



# **Medical Conditions in School Policy**

## **Ref: S001**

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<b>Document Control</b>	
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Author	Gabi Xiberras
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Date adopted by Cluster Resources	

**Written in consultation with Statutory Guidance – Supporting pupils at school with medical conditions December 2015 (updated 2017) issued under Section 100 of the Children and Families Act 2014, which places a duty on governing bodies to make arrangements for supporting students, with a medical condition, at their school.**

**It is also based on the Department of Education’s statutory guidance “Supporting pupils at school with medical conditions”.**

## 1 Introduction

This policy meets the requirements under Section 100 of the Children and Families Act 2014 which places a statutory duty on schools and governing bodies and states that it is to make arrangements to support students in schools with medical conditions.

## 2 Aims

**This policy aims to ensure that:**

- 1.1. The school is inclusive and that all students with medical conditions are supported appropriately so that they can access the same opportunities as other students in school as per the Equality Policy S009 – in particular Principles 1, 2, 4 and 6 – See Appendix 1.
- 1.2. All staff understand the need for students with medical needs to take full part in a wide and varied curriculum making and make appropriate adjustments and provision.
- 1.3. Staff understand that all medical needs must be addressed and that certain medical conditions are serious and can be potentially life-threatening, therefore must be planned for accordingly.
- 1.4. All staff understand their duty of care to young people and know what to do in the event of an emergency.
- 1.5. Different staff know what their specific roles and responsibilities are both in the support if students with medical needs and in dealing with medical emergencies.
- 1.6. Staff know what to do in a medical emergency.
- 1.7. Key Staff will receive appropriate training that will allow them to feel confident in both supporting students daily and knowing what to do in an emergency.
- 1.8. All staff are aware of the common medical conditions that affect children and the impact of them through annual staff training delivered by the community nurse team.
- 1.9. Parents and carers of students with medical conditions should feel secure in the processes that support their child in managing their medical needs at school.
- 1.10. The medical conditions policy is understood and supported by the whole school and local health community.

### 3. Policy Consultation

**This policy has been drawn up in consultation with the wider school community**

- a. The school has consulted on the development of this medical condition policy with key stakeholders within the school community including:
  - students with medical conditions,
  - parents,
  - school nurse,
  - school staff,
  - school governors.
- b. The school recognises the importance of acknowledging input and providing follow-up to suggestions put forward. This will be done annually or as stakeholders respond.

### 4 Roles and Responsibilities

**The Director of Student Support has overall responsibility for implementing this policy.**

**The Governing Body has a responsibility to:**

- Ensure the health and safety of their employees. This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips.
- Ensure health and safety policies and risk assessments are inclusive of the needs of students with medical conditions.
- Ensure the medical conditions policy is effectively monitored and evaluated and regularly updated.
- Provide indemnity for staff who volunteer to administer medication to students with medical conditions.

**The Head Teacher has a responsibility to:**

- Ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks.
- Ensure that the policy is known by all staff and communicated to all stakeholders
- Ensure lead staff liaise between relevant stakeholders including students, school staff, special educational needs coordinators, pastoral support/welfare leads, teaching assistants, school nurses, parents, governors, the school health service, the local authority, and local emergency care services.
- Ensure that every aspect of the policy is maintained, and that information held by the school is accurate and up to date.
- Check that there are good information sharing systems in place for using students' Medical Plans.
- Ensure student confidentiality.

- Assess the training and development needs of staff and arrange for them to be met.
- Delegate a staff member to check the expiry date of medicines kept at school and maintain the school medical conditions register.
- Monitor and review the policy as per calendar, with input from students, parents, staff and external stakeholders.
- Update the policy considering stakeholder recommendations and recent local and national guidance and legislation.

**All staff have a responsibility to:**

- Be aware of the potential common triggers, signs and symptoms of common medical conditions and know what to do in an emergency understand the school's medical conditions policy.
- Allow all students to have immediate access to their emergency medication.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- Ensure students who carry their medication with them have it when they go on a school visit or out of the classroom.
- Support students with medical conditions who may be experiencing poor social interactions are given extra social support.
- Understand the common medical conditions and the impact it can have on students (students should not be forced to take part in any activity if they feel unwell).
- Ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- Ensure students have the appropriate medication or food with them during any exercise and are allowed to take it when needed.
- When planning trips or visits that include students with specific medical needs, staff must make sure that the venue/destination is suitable. A full risk assessment must be carried out, control measures carefully considered and bespoke provision made if needed.

