

# **Stepney All Saints School**

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## **MEDICAL POLICY**

**Committee Review:** P&C

**Ratified:** June 2020

**TBR:** June 2021

**SLT Responsible:** V Jech

**This policy adheres to the Department for Education guidance ‘Supporting Students in School with Medical Conditions’ (September 2014). Please see this document for further details. Also to incorporate ‘Guidance on the use of emergency Salbutamol inhalers in schools’ (October 2014) and ‘Guidance on the use of adrenaline auto-injectors in schools’ (September 2017).**

## **1. Aims**

- 1.1 To outline the systems in place to support children with medical needs so that they can receive full access to education including participation in physical education and school trips.
- 1.2 To safeguard all students and staff.
- 1.3 To clarify the responsibility of parents and students in relation to medication required at school and management of any medical condition.
- 1.4 To clarify the responsibility of the school.
- 1.5 To avoid unnecessary exclusion of any child who is fit for school but who is completing a course of medical treatment or has a newly diagnosed condition.
- 1.6 To safeguard against accidents arising from the storage and administrations of medicines.

## **2. Medicine and Medical Care**

- 2.1 A medicine is defined as any substance used for the treatment or prevention of medical conditions.
- 2.2 Parents must provide the school with up-to-date emergency contact details for all students and ensure that they or their nominated person is able to collect the child in an event of an emergency.
- 2.3 In the case of a student becoming ill or requiring first aid at school, the student will be accompanied to the medical room to see the Medical Needs Co-ordinator or a First Aider. The Medical Needs Co-ordinator and First Aiders have completed a training course that was approved by the Health and Safety Executive but are **not qualified doctors or nurses**.
- 2.4 The medical room is for administering medication and emergency first aid, it is not a refuge for students to attend instead of lessons. Once assessed and it has been decided that the student is well enough to stay in school they will return to class. Report slips will be supplied for more minor interventions such as requiring an ice- pack or needing a small graze dressed. This report slip should be taken home and shown to parents/carers.
- 2.5 In any instance of any head injury or potential head injury the student will be seen for first aid and parents/carers will be notified. The student will be

issued with a head injury advice letter to accompany the report slip. In some cases parents/carers will be asked to collect their child.

- 2.6 Should a student require **urgent** medical attention the emergency services will be called first. Parents/carers are called immediately after this call has been made. If necessary the Medical Needs Co-ordinator or a member of the Senior Leadership Team will accompany the student and wait until the parent/carer arrives.
- 2.7 If a student's health deteriorates as a result of a pre-existing medical condition First Aiders will follow the individual health care plan or emergency protocol if this has been supplied to the school. This may involve implementing preventative measures, administering emergency medication and/or calling emergency services as appropriate.
- 2.8 If a student appears under the influence of drugs or alcohol parents/carers will be called to collect their child to ensure their safety and to safeguard the wellbeing of other students, staff and visitors. Please refer to the Drug and Alcohol policy for further details. If a student is visibly unwell due to drug or alcohol use they will be assessed by a First Aider who may need to administer first aid and summon appropriate support.

### 3. General Responsibilities

- 3.1 Parents/carers have prime responsibility for their child's health and are responsible for supplying information to the school about their child's medical condition, medication changes and other relevant updates as soon as possible. This includes attending care plan and health needs reviews with Tower Hamlets School Nursing Team.
- 3.2 Students will ensure their emergency medication is carried with them at all times including to and from school. Students who have food allergies will try to avoid them where possible.
- 3.3 Students will provide information to school staff on how their medical condition affects them and will contribute and comply with their health care plan.
- 3.4 Parents/carers will if their child requires it provide a spare asthma inhaler plus Volumatic spacer, adrenaline auto-injector & anti-histamine, diabetic medication, or epilepsy emergency medication to be stored in the medical room in the event of an emergency. **If a student does not have their medication or it has expired and there is no spare in school you will be asked to bring it in immediately or you may be asked to collect your child. It may be unsafe for your child to remain in school without their emergency medication.**
- 3.5 ***Although medical Notices are featured on the school website, written reminders and text messages reminders may be sent.***  
**It IS the PARENT/CARER'S RESPONSIBILITY to ensure that they maintain adequate supplies of their child's medication and order new stock, replacement inhalers or adrenaline auto-injectors before the medication expires.**
- 3.6 The Governors and delegated member of the Senior Leadership Team

(SLT) oversee the management of the Medical Policy.

