



Medical Conditions Policy

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Great Sankey High School Mission Statement

The Great Sankey learning community provides excellent teaching and learning with passion and purpose, based on core values, devised with our students. Working in a warm and welcoming, yet purposeful environment, our mission is for everyone to be happy and inspired by their school experience. We empower students to harness their own creativity, to raise their aspirations and to achieve their potential. Working together, they gain confidence and pride to take their place in our community.



Rationale:

Great Sankey High School Values	How this policy addresses these values
Achievement is for all: be inspired by your school experience.	Equality for all students through reasonable adjustments
Enjoyment for all: be happy and encouraged to participate.	All students are able to participate and are supported ensuring a happy experience for them
Well-being: feel safe, be supported and have a champion.	The Medical Conditions policy ensures that students with additional needs are supported and have a champion
Personalised Learning: receive regular feedback on your progress and next-steps guidance.	The Medical Conditions plan is reviewed on an individual basis and enables students to progress and have an input
High Standards and Expectations: seek challenging, meaningful and manageable learning.	Students with additional needs are able to have the same aspirations and expect the same as all students
A pride and place in our community: take responsibility and act as role models and good citizens.	Addressing the individual needs allows students to have a sense of belonging and pride in our community and enjoy the same opportunities as all students
Life-long learning: have guided future pathways and develop independence and wider employment skills.	Support through the Medical Conditions policy allows students to develop the wider skills and develop independence
Mutual respect: be polite, tolerant of others and celebrate diversity.	The policy itself celebrates and supports diversity
Confidence: develop resilience, self-belief and aspiration.	Having a plan that directly addresses the needs of students with a Medical Conditions plan
Shared vision: have a voice and access to leadership opportunities.	The Medical Conditions plan ensure equality of opportunities and celebrates diversity

Great Sankey High School believes that all students should have the same opportunities to develop as students to enable them to contribute to our school and the wider community. We believe it is essential to celebrate our students' uniqueness and offer support to students with additional medical needs. By supporting those students who need additional support we are able to:

- ensure all students can make personal progress in a range of subjects and activities through directed support for their medical condition
- ensure all students develop positive attitudes and embrace the opportunities within the school
- ensure that all students with a medical condition have equal opportunities

Aims and Objectives:

1. The policy aims to offer individual support to students in light of their medical needs
All staff will have appropriate training to enable them to support the students they are directly responsible for.
2. All staff will have access to advice regarding the more common conditions such as asthma, anaphylactic shock.
3. All staff will have access to advice regarding the more common conditions such as asthma, anaphylactic shock etc
4. Diversity and equality will be supported and celebrated allowing all students to reach their potential through targeted medical support

Roles and Responsibilities:

1. Every member of staff is responsible for support students with Medical Conditions plans
2. Staff will attend relevant training to allow them to recognise and support medical conditions
3. CPD co-ordinator will ensure that relevant training is available for all staff
4. The Special Education Needs Disability Coordinator (SENDCo) will ensure that medical information is communicated to relevant parties and updated regularly
5. The Safeguarding lead will oversee the process, including the collection of data on an annual basis
6. SENDCo will train new staff and ensure that information regarding Medical Condition plans is shared with appropriate temporary staff and supply teachers.

INTRODUCTION

Great Sankey High School is an inclusive community that aims to support and welcome students with medical conditions. The school aims to provide equality of opportunity for all students with medical conditions.

We will help to ensure they can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- understands the importance of medication being taken as prescribed
- achieve economic well-being in school:
- ensures all staff understand their duty of care to children and young people in the event of an emergency
- understands the seriousness of certain medical conditions and how they can be potentially life threatening, particularly if ill managed or misunderstood
- understands the importance of medication being taken as prescribed

All staff understand the common medical conditions that affect children at this school.

POLICY FRAMEWORK

2.1 The school's Medical Conditions Policy is drawn up in consultation with a range of stake holders

2.2 Staff understand and have procedures to follow in the event of an emergency for the most common serious medical conditions and are trained in general emergency procedures.

2.3 The school ensures that the whole school environment is inclusive and favorable to students with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

2.4 The school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency.

2.5 The Medical Conditions Policy is regularly reviewed, evaluated and updated.

2.6 Implementation – all stakeholders are consulted on the formulation and review of the policy. All staff are alerted to changes within this policy.

3. POLICY

3.1 The school has consulted on the development of this Medical Conditions Policy with a range of key stakeholders:

- Parents/Carers
- school nurse
- Headteacher
- teachers
- Special Educational Needs and Disability Coordinator (SENDCO)
- members of staff trained in first aid
- all other school staff
- school governors.

3.2 Parents/Carers are informed and regularly reminded about the Medical Conditions Policy:

- through the school website
- when their child is enrolled as a new student
- through the annual data collection exercise

3.3 School staff are informed and regularly reminded about the Medical Conditions Policy:

- through distribution for annual review
- at scheduled medical conditions training
- through the key principles of the policy being displayed in several prominent staff areas at this school

3.4 All supply and temporary staff are informed of the policy and their responsibilities.

3.5 Staff are aware of the most common serious medical conditions at this school and understand that in an emergency situation they are required under common law duty of care to act like any reasonably prudent Parent/Carer. This may include administering medication.

3.6 Training is refreshed for all staff at least once a year.

3.7 The school uses Medical Plans to inform the appropriate staff (including supply teachers and support staff) of students in their care who may need emergency help.

3.8 Staff know what action to take in the event of a medical emergency (Appendix 1) including:

- how to contact emergency services and what information to give
- who to contact within school.

3.9 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/Carer arrives. The school tries to ensure that the staff member will be one the student knows.

Generally, staff should not take students to hospital in their own car.

Administration of Medication

4.1 Administration – emergency medication

A) Students with medical conditions have easy access to their emergency medication.

- b) Students are encouraged to carry and administer their own emergency medication, when their Parents/carers and health specialists determine they are able to start taking responsibility for their condition. This is also the arrangement on any off-site or residential visits.
- c) Students who do not carry and administer their own emergency medication know where their medication is stored and how to access it.

4.2 Administration – general

- a. All use of medication defined as a controlled drug, even if the student can administer the medication themselves, is carried out under supervision
- b. The school understands the importance of medication being taken as prescribed. Staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a student taking medication unless they have been specifically contracted to do so.
- c. For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to students under the age of 16, but only with the written consent of the student's Parent/Carer.
- d. Training is given to all staff members who agree to administer medication to students, where specific training is needed. The academy provides full indemnity.
- e. In some circumstances medication is only administered by an adult of the same gender as the student, and preferably witnessed by a second adult.
- f. Parents/Carers understand that if their child's medication changes or is discontinued, or the dose or administration method changes, that they should notify the school immediately.
- g. If a student at this school refuses their medication, staff record this and follow procedures. Parents/Carers are informed as soon as possible. The school nurse will also be informed.
- h. All staff attending off-site visits are aware of any students with medical conditions on the visit. They receive information about the type of condition,
- i. What to do in an emergency including any additional medication or equipment needed through the Medical Plan.
- j. If a trained member of staff, who is usually responsible for administering medication, is not available, the school makes alternative arrangements to provide the service. This is always addressed in the risk assessment for off-site activities.
- k. If a student misuses medication, either their own or another student's, their parents/Carers are informed as soon as possible. These students are subject to the school's usual disciplinary procedures.