**Teachers have a responsibility to:**

- Complete Class Charts seating plans, include up to date medical information about the students they teach and be familiar with the content of the student's Medical Plan.
- Ensure lessons planned are inclusive and consider relevant medical needs and common triggers.
- Be aware that medical conditions can affect a student's learning and provide extra help when students need it and help students catch up on missed work
- Liaise with parents, pastoral staff and Access and Achievement coordinator if a student is falling behind with their work because of their condition.
- Ensure enrichments activities are inclusive.
- Staff who run sessions that require physical activity consider carefully how lessons can be adapted and if a student feels ill, allow them to take a break as needed
- Use opportunities within their curriculum to generally raise student awareness about medical conditions.

**The school nurse and other health care professionals have a responsibility to:**

- Help update the school's medical conditions policy.
- Help provide training for school staff in managing the most common medical conditions at school.
- Healthcare professionals, such as GPs and Paediatricians, will liaise with the school nurses and notify them of any students identified as having a medical condition. The school nurse must then notify the school.
- Provide information about where the school can access other specialist training.

**First aiders have a responsibility to:**

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school.
- When necessary ensure that an ambulance or other professional medical help is called.

**The SENCO and Pastoral Leads / HOY have the responsibility to:**

- Help update the school's medical condition policy.
- Know which students have a medical condition and which have special educational needs because of their condition.

**The Admin Coordinator has the responsibility to:**

- Help update the school's medical conditions policy.
- Manage the day to day implementation of the policy.
- Send out termly requests for updates on medical conditions.
- Carry out and log the routine checks completing follow up work, if identified
- Know which students have a medical condition and which have special educational needs because of their condition.
- Ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in.

**The Estates team have the responsibility to:**

- Check defibrillator battery, as per instructions each holiday.
- Check the wheelchairs remain in situ under staff stairs.
- Periodically check that 'What to do in a medical emergency' SOPs and Common Triggers information is clearly visible in planning offices

**The students have a responsibility to:**

- Treat other students with and without a medical condition equally.
- Tell their parents, teacher or nearest staff member when they are not feeling well.
- Let a member of staff know if another student is feeling unwell.
- Let any student take their medication when they need it and ensure a member of staff is called.
- Treat all medication with respect.
- Know how to gain access to their medication in an emergency.
- If mature and old enough, know how to take their own medication and to take it when they need it.

- Ensure a member of staff is called in an emergency situation.

**The parents of a child have a responsibility to:**

- Tell the school if their child has a medical condition ensure the school has a complete and up-to-date Medical Plan for their child.
- Inform the school about the medication their child requires during school hours.
- Inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities.
- Tell the school about any changes to their child's medication, what they take, when, and how much.
- Inform the school of any changes to their child's condition.
- Ensure their child's medication and medical devices are labelled with their child's full name.
- Provide the school with appropriate spare medication labelled with their child's name.
- Ensure that their child's medication is within expiry dates.
- Ensure their child catches up on any schoolwork they have missed.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional.
- Respond to results of the monitoring and evaluation of the policy.

## **5. Communication**

- 5.1 The Medical Conditions Policy is signposted to parents of all students upon enrolment. It can be found on the school website at all times.
- 5.2 Students with medical needs are informed about the medical conditions policy.
- Through bespoke sessions with relevant lead staff.
  - In life skills classes, as appropriate.
  - Through school-wide communication about the policy.
- 5.3 Parents are reminded about the need to update the schools records medical conditions policy:
- when their child is enrolled as a new student,
  - through termly reminders requesting updates to medical conditions and plans.
- 5.4 School staff, including supply and temporary staff are informed and regularly reminded about the Medical Conditions Policy:
- through information presented at the first staff meeting of the school year,
  - through new staff induction,
  - through the school's website,
  - at scheduled medical conditions training,
  - through school-wide communication about results of the monitoring and evaluation of the policy.

- 5.5 Relevant local health staff and other external stakeholders are informed and regularly reminded about the school's medical conditions policy:
- By direct communication, as appropriate.
  - Via the school's website.

