



Mendlesham Primary School

Supporting Children with Medical Conditions

Revision Date: SEPT 2021

Review due: SEPT 2024

Reference:

1. This school is an inclusive community that aims to support and welcome pupils with medical conditions.

- Mendlesham School understands that it has a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may enrol in the future.
- Mendlesham School aims to provide all children with all medical conditions the same opportunities as others at the School. We will help to ensure they can:
 - Be healthy.
 - Stay safe.
 - Enjoy and achieve.
 - Make a positive contribution.
 - Achieve economic well-being.
- Pupils with medical conditions are encouraged to take control of their condition where appropriate.
- This school aims for pupils feel confident in the support they receive from the school to help them do this.
- Mendlesham School aims to include all pupils with medical conditions in all School activities.
- Mendlesham School ensures all staff understand their duty of care to children on a day-to-day basis and in the event of an emergency.
- All staff should feel confident that they know what to do in an emergency.
- Mendlesham School understands that certain medical conditions are serious and can be potentially life-threatening.

2. This Medical Policy is supported by a clear communication plan for staff, parents and where necessary, students to ensure its full implementation.

- Parents may request a copy of this policy from the school office, the policy is likely to be discussed with parents of children with medical conditions and where relevant, the children as well.
- School staff are informed and reminded about the Medical Policy and a copy is kept in the staff room

3. Paediatric First Aid trained staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this school.

- Paediatric First Aid trained staff are aware of the most common serious medical conditions at this school.
- Staff at Mendlesham School understand their duty of care to pupils in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.

Paediatric First Aid trained staff who work with pupils at this school know what to do in an emergency for the pupils in their care with medical conditions.

- Training for Paediatric First Aiders is kept up to date.
- Action for staff to take in an emergency for asthma/epilepsy/anaphylaxis and diabetes is displayed in the staff room.

See appendix 1 – form 1

See appendix 1 – form 2

See appendix 1 – form 3

See appendix 1 – form 4

4. All staff understand the school's general emergency procedures.

- Staff know what action to take in the event of a medical emergency. This includes:
 - How to contact the emergency services and what information to give.
 - How to contact a Paediatric First Aid member of staff.
- Training for Paediatric First Aiders is kept up to date.
- Action to take in a general medical emergency is displayed in prominent locations for staff: the staff room.
- If a pupil needs to be taken to hospital, a member of staff will accompany them if parents are unavailable or school will ask parent to meet the ambulance at A&E.
- Staff will not take pupils to hospital in their own car, unless insured to do so by the MAT and not doing so would put a child at immediate risk.

5. The School has clear guidance on the administration of medication at school.

Administration - emergency medication

- All pupils at this school with medical conditions have easy access to their emergency medication.
- All pupils and staff are aware of where their emergency medication is kept in school i.e inhalers, epipens and insulin and how to access it.

Administration - general.

- All use of medication defined as a controlled drug, even if the pupil can administer the medication themselves, is done under the supervision of the Office Manager, paediatric first aid trained/suitably trained staff or a senior leader.
- Mendlesham School understands the importance of medication being taken as prescribed.
- The school is aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a pupil taking medication.

- For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to pupils on a voluntary basis, but only with the written consent of the pupil's parent.
- Training is given to all staff members who agree to administer medication to pupils, where specific training is needed.
- Parents at this school 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.
- All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They receive information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed.

6. Mendlesham School has clear guidance on the storage of medication at this School.

Safe storage – emergency medication.

- Emergency medication is readily available to pupils who require it at all times in the staffroom during the school day. If the emergency medication is a controlled drug and needs to be locked up it is kept in the School Office.
- Pupils carry their own epi-pens if appropriate, for younger children, it will be kept in the staffroom
- Pupils carry their emergency medication with them if appropriate.
- Medication will be stored in the staffroom fridge if cold storage is advised.

Safe storage – non emergency medication.

- All non-emergency medication is kept in the staffroom. Pupils with medical conditions know where their medication is stored and how to access it.
- Staff ensure that medication is only accessible to those for whom it is prescribed.

