



Policy title	Supporting Students with Medical Conditions
Date policy ratified by Governing Body	Re-issued no change May 2021
Signed by Print name	S Featherstone
Effective date	May 2021
Review frequency	Annually
Review date	May 2022
Governing Body-Sub Committee	Behaviour, Attitudes and Personal Development

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Supporting Students with Medical Conditions

The Hayfield School is a fully inclusive Academy and welcomes and supports students with medical conditions. The Hayfield School is fully committed to providing students with medical conditions the same opportunities as others at the School in line with statutory guidance “Supporting pupils with medical conditions” December 2015 and the “Children and Families Act” 2014.

Every student with a medical condition who attends Hayfield will be supported to fully access education, educational trips and physical education enabling them to play a full and active role in school life and remain healthy. The Hayfield School listens to parents and students and this is reflected when considering organising structured and unstructured activities, extended school activities and residential trips to ensure everyone is involved and included.

Children with Health Needs who cannot attend School

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

It is also the case that a student’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 school so that effective support can be put in place. This will require establishing relationships with local health professionals to help them.

With long-term absences due to health problems, attainment may be affected. Reintegration back into school should be properly supported so that students with medical conditions fully engage with learning and do not fall behind when they are unable to attend. There are support mechanisms in school such as Student Support Services (Mrs Conroy and Mrs Hartshorn) to help students re-integrate 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 student’s educational attainment and emotional and general wellbeing.

Should the medical condition lead to prolonged absence from school, the school will work with the family and partnership agencies to arrange alternative provision to minimise the impact of the absence on the student’s education.

We will help to ensure they can:

- Be healthy.
- Stay safe.
- Enjoy and achieve.
- Make a positive contribution.
- Achieve economic wellbeing once they have left The Hayfield School.

We will ensure this by educating all staff about the medical conditions that affect students at the school and ensuring that staff receive the appropriate training. Also, some students with medical conditions will have Individual Health Care Plans which will be devised with parents,

students, healthcare professionals and the Special Educational Needs Co-ordinator (SENCO) at The Hayfield School.

Under the Health and Safety at Work Act 1974 the employer is responsible for making sure that The Hayfield School has a Health and Safety Policy. This should include procedures for supporting students with medical needs, including managing and administering prescribed medication.

The Control of Substances Hazardous to Health (COSHH) Regulations require that no person is placed at risk from the use of any hazardous substances. A medicine is a hazardous substance to those administering it and to those who may inadvertently be exposed to it.

The Children's Act 1989 authorises people who have care of a child (other than parental responsibility), subject to the provisions of the Act, to do what is reasonable in all the circumstances of the case for the purpose of safeguarding or promoting the child's welfare.

The Disability Discrimination Act (DDA) 1995 requires that The Hayfield School must not discriminate against a Disabled Person. Any students with medical needs who are also disabled will be protected under this Act.

Most students may need to take medication at some time whilst they are attending The Hayfield School. This policy gives clear guidance and will be enhanced by an effective staff management system, which will support individual students with medical needs.

The Hayfield School 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 Hayfield School has a legal duty to make arrangements to ensure that students with medical needs are able to attend the school with as little disruption as possible. A policy which has appropriate procedures will be better placed to enable students attending the school 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.

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 regards to managing and administering prescribed medications.

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 Hayfield School.

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.

The National Curriculum Inclusion Statement 2000 emphasises the importance of providing effective learning opportunities for all students and offers three key principles for Inclusion.

RESPONSIBILITIES

The Board of Governors of The Hayfield School

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

The Board of Governors must review the arrangements for staff training on essential medical issues within school such as:

- Allergies.
- Asthma.
- Diabetes.
- Epilepsy.

The Board of Governors recognise that there is a duty of care to all students and will do all that is reasonably practicable to safeguard and promote their welfare.

The Headteacher

The Headteacher is responsible for implementing the policy and procedures in the school and should ensure that all parents/carers and staff are aware of the policy.

Where members of staff volunteer to assist, the Headteacher 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 absences.

An up-to-date record is to be kept of all training.

The Headteacher should ensure that a written Individual Health Care Plan for each student with specific medical needs is drawn up in conjunction with the parent/carer and/or General Practitioner (GP).

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

Where a Headteacher deems it necessary to share information with other staff within the school, they should first seek permission from the student or their parent/carer. Parents/Carers' culture and religious views should be respected at all times.

The Parents/Carers

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

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

Where a student has acquired an injury outside of school hours, this must be dealt with by parents/carers. The school is not in a position to diagnose nor does it have the equipment to be able to make decisions on breaks, fractures or any internal complaints or injuries.