## **6 Dealing with Medical Emergencies**

- 6.1 Students with medical conditions have completed **Medical Plans** attached on SIMS in Attached Documents. Clear indication of an existing medical need is signposted in the 'Quick note' section.
- 6.2 All staff are directed to include medical information this information on their 'Who Is In My Class' documentation.
- 6.3 All staff are reminded annually of their duty of care to students in the event of an emergency and the fact that they are required, under common law duty of care to act like any reasonably prudent parent. This may include administering medication.
- 6.4 Key staff who are first responders or First Aiders receive appropriate training and certification is updated, as required.
- 6.5 All staff receive annual training and know what to do, or who to contact, in a medical emergency. (Appendix 1)
- 6.6 Action for all staff to take in an emergency for common serious condition is displayed in prominent locations including the main office, all planning rooms, all offices, school kitchens, PE block, Technician offices and the staff room.
- 6.7 All supply teachers are issued with a 'What to do in a medical emergency' SOP.
- 6.8 In the event of a medical emergency a copy of the student's Medical Plan will be sent with the student to the emergency care setting. If this is not possible, the form will be sent (or the information on it will be communicated) to the hospital as soon as possible.
- 6.9 If a student needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school will try and ensure that the staff member will be one the student knows.
- 6.10 In an emergency situation, staff should not take students to hospital in their own car. Advice will be sought directly from the emergency services. In exceptional circumstances guidance will be sought from the Headteacher.
- 6.11 If a student needs to be taken to hospital but an ambulance is not required, two members of staff will go, one of whom (not the driver) will be a qualified First Aider.



- 6.12 The School has 3 wheelchairs. These are located on the ground floor of the staff staircase in the main building.
- 6.13 **School has two defibrillators on site, situated in the Main Reception area and the PE block.** All first aiders are trained in their use. Pre-recorded instructions on the device mean that any member of staff can use the equipment in an emergency situation.

## **7 Administration of medication at school**

### **Administration – emergency medication**

- 7.1 All students are encouraged to carry and administer their own emergency medication, when parents and health specialists determine they are able to start taking responsibility for their condition. All students carry their emergency medication with them at all times, except if they are controlled drugs as defined in the Misuse of Drugs Act 1971. This is also the arrangement on any off-site or residential visits.
- 7.2 Students who do not carry and administer their own emergency medication know that their medication is stored in the medical cabinet in Student Services and know how to access it.
- 7.3 Students who do not carry and administer their own emergency medication understand the arrangements for a member of staff (and a reserve member of staff) to assist in helping them take their medication safely.

### **Administration – general**

- 7.4 Key staff have specific responsibilities to administer medication if necessary and have received the 'Administration of Medicines' Training. They understand the importance of medication being taken as prescribed.
- 7.5 All use of medication defined as a controlled drug, even if the student can administer the medication themselves, is done under the supervision of a named member of staff in Student Services who has had 'Administration of Medicines' Training.
- 7.6 In some circumstances medication will only administered by an adult of the same gender as the student, and preferably witnessed by a second adult of the same gender.
- 7.7 Parents are advised on completion of a Medical Plan that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately in writing.
- 7.8 The school will send out termly prompts for medical information/changes to all parents. The Admin Coordinator on duty will then update Medical Plans, update the central

medical spreadsheet on Staff Shared - Student Key Information - Student Medical Information and notify staff to check the changes

- 7.9 If a student refuses their medication, staff will record this and notify parents.
- 7.10 All staff attending off-site visits must ensure they are aware of any students with medical conditions on the visit. They must ensure they receive information about the type of condition and consider what control measures will need to be employed to ensure the student is able to fully engage in the planned activity. Details on what to do in an emergency and any other additional support/medication/equipment necessary, will be assembled before embarking on the visit.
- 7.11 If a trained member of staff who is usually responsible for administering the medication is not available, school will make alternative arrangements to provide the service; this is always addressed in the risk assessment for off-site activities.
- 7.12 If a student misuses medication, parents will be informed as soon as possible and those involved maybe subject to the school's usual disciplinary procedures and health advice will be sought and acted on.

## **8 Storage of medication at school**

- 8.1 The Admin Coordinator will ensure, along with the parents of student with medical conditions, that all medication brought in to school is supplied and stored in its original containers, is clearly labelled with the student' name, the name and dose of the medication, the expiry date and the prescriber's instructions for administration, including dose and frequency. This includes all medication that student carry themselves.
- 8.2 All medication held by school is kept in clearly marked containers organised by year group. Students name and form will be clearly visible. All medication for individual students will be kept together.