- 3.7 The Medical Needs Co-ordinator's role involves being the primary First Aider, oversee the daily management of medical care, medical lists and disseminate relevant information to staff regarding the medical needs of students in their class. **The school does not provide a full time nurse.**
- 3.8 It is the class teacher, trip organiser or PE department's responsibility to ensure that any necessary medication and a First Aid kit are taken offsite or on school trips.
- 3.9 First Aiders and the Medical Needs Co-ordinator are responsible for administering medical care and emergency first aid in school. Teaching and support staff working with students who have Asthma, Allergies and Epilepsy and other health conditions are offered health needs training from Tower Hamlets School Nurses.

#### **4. Administering Medication in School**

- 4.1 There is no legal duty which requires school staff to administer medication.
- 4.2 The policy of the school is not to administer medication unless the student has a medical condition which, if not managed, could limit their access to education. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- 4.3 Only when it is absolutely necessary will the Head teacher accept responsibility for First Aiders administering or supervising the taking of prescribed medication during the school day.
- 4.4 It is **not** deemed necessary for the school to administer medicine where: a child is prescribed to take medication three times a day - it can be administered by the parent before school, after school and before the child goes to bed.
- 4.5 If a parent feels that their child's situation differs to those above (for example, the child needs medicine four times a day) then they must discuss this with the Medical Needs Co-ordinator or Head of Year or member of SLT.
- 4.6 The school does not administer medication such as Paracetamol and Ibuprofen if a student has a high temperature, headache or menstrual cramps. If you feel your child may need this you could supply them with one tablet to take if needed during the school day. The school does not recommend students carry whole packets of tablets on their persons and does not take any responsibility for them being self-administered.
- 4.7 In situations where it is absolutely necessary for students to take medication in school a letter of consent from the parent/carer must be provided or consent form can be filled in.
- 4.8 Students that have been prescribed a reliever inhaler and for whom consent for the use of the emergency Salbutamol inhaler has been given (on the medical update form) can be assisted with the administration of this in an **emergency situation only.**

- 4.9 Students who have an Allergy Action Plan and are prescribed an adrenaline auto- injector (AAI) and for whom consent for the use of the school's spare AAI has been given (on the medical update form) may receive this in **an emergency situation and with guidance from the emergency services**. Due to the different dosages of AAI the school would seek advice from the 999 call handler.

## 5. Storing Medication in School

- 5.1 To comply with guidelines the student's prescribed medication can only be accepted if it is in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage.
- 5.2 The medication must be stored safely. Student medication is stored in the medical room located in the main corridor. The medication is stored securely yet accessible in an emergency. All First Aiders and SLT have keys.
- 5.3 The school will not store large volumes of medication.
- 5.4 Prescribed Eczema cream that has not been opened or used for several months will be returned home via the student.
- 5.5 Spare emergency medication is stored securely in a box together with the child's care plan and photo in the medical room.
- 5.6 A medication fridge is available in the medical room for medicine that needs to be stored at a certain temperature.

## 6. Medical Fitness for Attending School

- 6.1 Parents will ensure that their child is well enough to attend school.
- 6.2 Where students have been unable to attend school due to a prolonged illness, exacerbation of an existing medical condition, ongoing investigations or has had a hospital admission it is expected that parents/carers will provide medical evidence of this to the Attendance Officer and Medical Needs Co-ordinator. This can take the form of clinic reports, hospital discharge summaries or GP printouts of recent consultants and medical history.
- 6.3 It is expected that parents/carers or emergency contacts will be available to collect the student as soon as possible should they become unwell and need to go home. Parents can give their permission for their child to go home unaccompanied or to a relative's house if the illness/injury is minor in nature. Stepney All Saints School does not take any responsibility for the student. If a student is very unwell they must be collected as soon as possible.
- 6.4 In the interests of students, staff and visitor health and to prevent any epidemics it is expected that parents of students who have infectious illness will notify the school at the earliest opportunity. They will be required to keep their child at home for the

required exclusion period as per Local Authority and Health Protection Agency Guidance.

