



Policy Name	SUPPORTING STUDENTS WITH MEDICAL CONDITIONS
Relevant To	Federation <input checked="" type="checkbox"/> Bidwell Brook Only <input type="checkbox"/> Ellen Tinkham Only <input type="checkbox"/>
Type of Policy	Model <input type="checkbox"/> School <input checked="" type="checkbox"/>
Name of Policy Holder	Nikki Burroughs
Subject/Department	Health & Safety
Approved By	Full Governing Body <input type="checkbox"/> CBT Governors <input checked="" type="checkbox"/> T&L Governors <input type="checkbox"/> SLT <input type="checkbox"/>
Version Date (if applicable)	n/a
Date of Last Review	Summer Term 2023
Date of Next Review	Spring Term 2026

1. The Learn to Live Federation aims to ensure that students with medical needs receive proper care and support. Our intention is to ensure that students with medical conditions should have full access to education including trips and PE. The governing body will ensure that staff are supported and trained and competent before they take on the responsibility of supporting students with medical conditions.
2. The school's insurance will cover liability relating to the administration of medication.
3. NHS Special school Nurses will be responsible for ensuring the following:
 - Carrying out a health assessment of prospective students and plan care in conjunction with the pupil, their family and the school
 - Review care plans annually or as medical needs change
 - Students over 18 years of age are under the care of adult health care services, their health care plans should be assessed/planned and reviewed by the school along with adult services the pupil and their family.
 - Students over 18 years of age are not the responsibility of the school nurses but school nurses may support teachers to approach relevant professionals.
4. The above procedures will be monitored and reviewed by Core Business Team.
5. Where identified as being necessary, Individual Health Care Plans (IHCP) will be developed between Learn to Live Federation, healthcare professionals and parents so that the steps needed to help a student manage their condition and overcome any potential barriers to getting the most from their education are identified. The IHCP will include all information deemed necessary by the child's health professionals.
6. The Executive Head will have the final decision on whether an Individual Health Care Plan is required, and if the school is able to support the child to access education. The decision will be taken in collaboration with other professionals

Students with Asthma

7. The Learn to Live Federation has decided to hold an emergency inhaler and spacer for the treatment of an asthma attack.
8. NHS special school nurses will provide the following on an annual basis:
 - Instructing all staff on asthma management and to specific classes on the needs of their pupils
 - Instructing all staff on the existence of this policy
 - Instructing all staff on how to check the asthma register
 - Instructing all staff on how to access the inhaler
9. School nursing assistants, school staff and the H&S manager will be responsible for the storage, care and disposal of asthma medication.

10. School nursing assistants will be responsible for ensuring that there has been written consent from parents for the administration of the emergency inhaler and spacer. The emergency inhaler/spacer will only be available for students who have been diagnosed with asthma and have been prescribed reliever inhaler AND for whom parental consent has been given. This information shall be recorded in the student's IHCP plan.
11. School nursing assistants will be responsible for the supervision of administration of medication and for maintaining the asthma register.
12. School nursing assistants and school staff will be responsible for ensuring parents are informed in writing when the emergency inhaler/spacer has been used.

Students with Anaphylaxis

13. The Learn to Live Federation has decided that schools may hold an emergency adrenaline auto-injector for the treatment of an anaphylaxis attack for pupils who have been diagnosed with anaphylaxis and prescribed an auto-injector.
14. NHS special school nurses will be responsible for ensuring the following:
 - Instructing staff on the symptoms of an anaphylaxis attack and procedures for individual pupils.
 - Instructing staff on the existence of this policy
 - Instructing all staff on how to check the pupil medical register
 - Instructing all staff on how to access the auto-injector (if held)
15. NHS special school nurses will be responsible for ensuring that designated staff in schools where an emergency auto injector is held:
 - Recognise the signs of an anaphylaxis attack and when emergency action is necessary
 - Know how to administer the auto-injectors
 - Make appropriate records of attacks
16. School nursing assistants and H&S manager will be responsible for the storage, care and disposal of the adrenaline auto-injector.
17. School nursing staff will be responsible for ensuring that there has been written consent from parents for the administration of the emergency auto-injector. The emergency auto-injector will only be available for students who have been diagnosed with anaphylaxis and have been prescribed an auto-injector AND for whom parental consent has been given. This information shall be recorded in the student's IHCP plan.
18. Classroom staff will be responsible for the supervision of administration of medication and for maintaining the pupil medical register.
19. Class teachers will be responsible for ensuring parents are informed when the auto-injector has been used.

THE ADMINISTRATION OF MEDICINE

20. The staff of the Learn to Live Federation will ensure that young people with medical needs receive proper care and support at school. The Headteacher will accept responsibility in principle for members of staff giving or supervising a young person taking prescribed medication during the day. Members of staff will receive appropriate training to administer and/or supervise medication. Competency will be achieved through attending theory training given by the special school nurses and completion of a workbook. Competency will be maintained by attending an annual update and regular administration of medications. given by the school nursing service. Staff will adhere to the “6 Rights” principles outlined in their training.
21. Any parent/carer requesting the administration of medication will be given a copy of this policy.
22. Prescribed medication will be accepted and administered in the establishment.
23. Non-prescription medication will only be accepted and administered in the following circumstances:
 - All medication to arrive in school in a factory sealed container complete with box and any paperwork.
 - Parents will be responsible for providing the school with written consent to include dosage and frequency/reason to administer. This must be in line with the manufacturers’ guidelines.
 - Parents accept responsibility for any side effects caused by non-prescription medication.
 - Parents are responsible for informing the school if there are any changes to their child’s medication.
 - Medication will not be administered before 1200 unless parents are able to confirm the time of last dosage.
 - The following non-prescribed medications will be administered in school - Paracetamol, Ibuprofen and Antihistamines. In exceptional circumstances other medications may be administered with the prior agreement of the head teacher. Topical creams which do not contain medication
24. Prior written parental consent is required before any medication can be administered.
25. Only reasonable quantities of medication will be accepted (no more than one week’s supply).
26. All medicines arriving in or leaving school are to be accounted for under locally agreed procedures.

27. Each item of medication should be clearly labelled with the following information:
- Student's name
 - Name of medication
 - Dosage
 - Frequency of dosage
 - Date of dispensing
 - Storage requirements (if important)
 - Expiry date (if available)
28. The school will not accept items of medication which are in unlabelled containers or not in their original container.
29. Medicines will be stored in locked cabinets in either the medical room or classrooms as appropriate unless it is required to be with the child at all times. In which case other appropriate arrangements will be made.
30. Staff administering medicines will record and sign each time a medicine is administered. Written records of all medication administered to every pupil will be held by the school in a secure location and may be made available to parents on request.
31. If a pupil refuses their medication, staff will record this, report to parents as soon as possible and follow the protocol laid down in the IHCP.
32. Where it is appropriate to do so, students will be encouraged to administer their own medication - if necessary, under staff supervision. Parents/carers will be asked to confirm in writing if they wish their student to carry their medication with them. In the absence of an agreement the procedures in paragraph 30 will apply.
33. It is the responsibility of parents/carers to notify the school if there is a change in medication, a change in dosage requirements, or the discontinuation of a student's need for medication.
34. Staff who assist in the administration of invasive medication will receive appropriate training/guidance through arrangements made with the school's Nurse Service. In pre-school settings arrangements will be made through Primary Care Health Visitors.
35. The school will continue the administration of medication to a student whilst on activities away from the premises.