

COVID 19 ROLLOVER

Statutory/Non Statutory Policy

On

Medical Policy

Drafted by: Mrs Keeble - Director of Business & Finance	
Date of Approval by Governing Body: March 2020 ROLLOVER TO MARCH 2021	
Signed by Chair of Governors:	
Review date: March 2023 ROLLOVER TO MARCH 2024	
Person(s) Responsible for Day to Day Managem Director of Business & Finance	ent:
Person Responsible for Review Director of Business & Finance	

Medicine and Supporting Pupils at School with Medical Conditions Policy

This policy has been updated in January 2016 to reflect the DfE Guidance issued to schools in December 2015 "Supporting Pupils at School with Medical Conditions".

Section 100 of the Children and Families Act 2014 places a duty on the Governing Body of the School to make arrangements for supporting pupils at the School with medical conditions. To that end the Governing Body will ensure that arrangements are in place to support pupils with medical needs and that appropriate policy, plans and procedures are in place to meet that statutory duty.

Policy Implementation

All schools and academies are expected by law to have a policy dealing with medical needs and to be able to demonstrate that this is implemented effectively. The overall responsibility for the administering and implementation of this Policy is given to The Governing Body & Headteacher who delegates this to The Director of Business & Finance. The Director of Business & Finance will be responsible for ensuring that sufficient staff are suitably trained and will ensure that appropriate arrangements are in place to cover any staff absences. The Examinations Officer and the Data Manager will be responsible for briefing supply teachers and the Director of Business & Finance will be responsible for briefing new members of staff. Risk assessments for school visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans will be the responsibility of Wendy Keeble, Director of Business & Finance. All staff will be expected to show a commitment and awareness of pupil's medical conditions. All members of staff will be inducted into the arrangements and guidelines set out in this Policy.

Procedures to be followed when Notification is received that a Pupil has a Medical Condition

The School will ensure that the correct procedures are followed in accordance with this policy. Whenever we are notified that a pupil has a medical condition, appropriate procedures will also be in place to cover any transitional arrangements for these pupils between schools, for

reintegration, or when a pupil's needs change, and will make suitable arrangements for any staff training or future support. For children starting at Blythe Bridge High School & Sixth form, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to Blythe Bridge High School & Sixth form midterm, we will make every effort to ensure that arrangements are put in place within two weeks.

In making the arrangements, the School will take into account that many of the medical conditions that require support at school may affect quality of life and/or could be life threatening. We will also acknowledge that some will be more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. The School will endeavour to give Parents/Carers and pupils confidence in the School's ability to provide effective support for their child's medical conditions in school.

The School will liaise with, and seek support from, the Local Authority, where appropriate in the first instance with regards to students who have medical needs.

The Role and Responsibilities of Staff at Blythe Bridge High School & Sixth Form

Some children with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have Special Educational Needs and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance should be read in conjunction with the Special Educational Needs and Disability Code of Practice 0- 25 years and the Blythe Bridge High School & Sixth Form SEN Information Report.

Students' medical needs may be broadly summarised as being of two types:

- (a) Short-term, affecting their participation in school activities which they are on a course of medication.
- (b) Long-term, potentially limiting their access to education and requiring extra care and support

If a student is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, the School, along with health professionals, parents/carers and other support services will work together to ensure that

students with medical conditions are able to enjoy the same opportunities at school as any other student, unless a clinician states otherwise.

In some cases this may require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals. Consideration will also be given to how children will be reintegrated back into school after long periods of absence.

Staff **must not** give prescription medicines or undertake health care procedures without appropriate training. At the School, we recognise that a first-aid certificate does not constitute appropriate training in supporting children with specific medical conditions. In those circumstances, appropriate healthcare professionals will provide the relevant training and subsequent confirmation of staff proficiency to undertake a particular medical procedure, or to administer specific medication in accordance with a pupil's individual healthcare plan.

Individual Health Care Plans

Individual Health Care Plans (overview at Annex A) will be written and reviewed by Mrs W Keeble, Director of Business & Finance and Mrs Dena Moore, Attendance Administrator. Where Dena Moore is absent and in an emergency this responsibility will be delegated to Leanne Smith, Administrator and First aider. It will be the responsibility of all members of staff supporting the individual pupil to ensure that the Plan is followed. Individual Healthcare Plans will help to ensure that Blythe Bridge High School & Sixth Form effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention may be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex.

However, not all children with medical conditions will require one. Blythe Bridge High School & Sixth Form, along with an appropriate health care professional and parents/carers should agree, based on evidence when a Health Care Plan would be inappropriate or disproportionate. If consensus cannot be reached, the appropriate healthcare professional will have the final say.

Individual Health Care Plans

Individual Health Care Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the child effectively. The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support.

Where a child has SEN but does not have a statement or EHC plan, their SEN should be mentioned in their Individual Health Care Plan. Annex B identifies what ought to be included as a minimum in an Individual Health Care Plan. Individual Healthcare Plans (and their Review), may be initiated, in consultation with the Parent/Carer, by a member of school staff or a healthcare professional involved in providing care to the child. The Individual Health Care Plan must be completed by Dena Moore, Attendance Administrator with support from Parents/Carers, and a relevant healthcare professional. Students should also be involved whenever appropriate. The responsibility for ensuring it is finalised and implemented rests with the School.

