



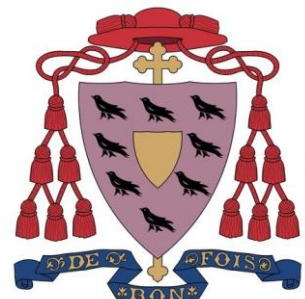
St Aidan's Catholic Academy

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Supporting Pupils in School with Medical Needs Policy

October 2024





Introduction

The primary aim when educating pupils and young people who have medical needs is to minimise, as far as possible the disruption to normal schooling. St Aidan's Catholic Academy has set out a positive policy to support pupils with medical needs. This medication policy fits with the local and national guidelines and is intended to ensure that there is minimum disruption to the pupil's education and that medication is administered in the appropriate manner within a safe environment.

To support our pupils we have developed procedures that will encourage open communication between school leaders, health and social care professionals, pupils and parents to ensure that the needs of pupils with medical conditions are effectively supported. The Assistant Headteacher and respective Heads of Houses will establish the needs of individual pupil's through parent meetings and the completion of an Individual Health Care Plan. We have appointed and qualified members of staff responsible for managing medications in school, (Laurie Harrison / Alexander Donaldson) who will be happy to help with any concerns parents/carers may have.

The school undertakes to keep clear records about all aspects of medication administration and to ensure that the records are kept securely. Individual Care plans, parental agreements, Administrations records for individual pupils, and staff training record are part of the medication policy.

We understand that parents of pupils with medical conditions are often concerned that their health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that pupil's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that our procedures provide effective support for their child's medical condition and that pupil's feel safe.

In addition to this policy we acknowledge that there are potential social and emotional implications associated with medical conditions. Pupils may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect pupil's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school will be supported by Heads of House, staff will work individually with pupils to ensure they are supported and fully engage with learning; not falling behind when they are unable to attend. Short term and frequent absences, including those for appointments connected with a pupil's medical condition, (which can often be lengthy) will also be managed to ensure appropriate support is in place to limit the impact on the pupil's educational attainment and emotional and general wellbeing.

Some pupils with medical conditions may be disabled. Where this is the case the local governing body will comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For pupils with SEN, this guidance should be read in conjunction with the SEN code of practice and our SEND policy.



The prime responsibility for a pupil's health lies with the parent/carer who is responsible for the pupil's medication and should supply the school with the relevant information/contacts and medication.

Procedures

The Governing Body will ensure the following procedures are in place to support pupils with medical conditions:

1. Contact is to be made by the parent/carers and the individual medical needs discussed and outlined in an Individual Healthcare Plan IHCP (see appendix 1). This will include relevant medical information, for example; medical condition; Clinical/hospital contact; medication prescribed; dosage regime; possible side effects; and the appropriate action to take in an emergency.
2. The medication must be brought in by the parent/carer in the original packaging with the pharmacy label with the pupil's name, medication details and the dosage regime clearly stated. Only medication needed three or more times a day should be brought into school.
3. A Parental Agreement (See appendix 2) must be signed authorising a member of staff to administer the medication, this will take place during the initial care plan meeting with the relevant Head of House. The medication will be stored in an approved medicine cabinet. An individual register will be kept for the pupil. This will state the date, time, amount given, amount left and signature of the person administering the medication (See appendix 3). Please be aware that St Aidan's Catholic Academy cannot be held responsible for a missed dosage. It remains the pupil's responsibility to remember the time to have their medication.
4. Parents/carers are contacted by telephone to request that they collect any unused or out of date medication.
5. All relevant staff will be fully aware of a pupil's condition and review meetings held termly to ensure procedural consistency (Head of House/SENDCo and other relevant agencies and professionals will attend). Information will be shared with staff via regular updates via Arbor / Edukey and at the beginning of whole school meetings via the SENDCo.
6. If the trained staff members for administration are absent cover arrangements will be in place to ensure someone is always available.
7. All supply teachers will be briefed with regards to procedures and policy for supporting pupils with medical conditions and regular updates provided to staff via Arbor (confidential to staff). Staff will be informed of any changes via Arbor to procedure/policy and pupil condition. These updates will be provided by the Head of House.
8. The EVC (Educational Visit Coordinator) (L Harrison/V Cottam) will ensure that all pupils' medical needs (e.g. asthma, diabetes, anaphylaxis) are known and that staff are competent to handle them. All relevant medical information with regards to a pupil's condition, will be



