



Medical Policy

Supporting Students with Medical Needs

1. Aims

- Students at this school with medical conditions will be properly supported so that they have full access to education, including school trips and physical education. The school will consult health and social care professionals, students, and parents / carers to ensure that the needs of students with medical conditions are effectively supported.
- The overall aim is to ensure that all students with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.
- The impact of long-term and frequent short-term absences will be effectively managed, and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.
- Students whose illnesses are so severe as to require an Education, Health Care Plan are dealt with under the SEN policy rather than this policy though the aims of the policies are the same.

2. Roles and Responsibilities

Governors

- The Governing Body will ensure that arrangements are in place to support students with medical conditions. In doing so they will ensure that such children can access and enjoy the same opportunities at school as any other child.
- The Governing Body will ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.
- The Governing Body will ensure that their arrangements give parents and students confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. They will ensure that staff are trained to provide the support that students need.

The Head teacher

- That the school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting students with medical conditions and understand their role in its implementation.
- That sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

Nominated Person / Senior First Aider

- Will ensure that there is the required number of staff trained and qualified to administer first aid to students, staff, contractors on site and visitors, and will also ensure that all qualified members of staff hold a current first aid certificate and arrange for requalification for those members of staff where their qualification has or is due to expire.
- They will also arrange for staff to attend any specialist first aid courses relevant to school such as the outdoor first aid course which is a qualification required for some of schools organised trips.
- Will ensure that there is the correct provision of equipment and supplies available to be ready for operational use, this includes first aid kits and AED De fibs located on the school's site, and to ensure in the event of absences that there is cover in place to administer first aid.
- They will closely work with the school's pastoral leader and heads of years to ensure that all relevant staff and supply staff are made aware of all students' medical conditions, which will require treatment, medication to be administered if they suffer a sudden onset of illness or injury.
- Together with the pastoral heads of year will continue to ensure that information regarding student medical conditions whether it be permanent or temporary is shared with staff, this will be done via e mails, round robins, and for the most serious via the student medical register.
- Ensuring that first aid cover over is available in case of staff absence or staff turnover to ensure the school always has first aid cover and that there is cover for any member of staff named in an individual care plan.

Pastoral Leader

- The Schools Pastoral leader will work with the school heads of years to ensure that all relevant staff and supply staff are made aware of all students' medical conditions, which will require treatment, medication to be administered if they suffer a sudden onset of illness or injury.
- To act on information from parents/ carers as to any health issues which their child may have, and to organise a care plan for the student if required to do so with health care professionals as to serious issues such as type 1 diabetes, cancer nursing teams and occupational health professionals.
- The pastoral leader and team will support students with non-serious medical conditions as to pastoral care and ensuring that their needs are met in school.
- They will also assist the schools trip organiser for those students who plan take part in school visits, holidays, and other school activities outside of the normal timetable as to any recognised medical conditions which they may have.

All staff

All staff have the responsibility to ensure:

- They are familiar with the needs of students with healthcare plans and medical needs.
- They plan activities that take account of the medical needs of students.
- They keep up to date with training on dealing with some of the most common health problems.

Parents / Carers

- Parents / Carers have responsibility to: Share relevant information about a child's medical needs with the school.
- Ensure that all medication stored in school is up to date and properly labelled.

Students

- Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- This will be reflected within individual healthcare plans. Wherever possible, students will be allowed to carry their own medicines and relevant devices or be able to access their medicines for self-medication quickly and easily.
- Students who can take their medicines themselves or manage procedures will be offered appropriate level of supervision if needed. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them.

3. Notification of Medical Need

This can be done in any of the following ways:

- By parents filling in the appropriate section of the admission form on entry to school
- By parents informing school in writing at other times of the year
- By the transferring school passing on information
- By the school nurse or other medical professionals such as the Diabetic team informing school.

The school will:

- Collate information into a medical list and put individual information onto the schools' current systems in operation.
- Inform staff: students with medical needs and Healthcare Plans who may need urgent attention during the day are identified on the school's student medical register.
- Students with Healthcare Plans will have a copy of the plan recorded on SIMS and Synergy (in linked documents)
- Documents) and in the school's class charts programme, and a paper copy kept in the care plan file which can be kept in the medical room.

