



## **NOWER HILL HIGH SCHOOL**

<b>Title:</b>	<b>Supporting Students with Medical Conditions Policy</b>
<b>Date of Last Review:</b>	<b>May 2017</b>
<b>Date of Ratification by Governing Body:</b>	May 18 <sup>th</sup> 2017
<b>Status:</b>	Statutory
<b>Approval Authority:</b>	Governing Body
<b>Staff Lead:</b>	Deputy Headteacher Student Support
<b>Governor Lead:</b>	Chair of Governing Body
<b>Review Frequency:</b>	Every 2 Years
<b>Location:</b>	Website - Parents and Carers - Policies
<b>Date of Next Review:</b>	May 2019

# Medical Policy

Nower Hill High School (NHHS) is an inclusive community that aims to support and welcome students with medical conditions. NHHS aims to provide all students with medical conditions full access to education including school trips and physical education so that such children may enjoy the same opportunities at school as any other child.

The named person with overall responsibility for medical policy implementation: Louise Voden Deputy Headteacher Student Support.

This policy is written in accordance with:

- DFE statutory guidance on supporting pupils at school with medical conditions (December 2015)
- The Equality Act 2010
- Special Educational Needs and Disability Code of Practice (July 2016)

## **The aims of the Medical Room staff are:**

- To provide professional, sensitive and efficient care to all students
- To facilitate students' continuity in their education.
- For all school staff to be supported by medical staff when dealing with students with medical needs.
- To offer support guidance and update staff as necessary so that all staff feel confident in knowing what to do in an emergency and understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- To ensure students' safety and privacy when receiving medical/first aid care.
- To facilitate the sharing of information regarding the individual student's medical needs, taking into consideration the need for confidentiality and sensitivity, between the Medical staff, teaching staff, parents/carers and students.
- To ensure uniformity in the storage, documentation and administration of medication by medical room staff and first aiders who cover Medical.
- Students who require medical support whilst in school will have individual care plans which will be reviewed annually.

## **Medical Room Information**

The medical room is staffed by one staff nurse who is accountable to the Deputy Headteacher, Student Support and also to the Nursing and Midwifery Council (NMC) .The staff nurse works 5 days a week and is responsible for the management, supervision and organisation of all aspects of the medical room daily practice.

Designated first aiders within the school cover the School Nurse for lunch from 12.00 - 12.30pm.

The medical room opening times are 8.30am - 3.30pm daily.

Any member of staff may send a student to the medical room if they are concerned about the student's health; it may be necessary for the student to be escorted or the School Nurse may be called to the situation if the student is too unwell to come to the medical room.

## **Accidents**

All accidents are documented by the medical room staff on SIMS. If the accident is deemed serious, is caused by a hazard at school or requires hospital admission, then it will be reported immediately to the school's Health and Safety provider, to the Deputy Head Student Support and to the school's Health and Safety Officer. Data is presented once a term to the Health and Safety Committee by the School Nurse outlining medical room activity.

## **General Medical Emergency Procedures**

- All staff know what action to take in the event of a medical emergency. This includes:-
  - how to contact emergency services and what information to give
  - who to contact within the school.
  - how to administer an EpiPen or other adrenaline auto-injectors
- Training is refreshed for all staff at least once a year.
- If a student needs to be taken to hospital, the parent or carer will be asked to attend school and accompany them. A member of staff will accompany them if a parent or carer cannot get to school quickly and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the student knows.
- If a student is unwell and it is not an emergency, parents/carers should be contacted and asked to take the child to the G.P or A+E if they think fit. If unable to contact the parent/carer then the First Aider/School Nurse should ensure that a message is left on their phone outlining a brief summary of what is wrong and who to call back.
- If too unwell to return to school activities, the student should remain under observation in the medical room until contact has been made with the parent/carer.

## **Sending Students to the Medical Room**

If a student becomes unwell, teaching staff must send them to the medical room with a permission slip. No student will be seen by the School Nurse without a note unless it is an emergency. If a student is unwell, the supervising member of staff may need to arrange an escort to accompany the student to medical or contact the School Nurse to attend to the student in situ.