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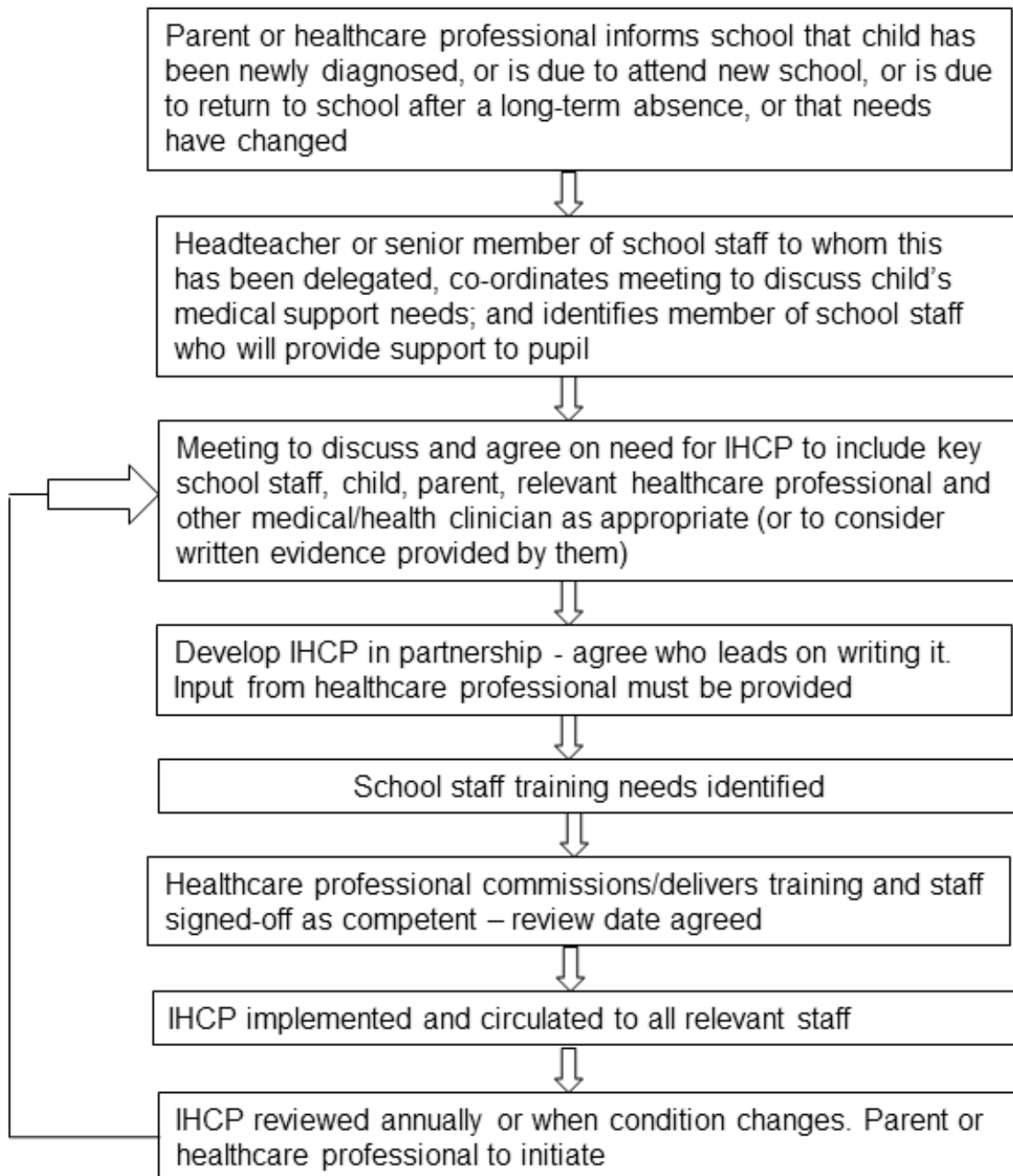
passed on to the visit leader via the pupil's IHCP, prior to a visit. The visit leader is responsible for ensuring that the IHCP is followed at all times during a visit and will supervise the administration of all prescribed medication if necessary or requested by parents. Any medication administered should be done in the presence of another staff member and the medical administration form completed (Appendix 6). This form will be handed to G Hogg on return.

9. If a pupil is in a transitional phase between schools following a transfer it is imperative that the Initial Care Plan meeting has occurred prior to admission. House spaces may be used as an interim measure for pupils with medical issues whilst the correct support and arrangements are secured.

Individual Healthcare Plans IHCP (appendix 2):

Individual healthcare plans, (and their review), will be initiated, following consultation with the parent, by the Head of House or a healthcare professional involved in providing care to the pupil. Plans will be drawn up in partnership between the Academy, parents, and a relevant healthcare professional, eg school, specialist or pupil's community nurse, who can best advise on the particular needs of the pupil. Pupils should also be involved whenever appropriate.

A flow chart for identifying and agreeing the support a pupil requires when developing an Individual healthcare plan is shown below.



Please note:

1. Where a pupil has SEN but does not have a statement or EHC plan, their special educational needs should be mentioned in their individual healthcare plan.
2. Where a pupil is returning to school following a period of hospital education or alternative provision (including home tuition), the Academy will work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.