4. Individual Healthcare Plans

- Healthcare Plans will be drawn up in cases where conditions fluctuate or where there is a substantial risk that emergency intervention will be needed and are likely to be helpful in most other cases, especially where medical conditions are long-term and complex.
- However, not all children will require one. The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate.
- Individual healthcare plans (and their review) may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child.
- Plans will be drawn up in partnership between the school (the school will be represented by the Pastoral Leader and the member of staff responsible for emergency First Aid), parents and a relevant healthcare professional, e.g. school, specialist, or children's community nurse, who can best advise on the particular needs of the child.
- Students will also be involved whenever appropriate. The aim is to capture the steps which the school will take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

- Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.
- Students with existing Care Plans on entry to the school will have that plan reviewed during the induction period. Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan will be linked to or become part of that statement or EHC plan.

5.Managing Medicine on the School Premises

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child under 16 will be given prescription or non-prescription medicines without their parent's / Carers consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality. School will set out the circumstances in which non-prescription medicines may be administered.
- A child under 16 will never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken. Parents will be consulted and informed.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- School will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage, and storage. The exception to this is insulin which must still be in date but will be available to schools inside an insulin pen or a pump, rather than in its original container.
- All medicines will be stored safely. Children will know where their medicines are always and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be carried by the student. This is particularly important to consider when outside of school premises, e.g. on school trips. Spares are stored in school and are readily available to children.

- A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so but passing it to another child for use is an offence. Students who are deemed competent to carry and self-administer controlled drugs will be provided with a safe, confidential place to administer the drug, if required, but otherwise self-administration of controlled drugs is not supervised. School will otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable container. Qualified First Aiders will have access to administer the drugs.
- Controlled drugs will be easily accessible in an emergency. A record will be kept of any doses used and the amount of the controlled drug held in school. When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes must be used for the disposal of needles and other sharps.
- Written records must be kept of all medicines administered at school and parents must be informed.

6. Unacceptable Practice

- Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is NOT acceptable practice to:
- Prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged).
- Send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.
- If the child 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 manage their medical condition effectively.
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues.
- Prevent children from participating or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

7.Complaints

- Any complaints about the application of this policy should be made to the Head teacher using the schools Complaints Policy available on the school website or from the Head Teachers P.A.

Appendix A : First Aid Information in school and dealing with accidents.

First Aid Provision in School

First Aid provision on site is managed on four levels:

1. Head of Year Offices

- All Heads of Year offices will be issued with a First Aid box that is approved under the First Aid at Work Regulations 1981. There are other extra items of equipment available such as sick bowls, plasters and ice packs and heart packs.
- All Heads of Year offices can access the low-level accident treatment log so that all minor injuries can be recorded.
- The above will not aid in the delay treatment to students and will prevent one of the on call First Aiders attending for minor injuries. Heads of Year will be trained in basic First Aid to allow them to carry out this role.

2. First Aid Kits Across School

- First Aid kits will be placed across the site in prime locations so that staff that are trained in First Aid can access the kits.
- The boxes will provide provisions for 21 to 50 people as set out under the First Aid at work regulations 1981.

3. Medical Room

- The medical room is where students will be seen who are suffering minor injuries or general illnesses, they will be open at specific times during the school day.
- In the event of a more serious injury, serious onset of illness then the medical room is available to take students to be treated and can be used as a holding area for assistance from the on call First Aider.
- Students should only be taken to the medical room if their injury is of a traumatic nature, or they have a medical condition that will need further intervention.
- Main Reception and site staff should be informed if an ambulance is to be called and the location of the incident. Where possible, the student should be conveyed to the medical room so that the Ambulance Service can assess the student in a more controlled environment.
- Any student that states that they have injured their back or neck must not be moved for any reason until a senior first aider arrives on scene, if a student also informs you that they cannot move an injured part of their body, leave them in the position that they are in and inform patrol and first aid of the incident and your location.

4. On Call First Aiders

- On Call First Aiders will be available to attend incidents that are of a traumatic nature or to medical incidents.
- The On Call First Aiders will have access to a First Response bag which will contain equipment for the more severe injuries that they are likely to attend.
- The On Call First Aiders will also deal with any onset of serious illnesses.

