



WALTON HIGH SCHOOL

Proud to be part of Walton Multi Academy Trust



SUPPORTING PUPILS WITH MEDICAL NEEDS POLICY

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WALTON HIGH SCHOOL

SUPPORTING PUPILS WITH MEDICAL NEEDS POLICY

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1. Rationale

Walton High School values the abilities and achievements of all its pupils, and is committed to providing for each pupil the best possible environment for learning. We actively seek to remove the barriers to learning and participation that can hinder or exclude individual pupils, or groups of pupils. This means that equality of opportunity must be reality for our children. We make this a reality through the attention we pay to the different groups of children within our Academy.

This policy is to be read in conjunction with our:

- SEN Policy;
- Safeguarding policies;
- Equality Policy;
- Behaviour and Anti Bullying policies;
- Curriculum and Teaching and Learning policies;
- Health and Safety Policy.

2. Introduction

The Children and Families Act 2014 states that arrangements for supporting pupils at school with medical conditions must be in place and those pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.

Many children, at some point during their time at school, will have a medical condition which may affect their potential to learn and their participation in school activities. For most, this will be short term; perhaps finishing a course of medication or treatment; other children may have a medical condition that, if not properly managed, could limit their access to education.

This policy includes managing the administration of medicines, supporting children with complex health needs and first aid. The school makes every effort to ensure the wellbeing of all children, staff and adults on site.

3. Aims and Objectives

- **To ensure that children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.**
- **To establish a positive relationship with parents and carers, so that the needs of the child can be fully met** - Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support,

medicines and care while at school to help them manage their condition and keep them well. Other children may require interventions in particular 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.

- **To work in close partnership with health care professionals, staff, parents and pupils to meet the needs of each child** – In making decisions about the support they provide, it is crucial that Academies consider advice from healthcare professionals and listen to and value the views of parents and pupils.

- **To ensure any social and emotional needs are met for children with medical conditions** – Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition.

- **To minimise the impact of any medical condition on a child's educational achievement** – In particular, long term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school should be fully supported with the aim that children fully re-engage with their learning. Short term absences, including those for medical appointments, (which can often be lengthy), also need to be effectively managed.

- **To ensure that a Health Care Plan is in place for each child with a medical condition and for some children who may be disabled or have special educational needs, that their Education, Health and Care Plan is managed effectively.**

4. Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Partnership working between school staff, healthcare professionals, and parents and pupils will be critical.

The school is responsible for:

- ensuring that a policy is in place to meet the needs of children with medical conditions;
- Ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation;
- Ensuring that all staff who need to know are aware of the child's condition;
- Ensuring that sufficient trained staff is available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations;
- ensuring that the school is appropriately insured and that staff are aware that they are insured to support pupils in this way;

- Ensuring that the school nursing service is contacted in the case of any child who has a medical condition that may require support at school but who has not yet been brought to the attention of the school nurse;
- Ensuring that relevant staff have received suitable training if appropriate and are competent before they take on responsibility to support children with medical conditions.

School staff:

- Understand that any member of school staff may volunteer or be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so;
- Understand the role they have in helping to meet the needs of a child with a medical condition
- Any assistance or administering of medicines must be conducted in a safe and competent manner, procedures must be followed and relevant legislation complied with

Healthcare professionals:

- Notifying the Academy when a child has been identified as having a medical condition who will require support in school;
- Take a lead role in ensuring that pupils with medical conditions are properly supported in school, including supporting staff on implementing a child's plan;
- Work with the school to determine the training needs of Academy staff and agree who would be best placed to provide the training;
- Confirm that relevant staff are proficient to undertake healthcare procedures and administer medicines.