### **Safe storage – emergency medication**

- 8.3 All emergency medication is located in the medical cupboard in the Student Services and ALL members of staff in this office have a key to this cabinet.
- 8.4 All Controlled drug medication will be kept in a locked cupboard at all times with only specified staff able to access it.
- 8.5 Most students will carry their emergency medication on them at all times and will be reminded to keep their own emergency medication.

- 8.6 Students whose healthcare professionals and parents advise the school that their child is not yet able to self-manage and carry their own emergency medication, know that they can access their emergency medication in Student Services at any time needed.

#### **Safe storage – non-emergency medication**

- 8.7 All non-emergency medication will be kept in the medical cupboard in Student Services. Students with medical conditions know this and how to access it.
- 8.8 Staff will ensure that medication is only accessible to those for whom it is prescribed - checking against details on containers / student records.

#### **Safe storage and disposal – general**

- 8.9 There are two Admin Coordinators; at the end of each term the Office Manager will task one of them to undertake the termly checks on medication held at school. This includes checking of containers, medication dates and sending out notifications to parents asking for medical updates.
- 8.10 It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year or when dispensed.
- 8.11 Some medication for students may need to be refrigerated. All refrigerated medication will be stored in an airtight container, clearly labelled. Refrigerators used for the storage of medication are in a secure area, inaccessible to unsupervised students or lockable as appropriate.
- 8.12 All medication will be sent home with students at the end of the school year. Medication will not be stored in summer holidays.
- 8.13 Parents will be asked to collect out-of-date medication and sign for its return. Any that is not picked up will be disposed of safely by the Health and Safety lead.
- 8.14 The Admin Coordinator is responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check will be done at least three times a year and documented.
- 8.15 Sharps boxes are used for the disposal of needles. Parents obtain sharps boxes from the child's GP or paediatrician on prescription. All sharps boxes will be stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis.
- 8.16 If a sharps box is needed on an off-site or residential visit, a named member of staff will be responsible for its safe storage and return to school.
- 8.17 Collection and disposal of sharps boxes will be arranged by the Health and Safety lead

with an appropriately registered organisation.

## **9 Medical plans and record keeping**

### **9.1 Enrolment forms**

Parents are asked to complete details of any health conditions or issues on the enrolment form, which is filled out at the start of each school year. Parents of new students starting in year are also asked to provide this information on enrolment forms. This information is then recorded on the school's SIMS system in the Quick note section and as an attached medical document.

### **9.2 Medical Plans are used to:**

- Inform the appropriate staff and supply teachers about the individual needs of a student with a medical condition in their care.
- Remind students with medical conditions to take their medication when they need to and, if appropriate, remind them to keep their emergency medication with them at all times.
- Identify common or important individual triggers for students with medical conditions at school that bring on symptoms and can cause emergencies. This school uses this information to help reduce the impact of common triggers.
- Ensure that all medication stored at school is within the expiry date.
- Ensure this 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.
- Remind parents of students with medical conditions to ensure that any medication kept at school for their child is within its expiry dates. This includes spare medication.

9.3 This school ensures that all staff protect student confidentiality.

9.4 **Medical plans are developed when a parent or health care professional informs the school** that a student has:

- A new diagnosis.
- Is due to attend a new school / or return to school after a long term absence.
- Has needs which have changed.

The attached Pastoral Leader or SLT will coordinate a meeting to discuss the child's needs and identify a member of staff to support the student.

Not all students with a medical condition will require a Medical Plan. It will be agreed with a healthcare professional and parents when a Medical Plan would be inappropriate or disproportionate.

9.5 If a Medical Plan is necessary, a meeting involving key school staff, parents and any

relevant health care professional will be held to draw up a plan.

