

Ormiston Academies Trust

Ormiston Bushfield Academy

Supporting students with medical needs policy

Policy version control

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1. Policy statement and principles

1.1. Policy aims and principles

- 1.1.1. The academy wishes to ensure that students with medical conditions and specific medication needs receive appropriate care and support at the academy. We also aim to ensure that students with medical conditions are able to participate fully in all aspects of academy life.
- 1.1.2. The principal will accept responsibility in principle for members of the academy staff giving or supervising students taking prescribed medication during the academy day where those members of staff have volunteered to do so.
- 1.1.3. The academy will treat any medical information about a student as confidential and it will only be shared on a need to know basis to ensure that the student receives the most appropriate care and support during their time at the academy.

Please note that parents should keep their children at home if acutely unwell or infectious.

- 1.1.4. Key definitions used within this policy:
- 'Medication' is defined as any prescribed over the counter medicine
- 'Prescription medication' is defined as any drug or device prescribed by a doctor
- 'Home remedies' is defined to mean any medication that can be purchased over the counter in a pharmacy or herbal supplier that is designed to alleviate discomfort from illness.
- 1.1.5. This policy is consistent with all other policies adopted by OAT / the academy and is written in line with current legislation and guidance.

1.2. Complaints

- 1.2.1. All complaints are dealt with under the OAT Complaints Policy.
- 1.2.2. Complaints should be made in writing and will follow the OAT complaint procedures and set timescales. The handling of complaints may be delegated to an appropriate person.

1.3. Monitoring and review

- 1.3.1. This policy will be reviewed every two years or in the following circumstances:
- changes in legislation and / or government guidance
- as a result of any other significant change or event
- in the event that the policy is determined not to be effective
- 1 Home remedies, also known as non-prescription or over the counter (OTC) medicines, are medications that can be obtained without a prescription and can be purchased either under the supervision of a pharmacist (P medicines) or on general sale through retailers such as garages



and supermarkets (GSL medications). Medications are classified as OTC (P or GSL), based on their safety profiles. Any medication/remedies which a school allows on its premises must have reached UK safety standards.

1.3.2. If there are urgent concerns these should be raised to the [insert responsible person] in the first instance for them to determine whether a review of the policy is required in advance of the review date.

2. Roles and responsibilities

2.1. Key personnel

Assistant Principal (Safe	eguarding)	Andrew Thorpe
Contact Details	Email	Andrew.thorpe@bushfield.co.uk
	Telephone	
Health Coordinator		Sarah Roberts
Contact Details	Email	Sarah.roberts@bushfield.co.uk
	Telephone	
First Aid		Samantha Cartwright
Contact Details	Email	Samantha.cartwright@bushfield.co.uk
	Telephone	
Contact Details	Email	
	Telephone	

3. Supporting students

3.1. The academy will work with parents and medical professionals to enable the best possible support for students. Parents are responsible for providing the academy with comprehensive information regarding the student's condition and medication. Once the academy has received information about a student with a medical condition, all relevant members of staff will be made aware of this. The academy will agree a specific procedure with the parents and the student once



it is notified that a student has a medical condition, including any transitional arrangements between schools. For new students, arrangements will be in place at the start of term and for a new diagnosis or for students starting mid-term, within two weeks.

- 3.2. We understand that students with the same condition may require different treatment and support, therefore it is our policy to involve the student (if applicable) and their parents when making support arrangements for an individual. The aim is to ensure that all children 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.
- 3.3. The academy aims to be an inclusive environment and will therefore endeavour to obtain good attendance from all students, including those with medical needs. We will not send students home frequently or prevent them from taking part in activities at the academy where possible. Staff will make reasonable adjustments to include students with medical conditions in lessons and in circumstances where this is not possible the academy will inform the student and parents of any alternative arrangements that will be put in place. The academy will do everything possible to support the attendance of students with medical needs. Where absences relate to their condition then the student will not be penalised. The academy will conduct risk assessments for school visits, holidays and any other school activity outside of the normal timetable, taking into account any medical condition a student may have.
- 3.4. Medical evidence and opinion will not be ignored and there may be times where the academy requires to contact medical professionals directly. The academy will always request authorisation for contacting medical professionals unless the academy considers that disclosing this information would be detrimental to the student. This will be the responsibility if the Health Coordinator (Sarah Roberts) to liaise on the academy's behalf with the Designated School Nurse (Helen Moaby) as a qualified member of the medical profession. The school nurse will then advise and report any information deemed appropriate with regards to a student's condition and how/if it will impact their education and attendance. This information will be shared with the relevant members of staff on a need to know basis only.