The School Nurse will assess the student and either treat him/her according to the symptoms, care plan (if documented) or arrange for the parent to collect him/her from school. Students who are unwell and attend the medical room will have their name logged, with time of arrival and departure, on a first aid treatment chart and treatment given documented on SIMS.

If a student is sent home unwell from school, Reception will be informed that the student is being collected and by whom. When the parent arrives the student will be signed out from Student Services and escorted to Reception by the School Nurse whenever possible.

## **Medication Storage and Administration**

The school medical room staff will follow the current NHHS Medication Protocol when administering medication to students. It is acknowledged that there will be students who are competent to manage their own health needs and medication. This is further addressed in the medication protocol.

## **Record Keeping**

### **Admission Forms**

Parents/carers are asked if their child has any health conditions or health issues on the enrolment form, which is filled out prior to admission. Parents of new students starting at other times during the year are also asked to provide this information on enrolment forms.

### **Individual Healthcare Plans**

An Individual Healthcare Plan is drawn up at enrolment or when a diagnosis is first communicated to the school. Important details about individual student's medical needs at school, their triggers, signs, symptoms, medication and other treatments are recorded. Further documentation can be attached to the Individual Healthcare Plan if required.

The parents, healthcare professional (if possible) and student with a medical condition are asked to fill out the student's Individual Healthcare Plan together. Parents then return these completed forms to the school.

If a student has a short-term medical condition that requires medication during school hours, a medication form plus explanation is sent to the student's parents to complete

The School Nurse follows up with the parents any further details on a student's Individual Healthcare Plan required or if permission for administration of medication is unclear or incomplete.

### **Ongoing Communication and Review of Individual Healthcare Plans**

Parents are asked to update their child's Individual Healthcare Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change.

### **Storage and Access to Individual Healthcare Plans**

Individual Healthcare Plans are kept in a lockable room within the medical area.

Apart from the central copy, specified members of staff (agreed by the student and parents) securely hold copies of students' Individual Healthcare Plans. These copies are updated at the same time as the central copy.

All members of staff who work with groups of students have access to the Individual Healthcare Plans of students in their care on request.

When a member of staff is new to a student group, for example due to staff absence, the school makes sure that they are made aware of (and have access to) the Individual Healthcare Plans of students in their care.

The school ensures that all staff protect student confidentiality.

Permission will be sought from the student and parents before sharing any medical information with any other party, such as when a student takes part in a work experience placement.

## **Use of Individual Healthcare Plans**

Individual Healthcare Plans are used by the school to:

- inform the appropriate staff and supply teachers about the individual needs of a student with a medical condition in their care
- identify common or important individual triggers for students with medical conditions at school that bring on symptoms and can cause emergencies
- identify students with particular health concerns whose details may need to be added to the school medical alert list
- ensure the school's local emergency care services have a timely and accurate summary of a student's current medical management and healthcare in the event of an emergency.

Where the student has a special educational need identified in an Educational Healthcare Plan (EHCP), the Individual Healthcare Plan should be linked to or become part of the EHCP.

The following information should be recorded in the Healthcare plans;

- the medical condition, its triggers, signs, symptoms and treatments
- the student's needs, including medication (dose, side effects, storage) 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 corridors, 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 exams, use of rest periods or additional support in catching up with lessons, counseling 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
- who in the school needs to be aware of the child's condition and the support required
- arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the student during school hours
- separate arrangements or procedures required for school trips or other school activities out outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

## **Staff Training**

The school holds training on common medical conditions once a year. A log of the medical condition training is kept by the school.

All school staff who volunteer or who are contracted to administer medication are provided with training by the School Nurse. The school keeps a register of staff who have had the relevant training.

This school keeps an up-to-date list of members of staff who have agreed to administer medication and have received the relevant training.

## **SIMS**

Students who have been treated in the medical room will have details of treatment given documented on SIMS. This is accessible by the Deputy Headteacher, Student Support and medical room staff. Details of Medical conditions as given by parents are documented within Medical Conditions on SIMS and are accessible by all staff. Parents are asked to confirm diagnosis details with a Doctor's letter when deemed necessary by the Student Support Leadership Team. A copy of the Doctor's letter will be given to the School Nurse.

## **First Aid Kits**

The medical room provides and checks first aid bags to be given to staff for school trips, these must be requested by email and signed out by the accompanying member of staff. When returned the medical room staff should be informed if any of the supplies were used so that they can be replenished. Records of first aid kit bag contents are held within the Medical room.