- 6.5 If a student develops an ongoing complaint (illness/injury/pain) it is the responsibility of the parents/carer to arrange for their child to be seen by a medical specialist or GP. There are no registered nurses or doctors on-site.

## **7. Health Care Plans**

- 7.1 In the case of a student with a chronic illness, medical need or a potentially life threatening condition they will have an existing health care plan in place, or will be referred to Tower Hamlets School Nursing Service for a medical review or care plan.
- 7.2 Some health care plans will be reviewed in school by the local authority school nurses and parents may attend the appointments unless they have given permission (on the medical update form) that they are happy for their child to meet with the nurse on their own.
- 7.3 Students with Allergy Action Plans who are at risk of Anaphylaxis will keep a copy of their health care plans with them at all times alongside their emergency AAls and other prescribed medication.
- 7.4 Copies of health care plans and other relevant student medical information are stored securely in the medical room.
- 7.5 Health Care Plan advice and actions will be shared with school staff as necessary in order to safeguard the wellbeing of the student.
- 7.6 Some health care plans may be completed or reviewed in the community, for example Asthma Plans or Allergy Action Plans. In this situation parents/carers will be required to provide a copy of the updated plan to the school as soon as possible even if there have been no changes.

## **8. Record Keeping**

- 8.1 Parents/carers must complete the medical update form when the child starts school. This will include their doctor's name and contact details, details of the child's medical conditions and medication that is required.
- 8.2 A record will be kept of medication administered in school.
- 8.3 First Aiders attending to a student will complete and sign the School Accident Report Duplicate book. The white copy will be given to the student to take home. The blue insert is the school's record of the intervention.
- 8.3 Records of incidents/accidents occurring on school premises or on school visits and injuries to staff and visitors will be recorded in the Accident Record Folder that is kept in Reception and/or recorded in the School Accident Report Duplicate Book.

- 8.4 Brief details of the student's medical condition will be recorded on the student notes on SIMS by the Medical Needs Co-ordinator or School Registrar. Medical events such as requiring first aid or needing to go home because the student is unwell will also be recorded on SIMS.

## 9. Vaccinations in School

- 9.1 Vaccinations that occur in school are delivered by a team of nurses employed by Vaccination UK Ltd who are contracted by the NHS to administer immunisations as per the NHS Vaccination Schedule.
- 9.2 The HPV (human papillomavirus) vaccination is offered in Year 8 (age 12-13) to protect against cancers caused by the HPV virus.
- 9.3 MenACWY and the 3in1 Teenager Booster vaccinations are both offered in Year 9 (age 13-14). MenACWY protects against four different strains of the meningococcal bacteria that cause meningitis and blood poisoning; A, C, W and Y. The 3in1 Booster vaccination is given to boost protection against Diphtheria, Tetanus and Polio.
- 9.4 Consent forms will be sent home via students to be signed and should be returned to the box in Reception to be passed onto the Immunisation Co-ordinator at Vaccination UK who will collect them in advance of the vaccination date.
- 9.5 The parent/carer with parental responsibility should sign the form to consent or alternatively can sign the refusal box if the student has already received the vaccinations or they do not want their child to be vaccinated.
- 9.6 Young people under the age of 16 can give or refuse consent if considered competent by the nursing staff. If the student self-consents the nurse will complete a Gillick Competency Assessment Form. Further information can be found via these links.  
<https://www.nhs.uk/conditions/consent-to-treatment/children/>  
<https://learning.nspcc.org.uk/research-resources/briefings/gillick-competency-and-fraser-guidelines>