

Supporting Students with Medical Conditions Policy

Secondary and Post 16 Academies

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Document History

Version	Date	Author	Note of revisions
V2	Oct 18	L Calton	Reference to DDA replaced with Equality Act 2010.
V3	Oct 19	J Holmes	Sentence added; Where a prescription for paracetamol is not prescribed by a doctor, a letter must be obtained from the doctor by parent/carer confirming it is safe to administer the paracetamol over a period of time.
			Removal of Statement and replaced with EHCP to reflect all changes made in academies.
			Standardisation of document reference to Individual Health Care Plan.
			Removal of the word Lucozade.
			Added bullet point in section 5 emergency 'medication is located in prime locations around the Academy site'.
V4	Sept 20	L Calton	Reference made to possible online learning for students for students with prolonged absence due to illness.
			Details of RPA insurance added.
			Updated to reflect students with Covid 19 symptoms.
			Completion of forms: updated to reflect that forms should be completed with the parents.
			Section 5 wording updated.
V5	Dec 20	L Calton	Section on covid updated to reflect change to isolation periods.
V6	Dec 21	J Holmes & L	General re-wording to provide clarity on procedures.

	Calton	
		Removal of appendices of managing illnesses, this is reflected in individual healthcare plans.
		Confirmation around classification of schedule 2 / controlled drugs.
		Clarification on training procedures.
		Inserted 3.4 Students
		Updated information on exams around diabetes monitoring.

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I INTRODUCTION

Outwood Grange Academies Trust is a fully inclusive multi-Academy trust and welcomes and supports students with medical conditions. The Trust is fully committed to providing students with medical conditions the same opportunities as others at their Academy in line with the statutory guidance 'Supporting pupils with medical conditions' December 2015 and 'Children and Families Act 2014'.

Should a medical condition lead to prolonged absence from the Academy, the Academy will work with family / carers and partnership agencies to arrange alternative arrangements to minimise the impact of the absence on the students' education, this could include online learning.

We will ensure this by educating all staff about the medical conditions that affect pupils at the Academy and ensuring staff receive the appropriate training. Also, some students with medical conditions will have individual healthcare plans which will be devised with parents, students, healthcare professionals and the Inclusion Coordinator/ SEND officer or designated person for the Academy. This policy complies with the statutory guidance and documents detailed in:

- Health & Safety at Work Act 1974
- The Control of Substances Hazardous to Health (COSHH)
- The Children's Act 1989
- The Equality Act 2010
- The Controlled Drugs (penalties) Act 1985

The Academy will ensure that this policy and procedures are in place, so that no person is placed at risk from the storage, administration and / or disposal of medication. The Academy has a legal duty to make arrangements to ensure that students with medical needs are able to attend the Academy with as little disruption as possible.

A policy that has appropriate procedures will be better placed to enable students attending the Academy, who require medication to continue their education with as little disruption as possible.

Unless so directed by the terms of their employment contract, no member of staff should feel compelled to be responsible for the management and administration of prescribed medication, to a student.

Outwood Grange Academies Trust is covered under the Risk Protection Arrangement (RPA) for schools for insurance purposes.

2 AIM

This policy aims to ensure that:

All parties are aware of their roles and responsibilities and are clear about the services that are expected of them when dealing with students with regard to managing and administering prescribed medications.

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Students who have short or long term medical needs or who require assistance with managing and administering prescribed medications will have the appropriate assistance, where required, when they are attending the Academy.

The approach is flexible, responsive and supportive to the medical needs of students, to ensure that they return to their educational studies as soon as possible following an illness or course of medication.

There is a good working partnership with students, parents/carers, staff and health professionals to ensure a duty of care.

3 RESPONSIBILITIES

3.1 The Outwood Grange Academies Trust (OGAT) Board

The OGAT Board will ensure that the Academy has developed its policy to assist students with medical needs and that staff involved with administration of medication have had the appropriate training.

As a sub-committee of the OGAT Board, the Academy Council must review the arrangements for staff training on essential medical issues in the Academy.

Staff involved with the administration of medication should undertake Management of Medication in an Educational Setting training at level 2 as a minimum and this must be reviewed every 3-5 years unless a change of legislation takes effect before that expiry period.

3.2 Principals

Principals are responsible for implementing the policy and procedures in their Academy and should ensure that all parents/carers are aware of the policy.