5. Assisting Students with Long Term or Complex Medical Needs

A proactive approach is taken towards children with medical needs. A home visit can be arranged for students with long term or complex medical needs from the Attendance and Welfare Manager at the onset of condition or change in condition. This enables the Academy / parents to identify potential issues/difficulties before a student returns to school. Issues identified in the past have included access to classrooms, toilet facilities, additional adult support, lunchtime procedures and emergency procedures. In conjunction with the school nurse and or any relevant health care professionals a Health Care Plan will be produced for any student with long term/complex medical needs and will be reviewed on a regular basis. To assist students with long term or complex medical needs, the school will also consider whether any/all of the following is necessary:

- Adapting equipment, furniture or classrooms to enable the student to access a particular aspect of the curriculum or area of the school. Involving the home and hospital support service. Working in partnership with medical agencies and receiving advice/support from other professionals including the School Nurse;
- Arranging for additional adult support throughout specific parts of the school day;

- Adapting lesson plans;
- Establishing a phased attendance programme;
- Ensuring that there are procedures in place for the administration of medicine;
- Training for Support Staff/Teachers on a specific medical condition;
- Providing a programme of work for children who are absent from school for significant periods of time;
- Providing appropriate seating during assembly, etc;
- Ensuring there is adequate supervision during break times so that the health and safety of all students is not compromised;
- Ensuring that arrangements are made to include a student with medical needs on school visits.

6. School Procedures

Where medication administration/assistance is required, detailed management procedures need to be developed and communicated to all relevant employees.

Where the school identifies the need for/ wishes to develop its own local procedures the following must be included as a minimum:-

- a) Consent Arrangements;
- b) Cultural and Religious requirements;
- c) Authorisation arrangements for employees to administer medication;
- d) Communication arrangements;
- e) Assessment of Service users' abilities and support needs;
- f) Record Keeping;
- g) Safe storage and transportation of medication;
- h) Arrangements with regards to Prescription Only Medications and Over the Counter Medications;
- i) Controlled Drugs;
- j) Disposal of medication and management of sharps;
- k) Management of errors and incidents;
- l) Information Instruction and Training;
- m) Within the local arrangements, consideration must be given to the plans for administering medicines for a long-term health condition which will differ from a short-term requirement e.g. course of antibiotics.

This is not an exhaustive list, and the school needs to consider the implications for the management of medication taking into advice and guidance issued by relevant governing bodies.

7. Risk Assessment and Individual Plans

An individual Health Care Plan must be developed which identifies and documents the range of support required by the student. This plan must

be reviewed at regular intervals and following any changes in circumstances. The details within the plan must be communicated to all relevant parties.

8. Control of Substance Hazardous to Health (COSHH) Assessments

If local medication policy guidelines are established, implemented and monitored in accordance with this policy there is no requirement to complete COSHH Assessments for medication products, as these arrangements will ensure its safe storage, handling, administration and disposal.

9. Information, Instruction and Training

Any member of staff who has to assist or administer any medication in the course of their duties must receive appropriate information, instruction, and where the need is identified attend training in the completion of such tasks.

Any changes in Health Care Plans and needs must be effectively communicated to relevant staff.

10. Incident Reporting

Procedures must be in place for the reporting of adverse reactions or errors in administration of medication.

This procedure must cover:-

- a. The facts of the incident,
- b. Persons involved,
- c. Reason for the incident,
- d. Details of any ill health or injuries sustained (if this is the case an accident/incident report form must be completed and forwarded to the Directorate Health and Safety Team),
- e. Witness Statement.
- f. Details of persons informed (Parents/Carers, Pharmacist, GP, NHS Direct, Governing bodies CQC/OFSTED),
- g. Corrective and Remedial action taken.
- h. Outcome of Investigation by senior manager.

11. Monitor and Review

Systems must be established to ensure that local procedures are reviewed at least annually to ensure they are up to date, reflect current best practice and are working effectively. This will include sharing health care plans for review with parents.

Any changes to local procedures must be incorporated into staff instruction and training arrangements and effectively communicated to staff and other relevant parties.

12. Code of Conduct

Staff must abide by the staff code of conduct.

13. Supporting Documents

- a. HR G10 – Social Care and Health Medication Guidance
- b. HR G11 – Children and Lifelong Learning Medication Guidance
- c. Managing Medicines in Schools and Early Years Settings (DFES and Department of Health March 2005).