5. Contact with Home

- When a student is treated within school and the injury is of a significant nature direct contact **MUST** be made with parents, this is normally done by the first aider, or by a senior member of staff who is assisting with the incident.
- Heads of Year office should be informed with details of serious injury/accidents / serious illness.
- Students who self-harm either at home or in school and are treated by a school first aider a CPOMS must be recorded by the person administering the treatment, the member of staff who is dealing with the incident must ensure that a call home is made, this must be made by a member of the safeguarding team.

6. Documentation

- When a student or member of staff is treated in school, this will be logged on the minor injury form or the accident/incident report form by the senior First Aider in school.
- For serious accidents, the 'serious accident protocol' should be followed. All serious accidents should be reported to the Head teacher who will apply the protocol or appoint a responsible person to undertake this role.

7. Dealing with Accidents & Illness

Students

- Use common sense and speedy action. Help keep the student calm and send for help from a qualified First Aider using your two-way radio or by sending a student.
- Remain with the original student. Calmly give clear and precise instructions about your location and the nature of the injury. The accident/incident report for the incident will be completed by the First Aider
- Parents will be notified so that a student can be taken home or for medical treatment. In urgent cases an ambulance will be called.
- If a student has suffered a bump to the head parents should be informed by telephone (the First Aider is responsible for contacting parents) for all head injuries a 'Bump to the Head' letter should be issued (X:\Health & Safety\ Low Level Accident Section Bump to the Head letter)
- Burns also will need a call home to be made if possible by the first aider, however it is acceptable if a burn has occurred for the staff in the lesson of the incident can call home.

Staff

- If you injure yourself seek help or send a student for help. First Aid or medical assistance will be provided.
- The accident/incident report for the incident will be completed by the First Aider
- If you have an accident outside working hours that may impact on your ability to carry out your job, this must also be reported to your line manager, irrespective of whether you are prevented from attending school.
- If the accident is serious and has happened at work or during a work activity off-site, e.g. a broken bone, or involves a stay in hospital you should ALSO notify the senior First Aider who will produce a RIDDOR report.

8. Training

- Annual all staff training is undertaken on the following conditions asthma, epilepsy, diabetes, and anaphylaxis.
- School also carries out practical use of a Defibrillator and CPR training, practical use of an auto injector devices (Eppi Pens) is also undertaken, School has members of staff who have received the training.

9. Near Misses

Accidents can often be prevented if action is taken following a near miss, report any incident you witness to the Health & Safety administrator or to a senior member of staff, who will act accordingly, and if required will complete any relevant discommendation.

10. RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013)

- From 6 April 2012 you do not have to report over-three-day injuries, but you must keep a record of them.
- Employers can record these injuries in their accident book. You must keep records for at least three years after the incident.
- LSAHS have a RIDDOR guidance document which is available on the X drive in the Health & Safety section.

11. Staff Administering & Accepting Student Medication

- Some students who are required to take daily medication or have emergency medication stored in the medical rooms locked cabinet or in some cases stored in the medical room's fridge will have access to their medication.
- First aid qualified staff will have received the appropriate instruction to enable them to carry out these duties and will follow the prescribed dosage on the medication containers.
- Medication from students / parents will only be accepted if it is in the correct packaging stating the batch number, expiry date, and if has been prescribed by a medical professional, no medication either loose or in blister packs will be accepted.
- An individual medication control sheet must be completed for each student. The control sheet must detail the individual's prescribed medication, it must clearly indicate the name of the medication, the batch number, the expiry date, and the quantity initially received and after each dosage the sheet must be updated accordingly to consider the dosage / amount taken and the remaining stock. In the case of oral suspension, the recording sheet will indicate the dosage taken. It is difficult to attain the remaining quantity of liquids as there may have been some spillage.
- On each occasion new medication is received a new sheet must be completed to reflect the new batch number, quantity, and expiry date. Any medicines which are out of date will be highlighted during regular audits carried out by a senior first aider. In the first instance heads of year will be notified in order that they inform students and parents to collect and dispose of the out-of-date medication and to request new and up to date medication.
- Students who need to take temporary medication prescribed by a medical professional due to illnesses injuries etc should wherever possible administer this medication themselves.
- If it needs to be stored in the medical room and supervision is necessary parents should contact the students head of year with the details of the illness and the medication required.
- The head of year should then inform a senior first aider so this can be logged, and a record sheet can be completed.
- A quarterly audit will be undertaken of student stored medication, school will alert parents / carers if the medication is out of date so it can be replaced.
- Parents / Carers have a responsibility to ensure that their child medication is the correct one prescribed by a health care professional.
- Also parents / carers have a responsibility to notify school if medication dosages are increased, or if the current medication their child is taking is changed or if they no longer require taking it.