Safe disposal

- Parents are asked to collect out of date medication.
- If parents do not collect out of date it, medication is taken to a local pharmacy for safe disposal.
- The Office Manager and Executive Headteacher are responsible for checking the dates of medication and arranging for the disposal of any that has expired.

7. Mendlesham School has clear guidance about record keeping.

Enrolment forms

- Parents at this school are asked if their child has any health conditions on the enrolment form, which is filled out at the start of each school year. Parents of new

pupils starting at other times during the year are also asked to provide this information on enrolment forms.

Requests to Administer Medication

- Mendlesham School asks parents to complete a request to administer medication form, including important details about individual children's medical needs at school, their triggers, signs, symptoms, medication and other treatments. These forms are kept in the staff room close to the medication store.
- If a pupil has a short-term medical condition that requires medication during school hours, a medication form must be completed by the parent/carer and handed into the School Office.
- Parents/carers must inform the School Office, Senior Leader or Class Teacher if their child has had a medical emergency or if there have been changes to their symptoms, or their medication and treatments change.

Education Health Care Plans (EHCP)

- For children with medical conditions which may affect their ability to learn or participate in school life, the school may apply for an EHCP, this will involve collaboration between school, parents and a variety of professionals, including medical.
- Training will be sought for any condition as required, including the use of medical equipment if the need arises.
- Mendlesham School will endeavour to communicate with nurseries and schools from which children transfer at the earliest opportunity to ensure any medical equipment and training is in place and transitions are smooth.
- Copies of EHCPs are kept in the Executive Headteacher's office.
- Children who have a serious medical condition, but do not require an EHCP will have a SEN file in the Executive Headteacher's office, detailing their medical condition, steps to be taken to ensure that the child is well cared for and included in school life as best as possible.
- At Mendlesham School, we work collaboratively with health and other professionals to ensure that pupils' needs are met.

Record of Medication:

- The requests to administer medication, including the record of timings of medication given (on reverse of the form) are kept in the children's blue folders which are locked in the Executive Headteacher's filing cabinet once complete.

8. Mendlesham School ensures that the whole School environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities

Physical environment

- This school is committed to providing a physical environment that is accessible to pupils with medical conditions. The school currently has ramps, accessible toilet facilities, a Soundfield system and a hearing loop.

Exercise and physical activity

- This school understands the importance of all pupils taking part in sports, games and activities.
- This school ensures Classroom Teachers make appropriate adjustments to sports, games and other activities to make physical activity accessible to all pupils.
- Teachers are aware of pupils in their care who have been advised to avoid or take special precautions with particular activities.
- Mendlesham School ensures staff are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these triggers.
- At Mendlesham School we aim to ensure that those parents who require it, have access to any physical activities recommended by health professionals, e.g gym trail

Education and learning

- Mendlesham School ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures appropriate adjustments and extra support are provided.
- Staff are aware that some pupils with certain medical conditions may also have Special Educational Needs (SEN). If this is the case, the Class Teacher and SENCo will liaise with parents/carers and also take advice from the appropriate health professionals.

9. Each member of the School and health community knows their roles and responsibilities in maintaining an effective Medical Policy.

- This School works in partnership with all interested and relevant parties including all School staff, parents, the Local Authority and community healthcare professionals to ensure this Policy is planned, implemented and maintained successfully. This Medical Policy is drawn up by Mendlesham School staff and is reviewed every three years or as soon as necessitates.
- The following roles and responsibilities are used for the Medical Policy at this School. These roles are understood and communicated regularly.

Employer (John Milton Academy Trust)

Mendlesham School's employer 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 pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips as well as out of hours activities such as wrap around care, school discos etc.
- Make sure the Medical Policy is effectively monitored and evaluated and regularly updated.
- Provide indemnity to staff who volunteer to administer medication to pupils with medical conditions.