All other departments within the school are responsible for checking, ordering and replenishing first aid supplies within their own area.

## **Infection Control**

The Medical room staff will follow Public Health England infection control guidelines when caring for an infectious student and inform the Deputy Headteacher, Student Support if there is a concern which may need to be communicated to parents/carers.

## **Inclusion**

### **Physical Environment**

The school is committed to providing a physical environment that is accessible to students with medical conditions.

The school's commitment to an accessible physical environment includes out-of-school visits. The school recognises that this sometimes means changing activities or locations.

### **Social Interactions**

The school ensures the needs of students with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after school.

The school ensures the needs of students with medical conditions are adequately considered to ensure they have full access to extended school activities such as school productions, after school clubs and residential visits.

All staff at the school are aware of the potential social problems that students with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the school's Anti-Bullying and Behaviour Policies.

Staff use opportunities such as Personal Development lessons to raise awareness of medical conditions amongst students and to help create a positive social environment.

### **Exercise and Physical Activity**

The school understands the importance of all students taking part in sports, games and activities.

The school ensures all classroom teachers; PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all students.

The school ensures all classroom teachers, PE teachers and sports coaches understand that students should not be forced to take part in an activity if they feel unwell.

Teachers and sports coaches are aware of students in their care who have been advised to avoid or to take special precautions with particular activities.

The school ensures all PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for students' medical conditions when exercising and how to minimize these triggers.

The school ensures all students have the appropriate medication or food with them during physical activity and that students take them when needed.

The school ensures all students with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.

### **Education and learning**

The school ensures that students with medical conditions can participate fully in all aspects of the curriculum and ensures that reasonable adjustments and extra support are provided.

Students with medical conditions may miss a lot of time at school, may have limited concentration or be frequently tired. All teachers at this school understand that this may be due to their medical condition and will contact the SSLT or the School Nurse if they have concerns.

In extreme cases where the child is unable to attend school, home tuition will be organized until such time as the child has recovered well enough to return to school on either a full or part-time timetable.

Teachers are aware of the potential for students with medical conditions to have special educational needs (SEN). Students with medical conditions who are finding it difficult to keep up with their studies are referred to the SENCO. The school's SENCO consults the student, parents and the student's healthcare professional to ensure the effect of the student's condition on their schoolwork is properly considered.

The school ensures that lessons about common medical conditions are incorporated into the Personal Development Plan, Citizenship and other parts of the curriculum such as Science.

## **Residential visits**

The trip leader will follow the school's educational visits checklist. Parents are required to declare pre-existing medical conditions and to consent to urgent medical treatment or first aid. Parents are also asked for permission to administer paracetamol which must be provided by the parent in advance of the trip. The school will provide a designated staff first aider who will be assessed in the administration of medication as outlined in attachment 1.

Risk assessments are carried out by the school prior to any out-of-school visit and medical conditions are considered during this process. Factors the school considers include: how all students will be able to access the activities proposed; how routine and emergency medication will be stored and administered; and where help can be obtained in an emergency. Additional risk assessments may need to be carried out for students with specific medical conditions participating in the visit.

The school understands that there may be additional medication, equipment or other factors to consider when planning residential visits. This school considers additional medication and facilities that are normally available at school.

Risk assessments are carried out before students start any work experience or off-site educational placement. It is this school's responsibility to ensure that the placement is suitable, including travel to and from the venue for the student. Permission is sought from the student and their parents before any medical information is shared with an employer or other education provider.

## **Vaccinations**

### **Polio, Diphtheria, Tetanus and Meningitis ACWY Vaccinations**

The Area Health Team will offer students the opportunity to receive this vaccination in accordance with the Childhood Vaccination Programme. A consent form will be sent to parents six weeks prior to the vaccination.

These vaccinations will be administered by the Area Health Team in the school.

### **HPV vaccinations**

The Area Health Team will offer the HPV vaccination in accordance with the department of Health Guidelines. Consent forms will be sent to parents six weeks prior to the vaccination.

These vaccinations will be administered by the Area Health Team in the school.