3.5. Long term or complex medical conditions

3.5.1. For each student with long term or complex medical needs the academy will ensure that an Individual Health and Care Plan (IHCP) is drawn up (Andrew Thorpe – Assistant Principal) (template attached to this policy), in conjunction with the appropriate health professionals. This may involve a meeting with the parents and student to discuss arrangements for how the academy can support the student whilst in education.

3.6. Individual Health and Care Plan (IHCP)

- 3.6.1. IHCPs will be easily accessible whilst preserving confidentiality. The IHCP will be monitored and reviewed at least annually or when a student's medical circumstances change, whichever is sooner.
- 3.6.2. Where a student has a Statement of Special Educational Needs or an Education, Health and Care Plan (EHCP), the IHCP will be linked to it or become part of it.



3.6.3. Where a student is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the student needs to reintegrate.

3.7. Training

- 3.7.1. The Principal will ensure that members of staff receive training on the Supporting Students with Medical Conditions Policy as part of their new starter induction and will receive regular and ongoing training as part of their development.
- 3.7.2. All staff will receive (annual/termly) training on identification of signs and symptoms of illness (with special attention given to the illnesses that have been identified to the academy for that academic year) and where to accompany the student to in these cases (insert location of sick room/school office/nurse's office). Staff must always ensure that a student is accompanies to the (sick room/school office/nurse office) lest they should need additional support on the way due to fainting or vomiting etc.
- 3.7.3. If a student has a specific medical need that requires one or more staff members to undertake additional training this will be identified on their IHCP.
- 3.7.4. The academy will keep a list of all training undertaken and a list of staff members qualified to undertake responsibilities under this policy. Supply/Cover teachers will be briefed on arrival as part of their induction.

3.8. Emergencies

3.8.1. Medical emergencies will be dealt with under the academy's emergency procedures below unless an IHCP is in place and this amends the emergency procedures for a student.

CONTACTING EMERGENCY SERVICES

REQUEST AN AMUBLANCE – 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.

- **1.** Give your telephone number
- 2. Give your name
- **3.** Give your location as follows Ormistion Bushfield Academy, Orton Gate, Orton Goldhay, Peterborough
- **4.** State what the postcode is (PE2 5RQ) please note that postcodes for satellite navigation systems may differ from the postal code
- 5. Provide the exact location of the patient within the academy setting
- **6.** Provide a brief description of their symptoms and follow instructions given by Ambulance Control
- **7.** Inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient



- 3.8.2. If a student needs to be taken to hospital, a member of staff will remain with the student until a parent or known carer arrives.
- 3.8.3. All staff will be made aware of the procedures to be followed in the event of an emergency. Students will be informed in general terms of what to do in an emergency i.e. telling a member of staff.

3.9. Defibrillators

- 3.9.1. The academy has a Cardiac Science Powerheart AED G3 automated external defibrillator (AED).
- 3.9.2. The AED is stored at reception in an unlocked, alarmed cabinet.
- 3.9.3. All staff members and pupils are aware of the AED's location and what to do in an emergency.
- 3.9.4. No training is needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members are trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use.

3.10. Insurance

- 3.10.1. Staff members who undertake responsibilities within this policy are covered by the academy's insurance.
- 3.10.2. Full written insurance policy documents are available to be viewed by members of staff who are providing support to students with medical conditions. Those who wish to see the documents should contact the principal.