The School will ensure that Individual Health Care Plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that the School assesses and manages risks to the child's education, health and social wellbeing and minimises disruption. Where the child has a SEN identified in a statement or EHC plan, the Individual Health Care Plan should be linked to or become part of that statement or EHC plan.

Individual Health Care Plans should at the very least include the following:

☐ the medical condition, its triggers, signs, symptoms and treatments;
□ the student's resulting needs, including medication (dose, side-effects and storage)and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded/noisy conditions, travel time between lessons;
□ specific support for the student's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions:

□ the level of support needed, (some children will be able to take responsibility for their own
health needs), including in emergencies. If a child is self-managing their medication, this
should be clearly stated with appropriate arrangements for monitoring;
□ who will provide this support, their training needs, expectations of their role and
confirmation of proficiency to provide support for the child's medical condition
from a healthcare professional; and cover arrangements for when they are unavailable;
$\ \square$ who in the school needs to be aware of the child's condition and the support
required;
□ arrangements for written permission from Parents/Carers for medication to be administered
by a member of staff, or self-administered by the pupil during school hours;
□ separate arrangements or procedures required for school trips or other school
activities outside of the normal school timetable that will ensure the child can
participate, e.g. risk assessments;
□ where confidentiality issues are raised by the Parents/Carers or child, the
designated individuals to be entrusted with information about the child's condition;
□ what to do in an emergency, including whom to contact, and contingency
arrangements. Some children may have an Emergency Health Care Plan prepared by their
lead clinician that could be used to inform development of their Individual Health Care Plan.
The Emergency Health Care Plan will not be the School's responsibility to write or review.

Pupil Participation in School Activities/Trips.

Blythe Bridge High School & Sixth Form will actively support the inclusion of pupils with medical needs to take part in school activities/trips after the conducting of any appropriate risk assessments, by being flexible and by making any reasonable adjustments as and when required, unless evidence from a clinician such as a GP states that this is not possible.

However, in line with our Safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from, for example infectious diseases. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

Blythe Bridge High School & Sixth Form 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 the available evidence at the time. This would normally involve some form of medical evidence and consultation with Parents/Carers.

Where evidence conflicts, some degree of further investigation may be necessary to ensure that the right support can be put in place, this will usually be led by the Headteacher. Following any further investigations, an Individual Health Care Plan may then be put in place. Where a pupil has an Individual Health Care Plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and any subsequent procedures.

Otherstudents in the School should be made aware of what to do in general terms, if a student seems to be unwell or injured and they think help is needed, such as informing a teacher immediately. If a student (regardless of whether they have an Individual Health Care Plan) needs to be taken to hospital, staff should stay with the pupil until the Parent/Carer arrives, or accompany a student taken to hospital by ambulance.

Appropriate risk assessments will be carried out to assist with the School in any decision making process.

The Student's Role in managing their own Medical Needs

After discussion with the Parents/Carers and the pupil themselves, if it is agreed that a student is competent to manage their own health needs and medicines, the School will encourage them to take responsibility for this, and it will be reflected within a student's Individual Health Care Plan.

Wherever possible, students should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily; these will be stored in the Student Support Centre to ensure that the safeguarding of other children is not compromised. The School recognises that pupils who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If a student is not able to self-medicate then appropriately trained staff should help to administer medicines and manage procedures for them. If a student refuses to take medicine or carry out

a necessary procedure, staff should not force them to do so but instead follow the procedure agreed in the Individual Health Care Plan. Parents/Carers should be informed, outside of the review, so that alternative options may be considered.

Managing Medicines on the School Site ☐ Medicines should only be administered at Blythe Bridge High School & Sixth Form when it would be detrimental to a stduent's health or school attendance not to do so. ☐ No student under 16 should be given prescription or non-prescription medicines without their Parents/Carers written consent. ☐ Generally, Blythe Bridge High School & Sixth Form will not administer non-prescription medicines to a student. Painkillers may be administered if it is considered appropriate and only with parental approval. In such circumstances the school will check any maximum doses and when any previous doses may have been taken. A student under 16 should never be given medicine containing aspirin unless prescribed by a doctor. ☐ Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours. ☐ Blythe Bridge High School & Sixth Form will only accept prescribed medicines that are indate, 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 still be in date, but will generally be available inside an insulin pen or a pump, rather than in its original container. ☐ All medicines will be stored safely in the Student Support Centre. Students should know where their medicines are at all times and be able to access them easily. Where relevant, they should know who holds the key to the storage facility, which will be Mrs Dena Moore, Attendance Administrator. ☐ Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to pupils and not locked away; these will be stored in the Student Support Centre and the relevant student's will be informed and know how to access them. If a student requires an asthma inhaler, it is very important that there is an inhaler in the School at all times.