- 9.6 When signing up to a Medical Plan parents must give permission for the medical information therein to be shared in certain situations, e.g. should an emergency happen during school hours or whilst taking part in a school related activity.
- 9.7 Any Medical Plan held by school will be sent to parents of students with a long-term medical condition, accompanied by an explanation of why and how it is used. This is sent:
- at the start of the school year / on enrolment,
  - when a diagnosis is first communicated to the school.
- 9.8 The parents of ALL children with Medical Plans are contacted at the end of each term to remind them to amend or update the Medical Plans as necessary.
- 9.9 The Medical Plan is reviewed:
- If there any changes to the student's medicine or care.
  - If there has been a medical emergency.
  - At least once a year.
- 9.10 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.
- 9.11 Once Medical Plans are submitted, the Admin Coordinator should follow up any details on a student's Medical Plan that are unclear or incomplete with parents.
- 9.12 A centralised register of students with medical needs will be updated termly or as new information is provided to school by the Admin Coordinator as part of the termly checks and prompts.
- 9.13 Medical Plans will be recorded in SIMS inn attached documents. A quick note will be added on SIMS so staff can easily identify those students with a Medical Plan.
- 9.14 When a member of staff is new to a student group, for example due to long term staff absence, the temporary staff will be provided with details of Medical Plans/WIMC sheets for students in their care by the Curriculum Lead.

#### **9.15 Consent to administer medicines**

See section 6 of this document - Administration of Medicines at school.

#### **9.16 Residential visits**

Details of support given to students with Medical Plans during residential visits is outlined in the Educational Visits Policy B007

#### **9.17 Other record keeping**

This school keeps an accurate record of each occasion an individual student is given or

supervised taking medication. Details of the supervising staff member, student, dose, date, and time are recorded. If a student refuses to have medication administered, this is also recorded, and parents are informed as soon as possible.

## **10 Common triggers that can make medical conditions worse or can bring on an emergency.**

- 10.1 This school is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.
- 10.2 School staff will receive training on medical conditions. This training includes detailed information on how to avoid and reduce exposure to common triggers for common medical conditions.
- 10.3 The school has a list of common triggers for the common medical conditions which are located in all offices and planning rooms. The school has written a trigger reduction schedule and is actively working towards reducing or eliminating these health and safety risks.
- 10.4 This school uses Medical Plans to identify individual students who are sensitive to particular triggers. The school has a detailed action plan to ensure these individual students remain safe during all lessons and activities throughout the school day.
- 10.5 Full health and safety risk assessments are carried out on all out-of-school activities before they are approved, including work experience placements and residential visits, considering the needs of students with medical conditions.
- 10.6 The Health and safety lead reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to the policy and procedures are implemented after each review.

## **11. Training**

- 11.1 Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so. The training will be identified during the development or review of Medical Plans. Staff who provide support to students with medical conditions will be included in meetings, where this is discussed.
- 11.2 The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Director of Student Support. Training will be kept up to date.
- 11.3 Training will:
  - Be sufficient to ensure that staff are competent and have confidence in their ability to support the students.

- Fulfil the requirements in the Medical Plans
- Help staff to understand the specific medical conditions they are being asked to deal with, their implications and preventative measures

11.4 All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

## **11 Unacceptable Practice**

School staff should use their discretion and judge each case individually, but it is generally not acceptable to:

- Prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every student with the same condition requires the same treatment.
- Ignore the views of the student or their parents or medical evidence.
- 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.
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Prevent students from participating or create unnecessary barriers to students participating in any aspect of school life, including school trips.
- Administer, or ask students to administer, medicine in school toilets.

## **12. Complaints**

Parents with a complaint about their child's medical condition should discuss this directly with the Assistant Headteacher attached to the Year group in the first instance.

If the Assistant Headteacher cannot resolve the matter, they will direct the parent to the school's complaint procedure.

## **10. Review**

The Medical Conditions Policy is regularly reviewed evaluated and updated. Updates are produced every year in line with school's policy and any updated guidance from the Departments of Education and Health.

## Appendix 1: Equality Policy S009

- **Principle 1 - All members of the school community are of equal value and should be treated with dignity and respect.** Every member of the school community is of equal value whether or not they are disabled, whatever their ethnicity, culture, national origin or national status, whatever their gender and gender identity, whatever their religious or non-religious affiliation or faith background and whatever their sexual orientation. All individuals are entitled to be treated with dignity and respect and should treat others in the same way.
- **Principle 2 - The school recognises respects and values difference and diversity.** Treating people equally does not necessarily mean treating them all in the same way. The school will take account of differences and the kind of barriers and disadvantages which people may face in relation to protected characteristics. The school will make reasonable adjustments to arrangements or practices in relation to disability including the provision of any necessary auxiliary aids and services. The diversity of people's backgrounds and circumstances should be appreciated and valued. Diversity is a strength, which should be respected and celebrated by all those who learn, teach and visit the school.
- **Principle 4 - The school fosters positive attitudes and relationships.** The school intends that its policies, procedures and activities should actively promote positive attitudes, good relations and mutual respect between all groups of individuals who are different from each other. The school will take action to prevent and tackle discriminatory and derogatory language including language that is derogatory about disabled people and homophobic and racist language.
- **Principle 6 - The school aims to reduce and remove inequalities and barriers which may already exist.** In addition to avoiding or minimising possible negative impacts in its policies and practices, the school will take opportunities to maximise positive impacts by reducing and removing inequalities and barriers which may already exist in relation to certain groups with protected characteristics.