15. Legislative Framework

- a. Health and Safety at Work Act 1974
- b. Control of Substances Hazardous to Health Regulations 2003
- c. Health and Safety (Miscellaneous Amendment) Regulations 2002
- d. Management of Health and Safety at Work Regulations 1999
- e. Personal Protective Equipment Regulations 2002
- f. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
- g. Hazardous Waste Regulations 2005
- h. Medicines Act 1968
- i. Misuse of Drugs Act 1971
- j. Human Rights Act 1998
- k. Data Protection Act 1998

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MEDICAL DEPARTMENT PROCEDURE FOR ALL FIRST AID STAFF

Customers requesting first aid treatment must always receive professional, courteous, prompt and effective First Aid Treatment that respects the privacy, dignity and rights of all without prejudice.

First aid staff are not medically trained and must not attempt to diagnose any illness/injury or offer their own personal opinion at any time.

As First Aid Treatment is not medical treatment, all First Aid staff must use their own discretion when requested to carry out first aid for a customer that is already receiving medical treatment from a medical professional. In these instances, First Aid treatment may be inappropriate or even harmful. Where this concerns students, the parent/carer must always be contacted.

With regard to pupils, should any First Aider have any serious concerns they must report these to the Head of House. Any Child Protection concerns must be reported directly to the Designated Safeguarding Lead.

Record keeping

When first aid is given, this must be logged in the medical book and the following details recorded:

Name

Form

Time

Reason for treatment

Details/symptoms

Details of treatment given and by whom

Outcome – ie – sent home, ambulance, back to class.

Accidents

All accidents must be recorded in the HSE accident Book BI 510. These are kept in reception. Once the accident form has been completed it must be passed to the Business Manager who will instigate an accident investigation where deemed necessary. The Local Authority Accident Investigation Form will be used. Section 4 will be passed out to the Head of Department for completion before being signed off by the Business Manager and forwarded onto the SCC.

Medication procedures

Arrangements and procedures for managing medicines:

When on the premises

All pupil medication administered /stored securely on site must comply with Staffordshire County Council's Health and Safety Guidance reference No G10 and Medication Guidance HR109 (Oct 2010).

Students are expected to self administer medication. Students are permitted to carry medication with them as agreed on their individual Medication Plan. This must be authorised by parents. Staff therefore will not administer medication, unless an agreed Care plan authorised by the parents and by school determines otherwise. First Aid staff will supervise students as they self medicate, and will ensure that the relevant forms are completed by the students as required. First Aid staff are also responsible for receipt, checking and safe storage of medication, and for the arrangements for the return of any unused/out of date medication to parents/carers. Medicines must not be disposed of by school. Unwanted medication should be labeled 'Not to be taken' and stored in a separated area of the lockable medicine cupboard until collected and signed for by parents/carers. Sharps must be disposed of in the sharps container in the medical room.

Parental responsibility

Parents are responsible for ensuring school are kept updated on the medicine requirements of their children, and of any cultural or religious requirements their students may have in relation to medication.

Parents/guardians of those pupils who require their medication during the day/emergency medication must complete a Medication Plan and a Health Care Plan detailing what medication is required and in what circumstances.

Parents/carers are also responsible for ensuring they supply the school with 'in-date' medication, and collect all out of date/no longer required medication.

Storage of medicine

With the exception of inhalers and Epi-pens, all medication must, at all times be securely stored within the medical room. All pupils' medication is to be stored in individual re-sealable bags which are clearly labeled with the pupils name.

All medication brought into school must be recorded on the Student Medication Record Sheet which will be kept in the medical room.

Medicines will be given to students to self medicate, who will be supervised as they take their medication and will be asked to sign the Student Medication Record Sheet by student and counter signed by member of First Aid staff.

All medicine will be administered in the medical room.

Any errors in the administration of medication must be reported to the Business Manager who will follow the SCC procedure for the management of errors/administration in Admin of Medicines. Any unaccounted for drugs must be reported to the Business Manager who will follow the SCC procedure.

Prescription medication

All student prescription medication brought on-site must be in its original container or box, showing the community pharmacy label which clearly states the pupils name, frequency and dose to be administered. Only pupil prescription medication which requires four doses per day, or regular timed doses as prescribed by the GP, can be administered/stored at Walton.

Prescription medication which requires three doses per day can be taken before school, after school and at bedtime and therefore does not need to be administered during the school day.

Under no circumstances must medicines be given to anyone except the person it was prescribed for.

Non-prescription medication and over the counter medication.