Where members of staff volunteer to assist, the Principal must ensure that they receive suitable and sufficient information, instruction and training to be able to undertake this function in a safe and effective manner. This also applies to members of staff who volunteer to be reserves to cover for absences.

Principals should ensure that a written Individual Healthcare Plan (IHCP) for each student with specific medical needs is drawn up in conjunction with the parent/carer and/or medical practitioner if required.

Where there is concern that a student's needs may not be met by the Academy or the parent's/carer's expectations appear unreasonable, the Principal should seek further advice from the student's GP, and other medical advisers. Where there are attendance concerns due to health, the Principal will also seek support and advice from medical professionals.

Where a Principal wishes to share information with other staff within the Academy they should first seek permission from the student's parent/carer, and/or the student in line with General Data Protection Regulations (GDPR) requirements.

3.3 Parents and Carers

The prime responsibility for a student's health rests with the parent/carer; they are responsible for making sure their child is well enough to attend the Academy.

Parents/carers are asked to complete a student information sheet when a student's starts at the Academy. This sheet identifies any medical needs that a student currently has, or health needs they have previously had that may affect them. With current medical conditions a parent/carer should provide the Academy with sufficient information about the student's medical needs. This should be undertaken in conjunction with the child's GP or paediatrician, as appropriate. Medical documentation/letters should be copied and sent into the Academy to support the process. Any medical appointments during Academy time should be followed with an appointment card or letter so the Academy can provide the correct response to support the young person.

Parents/carers should request prescribers to provide two prescriptions for a student's medication, where appropriate and practicable: one for home and one for use in the Academy.

Where a student has acquired an injury outside of Academy hours, this must be dealt with by parents/carers. The Academy is not in a position to diagnose or have the equipment to be able to make decisions on breaks, fractures or any internally diagnosed complaints/injuries.

If a student becomes unwell within the Academy they should be collected as soon as possible. It is vital to have the relevant home and emergency contact telephone numbers held on file; it is the parent/carer's responsibility to provide the Academy with updated information as necessary.

Parents/carers' culture and religious views should be respected at all times.

3.4 Students

Students are encouraged to take responsibility for their own medicine from an early age. A good example of this is children keeping their own asthma reliever. The ages that students are able to take control of their medicines varies enormously. It should however be considered that in some circumstances a young person might not ever mature enough to take medical responsibility for themselves whilst in the Academy. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed so that alternative options can be considered.

If a student takes their emergency medication whilst not in the presence of a member of staff, they should report this to the relevant staff member so appropriate records can be made and subsequent care given if needed.

As young people grow, develop and mature they should be encouraged to participate in decisions about their medications and to take responsibility. Self-medication does not mean that a student carries their medication with them. Self-medication means that a student can take the medication without adult support (given via spoon, or injected) furthermore the medication will continue to be taken in the presence of an adult/first aider.

Student's culture and religious views should be respected at all times.

3.4 Academy Staff

A teacher or other member of staff in the Academy, who looks after students in place of the parent (in loco parentis), must treat and take care of the student as a "careful parent" would. If a request is made in relation to a student's medical needs, then consideration should be given to whether or not the request is what would be expected of a reasonable parent in the same circumstances.

Each request should be considered on individual merit and Academy staff have the right to refuse to be involved. It is important that Academy staff who agree to administer medication understand the basic principles and legal liabilities involved and have confidence in dealing with any emergency situations that may arise. Regular training relating to emergency medication and relevant medical conditions should be undertaken.

A member of staff who has a student with medical needs in his/her class should understand the nature of the condition and when and where that student may require additional attention. For students with unique or unusual conditions training will be with small groups of staff who are there regularly to support that individual.

The training logs are kept for both insurance and audit purposes.

4 ADMINISTERING MEDICINES

No child under the age of 16 should be given medicines containing aspirin or ibuprofen unless it has been prescribed by a doctor and a written consent form has been signed by their parent/carer. Paracetamol in capsule form cannot be administered to children under 16.

A consent form enabling a member of Academy staff to administer medication to a child must be completed with the parent in all cases. No medication will be given under any circumstances without this form being completed.