If a student suffers a fracture or is incapacitated in any way eg requires a sling or crutches, parents/carers must first bring their child into school so that a Risk Assessment can be performed to assess if they are fit and able to attend school (including their ability to evacuate themselves from the building in an emergency), either with a full timetable or whether an adjustment needs to be made temporarily.

If a student is dealing with any social, emotional or mental health issues, the school is to be kept up to date with treatment so that they can act accordingly and support other agencies and health professionals involved.

If a student becomes seriously ill during the school day, they should be collected by a parent/carer as soon as possible. It is vital that the school has relevant home and emergency contact numbers held on file; it is the parent/carer's responsibility to provide the school with updated contact details as necessary.

The School Staff

A teacher or other member of staff at the school, who look 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 its individual merits and school staff have the right to refuse to be involved. It is important that school 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 the 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 in small groups of staff who are there regularly to support that individual.

Training Logs (see above) are to be kept for both insurance and audit purposes.

ADMINISTERING MEDICINES

It is the school's policy that staff DO NOT administer medication to students (except in certain specified circumstances) but that they can supervise students taking their own medication.

If parents/carers prefer to administer medicines themselves to their children during school hours, they must first discuss and arrange this with the responsible staff (in advance, in writing).

No child under school leaving age should be given medicines containing aspirin or ibuprofen unless it has been prescribed by a doctor and a written consent has been signed by their parent/carer.

Consent enabling a member of school staff to administer medication to a child must be completed by a parent/carer in all cases. No medication will be given under any circumstances without this written, signed consent.

The school will keep an individual student register of drugs for all medicines brought into the school by a parent/carer for administration to a student during the school day. The register will be signed by the responsible staff member and also the student. When medication has been administered and in the case of controlled drugs, two staff signatures will be required.

Non-prescription Medication

School staff will provide medication to students which has not been prescribed by a Doctor, Dentist or Nurse Practitioner provided that a written request for the school to administer the medication has been signed by the parent/carer and received by the school.

However, in the case of non-prescription pain relief medication, this will only be administered in line with the advice on the packaging to ensure maximum dosages are not exceeded and students will be asked to confirm when the previous dose, if out of school, was taken.

The school reserves the right to refuse to administer non-prescription pain relief medication if there are grounds to doubt whether maximum dosages have been, or are likely to be, exceeded. In these circumstances, parents will be informed. Students are not permitted to carry non-prescription pain relief medication around the building.

Short-term Medical Needs

Medicines should only be brought into school when essential i.e. where it would be detrimental to a student's health if the medicine was not taken during the school 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 is such that the student does not need to take any medication whilst in school e.g. a dose frequency of three times per day rather than four times per day (as per the Medicines Standard of the National Service Framework for Children).

Where medicines must be taken during school hours they must be provided in an original container (as dispensed by the pharmacist) and include the prescriber's instructions for administration. Prescribers should be encouraged to provide two prescriptions for a student's medication where appropriate and practicable; one for home use and one for use in school (again, as per the Medicines Standard of the National Service Framework for Children).

Self-administration

It is the school's policy that staff DO NOT administer medication to students (except in certain specified circumstances) but that they can supervise students taking their own medication.

Students are encouraged to take responsibility for their own medication 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 student might not ever be mature enough to take medical responsibility for themselves whilst in school. If it is not appropriate for a student to self-manage, the relevant staff should help to administer medicines and manage the procedure for them. If a student 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 Health Care Plan. Parents/Carers should be informed IMMEDIATELY so that alternative options can be considered.

As students grow, mature and develop they should be encouraged to participate in decisions about their medication and to take responsibility. Where students are prescribed controlled drugs staff will need to be aware that these are to be kept in safe custody. Students should be able to access these, when required, for self-medication, if it is agreed that this is appropriate. Self-medication does not mean that a student carries their medication with them (except in exceptional and pre-agreed circumstances). Self-medication means that a student can take the medication without adult support (given via a spoon or injected); furthermore the medication will continue to be taken in the presence of the responsible staff member.

Long term medical needs and Individual Health Care Plans

Parents/Carers of children with long term medical conditions are often concerned that their child's health will deteriorate when they attend secondary school. This is because students with long term and/or complex medical conditions may require ongoing support, medicines and care whilst at school 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 a student'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 school so that effective support can be put in place. This will require establishing relationships with local health professionals to help them.

The school 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 school should be properly supported so that students with medical conditions fully engage with learning and do not fall behind when they are unable to attend. There are support mechanisms in school such as Student Support Services to help students re-integrate 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 student's educational attainment and emotional and general wellbeing.