Non-prescription and over the counter medication will only be allowed/supervised in school where there has been a Health Care Plan and a Medication Plan authorised by the parent/carer and the medication has been provided by the parents/carers. The same procedures for supervision and recording will be followed as for prescription medication.

A CHILD UNDER THE AGE OF 16 SHOULD NEVER BE GIVEN ASPIRIN OR MEDICINES CONTAINING IBUPROFEN UNLESS PRESCRIBED BY A DOCTOR.

Controlled drugs

Students who have been prescribed controlled drugs which must be administered in emergency situations or during the school day, must store these in the medical room. First Aid staff must be present and will supervise the student's self medication.

A controlled drugs register book will be kept locked away, and must be signed by the student each time they self administer, or by the member of staff who has administered emergency first aid.

Education and Health Care Plans (EHCP)

If there are medical needs stated in an EHCP, the SEND coordinator is responsible for reviewing these. This applies to all new year 7 students on transition, and also current students. If needed we will arrange for specialist medical training to be delivered to nominated staff members to cover normal activities and first aid.

The SEND coordinator is responsible for ensuring that relevant risk assessments have been carried out, and controls/support put in place to ensure full participation in school activities for the student, including PE/Games/Swimming sessions and school trips.

The SEND coordinator must also ensure that communication to class teachers/HOH etc. regarding the student's condition is made.

All First aiders must ensure they are familiar with individual student Health Care plans. Nominated individuals will be trained to give first aid for specific vulnerable students as detailed in the Health Care Plans and organized by the SEN coordinator.

Epilepsy/diabetes/severe allergies

All first aid staff must ensure they are familiar with procedures with regard to epilepsy and diabetes.

Administration of emergency medication will only be carried out by First aider staff in compliance with the agreed Health Care Plan. Training and refresher training will be recorded.

First aiders must ensure they know which students and staff are involved. With regard to severe allergies, First Aid staff are to ensure they keep updated with the refresher Epi-pen training.

Emergency treatment of seizures

Members of staff should in the first instance call for a first aider.

First aiders must be aware that for students with a Health Care Plan in place, the nominated trained member of staff must be called to administer emergency medication and follow health care plan procedures.

Trips and outings

Parents must make staff aware as soon as possible if their child is wishing to go on a school trip. The trip organiser must identify those students with medical needs and liaise with first aiders/SEND where required as part of the risk assessment procedures, to ensure that spare medicines are taken and first aiders as needed for administration of Epi-pens.

For named students with specialist medical needs, a risk assessment must be carried out by the Trip organizer/HOH/SEND co-ordinator who will then determine whether reasonable adjustment can be made for the individual student, and if so, what arrangements will be made to support any medical requirements.

Where required, staff will take charge of all medication and will supervise the students who self administer. Medicines will be transported and kept in a secure location for the duration of the trip.

Physical examinations

First aid staff must never perform 'personal' physical examinations on any student. Should a student require First Aid treatment to any personal area of their body the parents/guardians must be contacted immediately and advised to take their child to see their GP or take their child to hospital.

Should the student be assessed to be in severe pain/severe bleeding then paramedics and parents must be contacted immediately.

Should a pupil request/require first aid treatment where an item of upper body clothing would need to be lifted or taken off, then it is strongly advised that two members of staff be present – as student dignity must be protected, this must always be discussed and agreed with the student beforehand.

First aid staff must never ask a student to remove clothing which is worn from the waist area to the knee – in this instance if first aid treatment is necessary then parent/paramedics should be contacted immediately.

Record keeping arrangements

All records relating to medication/Care plans, will be stored securely in the medical room.

First Aiders will communicate details of students who require medication administration/assistance, and details of any specialist first aid trained staff as a matter of course to all staff at the start of the school year, and when details change.

Authorisation for staff to administer medication

Only authorised staff may administer/supervise the administration of medication. Written authorisation is kept on form 'Staff Authorised to administer or supervise medication' form, a copy of which is pinned up in the medical room.

Medicines for a staff members own use.

An employee may need to bring medicine into school for their own use. Each member of staff has a responsibility to ensure that these medicines are kept securely and that students will not have access to them, and that they are not issued to other staff members or students.

First Aid staff will not dispense, administer or supervise medication for staff members.