□ During school trips, an appropriately trained member of staff be will be in charge of and carry all medical devices and medicines required for any student attending that trip. (Unless a parent is voluntarily in attendance and undertakes that role – it is not a requirement that a parent accompany any student to facilitate their attendance)
□ Appropriate members of staff administering medicines should do so only in accordance with the prescriber's instructions. The School will keep a record of all medicines administered to individual students whilst in the care of the School, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at the School should also be noted.
□ When no longer required, medicines should be returned to the Parent/Carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.
Unacceptable Practice
Although School staff should use their discretion and judge each case on its merits with reference to the child's Individual Health Care Plan, it is not generally acceptable practice to:
□ prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary and assume that every child with the same condition requires the same treatment
□ ignore the views of the student or their Parents/Carers; or ignore medical evidence or opinion, (although this may be challenged)
□ send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans
☐ if the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
□ penalise students for their attendance record if their absences are related to their medical condition e.g. hospital appointments

to

In an emergency

Forename Surname

Course

In a medical emergency, please note the details of members of staff teachers who have been appropriately trained:

Expiry Date

Ext

Judith	Burr	ITC Certificate in Outdoor First Aid	Ext 225	23/02/2019
Laura	Cartlidge	Emergency First Aid at Work	Ext 237	03/05/2019
Amy	Dodgson	ITC Certificate in Outdoor First Aid	Ext 233	23/02/2019
David	Edwards	ITC Certificate in Outdoor First Aid	Ext 237	23/02/2019
Jackie	Everill	Emergency First Aid at work	Ext 256	26/04/2016
Tarnya	Grigg	ITC Certificate in Outdoor First Aid	Ext 237	23/02/2019
Kerry	Hore	Emergency First Aid at Work	Ext 275	23/11/2019
Laura	Horobin	Schools first aid including use of auto-injector		12/10/2017
Emma	Housley	Standard First Aid	Ext 226	10/05/2020

Daniel	Hughes	Emergency First Aid at Work	Ext 241	03/05/2019
Alex	Jackson	Emergency First Aid at work	Ext 274	18/06/2018
Nikki	Johnson	Emergency First Aid at work	Ext 231	03/05/2019
Rebecca	Johnson	Standard First Aid	Ext 242	10/05/2020
Nikki	Jones	Emergency first aid at work	Ext 252	23/03/2020
Adam	Knight	ITC Certificate in Outdoor First Aid	Ext 253	23/02/2019
Richard	Leech	ITC Certificate in Outdoor First Aid	Ext 237	23/02/2019
Bernie	Littler	Emergency First Aid at Work		03/05/2019
Louise	Loveridge	Standard First Aid	Ext 242	29/01/2016
Mark	McDonnell	Emergency First Aid at Work		03/05/2019
Dena	Moore	Emergency First Aid at Work	Ext 0	23/11/2019
Steve	Myatt	Emergency First Aid at Work	Ext 252	03/05/2019
Laura	Pheasey	Emergency First Aid at work	Ext 249	28/02/2017
Andrea	Poyner	Emergency First Aid at Work	Ext 235	03/05/2019
Dan	Smith	Emergency First Aid at work		03/05/2019
David	Sutton	Emergency First Aid at Work	Ext 257	25/06/2018
Jade	Timperley	Emergency First Aid at Work		03/05/2019
Lianne	Alcock	National Rescue Award for Swimming Teachers &		
		Coaches	Ext 239	01/12/2018
Claire	Williams	Emergency First Aid at Work	Ext 231	03/05/2019
Hannah	Willott	Emergency First Aid at Work	Ext 237	03/05/2019

The Medical Room is situated in the Main Reception/bungalow

ALL accidents/injuries that occur to students, staff or visitors must be recorded.

All 999 incidents must also be reported to a member of the Senior Leadership Team.

If an ambulance needs to be called, staff will:

☐ Outline the full condition and how it occurred

☐ Give details regarding the child's date of birth, address, parents' names and any known medical conditions.

Student's will be accompanied to hospital by a member of staff if this is deemed appropriate. Staff cars should not be used for this purpose. Parents must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

Information

Confidential information will be shared with external medical staff if it is deemed appropriate. Confidentiality will be maintained at all times.

Record keeping

The Governing Body will ensure that written records are kept of all medicines administered to pupils on the school premises. These records offer protection to staff and students and provide evidence that agreed procedures have been followed. A parent/carer will be informed at the earliest opportunity if the school is made aware that their child has been unwell

Complaints

Should Parents/Carers or students be dissatisfied with the support provided they should discuss their concerns directly with the School. If for whatever reason this does not resolve the issue, they may make a formal complaint via the School Complaints Policy.

Policy

The Governing Body and Head teacher will be responsible for ensuring that this policy is implemented accordingly.

Additional information post adoption of policy on 4th November 2014

<u>Pupils attending hospital via ambulance from school</u> - if a care plan is in place, a copy of this will be given to the paramedics on site.

Confidential Care Plans are kept in SSC. Dena Moore is responsible for ensuring their update. Care Plans are always checked before any medication is given to the student.

<u>Educational Visits</u> - Copies of Care Plans are given to the leading member of staff prior to any visit. Staff are to ensure that Dena Moore is aware of all pending visits and student lists to ensure that medical information is gathered prior to the visits.