4. Process for administering medication

4.1. Medication administration within the academy

- 4.1.1. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the student to take them outside of academy hours. If this is not possible, the following policy will apply.
- 4.1.2. Each item of medication must be delivered to the principal or authorised person (listed in this policy) by the parent / carer. Medications provided by other individuals, and passing medication to another student will not be permitted on academy premises and if found will be dealt with under the **Behaviour Policy** and **Drug, Alcohol and Tobacco Policy**.



- 4.1.3. Medication must be provided in a <u>secure and labelled container as originally dispensed</u>. Medication will only be accepted if the academy has received a completed medication administration form (available from the academy or attached to this policy) and each item of medication must be clearly labelled with the following information:
- Student's Name
- Name of medication
- Dosage (how much and for how long)
- Frequency of administration
- Date of dispensing
- Storage requirements (if important)
- Expiry date
- Amount of medication provided please note that the academy will only accept a maximum of four weeks supply or until the end of the current term, whichever is sooner

Medicines which do not meet these criteria will not be administered.

- 4.1.4. It is the responsibility of the parents to renew medication when supplies are running low, to ensure that the medication supplied is within its expiry date and to notify the academy in writing if the student's need for medication has ceased.
- 4.1.5. The academy may request additional information (such as doctor's note or prescription slip) prior to administering medication. This will only be done in rare situations where the academy believes that this is a reasonable request. Renewed authorisation or additional information may also be requested where medication is taken for a prolonged period without diagnosis, this will ensure that the correct medication and dosage are still being administered by the academy.
- 4.1.6. The academy will not make changes to dosages on parental instructions alone. For prescription medication, a doctor's note or new prescription slip will be required and for non-prescribed medication any alteration must be within the recommended guide appropriate for the type of medication.

4.2. Medication administration outside of the academy

- 4.2.1. Where the student travels on academy transport with an escort, parents should ensure the escort has written instructions relating to any medication sent with the student, including medication for administration during respite care.
- 4.2.2. The academy will make every effort to continue the administration of medication to a student whilst on trips away from the academy premises, even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a student on a trip if appropriate supervision cannot be guaranteed, or alternative arrangements would not be reasonable for the academy to provide.



4.2.3. If the student is on a trip when medication is required, the student or an authorised member of staff will carry the medication. Parents and students will be informed of the process for taking medication whilst on the trip in advance.

4.3. Administering the medication

- 4.3.1. Students will never be prevented from accessing their medication; however, medications will only be administered at the academy if it would be detrimental to the student not to do so.
- 4.3.2. Staff members may refuse to administer medication. If a class teacher refuses to administer medication, the principal will delegate the responsibility to another staff member.
- 4.3.3. If a controlled drug is required to be administered, this will only be done so by a qualified staff member who is fully trained in administering a particular type of drug.

A child may require medication for serious conditions such as Epilepsy, Servere allergic reations and Chronic Asthma, therefore if a child is well enough to attend first aid, the medication which is prescribed to the individual will be administered within this room. If however they are too unwell to be moved the first aid trained member of staff will collect the relevant medication and take it directly to the child to administer. All medications are located in a locked first aid cabinet within the first aid room, the key to the cabinet is located in the Reception, the Health Coordinator also holds a key in the Welfare Office.

- 4.3.4. Where it is appropriate to do so, students will be allowed to administer their own medication for example a Ventolin inhaler may be carried by the student. Parents will be asked to confirm in writing if they wish their child to carry their medication with them in the academy. This would be assessed by the academy depending on the type of medication (and potential consequences if mis-administered) and the competency of the child to self-administer.
- 4.3.5. In some cases, it may be a child is given permission to self-administer the medication under supervision from a staff member to safeguard against accidental overdose. In these cases, the medication will be appropriately stored by the academy who will allow the student access as needed.
- 4.3.6. If a student refuses to take medicines, staff will not force them to do so, and will inform the parents of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, the academy's emergency procedures will be followed. Any refusal to take medication will be recorded.
- 4.3.7. If a student does not take the medication expected to be taken on a day or for a period, then the reason for this will be recorded. Reasons could include: student absence; parents collecting the student to administer medication themselves; student not turning up for medication where this is the arrangement.