5. Safe storage – Emergency Medication

- a. Emergency medication is readily available to students who require it at all times during the school day or on off-site activities. If the emergency medication is a controlled drug and needs to be locked up, the keys are readily available and not held personally by members of staff.
- b. Most students carry their emergency medication on them at all times.
- c. Students, whose healthcare professionals and Parents/Carers advise the school that their child is not yet able or old enough to self-manage and carry their own emergency medication, know exactly where to access their emergency medication.

5.1 Safe storage – non-emergency medication

- a. All non-emergency medication is kept in a secure place in the House Office.
- b. Staff ensure that medication is only accessible to those students for whom it is prescribed.

5.2 Safe storage – general

- a) The SENDCO (Special Educational Needs and Disability Coordinator) ensures the correct storage of medication at school.
- b) All controlled drugs are kept in a secure location and only named staff have access, even if students usually administer the medication themselves.
- c) At least three times a year the SENDCO/ Higher Learner Teaching Assistants (HLTAs) ensure that the expiry dates for all medication stored at school are checked
- d) A record is maintained in school.
- e) The SENDCO, along with the Parents/Carers of students with medical conditions, ensures that all emergency and non-emergency medication brought in to school is clearly labelled with the student's name, the name and dose of the medication and the frequency of dose. This includes all medication that students carry themselves.
- f) Medication is stored in accordance with instructions, paying particular note to temperature.
- g) It is the Parent/Carer's responsibility to ensure new and in date medication comes into school.
- h) Out-of-date medication and needles are safely disposed of in the sharps boxes which are stored in the Medical Room.
- i) If a sharps box is needed on an off-site or residential visit, the trip leader is responsible for its safe storage and return to a local pharmacy or to school or the student's parent/carer.

- j) Collection and disposal of sharps boxes is arranged with the local authority's environmental services.

6. Medical Plans (Appendix 17)

6.1 Parents/Carers are asked if their child has any health conditions or health issues on the Data Collection Forms, which are filled out at the start of each school year. Parents/Carers of new students starting at other times during the year are also asked to provide this information on enrolment forms.

6.2 A copy of the Medical Plan is included in Appendix 9.

6.3 The school uses Medical Plans to record important details about individual students' medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Medical Plan if required.

6.4 A Medical Plan is sent to all Parents/Carers of students with a long-term medical condition at the start of the school year

- at enrolment
- when a diagnosis is first communicated to the school.
- when the parent/carer identifies that they wish to review the plan

6.5 Medical Plan register

- a) Medical Plans are used to create an essential register of students with medical needs. The SENDCO has responsibility for the register at this school, and this is shared with all staff and is available for all staff to access centrally on the school network.
- b) The SENDCO/ HLTAs follow up with the Parents/Carers any further details on a student's Medical Plan required or if permission for administration of medication is unclear or incomplete.

6.6 Ongoing communication and review of Medical Plans

- a) Parents/Carers at this school are regularly reminded to update their child's Medical Plan if their child has a medical emergency or if there have been changes to their symptoms (deterioration or improvement), or if their medication and treatments change.
- b) Every student with a Medical Plan has their plan reviewed by the SENDCO at least once a year.
- c) Medical Plans are kept on students' files once they have been scanned onto students' SIMS files. If a parent/carer updates the Data Checking sheet with new/amended medical information, the SENDCO will send a new Medical Plan to Parents/Cares for completion.

6.7 Storage and access to Medical Plans

- a) Parents/Carers are provided with a copy of the student's current agreed Medical Plan. Staff who work with students have access to the Medical Plans of students in their care.
- b) 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 medical needs of students in their care.
- c) The school ensures that all staff protect student confidentiality.
- d) The school seeks permission from Parents/Carers to allow the Medical Plan to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This permission is included on the Medical Plan.
- e) The school seeks permission from the student and Parents/Carers before sharing any medical information with any other party, such as when a student takes part in a work experience placement.

6.8 Use of Medical Plans

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.
- Provide the required information to a member of staff when conducting a trip or visit.

7. Consent to administer medicines

7.1 If a student requires regular prescribed or non-prescribed medication at school, Parents/Carers are asked to provide consent on their child's Medical Plan giving the student or staff permission to administer medication on a regular/daily basis.

7.2 All Parents/Carers of students with a medical condition who may require medication in an emergency are asked to provide consent on the Medical Plan for staff to administer medication.

7.3 If a student requires regular/daily help in administering their medication then the school's agreement to administer this medication is outlined on the student's Medical Plan. The school and Parents/Carers keep a copy of this agreement.

7.4 Parents/Carers of students with medical conditions at this school are asked at the start of the school year or when they join the school, on the Medical Plan, if they and their child's

healthcare professional believe the child is able to manage, carry and administer their own emergency medication.

8. Medical information on students is taken on all trips.

9. All staff leading a trip/visit take a fully stocked first aid kit with them.

10. Risk assessments are carried out prior to any out-of-school visit and medical conditions are considered during this process. Factors considered 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.

11. Risk assessments are carried out for students in year 7 – 11 before the start of any work experience or off-site educational placement. It is the 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/Carers before any medical information is shared with an employer or other education provider

12. Other record keeping

The school keeps an accurate record of each occasion that an individual student is given or supervised taking medication (appendix 13). 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/Carers as well as the school nurse are informed as soon as possible.

13. All school staff who volunteer to administer medication are provided with training by a healthcare professional. The school keeps records of staff who have had the relevant training.

14. Physical Environment: Asthma

The school does all that it can to ensure the school environment is favorable to children with asthma. The school does not keep furry or feathery pets and has a non-smoking policy.

14.1 As far as possible the school does not use chemicals in science and art lessons that are potential triggers of asthma. Students are permitted to leave the room and go and sit in a supervised area, e.g. other classroom, if particular fumes trigger their asthma.

Precautions taken when using chemicals that could trigger an asthma attack are:

- plenty of ventilation, i.e. open windows and doors
- fume cupboards used by staff and students
- students who suffer from asthma are sent to the back of the room or to stand near a window/open door

Chemicals that could trigger asthma attacks are:

- chlorine
- H₂S
- ammonia (2M when used in salt prep)

- H₂
- Sulfur dioxide produced by the reaction of sodium thiosulphate and HCl in rates of reaction practical's or the burning of sulphur

Where appropriate, staff are advised to check if any students are asthmatic and inform the class of appropriate actions.