As part of our emergency first aid equipment Nower Hill has a defibrillator on site. Staff members are trained how to use this equipment and the equipment is checked weekly.

We also keep asthma inhalers on site for emergency use, but it is essential that students carry their own inhalers during school hours.



**Attachment 1**

**Residential Trip – First Aider/Designated staff member**

**Assessment in Demonstration of Safe Practice in Administration of Paracetamol**

Name		Date	
Demonstrates Good Understanding of :			
	YES	No	
Has read and is familiar with medication protocol			
Request for Admin of Medication/written parental request			Comment
<b>Medication Documentation</b>			
Name			
DOB			
Allergies			
<b>Medication given</b>			
Signed			
Dated			
Reason			
<b>Medication Received</b>			
Procedure with CD's, PMs ,OTCs			
Amount Logged			
<b>Medication Returned/disposed of</b>			
Amount logged			
Counter signatory			

<b>Storage of Medication</b>			
Emergency medication			
<b>Procedure if error/adverse reaction</b>			
Incident Report			
<b>Comments/Feedback Given</b>			
_____	_____	_____	
School Nurse Signature	First Aider Signature	Date	

## Attachment 2

### Demonstration of Safe Practice in Administration of Medication

Name		Date	
	Demonstrates Good Understanding of:		
Request for Admin of Medication/written parental request/copy of prescription (when needed)	Yes	No	Comment
<b>Medication Folder</b>			
Individual medication chart			
Name			
DOB			
Allergies			
Alphabetical Order			
Old Charts Filed			
Corresponding medication chart to listed medication			
<b>Medication given</b>			
Signed			
Dated			
Reason			
Sticker for Diary, SIMS			
<b>Medication received</b>			
Procedure with CD's, PMs, OTCs			
Amount logged			
Counter signatory			
<b>Storage of Medication</b>			

Cupboard/fridge/filing cabinet locks			
Emergency medication			
<b>Procedure if error/adverse reaction</b>			
Incident Report			
<b>Comments/Feedback Given</b>			
School Nurse Signature	Date	First Aider Signature	Date

**Attachment 3**

**Medication Incident Record**

**1. About the person who received the medication**

Name

DOB

Form

**2. About the person completing this form**

Name

Dept.

**3. About the incident**

Date

Time

Place

Give an account of the incident (including name and dosage of medication)

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What treatment was given?

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Who was notified and when?

Emergency services –

Deputy Headteacher Student Support/SLT –

Parent/carer -

GP –

School Nurse –

Outcome following School Nurse review

Any specific training needs/change to practice required – please outline:

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Review date \_\_\_\_\_ Signed \_\_\_\_\_

**Review comments:**

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Signed \_\_\_\_\_ Date \_\_\_\_\_

(if Drug Incident involves School Nurse then Borough School Nurse must also be informed and involved with review of incident)

**Attachment 4**

**Health Care Plan for a Pupil with Allergies**

**Student's Name:** \_\_\_\_\_

**Form:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

Please Affix  
Recent Photo

I am allergic to \_\_\_\_\_

The signs and symptoms I may experience during an allergic reaction are

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My treatment for an allergic reaction is

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The emergency medication I will need to carry with me is

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

**Emergency Contact 1:**

Name .....

Relationship to student .....

Home telephone number.....

Mobile telephone number .....

**Emergency Contact 2:**

Name .....

Relationship to student .....

Home telephone number.....

Mobile telephone number .....

I give permission for the above emergency medication to be administered to my child should the need arise. YES/NO (please circle reply)

I request that my child may carry his/her own emergency medication whilst at school YES/NO (please circle reply)

I understand that it is my responsibility to provide the School Nurse with spare "in date" emergency medication YES/NO (please circle reply)

Should there be any changes to my child's care I agree to inform you without delay.

Signed.....

Date .....

Office use only
Date Care plan Received:
Update Due:
Signed:



**Attachment 5**

**Healthcare Plan for Student with Asthma**

**Student's Name:** \_\_\_\_\_

**Form:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

Please Affix  
Recent Photo

**My Daily Treatment**

Asthma Symptom reliever (bronchodilator)

\_\_\_\_\_

How Much and How Often

\_\_\_\_\_  
\_\_\_\_\_

Preventative Treatment (prophylaxis) Name and Strength

\_\_\_\_\_

How Much and How Often

\_\_\_\_\_  
\_\_\_\_\_

Other Asthma treatment

\_\_\_\_\_

**My Triggers**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**My Treatment Before Sport**

**My Treatment if Asthma Symptoms Increase**

**EMERGENCY CONTACT INFORMATION**

**Emergency Contact 1:**

Name .....

