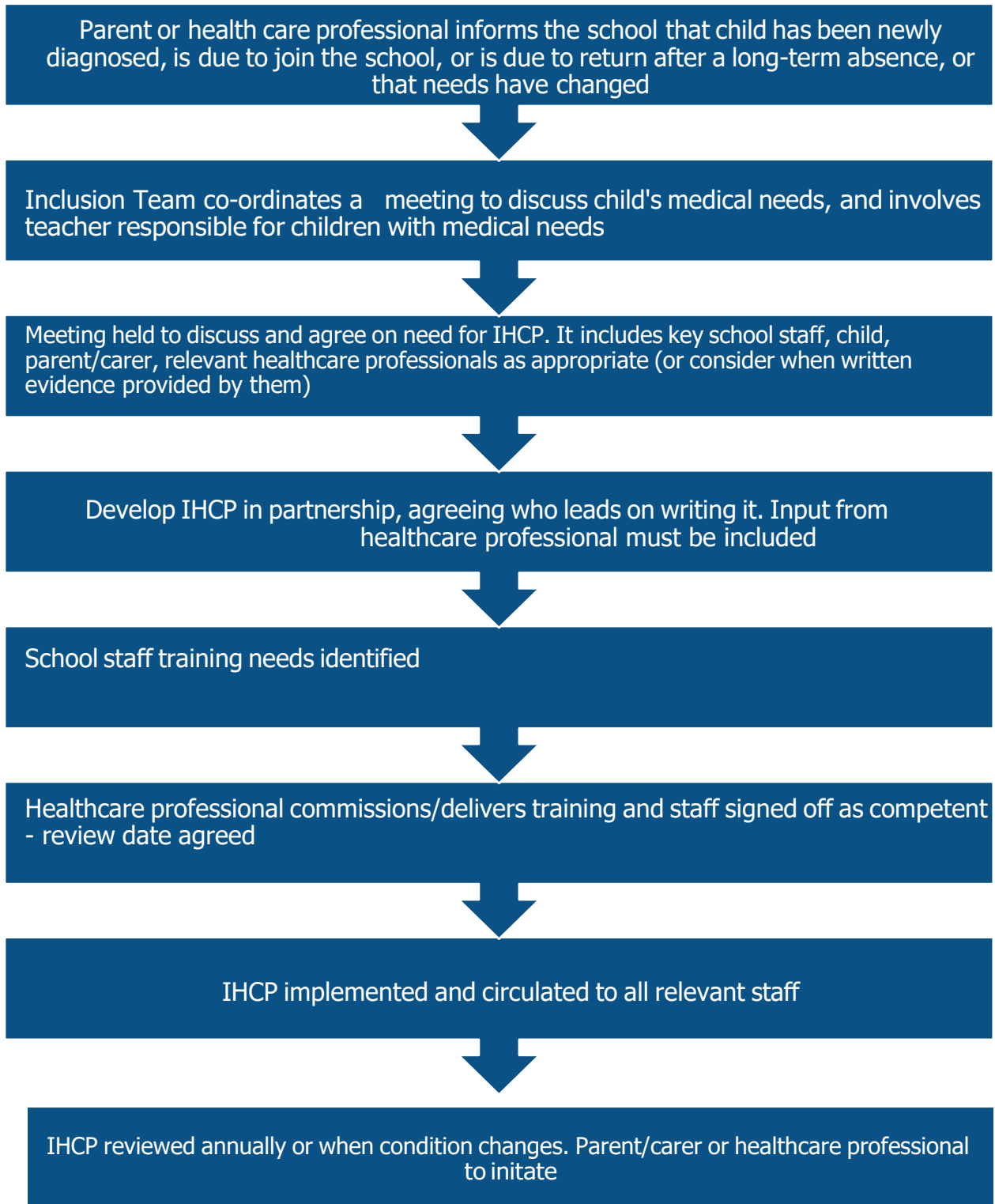
If the issue is not resolved, then a formal complaint may be made, following the Trust Complaints Procedure.

Links with other Policies

This Supporting Pupils with Medical Conditions policy is linked to the following policies:

- Accessibility plan
- Allergen and Anaphylaxis Policy
- Complaints Policy
- Equality Information and Objectives Policy
- First aid in school
- Health and Safety Policy
- Safeguarding Policy
- Special Educational Needs Information Report and Poli

Appendix A: Process for Developing Individual Health Care Plans



APPENDIX B Asthma specific guidance

Introduction

Asthma is the most common chronic condition affecting one in eleven children. On average there are two children with asthma in every classroom in the UK and over 25,000 emergency hospital admissions a year.

The School

Our school recognises that asthma is a widespread, serious but controllable condition and we welcome all pupils with asthma.

At the beginning of each school year or when a child joins the school, parents and carers will be asked if their child has any medical conditions. If a child or young person has asthma this will be documented on the asthma register.