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

- a. Classroom teachers, PE teachers and sports coaches understand that students should not be forced to take part in an activity if they feel unwell.
- b. 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.
- c. PE teachers, classroom teachers and school sports coaches are aware of the potential triggers for students' medical conditions when exercising and how to minimise these triggers.
- d. The school ensures that students have the appropriate medication or food with them during physical activity and that students take them when needed.
- e. All students with medical conditions are actively encouraged to take part in out-of-school clubs and team sports.
- f. Responsibilities of PE teachers relating specifically to asthma are outlined later in this policy.

15. Responsibilities

Each member of the school and health community knows their roles and responsibilities in maintaining an effective Medical Conditions Policy

The Governing Body has a responsibility to:

- ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all students). 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
- make sure the Medical Conditions Policy is effectively monitored, evaluated and regularly updated
- report to Parents/Carers, students, school staff and the local authority about the successes and areas for improvement of this school's Medical Conditions Policy
- provide indemnity for staff who volunteer to administer medication to students with medical conditions.

The Headteacher 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
- liaise between interested parties including students, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, school nurses, Parents/Carers, governors, the school health service, the local authority transport service, and local emergency care services
- ensure the policy is put into action, with good communication to all to ensure every aspect of the policy is maintained
- ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using students' Medical Plans
- assess the training and development needs of staff and arrange for them to be met
- ensure all supply teachers and new staff know the Medical Conditions Policy and that information on dealing with common health situations is displayed in every room (appendices 2-10)
- delegate a staff member (SENDSCO) to ensure the checking of the expiry date of medicines kept at school and maintain the school medical conditions register
- monitor and review the policy at least once a year, with input from students, Parents/Carers, staff and external stakeholders
- update the policy at least once a year according to review recommendations and recent local and national guidance and legislation
- report back to all key stakeholders about implementation of the Medical Conditions Policy.
- All staff have a responsibility to:
 - be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
 - understand the school's Medical Conditions Policy
 - know which students in their care have a medical condition and be familiar with the content of the student's Medical Plan
 - allow all students to have immediate access to their emergency medication
 - maintain effective communication with Parents/Carers 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
 - be aware of students with medical conditions who may be experiencing bullying or need 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
- Teachers have a responsibility to:
- ensure students who have been unwell catch up on missed school work
- be aware that medical conditions can affect a student's learning and provide extra help when students need it
- liaise with Parents/Carers, the student's healthcare professionals, SENDCO and welfare officers if a child is falling behind with their work because of their condition
- use opportunities such as PSHE (Personal, Social and Health Education) and other areas of the curriculum to raise student awareness about medical conditions.

PE Teachers have a responsibility to:

- ensure students with asthma are not forced to take part in activities if they feel unwell but are not excluded from activities if their asthma is well controlled.
- ensure students known to have asthma carry prescribed inhalers and are allowed to use them when needed
- if a student known to have asthma is showing symptoms during an activity, allow them to stop and self-medicate.
- help provide regular training for school staff in managing the most common medical conditions at school
- provide information about where the school can access other specialist training.

The Assistant Headteacher (CPD (Continuing Professional Development)) has a responsibility to:

- arrange training for first aiders and appointed persons
- where first aid qualifications are due to expire ensure that refresher training is completed or that a replacement first aider/appointed person is appropriately trained
- ensure the annual medical conditions training is undertaken by all teaching and support staff including but not limited to epipen use, asthma, diabetes, and epilepsy
- maintain a record of medical conditions training (Appendix 15)

First aiders/appointed persons 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.
- record first aid/medical incidents in the school's record system and student planner

The SENDCO (Special Educational Needs and Disability Coordinator) has the responsibility to:

- help update the school's Medical Conditions Policy
- know which students have a medical condition and which have special educational needs because of their condition

- ensure the correct storage of medication at school
- ensure that expiry dates for all medications stored at school are checked at least three times a year
- ensure that all emergency and non-emergency medication brought into school is clearly labelled with the student's name, the name and dose of the medication and the frequency of dose
- ensure that all students with medical conditions have a Medical Plan and that Parent/Carers have the opportunity to review this at least on an annual basis
- Arrange appropriate resources are displayed around school promoting good practice and passing on key information on known medical conditions.
- Ensure identified students key information is shared with staff i.e known allergies
- Parents/Carers 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
 - keep their child at home if he/she is not well enough to attend school
 - ensure their child catches up on any school work missed
 - ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
 - ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.

16. First Aid at Great Sankey High School.

First Aid Training and Qualifications

There will, at all times when pupils are at School, be at least one person qualified to a minimum level of Appointed Person. A First Aider is defined as a person who has successfully completed a suitably approved 3-day course or 1-day course.

A list of staff qualified as First Aiders is displayed around school, (appendix 16) in school officers and displayed near first aid boxes, with key names and numbers identified. Staff who administer First Aid should ensure, wherever possible, that another adult or pupil is present. The student's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled

clothing), another member of staff should be in the vicinity and should be made aware of the task being undertaken.

Regular requirements of an intimate nature for an individual student should be carefully planned. Agreements between the school, those with parental responsibility and the student concerned should be documented and be easily understood. The necessity for such requirements are reviewed regularly by the SENDCO. The child's views must also be actively sought and, in particular, any discomfort with the arrangements addressed.

Whole School Procedures

- The school will provide First Aid cover during the working hours of the school week and, where appropriate and necessary, out of school hours.
- First Aid information will be readily available and staff and pupils will be informed of whom to call for help, in any emergency.
- First Aid kits for minor injuries will be available for use in appropriate areas of the school.
- The First Aider will attend the casualty and provide any necessary emergency care.
- The First Aider will request that a member of staff contact emergency services if required.
- Parents will be contacted by the school office if a pupil has sustained an injury. The next of kin will be contacted if a member of staff sustains an injury or becomes ill whilst at work.
- If necessary, the First Aider or another appropriate adult will accompany a casualty to hospital. An appropriate adult will accompany a pupil taken to hospital in an ambulance.
- The First Aider will ensure that the First Aid Kit is replenished after use and liaise with identified staff in school as needed.