4.3.8. The academy cannot be held responsible for side effects which occur from any medication taken. Any side effects suffered by the student will be noted and the academy first aid or emergency procedures will be implemented when necessary.

4.4. Storage of medication

- 4.4.1. Medication will be kept in a secure place, out of the reach of students. Unless otherwise indicated all medication to be administered in the academy will be kept in a locked medicine cabinet.
- 4.4.2. Students will be informed of where their medicines are always and can access them immediately (accompanied by authorised academy staff). Where relevant, the Student will be aware of who holds the key to the medicine cabinet. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to students and not locked away.

Medicaton will be stored in a locked cabinet in the treatment room or in the fridge (when necessary)

4.4.3. Only authorised academy staff will have access to where medication is stored. No student will be left unaccompanied where medication is accessible.

4.5. Disposal of medication

- 4.5.1. Academy staff will not dispose of any medicines
- 4.5.2. Medicines which are in use and in date should be collected by the parent / carer at the end of each term. Date expired medicines, those no longer required for treatment or when too much medicine has been provided will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.

4.6. Record keeping

- 4.6.1. The academy will keep records of:
- The medication stored
- The quantity
- When the medication has been taken
- Reasons for medication not being administered when medication was expected to be taken
- Any medication returned to parents / carers and the reason
- 4.6.2. Medication records will be made available for parents on request.



4.7. Training

- 4.7.1. The academy will ensure that staff members who volunteer to assist in the administration of medication will receive appropriate training / guidance through arrangements made with the School Health Service.
- 4.7.2. No staff member may administer prescription medicines, administer drugs by injection or undertake any healthcare procedures without undergoing training specific to the responsibility.
- 4.7.3. The academy will keep a list of all training undertaken and a list of staff members qualified to undertake responsibilities under this policy.
- 4.7.4. The member of staff must always properly read the labels of the medication provided and check the details against the medication information provided by the parent.

4.8. Unacceptable Practice

- 4.8.1. The academy will never:
 - 4.8.1.1. Assume that students with the same condition require the same treatment.
 - 4.8.1.2. Prevent students from easily accessing their inhalers and medication.
 - 4.8.1.3. Ignore the views of the pupil and/or their parents/carers.
 - 4.8.1.4. Ignore medical evidence or opinion.
 - 4.8.1.5. Send students home frequently for reasons associated with their medical condition, or prevent them from taking part in activities at school, including lunch times, unless this is specified in their IHC plan.
 - 4.8.1.6. Send an unwell student to the medical room or school office alone or with an unsuitable escort.
 - 4.8.1.7. Penalise students with medical conditions for their attendance record, where the absences relate to their condition.
 - 4.8.1.8. Make parents/carers feel obliged or forced to attend school to administer medication or provide medical support, including for toilet issues. The school will ensure that no parent/carer is made to feel that they must give up working because the school is failing to support their child's needs.
 - 4.8.1.9. Refuse to allow pupils to eat, drink or use the toilet when they need to to manage their condition.



5. Home Remedies

- 5.1. The academy must decide **IF** they are willing to allow home remedies and under what circumstances. The academy must also consider what students/parents are likely to do if home remedies are not allowed at all.
- 5.2. For example, the father of a 10-year-old may send his son on a trip with a travel sickness tablet just in case they needed it but when one child feels very sick in the back and his friends want to help, they also offer him their travel sickness tablet to help him which may result in an accidental overdose.
- 5.3. Or a 12-year-old girl suffers from menstrual cramps and has been given ibuprofen by her mother to help her if she needs it during the day but then that same girl offers her ibuprofen to her friend who also has menstrual cramps but who also happens to have asthma (bad combination/reacts badly to the medication combination/is allergic to the medication).
- 5.4. If you decide to allow home remedies to be administered in the academy it would be wise to contact parents where possible or have a section on the induction form as to which home remedies their child can be administered. If this is the case, the person administering the home remedies (a painkiller for example) must check when the last dose was administered and only provide the minimum amount and ensure that parent contact is made at the end of the day if not before.