The Academy will keep an individual student register of drugs for all medicines brought into the Academy by a parent/carer for administration to a student during the Academy day. The register will be signed by a Raising standards, transforming lives...

member of staff and also the student when medication has been administered. In the case of Schedule 2 drugs (those that would fall under The Controlled Drugs (Supervision of Management and Use) Regulations 2013) if administered not in accordance with the prescribers instructions, two staff signatures will be required.

Medicines should only be taken into an Academy when essential; e.g. where it would be detrimental to a student's health if the medicine was not administered during the Academic day. It is recognised that it may be necessary at times for a student to take medication to minimise absence. Where this happens, it is advised that the parent/carer request that the prescription be such that the student does not need to take any medication whilst in the Academy e.g. a dose frequency of three times per day rather than four times per day. The Academy will only accept medication of a frequency of four times per day or more unless a specific time is detailed on the medication label. Medications that state 'as and when required' must be accompanied with a minimum and maximum dose.

Where medicines must be administered during the day they must be provided in an original container (as dispensed by the pharmacist) and include the prescriber's instructions for administration. Unless stated by the prescriber, the academy cannot split or alter medication in any form. Prescribers should be encouraged to provide two prescriptions for a student's medication, where appropriate and practicable: one for home and one for use in the Academy.

4.1 Non-prescription medication

Academy staff will not give medication to a child unless it has been prescribed by a Doctor, Dentist or Nurse Practitioner and a request for the Academy to administer medication form has been completed.

In cases where paracetamol is advised by a medical practitioner but not prescribed, a letter must be obtained from a medical practitioner by the parent/carer confirming it is safe to administer the paracetamol, detailing the period of time this should be taken in order for the academy to consider the administration.

4.2 Medical needs and individual health care plans

Students with short-term, long-term and/or complex medical conditions may require ongoing support, medicines or care whilst at the Academy to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents/carers communicate with the Academy so that effective support can be put in place. This will require establishing relationships with relevant local health services to help them.

The Academy recognises that there are also social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may think they could be bullied or develop emotional disorders such as anxiety or depression around their medical condition. With long-term absences due to health problems, attainment may be affected. Reintegration back into the Academy

should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. There are support mechanisms in the Academy such as the Bridge to help students reintegrate back into a full time education. Short-term and frequent absences, including those for appointments connected with a student's medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case the Academy must comply with their duties under that Act. Some may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. See Special Education Needs and Disability Policy.

Where a student does have long term and/or complex medical needs and an Individual Health Care Plan is essential to manage their needs, The Individual Health Care Plan should be completed by designated Academy staff with parents/carers and student. All Individual Health Care Plans must be reviewed annually unless there is a change to the prescription. It is the parents/carers responsibility to inform the Academy of any changes.

4.3 Schedule 2 Drugs

When Schedule 2 Drugs (primarily "Ritalin" prescribed for Attention Deficit Syndrome) are kept on Academy premises, a written stock record is also required, this should detail the quantities kept and administered, taken and returned on any educational visit, and returned to the parent/carer, e.g. at the end of term. These drugs should be kept in a locked cabinet within a room with restricted access.

4.4 Student Privacy

Where invasive or personal care is required then the person carrying out such a treatment, where possible, should be of the same gender as the student receiving the treatment, unless agreed otherwise and with parental consent. One additional adult should be present whilst the treatment is carried out unless personal care procedures indicate otherwise.

Those persons who provide personal or invasive treatments must be suitably trained.

4.5 Refusing Medicines

When a child refuses their medication, the parent/carer should be informed the same day and appropriate records made on the register. Staff cannot force a child to take any medication.

5 STORAGE

Prescribed medication will be stored in the safe in the main office, labelled correctly in an appropriate container; a locked metal cabinet secured to a wall or floor unless:

- otherwise stated on an Individual's Health Care plan
- a student self manages their medication such as diabetes, allergy relief such as epi-pens or asthma
- it is an emergency medication located in prime locations around the Academy site

For medicines that are temperature sensitive, they should be stored in a locked fridge or an unlocked fridge within a locked room.

The main office has 2 members of staff in and is regularly monitored during the Academy day and should be locked if unsupervised.

Emergency medicines such as Auto Adrenaline Injectors e.g. EpiPens(c) and asthma inhalers should be readily available and not locked away. These responsive treatments will be risk assessed and appropriately stored.

Medication taken on trips must be kept in a lockable bag or box and never stored with the first aid kit. First aid kits should be readily accessible.