Great Sankey High School

CONTACTING THE EMERGENCY SERVICES

Appendix 1

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

01925 724118

Your name

Your location as follows:

Great Sankey High School

Barrow Hall Lane

Warrington

WA5 3AA

- Follow signs to main reception. You will have to press the buzzer to raise the barrier
- Come to reception and we will guide you from there
- Provide the name of the child and a brief description of their symptoms
- Put a completed copy of this form by the phone

Great Sankey High School

MEDICAL CONDITIONS INFORMATION FOR DISPLAY IN ALL CLASSROOMS

Appendix 2

ASTHMA: Attacks (purple)

INSULIN: Injections, treatment, blood test (yellow)

ANAPHYLAXIS (Allergic Reaction): treatment, use of EpiPen (green)

EPILEPSY: treatment (pink)

If a student requires first aid treatment:

- During a lesson: either send the student with another student or Teaching Assistant to the House Office or send a student to the House Office to request that the first aider attends the classroom.
- During break or lunchtime: staff on duty escort or send the student with another students to the House Office or an SLT member is informed who contacts the House Office by radio to request that the first aider attends the scene of the incident.

Great Sankey High School

PROCEDURE FOR TESTING/SUPERVISING BLOOD GLUCOSE TEST

FOR DISPLAY IN ALL CLASSROOMS

Appendix 3

(TRAINED STAFF ONLY)

Procedure for testing / supervising blood glucose test

- Equipment needed: Blood glucose meter, test strips, finger-pricking device, lancet, sharps bin and cotton wool.
- Ensure child washes their hands and dries them thoroughly. (If hands are cold, run them under warm water or shake them to warm them up).
- Insert lancet into finger pricking device and prepare device as taught.
- Insert test strip into blood glucose meter.
- Prick the side of the finger (it is less painful than the finger tips) and wipe away the first drop of blood with cotton wool.
- Squeeze a small drop of blood by milking the finger from the base to the tip.
- Hold the test strip to the blood and allow the strip to suck up the blood, or cover the test patch on the strip with the drop of blood, depending on the type of meter. The meter will beep or the display will start counting down when enough blood is received.
- After a few seconds the blood glucose level should appear on the screen. (If an 'error' appears on screen this may be due to insufficient blood sample therefore repeat the test. If problem persists, refer to meter reference guide or contact Parents/Carers for advice).
- Dispose of lancet and test strip as taught.
- Record blood glucose result.
- There are many different types of blood glucose meter, each requiring a slightly different method of use. The above is only a guide – always perform/supervise the test as taught by the children's diabetes nurse specialist.

Great Sankey High School
PROCEDURE FOR ADMINISTERING INSULIN VIA PEN DEVICE
FOR DISPLAY IN ALL CLASSROOMS

Appendix 4

(TRAINED STAFF ONLY)

The correct insulin cartridge will be loaded into the pen by the child's Parent(s)/Carer. When this needs replacing, the Parent(s)/Carer(s) will do this. Insulin lasts for one month when not stored in the fridge.

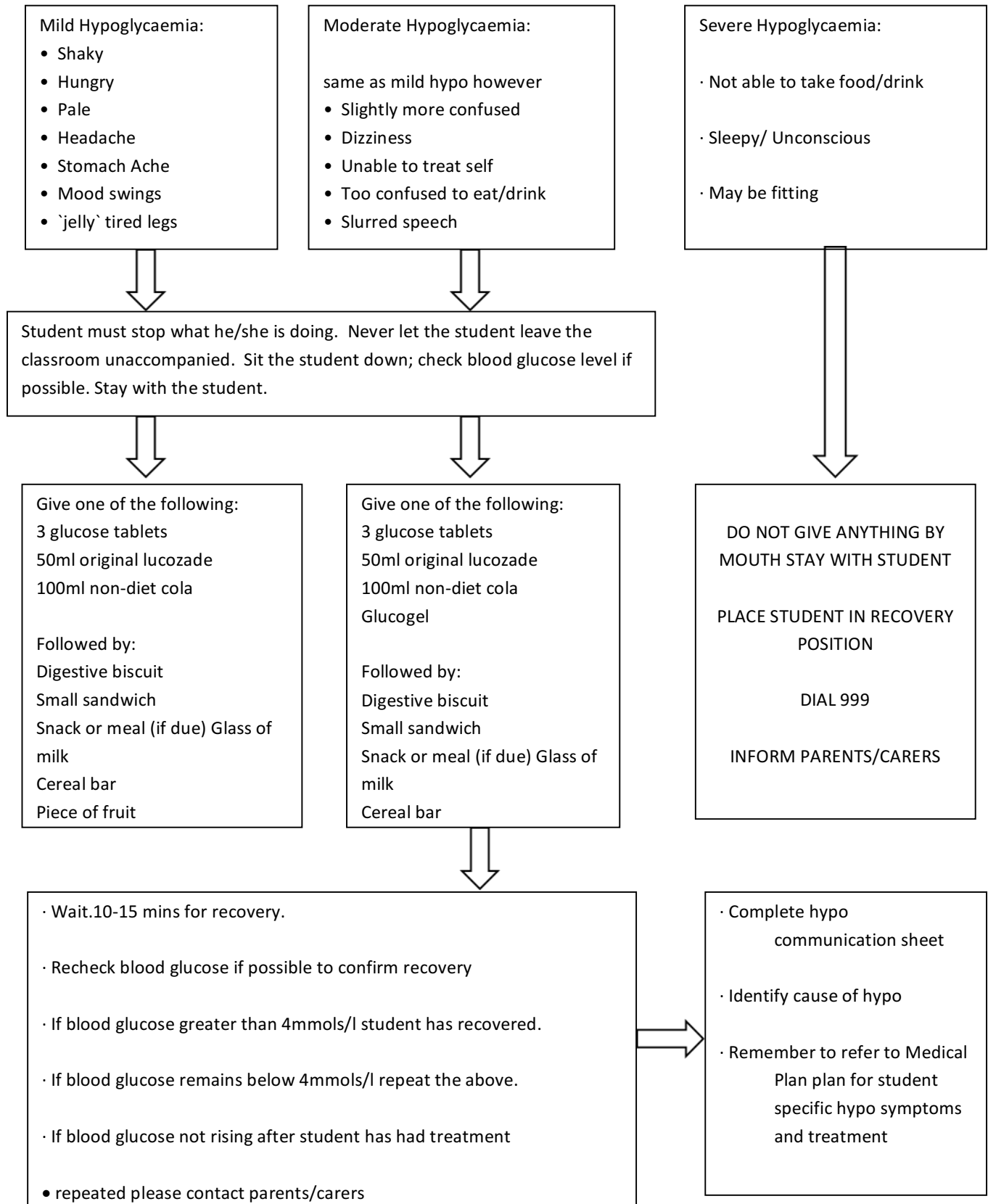
Preparation for the injection

- Check SIMS.net to make sure no one else has already administered today's injection.
- Remove the pen cap.
- Attach a new pen needle
- Prime the needle with 2 units of insulin, holding the pen with needle upright.
- Once a drop of insulin has been seen, the pen is ready to use. If a drop of insulin has not been seen – repeat the procedure.
- Dial the number of units calculated to inject, as per written agreement.
- Choose the injection site and lift a wide skin fold. This helps to hold the skin steady and avoids injecting into the muscle.
- Inject the pen device needle at 90 and press the button/plunger as far as it will go. The dial will reset back to zero to indicate that the requested dosage has been administered.
- Count to 10 before removing the pen device to reduce insulin leakage.
- Following the injection, which will always be performed in the first aid room, remove the pen needle using the outer cover (do not try to replace the inner cap) and discard carefully in the sharps container, which is kept in the medicine drawer / cupboard in the office / first aid room, along with the child's medical equipment.
- Replace the pen cap.
- Fill in and sign the logbook.