Relationship to student .....

Home telephone number.....

Mobile telephone number .....

**Emergency Contact 2:**

Name .....

Relationship to student .....

Home telephone number.....

Mobile telephone number .....

I give permission for the above reliever medication to be administered to my child should the need arise. YES/NO (please circle reply)

I request that my child may carry his/her own inhaler whilst at school YES/NO (please circle reply)

I understand that it is my responsibility to provide the School Nurse with spare "in date" emergency medication YES/NO (please circle reply)

Should there be any changes to my child's care I agree to inform you without delay.

Signed Parent/Carer.....

Date .....

Office Use Only

Date care plan received:

Update Due:

Signed:

Attachment 6

## Healthcare plan for Students with Type 1 Diabetes

Student's Name: \_\_\_\_\_

Form: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please Affix  
Recent Photo

My Insulin Regime is

My Signs and Symptoms of **Hypoglycaemia** are

My treatment for **Hypoglycaemia** is

My Signs and Symptoms of **Hyperglycaemia** are

My treatment for **Hyperglycaemia** is

When I am participating in sport I will need to (e.g. carry a snack/drink)

Any other information about conditions that may affect my Diabetes (illness, allergies special diet etc.)

*Please circle as appropriate*

**I can monitor my own blood glucose** Yes/ No

**I can administer my own insulin** Yes/ No

**I know where to administer my insulin** anywhere in school/ Medical Room

(Please be aware that we would prefer the Medical Room to be used for this purpose)

**I am able to adjust my own insulin and am aware of when this needs to take place**

Yes/No

**I am able to adjust my insulin pump and am aware of when this needs to take place**

Yes/No

**I am able to change my own insulin pump giving set** (needs to be done in Welfare room)

Yes/No

**I will keep a supply in the Medical room of** Glucose tabs/needles/insulin testing strips/ testing kit /lancets/snacks /giving sets

Specific:.....

**I will carry with me** Glucose monitor/ needles/insulin/testing strips/glucose tabs

Specific:.....

**Emergency contact address and telephone number of Parent/Carer**

**Contact Details of Specialist Diabetes Nurse/Team**

I give permission for the school nurse to contact the Specialist Diabetes team if she needs to discuss any aspects of the care plan      Yes/No (please circle)

I am aware that the School Nurse may contact me to discuss any problems/treatment.

Should there be any changes to my child's care I agree to inform you without delay.

Signed Parent/Carer .....

Date .....

**Office Use Only**

Date care plan received:

Update Due:

Signed:

Attachment 7

**Healthcare plan for children and young people with Epilepsy/Seizures**

**Student's Name:** \_\_\_\_\_

**Form:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

Please Affix  
Recent Photo

Types of Seizure/s experienced

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Length of seizure/s

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Symptoms

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Possible triggers

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Usual procedure following seizure

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My parent/carer needs to be contacted when

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Other information that may be important is

(E.g. when to call an ambulance + Details of Epilepsy specialist nurse)

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Prescribed anti-epileptic medication

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Should there be any changes to my child's care I agree to inform you without delay.

Signed Parent/Carer.....

Date.....

Emergency contact address and telephone number of Parent/carer:

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Office Use Only

Date care plan received:

Update Due:

Signed:



**Attachment 8**

**Healthcare plan for children and young people with medical conditions**

**Student's Name:** \_\_\_\_\_

**Form:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_



Things you need to be aware of are (i.e. signs and symptoms)

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My treatment is

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My parent/carer needs to be contacted when

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Other information that may be important is

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The medicine I need to keep in the Medical room is (please include details of dosage and frequency)

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Should there be any changes to my child's care I agree to inform you without delay.

Signed Parent/Carer.....

Date.....

Emergency contact address and telephone number of Parent/Carer

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Office Use Only

Date care plan received:

Update Due:

Signed:

## Attachment 9

### Model process for developing individual healthcare plans