Executive Headteacher/Head of School

Mendlesham School's Executive Headteacher/Head of School has a responsibility to:

- Ensure the School is inclusive and welcoming and that the Medical Policy is in line with local and national guidance and policy frameworks.
- Liaise with interested parties including pupils, School staff, Special Educational Needs Co-ordinators, pastoral Support/Welfare Officers, Teaching Assistants, MSDAs, School Nurses, Parents and Trust Members.
- Ensure the Policy is put into action, with good communication of the Policy to all.
- Ensure every aspect of the Policy is maintained.
- Ensure information held by the School is accurate and up to date and that there are good information sharing systems in place.
- Ensure pupil confidentiality.
- Assess the training and development needs of staff and arrange for them to be met.
- Ensure all supply staff and new teachers know the Medical Policy.
- Update the Medical Policy at least once a year according to review recommendations and recent local and national guidance and legislation.

All school staff

All staff at Mendlesham School 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 Medical Policy.
- Know which pupils in their care have a medical condition.
- Allow all pupils to have immediate access to their emergency medication.
- Maintain effective communication with parents including informing them if their child has been unwell at school.
- Ensure pupils who carry their medication with them have it when they go on a school visit or out of the classroom, or take it for them if it is stored in the staffroom.
- Be aware of pupils with medical conditions who may be experiencing bullying or need extra social support.
- Ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- Ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

Teaching staff

Teachers at this school have a responsibility to:

- Ensure pupils who have been unwell are given the opportunity to catch up on missed school work.
- Be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it.
- Liaise with parents, the pupil's healthcare professional, class teacher and Special Educational Needs Co-ordinator if a pupil is falling behind with their work because of their condition.

Paediatric First Aiders

Paediatric First Aiders at this school have a responsibility to:

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

Special Educational Needs Co-ordinator

The SENCo at this school has a responsibility to:

- Help update the school's Medical Policy.
- Ensure the child's needs are met and co-ordinate support for the pupil
- Know which pupils have a medical condition and which have Special Educational Needs because of their condition.

Specialist Healthcare Professionals and Local Doctors

Individual doctors and specialist healthcare professionals caring for pupils who attend this school, have a responsibility to:

- Where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours.
- Ensure the child or young person knows how to take their medication effectively.
- Ensure children and young people have regular reviews of their condition and their medication.
- Provide the school, if appropriate, with information and advice regarding individual children with medical conditions (with the consent of the pupil and their Parents/Carers) and a healthcare plan if necessary.

Pupils

The pupils at this school have a responsibility to:

- Treat other pupils with and without a medical condition equally.
- Tell their parents, teacher or nearest staff member when they are not feeling well.
- Let a member of staff know if another pupil is feeling unwell.
- Treat all medication with respect.
- Know how to gain access to their medication in an emergency.
- Ensure a member of staff is called in an emergency situation.

Parents/Carers*

The parents of a student at this school have a responsibility to:

- Tell the school if their child has a medical condition.
- Ensure the school has a complete and up-to-date Medication Form for their child.
- Inform the school about the 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 medication is within expiry dates.
- Keep child at home if they are not well enough to attend school.
- Ensure their child catches up on any school work they have missed.
- Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional and provide a healthcare plan if appropriate.

*The term 'parent' implies any person or body with parental responsibility such as foster parent or carer.

Appendix 1 - Form 1

Asthma awareness for school staff – all staff should be made aware of children susceptible to asthma.

What to do in an asthma attack

- Keep calm.
- Encourage the child or young person to sit up and slightly forward .
- Make sure the child or young person takes two puffs of reliever inhaler (usually blue) immediately – preferably through a spacer.
- Ensure tight clothing is loosened.
- Reassure the child.
- Ask for a first aider to come to the pupil.

If there is no immediate improvement

- Continue to make sure the child or young person takes one puff of reliever inhaler every minute for five minutes or until their symptoms improve.

Call 999 or a doctor urgently if:

- The child or young person's symptoms do not improve in 5–10 minutes.
- The child or young person is too breathless or exhausted to talk.
- The child or young person's lips are blue.
- You are in doubt.

Ensure the child or young person takes one puff of their reliever inhaler every minute until the ambulance or doctor arrives.

It is essential for people who work with children and young people with asthma to know how to recognise the signs of an asthma attack and what to do if they have an asthma attack.

Common signs of an asthma attack are:

- coughing
- shortness of breath
- wheezing
- tightness in the chest
- being unusually quiet
- difficulty speaking in full sentences

- sometimes younger children express feeling
- tight in the chest as a tummy ache.

After a minor asthma attack

- Minor attacks should not interrupt the involvement of a pupil with asthma in school.
- When the pupil feels better they can return to school activities.
- The parents/carers must always be told if their child has had an asthma attack.
- Ensure details about medication administered are recorded on the child's medication form

Important things to remember in an asthma attack

- Never leave a pupil having an asthma attack.
- If the pupil does not have their inhaler and/or spacer with them, send another teacher or pupil to their classroom or assigned room to get their spare inhaler and/or spacer.
- In an emergency situation school staff are required under common law, duty of care, to act like any reasonably prudent parent.
- Reliever medicine is very safe. During an asthma attack do not worry about a pupil overdosing.
- Send another pupil to get another teacher/adult if an ambulance needs to be called.
- Contact the pupil's parents or carers immediately after calling the ambulance/doctor.
- A member of staff should always accompany a pupil taken to hospital by ambulance and stay with them until their parent or carer arrives.

Appendix 1 – Form 2

Epilepsy awareness for school staff – always ask parents of susceptible children if there are triggers for epilepsy eg flicking lights, food, temperature and make sure instances are reported to prevent seizures occurring. All staff should be made aware of children who are susceptible to seizures.

Ask a first aider to attend wherever possible.

Complex partial seizures - Common symptoms

- The person is not aware of their surroundings or of what they are doing
- Plucking at their clothes
- Smacking their lips
- Swallowing repeatedly
- Wandering around

Call 999 for an ambulance if...

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

Do...

- Guide the person from danger, remove hazardous objectives from around them
- Stay with the person until recovery is complete, maintaining their dignity at all times
- Be calmly reassuring

Don't...

- Restrain the person
- 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
- Give the person anything to eat or drink until they are fully recovered
- Attempt to bring them round
- Explain anything that they may have missed

Tonic-clonic seizures

Common symptoms:

- the person goes stiff,
- loss of consciousness
- falls to the floor

Do...

- Protect the person from injury (remove harmful objects/hazards from nearby)
- Cushion their head
- Look for an epilepsy identity card/identity jewellery
- Aid breathing by gently placing the person in the recovery position when the seizure has finished
- Stay with them until recovery is complete
- Be calmly reassuring
- Ensure dignity for the pupil is maintained at all times
- Keep other pupils calm

Don't...

- Restrain the person's movements
- Put anything in their mouth
- Try to move them unless they are in danger
- Give them anything to eat or drink until they are fully recovered
- Attempt to bring them round

Call 999 for an ambulance if...

- You know it is the person's first seizure
- The seizure continues for more than five minutes
- One seizure follows another without the person regaining consciousness between seizures
- The person is injured
- You believe the person needs urgent medical treatment

ALWAYS ENSURE PARENTS/CARERS ARE NOTIFIED OF ANY TYPE OF SEIZURE.

Appendix 1 – Form 3

Anaphylaxis awareness for staff- all staff should be made aware of children susceptible to extreme allergic reactions, including known or suspected triggers.

Symptoms of allergic reactions:

Ear/Nose/Throat - Symptoms:

runny or blocked nose, itchy nose, sneezing, painful sinuses, headaches, post nasal drip, loss of sense of smell/taste, sore throat/swollen larynx (voice box), itchy mouth and/or throat and blocked ears.

Eye - Symptoms:

watery, itchy, prickly, red, swollen eyes. Allergic 'shiners' (dark areas under the eyes due to blocked sinuses).

Airway - Symptoms:

wheezy breathing, difficulty in breathing and or coughing (especially at night time).

Digestion:

swollen lips, tongue, itchy tongue, stomach ache, feeling sick, vomiting, constipation and or diarrhoea.