Great Sankey High School

TREATMENT OF HYPOGLYCEAMIA (BLOOD GLUCOSE LESS THAN 4MMOLS FOR DISPLAY) IN ALL CLASSROOMS

Appendix 5

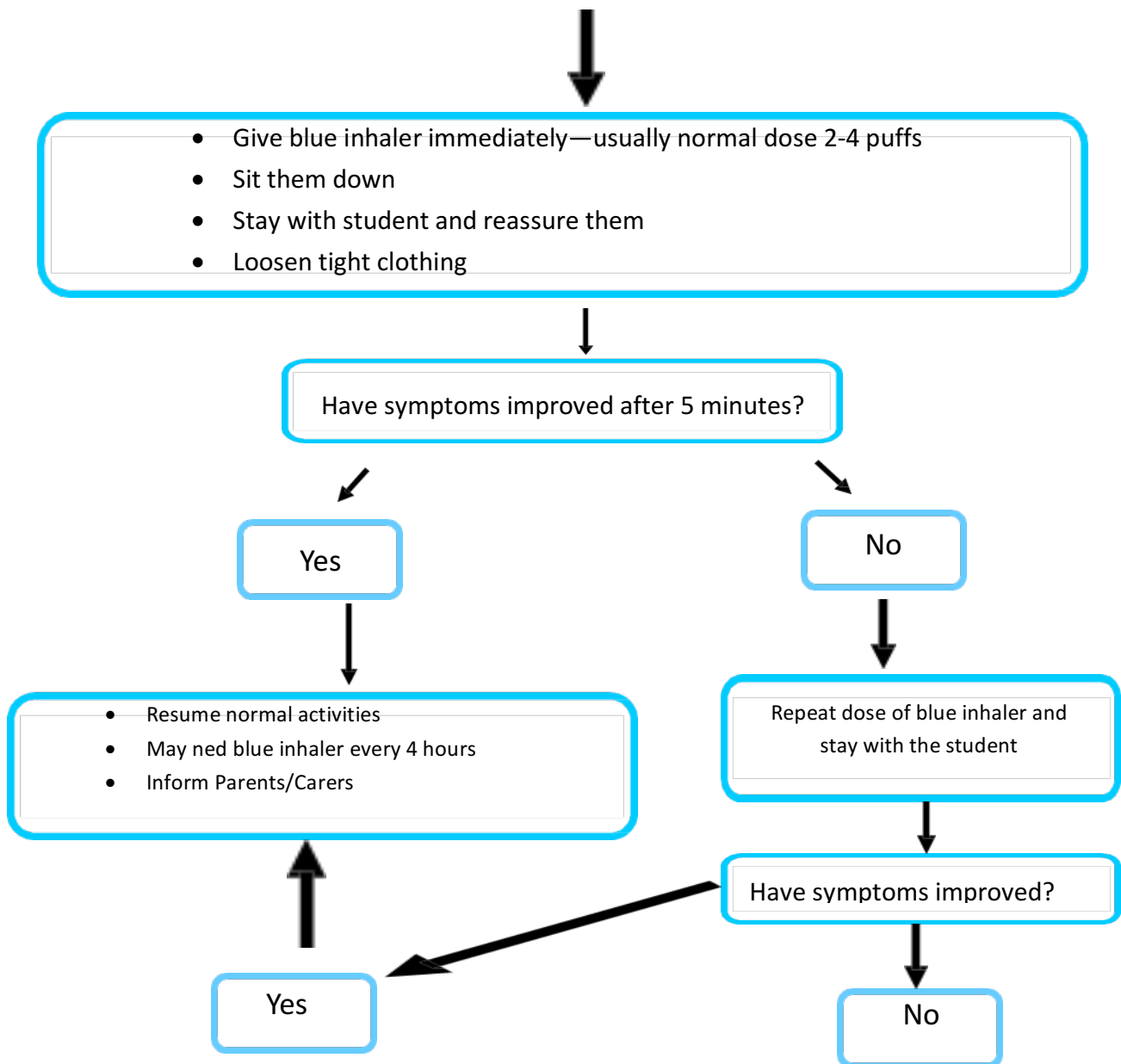


Great Sankey High School

SEVERE ASTHMA ATTACK GUIDANCE FOR DISPLAY IN ALL CLASSROOMS

Appendix 6

Student presents as wheezy, breathless, tight-chested or coughing continuously



When calling an ambulance remember to give the following:

- Location—landmarks, best entrance to school etc
- State student having an asthma attack
- Description of situation if able, i.e. age of student, symptoms, response to
- inhaler/medication given

SEVERE ASTHMA ATTACK GUIDANCE CONTINUED

Appendix 7

If the student has any or all of the following students:

- Distressed with their breathing
- Unable to talk/ speak in sentences
- Becoming exhausted

TREAT AS A SEVERE ASTHMA ATTACK

- Give 1 puff of the blue inhaler every minute until the ambulance arrives
- Keep calm!!
- Let student get into a comfortable position — usually sitting forward — DO NOT LET THE STUDENT LIE DOWN
- Stay with the student and reassure them
- Get someone to call an ambulance and then call the Parent/carer