5.5. Record Keeping

5.5.1. If home remedies are kept on site – someone must keep a record of what is kept on site and what and when it is used, who administered it, date, time, amount and to which student. An audit of the home remedies kept at the academy must be done every half term to ensure that all medication is accounted for and remains in date.

5.6. Residential Trips

5.6.1. Some thought should be put into allowing staff to administer home remedies such as 'paracetamol' on residential trips where a student may fall ill but not so ill as to need a doctor. In this case parents should be advised of which home remedies staff will have with them and give specific permission for it to be used on the residential. All effort should be made to make parent contact (ideally before) but certainly after to inform them that the home remedy was administered. Records must be kept in every case.



Appendix 1

Medication Administration Form

The academy will not administer medication unless you complete and sign this form

Name of student:		Group / class /	form:	
	·			
Date of birth:		Date form subm	itted:	
	·			
Name of parent:		Parents signature / consent:		
Medical condition / illne	ess:			
Madiainala, Diagga agu	41		4bi	
Medicine/s: Please con attached and signed	tinue on another	sheet if you require more	space – this m	nust be
	Amount provided	Dosage, method and timing	Date dispensed	Expiry date
attached and signed Name and type of	Amount	Dosage, method and	Date	Expiry
attached and signed Name and type of	Amount	Dosage, method and	Date	Expiry
Name and type of medicine	Amount provided	Dosage, method and timing	Date	Expiry
attached and signed Name and type of	Amount provided	Dosage, method and timing	Date	Expiry



Are there any side effects to the medication/s that the academy needs to know about?			
Self-administration: (delete as approp	oriate) Yes / No		
To be completed by the academy:			
Medication start date:			
Medication end date:			
Review to be initiated by:			
Agreed review date:			



Appendix 2

Individual Health Care Plan

To be completed for each student with long term or complex medication and that the Medical Administration Form is attached

Name of student:		Date of birth:	
Group / class / form / teacher:		Student address:	
Date plan drawn up:		Date to be reviewed: (no more than 12	
		months from date	
		drawn up):	
Contact information: Please co	mplete with the details	s of <u>two</u> primary con	tacts for student
Nama	-		
Name			
Address			
Evening number			
Relationship			
Man Paral and the Control of the Con			
Medical contact information: Please complete with the details of medical contacts			
Contact	GP	Clinic / hos	pital contact
Name			
A _l_l			
Address			



Phone number		
	esulting needs, including medica s, triggers, signs, treatments, facilit	tion: Describe medical needs and ties, equipment or devices,
Daily care requirements: i.e. sp	oort / lunchtime / arrangements	for academy trips etc.
	ents or procedures required for school timetable that will ensu f necessary	
Specific support and level of sue emotional needs.	upport required: For student's e	educational, social and
Who is responsible for providing they are unavailable):	ng support in the academy (and	cover arrangements when
Who in the academy needs to be	pe aware of the student's condit	tion:



Emergency information: Describe what constitutes to be taken if this occurs.	an emergency for the student, and	d action
Follow up care:		
Who is responsible in an emergency (and cover arr State if different on off-site activities.	angements when they are unavaila	able):
Medical Administering		
Written consent received from Parents for pupil to shours	self-administer during school	
Written consent received from Parents for [Member to [name of student] during school hours	of Staff] to administer medicine	
Written consent received from principal for pupil to hours	self-administer during school	
Written consent received from principal for [Member medicine to [name of student] during school hours	er of Staff] to administer	
Other information: [e.g. where confidentiality issued designated individuals to be entrusted with information in the confidentiality issued designated individuals to be entrusted with information.]		e
Staff training needed / undertaken: Who, what, whe	n?	
Signed:	Date:	



Parent / carer	
Student (if appropriate)	
Principal	
SENCO	
GP	