Every asthmatic child should have a reliever inhaler and spacer in school stored with their individual school action plan. This action plan will include parental consent for staff to administer medicine.

The school will ensure they have received the child's individual action plan from the GP practice, health professional, or parent.

The school recognises that pupils always need immediate access to reliever inhalers including all out of school activities. These can be kept in a small bag/ rucksack or box.

Children with asthma are encouraged to take control of their condition and feel confident in the support they receive from school. In case of an emergency where a child is unable to self-administer their inhaler, all staff should feel confident in managing this situation. All staff must understand their duty of care to children in an event of an emergency.

Exercise

Taking part in sports, games and activities is an essential part of school life for all pupils. The health benefits of exercise are well documented, and this is also true for children and young people with Asthma. Consequently, it is vital that pupils with asthma are encouraged to participate fully in all physical education lessons. Staff should remind pupils whose asthma is triggered by exercise, to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after exercise; where this is the case, this should be identified by the parent/carers on the asthma care plan.

The school ensures the whole environment which includes physical, social, sporting, and educational activities is inclusive and favourable to children with asthma.

Staff Training/Awareness

We ensure all school staff are aware of the potential triggers and ways to minimise these signs and symptoms of a pupil's asthma and what to do in the event of an attack.

Staff are trained so they know what to do during an asthma attack and understand that pupils with asthma should not be forced to take part in an activity if they feel unwell.

The Curriculum

Staff are aware there may be additional medication, equipment, or factors to consider in planning residential visits and seek the advice of the Medical Needs Co-Ordinator at the planning stages.

Administration

School has clear guidance on the administration of medicine in school – please see the Supporting pupils with medical conditions policy above.

The Department of Health guidance on the use of emergency salbutamol inhalers in school (DH, 2015) recommends school keep an emergency salbutamol inhaler – The inhaler should only be used for children who have a diagnosis of asthma and are prescribed a reliever inhaler. In this instance there should be a separate parental consent form signed. This inhaler can only be used if the pupil's own inhaler is not available to them. To avoid possible risk of cross infection the plastic spacer is NOT to be reused. School to return the inhalers to the community pharmacy for safe disposal. School to obtain a new spacer as per guidance on obtaining an inhaler and spacer.

Schools may wish to discuss with their community pharmacist the different plastic spacers available and what is most appropriate for the age-group in the school. Community pharmacists can also provide advice on use of the inhaler

<https://www.gov.uk/government/publications/emergency-asthma-inhalers-for-use-in-schools>

Emergency Response

If a pupil needs to be taken to Hospital a member of staff will always accompany them until a parent/carer arrives.

Children's asthma medical packs should include:

Reliever inhaler and spacer.
Individual Asthma Action plan.
Emergency parental consent form (Annex A).

The school's emergency medical pack is located in the school office.

Staff Responsibilities

The designated asthma staff member is responsible for:

- Supporting staff in an emergency
- Ensuring that expiry dates of inhalers are inputted onto *Meditracker* which will alert parents when these need replacing.
- Ensuring that used or out of date inhalers, which are school owned, are returned to the local pharmacy for disposal. Children's individual inhalers will be returned to their parents/carers for safe disposal at the pharmacy.
- Ensuring that the asthma register is accurate and up to date

All staff responsibilities:

- The school emergency inhaler logbook should be completed if emergency inhaler has been used.
- Staff must inform designated asthma staff member if a school owned emergency inhaler has been used so that a new spacer can be ordered/replaced.
- If pupils require their inhaler, then staff need to record the amount of usage and inform parents via *Meditracker*.
- All staff should be aware of which children have asthma, be familiar with the content of their individual action plan.
- All staff must ensure children have immediate access to their emergency medicines.

- Maintain effective communication with parents including informing them if their child has been unwell at school
- Ensure children have their medicines with them when they go on a school trip or out of the classroom
- Be aware of children with asthma who may need extra support
- Liaise with parents, the child's healthcare professionals, SENCO and others, as appropriate, if a child is falling behind with their work because of their condition
- Ensure all children with asthma are not excluded from activities they wish to take part in
- Parents to be informed if child/young person has used their inhaler due to asthma symptoms

Safe storage

- Emergency medicines are readily available to children who require them at all times during the school day
- Children whose health care professionals /parents advise the school that their child is not yet able or old enough to self-manage their condition, know exactly where to access their emergency medicines

References

1. Asthma UK
https://www.asthma.org.uk/about?gclid=CJqmpbWsrM0CFYdAGwod4KQEnQ&gclid=CJqmp_bWsrM0CFYdAGwod4KQEnQ
2. Department of Health (2015), Guidance on the use of emergency salbutamol inhalers in schools
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/416468/e_mergency_inhalers_in_schools.pdf