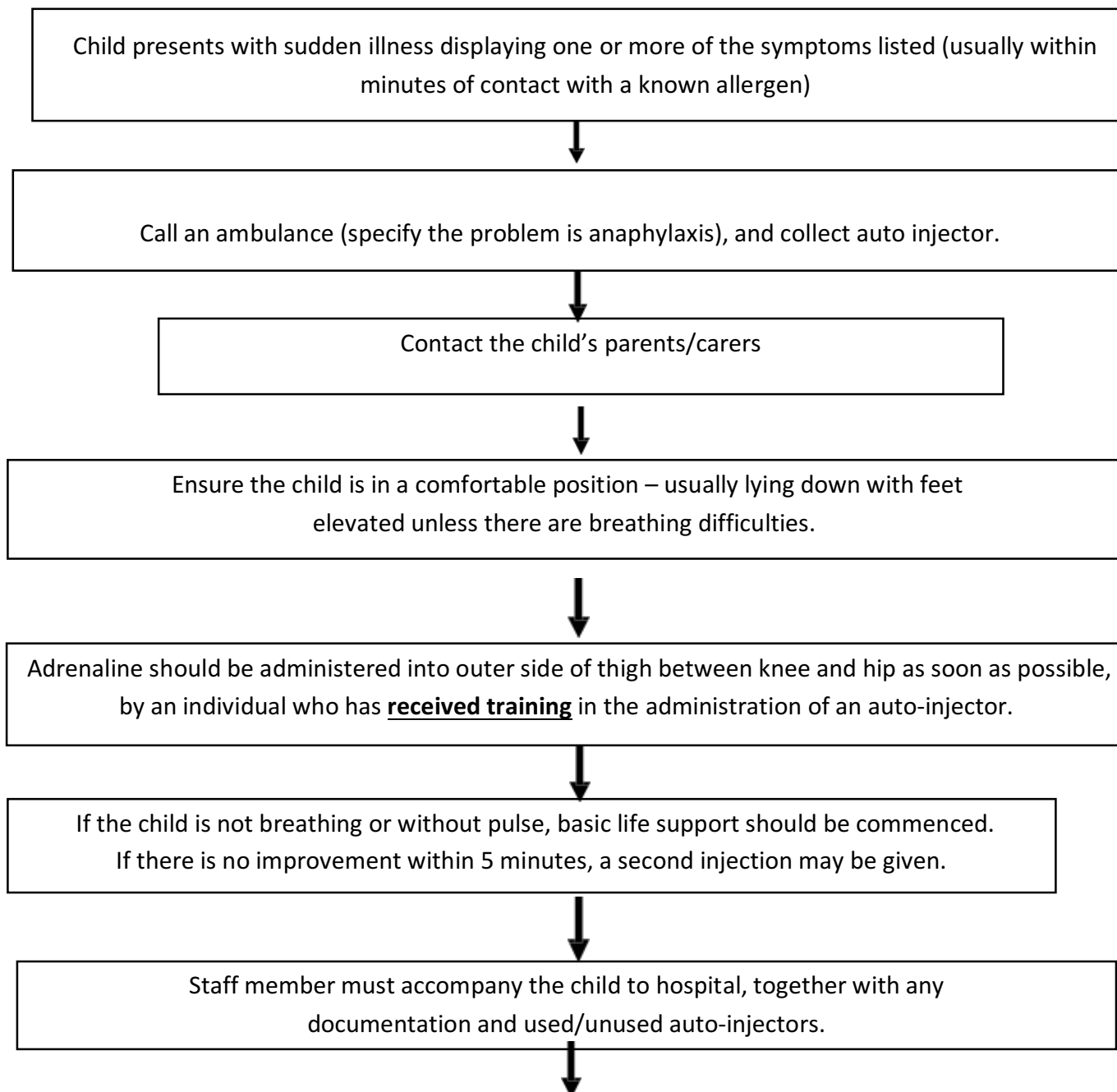
When calling an ambulance remember to give the following:

- Location—landmarks, best entrance to school etc
- State student having an asthma attack
- Description of situation if able, i.e. age of student, symptoms, response to
- inhaler/medication given

Continue to give the inhaler and do not stop until the ambulance arrives

Great Sankey High School
MANAGEMENT OF ANAPHYLAXIS USING A PRESCRIBED
AUTO-INJECTOR
FOR DISPLAY IN ALL CLASSROOMS

Appendix 8
(TRAINED STAFF ONLY)



SYMPTOMS MAY INCLUDE:

- Swelling of throat, mouth or tongue
- Difficulty in swallowing or speaking
- Alterations in heart rate
- Severe difficulty breathing
- Sudden feeling of weakness (drop in blood pressure)
- Collapse and unconsciousness
- There can also be abdominal cramps, nausea and severe diarrhoea

Great Sankey High School
GUIDELINES FOR USING AN ADRENALINE

AUTO INJECTOR EPIPEN®/ANAPEN®

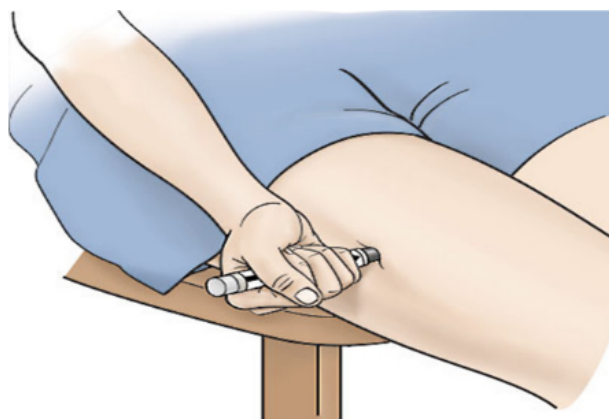
FOR DISPLAY IN ALL CLASSROOM

Appendix 9

(TRAINED STAFF ONLY)

(Instructions with a good diagram are provided in the box)

- Give the injection into the middle of the outer/front thigh. The injection can be given through clothing.
- Remove the injector from the packaging.
- Remove the safety cap.
- Hold the injector firmly in your fist, place on thigh with the tip at right angles to the skin.
- Press hard onto thigh
- Epi-pen – Press hard (there should be a click)
- Anapen – Press the trigger at the top.
- Hold in place for 10 seconds
- Remove the pen and rub the area for 10 seconds
- Call an ambulance even if the child improves
- Stay with the child
- If no improvement occurs a second dose may be given after 5 –10 minutes. If a second dose is required where possible, choose the opposite leg.
- The child will require a period of hospital observation.
- Ensure the child is in a comfortable position, preferably lying down with legs elevated unless there are breathing difficulties.



Great Sankey High School

FIRST AID FOR SEIZURES

Appendix 10

Seizures may occur where the person either loses consciousness (generalised) or remains conscious but suffers altered behavior. In all cases stay calm and re-assuring, protect the person from injury as far as practical, and stay with them until fully recovered or until the emergency services arrive as appropriate. Do not give them anything to eat or drink until they are fully recovered or attempt to bring them round. Advice on dealing with specific seizures is as below.

Tonic Clonic Seizures

Symptoms

- Person goes stiff, loses consciousness and then falls to the ground.
- A blue tinge around the mouth is likely – this is due to
- irregular breathing,
- Loss of bladder/bowel control may occur.
- After a minute or two jerking movements should stop and consciousness may slowly return.