## **Appendix 2**

Action for all staff to take in an emergency or for common serious condition is displayed as a SOP in prominent locations including the main office, all planning rooms, all offices, school kitchens, PE block, Technician offices and the staff room.

### **SOP - Medical Emergencies**

**OBJECTIVE: to ensure a consistent and safe approach to medical emergencies**

#### **How to contact emergency services and what information to give?**

- All members of staff can contact the emergency services if required to do so.
- They should have relevant information about the individual's symptoms, personal details, any known medical conditions. **If the student is suffering an anaphylactic shock, state this clearly.**

#### **Who to contact in school?**

- In the event of a medical emergency a qualified First Aider should be notified immediately by calling:  
**Student Services on 1166 or the First Aid Mobile on 07858886262**
- LTS should be called directly or via Student Services

#### **Dealing with the incident**

- The first aider should coordinate the process ensuring that:
  - The student is calm.
  - First aid administered – with checks made to Medical Plans, if required.

#### **If Emergency Services are needed:**

- The first aider should coordinate the call ensuring key information is shared.
- Student's personal details and Medical Plans are made available.
- Parents/Carers are notified of the incident, action taken and what they need to do.
- Assisting SLT should:
  - Clear the area and help staff settle students – re-directing if needed.
  - Contact the main reception so they can prepare for the arrival of the emergency services.
  - Check estates are ready to support with transportation of student.
  - Help assist with organising staff if a student needs to be taken to hospital.

#### **Once Emergency Services have left**

- Settle the class/ surrounding area.
- Write up an account of the incident on CPOMS and ensure a copy goes to the Admin Coordinator.

**NB: If a student needs to be taken to hospital but an ambulance is not required, two members of staff must go, one of whom (not the driver) must be a qualified First Aider.**

## **Appendix 3**

### **Further advice and resources**

#### **The Anaphylaxis Campaign**

PO Box 275  
Farnborough  
Hampshire GU14 6SX  
**Phone 01252 546100**  
**Fax 01252 377140**  
**info@anaphylaxis.org.uk**  
**www.anaphylaxis.org.uk**

#### **Asthma UK**

Summit House  
70 Wilson Street  
London EC2A 2DB  
**Phone 020 7786 4900**  
**Fax 020 7256 6075**  
**info@asthma.org.uk**  
**www.asthma.org.uk**

#### **Diabetes UK**

Macleod House  
10 Parkway  
London NW1 7AA  
**Phone 020 7424 1000**  
**Fax 020 7424 1001**  
**info@diabetes.org.uk**  
**www.diabetes.org.uk**

#### **Epilepsy Action**

New Anstey House  
Gate Way Drive  
Yeadon  
Leeds LS19 7XY  
**Phone 0113 210 8800**  
**Fax 0113 391 0300**  
**epilepsy@epilepsy.org.uk**  
**www.epilepsy.org.uk**

#### **Long-Term Conditions Alliance**

202 Hatton Square  
16 Baldwins Gardens  
London EC1N 7RJ  
**Phone 020 7813 3637**  
**Fax 020 7813 3640**  
**info@ltca.org.uk**  
**www.ltca.org.uk**

#### **Council for Disabled Children**

National Children's Bureau  
8 Wakley Street  
London EC1V 7QE  
**Phone 020 7843 1900**  
**Fax 020 7843 6313**  
**cdc@ncb.org.uk**  
**www.ncb.org.uk/cdc**

#### **National Children's Bureau**

National Children's Bureau  
8 Wakley Street  
London EC1V 7QE  
**Phone 020 7843 6000**  
**Fax 020 7278 9512**  
**www.ncb.org.uk**