Appendices A Care plan Template

Lytham St Annes High School – Individual Healthcare Plan	
Student's name	
Date of birth	
Student's address	
Medical diagnosis or condition	
Date of Care Plan	
Review Date	

Family Contact Information	
Name	
Relationship to student	
Phone no.	work
	home
	mobile
Name	
Relationship to student	
Phone no.	work
	home
	mobile

Clinic/Hospital Contact	
Name	
Phone no.	

G.P.	
Name	
Phone no.	

Who is responsible for providing support in school	
Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.	
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision	

Daily Care Requirements	
Specific support for the pupil's educational, social, and emotional needs	
Arrangements for school visits/trips etc.	Any medication which the student is taking must accompany them on all Trips / visits

Other Information	
Describe what constitutes an emergency, and the action to take if this occurs	
Who is responsible in an emergency (state if different for off-site activities)	
Plan developed with	
Staff training needed/undertaken – who, what, when	
Form copied to	

Appendices C Bump to the head letter



Albany Road, Lytham St. Annes, Lancashire FY8 4GW
Tel: 01253 733192
Email: Isahtc@lythamhigh.lancs.sch.uk
Web: www.lythamhigh.lancs.sch.uk
Headteacher: Ray Baker

"A learning community in pursuit of excellence"

Date. 10 December 2024

Dear Parent/Guardian,

We write to inform you that your child had an accident at school today. They received a bump to the head at approx. They were checked by a qualified first aider and have been well for the rest of the school day. It is important however, that you now monitor your child to check for any further signs of a more serious injury.

PLEASE WATCH FOR:

- Increasing drowsiness.
- Worsening headache.
- Confusion/strange behaviour or loss of memory.
- Any vomiting episodes since the injury.
- Weakness in an arm or leg.
- Speech difficulties.
- Dizziness, loss of balance or seizures.
- Any visual problems.
- Blood or clear fluid leaking from the nose or ear.
- Any breathing problems or unusual breathing patterns.

If any of these signs develop then please contact your doctor or ring 111 for further advice.

Yours faithfully,

Paul Tozer Senior First Aider

✂.....

Bump to the Head Letter to the Teacher p5 today.

Student:

Has received first aid for a bump to the head today. Please release them from your p 5 lesson five minutes early with an escort, so they can go to the first aider who treated them initially to be assessed before leaving school to go home.

Signed:

Date: 10/12/24.....

Appendix C Medication record sheet

Student Medication Control Sheet

Name Of Medication

Batch / Serial Number Expiry Date:

Quantity:

Name of Student:

- NB – quantity remaining can only be accounted for if the medicine is in blister packs (e.g., packaged as separate doses). If medication is in liquid form or if tablets are loose in a bottle staff do not need to list stock remaining.

Day & Date	Dosage	Orally/Injection	*Quantity Remaining	Signed

Appendix D Care plan Letter to Parent / Carers



Albany Road, Lytham St. Annes, Lancashire FY8 4GW

Tel: 01253 733192

Email: Isahtc@lythamhigh.lancs.sch.uk

Web: www.lythamhigh.lancs.sch.uk

Headteacher: Ray Baker

"A learning community in pursuit of excellence"

Date

Dear ***

As recorded on your admission form there have been some medical issues identified which your child suffers with, I therefore would like to request that you come into school so we can discuss this in more detail and formulate a new care plan.

The date I have available is from until, please contact on 01253 733192 Ext 111 so I can arrange a slotted time to meet with you.

If this date is not suitable, please contact me on the above number and arrange a more convenient appointment.

Yours sincerely,

Paul Tozer

Senior First Aider

Appendices E Lancashire County Council Low Level Accident Report Record

Department/Service/Establishment: LSA High School	
Location: Albany Road, Lytham St Anne's, Lancashire, FY8 4DW	Period From: To:

Date	Name of person reporting the accident/incident	Employee Name (Person sustaining injury)	Name of User involved in the accident/incident. (E.G Teacher, Pupil)	Brief accident/incident description of the	Action taken. Treatment Given