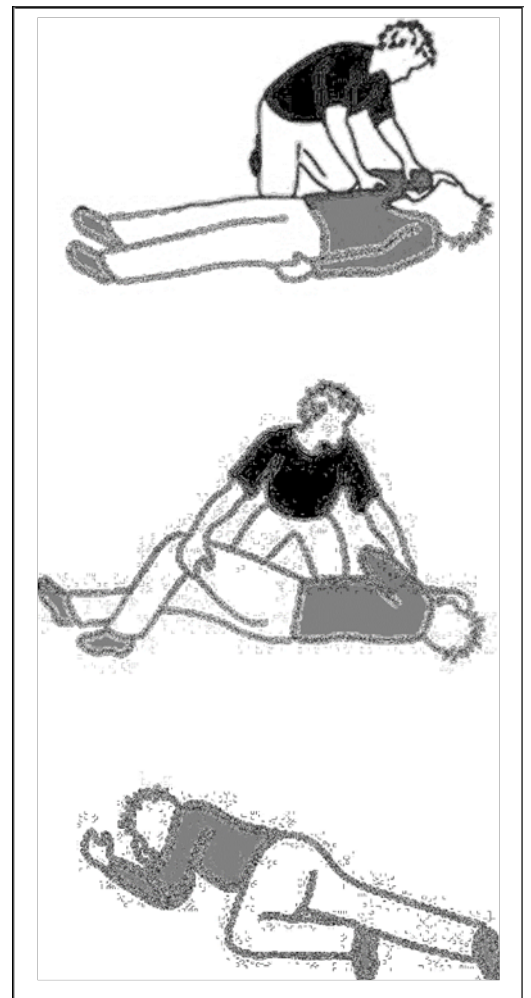
- Remove any harmful objects nearby
- Cushion the person's head
- Look for an epilepsy identify card or identity Jewelry
- Aid breathing by gently placing them in the recovery position once the seizure has finished. (See diagram)

Do not

- Restrain the person's movements
- Put anything in the person's mouth
- Try to move them unless they are in danger

Call an ambulance if

- You know this is the person's first seizure
- The seizure continues for more than 5 minutes
- One tonic-clonic seizure follows another with out person regaining consciousness between seizures
- The person is injured during the seizure
- You believe the person needs urgent medical



First Aid for Epileptic Seizures Continued
Appendix 12

Complex Partial Seizure

Symptoms:

- Person is not aware of their surroundings or what they are doing.
- They may pluck at their clothes, smack their lips, swallow repeatedly, and wander around.

Do not:

- Restrain the person's movements.
- Act in a way that could frighten them, such as making abrupt movements or shouting at them.
- Assume the person is aware of what is happening, or what has happened.

Call an ambulance if

- You know this is the person's first seizure.
- The seizure continues for more than 5 minutes.
- The person is injured during the seizure.
- You believe the person needs urgent medical attention

Further Information:

Epilepsy Action
Tel. 0808 800 5050, www.epilepsy.org.uk

The National Epilepsy Society
Tel. 01494 601 400

Great Sankey High School

Record of Medicine Administered to all Children

Appendix 13

Name of school/setting

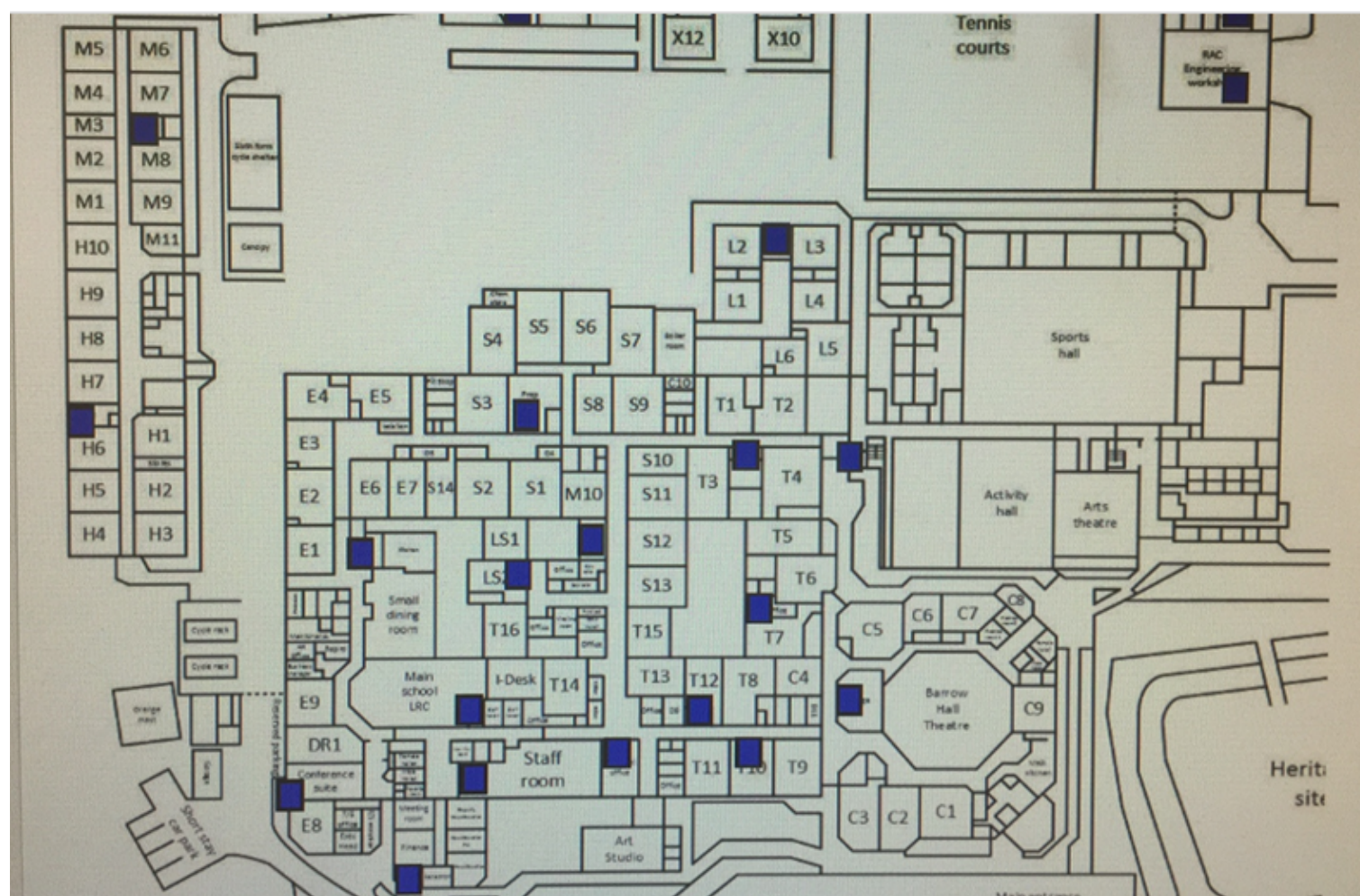
Date	Childs name	Time	Name of medicine	Dose given	Any reactions	Signature of Staff	Print name

First Aid Kit Provision

Location of First Aid kits (appendix 14)

- Staff room
- Reception
- Library store room
- English Office
- Humanities Office
- Maths Office
- College Office
- Prep Room
- MFL Office
- DT office
- Data Office
- BEICT Office
- PE Office
- Stage
- ICT office
- Conference Room
- House Office
- LS2
- Food technology classroom