Some students 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 school must comply with their duties under that Act. Some may also have Special Educational Needs (SEN) and may have a Statement or Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision.

Where a student does have ongoing and complex medical needs and an Individual Health Care Plan is essential to manage their needs, the Health Care Plan should be completed by parents/carers, designated school staff who have volunteered (or been specifically recruited) and health professionals as well as other appropriate external agencies involved in the care of the student.

CONTROLLED DRUGS

When Controlled Drugs (primarily “Ritalin” prescribed for Attention Deficit Syndrome) are kept on school premises, a written stock record is 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 each term. These drugs must be kept in a locked cabinet within a room with restricted access.

Student Privacy

Where invasive or intimate treatments are required then the person carrying out such a treatment should be of the same gender as the student receiving the treatment, unless agreed otherwise and with written and signed parent/carer consent. One additional adult should be present whilst the treatment is carried out unless intimate care procedures indicate otherwise.

Those staff members who volunteer (or have been appointed specifically) to provide intimate or invasive treatments must be suitably trained. Where invasive or intimate treatments are required but no member of staff volunteers to provide it, the Headteacher and parents/carers must respect the staff member’s wishes not to do so.

Refusing Medicines

When a student refuses their medication, the parent/carer should be informed IMMEDIATELY and this should be recorded on the register of medicines. School staff members cannot force a child to take any medication.

STORAGE OF MEDICINES

Student Medications (whether prescription or otherwise) kept in school are stored in the First Aid Room unless:

- Otherwise stated on a student’s Health Care Plan.
- A student self-manages their medication such as diabetes, allergy relief such as EpiPens, or asthma.

The First Aid Room is monitored at all times during the school day and is frequently occupied by the responsible staff member. All medication is stored securely and labelled appropriately.

DISPOSAL OF MEDICINES

Parents/Carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. Medicines should be collected from school at the end of each term. Liquid medication will only be stored on site for six months from the date of prescription or the date of first opening (if opened in the school).

DISPOSAL OF SHARPS

Sharps boxes/buckets provided must always be used for the disposal of sharps. The sharps boxes/buckets will be collected when required under the waste disposal contract, currently operated by SRCL Ltd.

SCHOOL TRIPS AND SPORTING ACTIVITIES

Students with medical needs should be encouraged to participate in school extracurricular activities and trips as long as the safety of the student, other students and/or staff is not placed at significant risk. The Hayfield School 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 medicines.
- Provision of properly-labelled single-dose sets.
- Copies of student Health Care Plans in the event of an emergency referral.
- Enhanced risk assessments based on the needs of the student.

When planning trips and extra-curricular 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 in writing to do this).

This must be covered in the event/trip 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/carers have consented in writing. If a student's medical condition could be aggravated by the location being visited or the planned activities at that location, they should not be permitted to go. If there is any doubt regarding the activity, the school must make the parent/carer aware and also, if necessary, seek advice from health professionals.

Some students will need to take precautionary measures prior to and/or during exercise and may need immediate access to medication afterwards. Any members of staff supervising students involved in physical education and sporting activities must be aware of the relevant medical conditions and emergency procedures for any student with a medical condition who is participating in the lesson or activity. For extracurricular activity or after-hours physical education lessons, where a student with a medical condition or need is participating, the level of supervision should be assessed and where necessary, increased.

It is important to note that it is the parent/carer's 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. Student medication, except in specific and agreed circumstances, must be handed to the teacher/trip leader and NOT carried by the student themselves.

EXAMINATIONS

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

For students with diabetes, they should take a blood-testing kit with them, a bottle of water, insulin and either dextrose tablets or Lucozade, etc. All items 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 room.

EpiPens should be taken into the exam room by the student and left on the desk. Any labels are to be checked by the exam invigilator on entry to the exam.

APPENDICES

1 Automated External Defibrillators

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.

HOWEVER, IT IS IMPORTANT THAT STAFF ARE AWARE THAT THE USE OF A DEFIBRILLATOR ON SOME PEOPLE CAN DO MORE HARM THAN GOOD. It is essential that those administering AEDs in school are aware of any such condition in the student concerned, via their Individual Health Care Plan.

AEDs are located in the Main Reception Foyer and the Community Sports Building Reception.

2 Complaints

It is possible that a parent/carer is unhappy with the manner in which the school is supporting their child or believes that the school is not adhering to this policy in some other way. The provision exists within statutory guidance for a parent/carer to raise their concern (or complaint) with the school via the Complaints Policy, which is posted on the school website.