There are emergency response kits stored at key points around the Academy for use in an emergency:

Main Office / Reception

Leaning Resource Centre

Science Technician Office

6 DISPOSAL OF MEDICINE

Parents/carers are responsible for ensuring that date expired medicines are returned to a pharmacy for safe disposal. They should collect medicines held by the Academy at the end of each term. Liquid medication will only be stored on site for 6 months from the date of prescription or the date of opening (if opened in the Academy).

Should the parents/carers fail to collect expired medicines, the academy reserves the right to appropriately dispose of them.

6.1 Disposal of sharps

Sharps boxes should always be used for the disposal of needles. Collection and disposal of the boxes should be arranged with the local Environmental Waste Disposal Unit.

7 ACADEMY TRIPS AND SPORTING ACTIVITIES

Students with medical needs should be encouraged to participate in Academy extracurricular activities and trips as long as the safety of the student, other students and/or staff is not placed at significant risk. An Academy may take additional measures for outside visits for students with medical needs. This may include:

- additional staff supervision;
- adaptations for bus or coach seats and entrances;
- provision of secure cool-bags to store medicine;
- provision of properly labelled single dose sets;
- copies of the student Healthcare plans in the event of an emergency referral;
- enhanced risk assessments based on the needs of the student

When planning trips and extracurricular activities which will include a student with medical needs, all staff supervising the trip should be made aware of any additional requirements that the student may need and any emergency procedures that may be required (unless the parent/carer does not give their prior consent to do this).

This is to be covered in the event Evolve Risk Assessment and can also be in a person specific Risk Assessment where necessary. The location to be visited should be made aware that student(s) with medical needs are included in the party, if this is practicable and if the parents have consented. If there is any doubt regarding the activity the Academy should discuss the activity with the parent/carer and also, if necessary, seek medical advice.

It is important to note that it is the parent/carers responsibility to ensure that their child has the relevant medication for a trip. If a student does not have the correct medication, they will be refused to attend.

8 EXAMS

Asthma inhalers can be taken into an exam but they must have no writing on them - any labels need to be checked by an exam invigilator on entry to the exam.

For students with diabetes, they should take a blood testing kit with them, a bottle of water, insulin and either dextrose tablets etc. All should have their labels removed and be placed on the desk they are working on (some students prefer it to be left on the front desk). Students should be allowed toilet breaks (under exam conditions). Medication can have a label on but needs to be checked by an exam invigilator on entry to the exam. Due to the exam regulations, students can use their glucose monitoring sensor but will not be permitted to use it via an app on their mobile phone.

Auto Adrenaline Injectors such as Epipens© should be taken into the exam by the student and left on the desk. Any labels are to be checked by the exam invigilator on entry to the exam.

9 AUTOMATED EXTERNAL DEFIBRILLATORS (AEDs)

An AED is a machine used to give an electric shock when a person is in cardiac arrest, i.e. when the heart stops beating normally. Cardiac arrest can affect people of any age and without warning. If this happens, swift action in the form of early cardiopulmonary resuscitation (CPR) and prompt defibrillation can help save a person's life.

The Academy AED/s is located in Main Reception.

10 Covid 19

If anyone becomes unwell with a new, continuous cough or a high temperature in an education or childcare setting, they must be sent home and advised to follow the COVID-19: guidance for households with possible coronavirus infection guidance.

If a child is awaiting collection, they should be moved, if possible, to a room where they can be isolated behind a closed door, depending on the age of the child and with appropriate adult supervision if required. Ideally, a window should be opened for ventilation. If it is not possible to isolate them, they should be moved to an area which is at least 2 metres away from other people.

If they need to go to the bathroom while waiting to be collected, they should use a separate bathroom if possible. The bathroom should be cleaned and disinfected using standard cleaning products before being used by anyone else.

PPE should be worn by staff caring for the child while they await collection if a distance of 2 metres cannot be maintained (such as for a very young child or a child with complex needs).

In an emergency, the Academy would call 999 if they are seriously ill or injured or their life is at risk.

N.B.: Parents/carers should regularly check government guidance as this can change frequently.

APPENDIX A

OUTLINE OF THE INDIVIDUAL HEALTHCARE PLAN PROCESS

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed
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Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil
Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)
Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided
Ţ,
School staff training needs identified
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Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed
Ţ
IHCP implemented and circulated to all relevant staff
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IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate