

**Tadcaster Grammar School**



**Toulston, Tadcaster, LS24 9NB**

# **MEDICAL CONDITIONS POLICY**

Written by: School Health and Curriculum Support Manager – January 2016  
Approved by Governors: January 2016

## **MEDICAL CONDITIONS POLICY**

### **Policy Statement**

#### **Rationale**

Tadcaster Grammar School is an inclusive community that aims to support and welcome students with medical conditions. We aim to provide all students with all medical conditions the same opportunities as others at school. The policy is drawn up in consultation with a wide range of key stakeholders both within the School and from health settings, including students, staff, governors and parents.

Section 100 of the Children and Families Act 2014 place a duty on all schools to effectively manage and meet the needs of students with medical conditions.

The policy reflects guidance from both the DFE 'Supporting Pupils at School with Medical Conditions 2014' and NYCC 'Guidance for Supporting Children and Young People with Medical Conditions in School Feb 2015'.

Some students with medical conditions may be disabled. Where this is the case the governing body must comply with the duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement or Education, Health and Care Plan (EHC Plan) which brings together health and social needs, as well as their special educational provision. For students with SEN, this guidance should be read in conjunction with the SEN Code of Practice 2014, the School SEN information report and SEND policy.

The Headteacher and Governing body take overall responsibility for ensuring students' medical needs are met in school.

#### **Aims**

##### **The school will ensure that:**

- Sufficient staff are suitably trained and available to implement the policy.
- The school is welcoming and supportive of students with medical conditions and aims to include them in all school activities and will make reasonable adjustments where possible to do so.
- Staff are made aware of any student with a medical condition.

- Staff understands their duty of care to children and young people and know what to do in the event of an emergency. Named first aiders are available throughout the school day.
- The school understands the importance of medication being taken as prescribed and has clear guidance on the administration, storage and recording of medication.
- All staff understands the common medical conditions that can affect children.
- Staff receive additional training/information about any students they may be working with who have complex health needs supported by an Individual Health Plan.
- The school understands that certain medical conditions are serious and can be potentially life threatening, particularly if poorly managed or misunderstood. It also understands that certain medical conditions can be serious, adversely affect a child's quality of life and impact on their ability to learn.
- The school understands that students with the same medical condition may still have differing needs.
- Consideration will be given as to how students will be reintegrated back into school after periods of absence due to their medical condition.
- All stakeholders are reminded about the medical conditions policy through clear communication channels eg training sessions, VLE, letters home.

### **Managing Medicines**

There may be occasions when it is necessary for a student to take medication during the course of the school day.

### **Prescribed Medication**

In most circumstances, medication (e.g. antibiotics) prescribed three times a day can be taken at home – before school, after school and before bedtime. However if prescribed medication needs to be administered during the school day, clear written instructions must be provided and the medicine must be contained in a properly labelled container. The label must be clear and free from alterations or defacement and must show:

- The name of the medication
- The name of the student
- The date of the prescription
- The dosage
- Specific directions for the medication (not simply “as directed” or “as required”)

- Precautions relating to the medication (e.g. “caution, may cause drowsiness” or “store in a refrigerator”)
- The name of the dispensing pharmacist/doctor
- The expiry date and the date of issue.

Parents are responsible for the collection of medicines no longer required and for the disposal of date-expired medicines.

If a student refuses to take their medication, a record will be made and parents will be informed as soon as is reasonably possible so they can make alternative arrangements.

Students are encouraged, when appropriate, to manage their own medication, the School Health Manager, may only need to supervise such medication. In her absence, either of two members of the Student Development Team, will undertake the responsibility. A record of the medication will be kept.

Students with asthma should carry their inhalers with them at all times. In accordance with Department of Health guidance, school is now permitted, if they so wish, to purchase salbutamol inhalers without a prescription for use in an **emergency only**. This only applies to students who are already diagnosed with asthma and have a prescribed inhaler. Parental consent is required to administer the emergency inhaler should it be needed. This will not be available on school visits.

### **Individual Care Plans**

Some students may have an individual care plan (IHP) eg for diabetes, epilepsy, severe allergies. Instructions for any medication prescribed such as Epipen for severe allergy, will be followed as directed. Appropriate training will be provided by a health care professional for the administration of such medication.

It is a parents' responsibility to keep the school up to date with medical information and to provide medication which is within its expiry date. To comply with NYCC insurance the school would not be covered to carry out the care plan if medication is not in date.

### **Non-prescribed Medication**

The use of non-prescribed medication is generally discouraged, but very occasionally pain relief may be required:

- Paracetamol is the only non-prescribed pain relieving medication which may be administered and only if consent was obtained when the student commenced the school in Year 7. If a request is made for paracetamol, the School Health Manager would also be required to obtain verbal or written consent from the parent on that day to verify that no other medication has been taken in the previous four hours. Without this consent it cannot be administered. She would also ask about recent paracetamol use or any other medication that had been taken recently. If

paracetamol has been taken in the last four hours it will not be given until four hours after the last dose.

- Parents are asked to review consent on a termly basis and inform school of any changes.
- The School Health Manager, or the designated persons, are the only members of staff able to administer paracetamol.
- No more than one dose would be given during the school day and a record made if administered.
- If repeated requests for pain relief are made, it will be brought to the parent's attention.
- If a parent wishes their child to self-medicate without overt school involvement, that is an arrangement between a parent and their child, which must be recorded in the student planner for monitoring. Parents are advised to discuss with their child the importance of not sharing any medication with other students.
- If a student regularly suffers from acute pain such as migraine, parents should authorise and supply appropriate painkillers complying with the details as above for 'Prescribed Medication'.

### **School Visits**

The Party Leader will nominate a member of staff to oversee the supervision of any prescribed medication in accordance with the instructions as detailed above.

### **Storage of Medicines**

Medicines will be stored securely in the Medical Room

### **Individual Healthcare Plans (IHP)**

Some students with medical conditions will require an IHP which helps to ensure that their medical needs are supported. This may include emergency care and any action may be required. The School, parents and healthcare professionals should agree, based on evidence when a healthcare plan would be appropriate or disproportionate. If a consensus cannot be reached, the Headteacher will make the final decision.

All staff have access to the IHP's of students in their care and have responsibility for ensuring confidentiality, in accordance with the school's confidentiality policy.

IHP's will be reviewed annually or when a student's medical circumstances change, whichever is sooner.

The school has a centralised register of IHP's. Copies are kept in the Medical Room.

The School Health Manger will oversee all aspects of IHP's.

### **Emergency procedures**

All staff know what to do in an emergency and receive annual updates.

Relevant information about the student's symptoms, personal details and known medical conditions should be available. A parent/carer should be contacted. Main office/reception and site staff should be notified to prepare for the arrival of the emergency services.

If a student is taken to hospital via ambulance, a member of staff will accompany them until a parent arrives. Staff will not take a student to hospital in their own car unless it is absolutely necessary and have appropriate motor insurance.

### **The role of parents**

Parents are asked to provide the School with sufficient and up-to-date information about their child's medical needs when first enrolling at TGS. Any changes should be put in writing to the School Health Manager. They should ensure that emergency contact numbers are up-to-date.

If their child is unwell and cannot attend school, school should be informed at the beginning of the day.

Parents as key partners will be involved in the development and review of an IHP (Individual Health Care Plan), where such a plan is appropriate.

Parents will ensure they comply with the Medicines in School Policy.

### **The role of the individual student**

Where possible, students with medical conditions will be encouraged to be fully involved in discussions about their medical support needs and will be expected to comply with their IHP. Students will also be encouraged to take responsibility for managing their own medical needs where appropriate and if deemed competent, following discussion with parents. This may include self-managing their medication.

### **School visits/Education off- site/Sporting activities**

Students with medical conditions are encouraged to participate in all school and sporting activities and educational visits and wherever possible they should be accommodated. Any additional requirements should be reflected in the

planning of activities considering the individual needs of the student with the medical condition. Arrangements and adjustments should be made within reason, taking into account the safety of all students participating in a particular activity.

Risk assessments are carried out prior to any off-site visits. Together with a copy of relevant IHP's, any appropriate equipment is taken on the visit. Where appropriate, school will meet with parents and any relevant healthcare services to discuss and plan for any additional care requirements they may be needed.

### **Home to School Transport**

Parents are responsible for informing SEN transport or Integrated Passenger transport if their child has a medical need that they may require assistance with during the journey to and from school.

### **Data Protection**

All records will be kept in securely in accordance with NYCC's Record Retention and Disposal Schedule. All electronic records will be password protected.

### **Liability and indemnity**

School insurance covers staff providing support to students with medical conditions and in cases where medication is administered to students, providing appropriate training has been undertaken.

### **Complaints**

For details on how to make a complaint in relation to medical issues in school, please follow the school's complaints procedure.

### **Monitoring and review**

This policy will be reviewed every three years or more frequently, if any relevant legislation changes.