Skin:

Urticaria - wheals or hives-bumpy, itchy raised area and or rashes. Eczema - cracked, dry, weepy or broken skin. Red cheeks. Angiodema - painful swelling of the deep layers of the skin.

Symptoms of Severe Reaction/ Anaphylaxis:

These could include any of the above together with:

- Difficulty in swallowing or speaking.
- Difficulty in breathing -severe asthma
- Swelling of the throat and mouth
- Hives anywhere on the body or generalized flushing of the skin
- Abdominal cramps, nausea and vomiting
- Sudden feeling of weakness (drop in blood pressure)
- Alterations in heart rate (fast pulse)
- Sense of impending doom (anxiety/panic)
- Collapse and unconsciousness

TREATMENT

All staff should be made aware of children with anaphylaxis. Anaphylaxis requires use of an epi-pen. This can be administered through clothing, into the patients thigh, by anyone who is trained to do so, or in an emergency by someone confident to use the epi-pen. The law states that only those qualified may administer medication, however; The exception to this is the administration of specific prescription only medicines, including adrenaline, when the purpose is to save a life. This is stated in Regulation 238

If student is conscious and alert ask them to self-administer their epi-pen. If student

unconscious, trained member of staff to administer epi-pen as per training. Record time of giving.

Ring for an ambulance

If student conscious keep them in an upright position to aid breathing. If unconscious then place in recovery position.

If no improvement within 5 minutes then 2nd epi-pen to be administered. Keep used epi-pens and give to paramedics when they arrive.

Always ensure parents are notified if an Epi-pen has been administered.

Ensure a new Epi-pen is provided in school before the child returns

Appendix 1 – Form 4

Type 1 Diabetes awareness and treatment for staff – all staff should be made aware of any child in school diagnosed with diabetes.

What is it?

People with type 1 Diabetes have to inject insulin, which is matched to their food intake. When the blood sugar levels fall too low or rise too high this can lead to the person becoming unwell & if untreated could lead to them losing consciousness.

There are two conditions which can cause problems – hypoglycaemia (hypo) which is very low blood sugar and hyperglycaemia which is very high blood sugar.

Pupils with diabetes in either case should have a care plan in school provided by a health care worker or their parent. Where blood count checks, auto-injectors, pumps etc are in use, this should be detailed in the care plan.

All staff should be made aware of children with medical needs, including the need to keep snacks in the classroom, the need to test blood at certain points in the day, record results and carbohydrate intake count.

A risk assessment will be carried out for any child with diabetes, all staff will be made aware of the child's needs, usual symptoms and the need to inform parents of any hypo/hyper. A sharps bin would be installed in the school and specific training carried out for staff as required.

Signs and symptoms:

Hypoglycaemia:

- Confused and lethargic
- Unable to concentrate
- Slurred speech
- Struggling to participate
- Shaking
- Sweating

Hyperglycaemia:

- Insatiable thirst
- Frequent trips to the toilet
- Fruity/breath
- Stomach ache
- Vomiting

First aid aims:

Hypoglycaemia:

Raise blood sugar level as quickly as possible
If hypo is severe and person is losing consciousness an ambulance should be called

Hyperglycaemia:

The person will need insulin as soon as possible to lower blood sugar
If person has lost consciousness this is a medical emergency and the person needs to get to hospital as soon as possible

Treatment

Hypoglycaemia:

Sit the person down preferably on the floor

Tell them they are having a hypo, as they will be in a very muddled state of mind

If person is reasonably responsive give them jelly babies, glucose sweets or a sweet drink such as lucozade. Once they are able to function get them to do a blood test and give more sugary food accordingly and test again half an hour later

If hypo is severe and person is unable to eat or drink they need medical assistance.

But, usually the person will be able to lick sugar if it is put on their lips, this is time consuming but it will help to bring the blood sugar up until medical help arrives.

Hyperglycaemia:

If person has extremely high blood sugar (over 20 mmol/L) they should sit down and give a correction dose of insulin

If person is unconscious they are ketotic, this is a life threatening condition and 999 should be called immediately.