Locations of First Aid boxes across the school site (Appendix 14)



Staff Training Record – Administration of Medicines

Appendix 15

Name of school/setting	Great Sankey High School
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Great Sankey High

First Aid poster displayed in school (Appendix 16)



Trained first Aiders at Great Sankey High School

Main point of call is the House office—Phone numbers 1042/1039

Zoe Bayne— *PE/Head of Austin*

Mike Bate— *PE/Head of Newton*

Cath Boyd— *Teaching Assistant*

Gill Buchan— *House Officer*

Lesley Canning— *House Officer*

Liz Dyson-Jones— *Teaching Assistant*

Liam Foster— *Maths*

Paula French— *Teaching Assistant*

Andrew Gee— *PE*

Sue Giles— *Maths*

Debbie Hall— *PE*

Holly Mullin— *Music*

Karl Ovington— *Maintenance*

Donna Pitt— *Teaching Assistant*

Cath Robins— *MFL*

Julie Rust— *ICT*

Alison Williams— *Lab Technician/St Johns*

Shona Wilson— *Science*

Julie Attwood— *DT*

Chris Foster— *Humanities*

Supatra Sri-Udom— *Humanities*

Lee Welsh— *DT/Photography*

Medical Plan for Students with Medical Conditions



Appendix 17

What is this form for?

This form will be held by the school and referred to for both in school activities and trips or visits. All information will remain confidential and will only be used by staff or medical professionals to enable appropriate medical help or support if required. If your child is attending a trip or visit you will be asked at that time to confirm that this plan is up to date and given the opportunity to review the information.

You do not need to complete this form unless the student has a medical condition.

1. Student Information

Name		Form	
Date of Birth		Gender	

1a. Emergency Contact Information – please provide 2

	Contact 1 (First)	Contact 2
Name		
Relationship to Student		
Address		
Telephone Primary		
Telephone Secondary		

1b. Doctor's details

Doctor's Name
Doctor's Address and postcode

2. Medical Conditions Information

Signs and symptoms of student's condition/s

Triggers or things that make the condition/s worse

3. Routine Healthcare Requirements

(For example, dietary, therapy, nursing needs or before physical activity)

During school hours:

Outside school hours:

4. Past Medical History

Ever Had?	YES <input type="checkbox"/> /NO <input type="checkbox"/>	IMPORTANT: if you answer 'yes' give details, including any medication, below (use another sheet if necessary)
1) Heart trouble?		
2) Asthma, bronchitis or tuberculosis?		
3) Diabetes?		
4) Epilepsy, fainting attacks, migraine, severe head injury?		
5) Hayfever or other allergy?(e.g. to medicine, insect bites or food)		
6) History of fractures or other allergy?		
7) A tetanus injection? If so, state date of most recent.		
8) Are you taking any medication? If so, please give details, state dosage and ensure you bring enough		
9) Do you have, or suffer from any other medical or physical condition?		
10) Please give details of any special dietary requirements:		
11) Please indicate if you give permission for your child to swim?		

5. What to do in an emergency: (to be filled in in conjunction with parent/carer)

6. Regular or Emergency Medication

Regular Medication 1	Regular Medication 2
Name/type of medication (as described on container)	Name/type of medication (as described on container)
Dose and method of administration (the amount taken and how the medication is taken e.g. tablets, inhaler, injection)	Dose and method of administration (the amount taken and how the medication is taken e.g. tablets, inhaler, injection)
When is it taken? (time of day)	When is it taken? (time of day)
Are there any side effects that could affect the student at school?	Are there any side effects that could affect the student at school?
Are there any contraindications (signs when the medication should not be given)?	Are there any contraindications (signs when the medication should not be given)?
Self-administration: Can the student administer the medication themselves? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes with supervision by trained staff (see section 7)	Self-administration: Can the student administer the medication themselves? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes with supervision by trained staff (see section 7)
Medication Expiry Date	Medication Expiry Date

Regular Medication 3	Regular Medication 4
Name/type of medication (as described on container)	Name/type of medication (as described on container)
Dose and method of administration (the amount taken and how the medication is taken e.g. tablets, inhaler, injection)	Dose and method of administration (the amount taken and how the medication is taken e.g. tablets, inhaler, injection)
When is it take? (time of day)	When is it taken? (time of day)
Are there any side effects that could affect the student at school?	Are there any side effects that could affect the student at school?
Are there any contraindications? (signs when the medication should not be given)	Are there any contraindications? (signs when the medication should not be given)
Self-administration: Can the student administer the medication themselves? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes with supervision by trained staff (see section 7)	Self-administration: Can the student administer the medication themselves? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes with supervision by trained staff (see section 7)
Medication Expiry Date	Medication Expiry Date

Emergency Medication

Name/type of medication (as described on container)
Dose and method of administration (the amount taken and how the medication is taken e.g. tablets, inhaler, injection)
When is it taken? (time of day)
Are there any side effects that could affect the student at school?
Are there any contraindications? (signs when the medication should not be given)
Self-administration: can the student administer the medication themselves? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes with supervision by trained staff (see section 7)
Medication Expiry Date
Is there any follow up care necessary?
Who should we notify if we need have had cause to administer this medication <input type="checkbox"/> parent <input type="checkbox"/> specialist <input type="checkbox"/> GP

7. Members of staff trained to administer medications for this student:

Regular medication
Emergency medication
Epi pens – see main register

8. Specialist education arrangement required: (e.g. activities to be avoided, special educational needs)

9. Any specialist arrangements required for off-site activities

10. Any other information relating to the student's healthcare school

Parental and Student agreement

I agree that the medical information contained in this plan may be shared with individuals involved with me/my child's care and education (this includes the emergency services).

I understand that I must notify the school of any changes in writing and confirm that I have not withheld any information.

I agree that this Medical Plan can be used for the purpose of trips and visits and that I will update the plan for this purpose when necessary.

I agree that if the child has a severe medical condition eg Epilepsy, Diabetes, severe allergies their photo will be shared with staff and displayed in appropriate places.

Signed	Print	Date
Student		
Parent/Carer (if child under 16)		

Permission for emergency medication

☐ I agree that I/my child can be administered my/their medication by a member of staff in an emergency

☐ I agree that my child cannot keep their medication with them and the school will make the necessary medication storage arrangements

☐ I agree that I/my child can keep my/their medication with me/them for use when necessary

Signed	Print	Date
Student		
Parent/Carer (if child under 16)		

Headteacher/SENDCO agreement

It is agreed that _____ (name of child) will receive the above listed medication at the above listed time (see part 5).

This agreement will continue until
(either end date of course of medication or until instructed by parents/carers)

Signed



MISS CAROLINE WHEATLEY