When meeting with parents and other relevant agencies, the following should be taken into consideration when deciding the content of the individual; healthcare plan:

1. the medical condition, its triggers, signs, symptoms and treatments;
2. the pupil's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues eg crowded corridors, travel time between lessons;
3. specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
4. the level of support needed, (some pupils will be able to take responsibility for their own health needs), including in emergencies. If a pupil is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
5. who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
6. who in the school needs to be aware of the pupil's condition and the support required;
7. arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
8. separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, eg risk assessments;
9. where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition; and
10. what to do in an emergency, including whom to contact, and contingency arrangements. Some pupils may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Roles and Responsibilities:

This policy recognises that supporting a pupil with a medical condition during school hours is not the sole responsibility of one person. Our ability to provide effective support will depend to an appreciable extent on working cooperatively with other agencies. Partnership working between school staff, healthcare professionals (and where appropriate, social care professionals), local authorities, and parents and pupils is critical.



The Local Governing body will ensure:

1. suitable procedures, (See above), are in place to ensure effective support and arrangements for all pupils with a medical issue.
2. academy staff have sufficient training and are competent before taking responsibility to support pupils with medical conditions. This will be coordinated by Heads of Houses and SENDCo.
3. heads of house and trained staff maintain up to date records using the Record of Medicine Administered to a Pupil sheet (See appendix 3). Heads of House will meet on a half termly basis with all relevant staff and agencies to review and monitor record keeping. When medicine has been given, or if a pupil has refused the medication, such records show proof that the appropriate procedures have been followed and the outcome documented. Laurie Harrison to maintain records and IHCP's on reception.
4. staff take into account the needs of pupils with medical conditions that they teach, although administering medicines is not part of their professional duties. Staff will however, receive updates and suitable training to ensure a level of competency before taking responsibility for a pupil with known medical conditions.
5. the school nurse has regular access to school via assemblies, PDE and Thursday drop-ins. Heads of Houses will work with the school nurse to look at specific needs of individual pupils and specific training needs of staff. Where appropriate the school nurse and other health professionals will be invited to reviews and IHCP meetings.
6. parents are aware that they are the key partners in this process and will be involved in the development and review of the IHCP at all stages. Parents are responsible for carrying out all actions of the IHCP, for example; provide medicine and equipment as and when required.
7. pupils are fully involved in the IHCP process.
8. pupils are aware that they can self-administer certain prescribed medicines e.g. inhalers for asthma and insulin for diabetes. Please note that whilst we encourage self-medication, the school holds no responsibility for ensuring that medication is taken, only that it would be safely stored. There would be immediate confiscation of the medication and the privilege removed if medication is misused. This will be reflected in the IHCP.
9. only sufficiently trained staff (Laurie Harrison/Victoria Cottam and Heads of Houses) are involved in administration of medicine following the procedures outlined above and details in the IHCP. Training needs will be reviewed each term during pastoral meetings where IHCP's/staff requirements/issues will be discussed.



10. complaints procedures are available from school on request via the website.

11. at least two staff members will have completed training and hold an Administering Medication in Schools Certificate.

Medications on the school premises:

Medications are stored in an approved medicine cabinet. An individual register will be kept for the pupil. This will state the date, time, amount given, amount left and signature of the person administering the medication (See appendix 3). Please be aware that St Aidan's Catholic Academy cannot be held responsible for a missed dosage. It remains the pupil's responsibility to remember the time to have their medication. Laurie Harrison will keep the key to cabinet and ensure records are up to date; in Laurie's absence suitable cover will be in place, this person will be trained as outlined above.

Controlled medication and prescribed medication

All medications brought into school that are categorised as a controlled substance, including methylphenidate ("Ritalin") and codeine (or medication that contains codeine) must have details of the diagnosis and relevance of the use of that medication. Details of further ongoing treatment must be communicated to keep accurate up to date records of dosage and strength. E.g. Methylphenidate milligram dosage is subject to change, depending on growth/age.

All medication must be brought in by the parent/carer in the original packaging with the pharmacy label with the pupil's name, medication details and the dosage regime clearly stated, accompanied by a signed consent form.

Anaphylaxis (use of "EPIPENS")

Each case will be treated individually with consultation between the parent/carer and the school. The pupil's individual healthcare plan should give detailed information of the action to take if anaphylaxis occurs.

Please note: It is imperative that all allergic reactions are made apparent within an IHCP as soon as possible, establishing cause, prevention and the appropriate response to take in the event of a reaction occurring.

Emergency Salbutamol Inhaler

The emergency salbutamol inhaler should only be used by pupils, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.



The Local Governing body will ensure:

1. an emergency asthma inhaler kit including: salbutamol metered inhaler, two single spacers compatible with the inhaler, instructions for usage, a list of inhalers to be checked monthly, a list of pupils permitted to use the inhaler (parental permission gained), a record of administration will be kept at reception.
2. to arrange for the supply, storage, care, and disposal of the inhaler and spacers in line with the schools policy on supporting pupils with medical conditions.
3. that there is a register of pupils in the school that have been diagnosed with asthma or prescribed a reliever inhaler kit, a copy of which should be kept with the emergency inhaler
4. that written parental consent for use of the emergency inhaler included as part of a pupil's individual healthcare plan. Please see Appendix 6.
5. that the emergency inhaler is only used by pupils with asthma with written parental consent for its use
6. that there is provision of appropriate support and training for staff in the use of the emergency inhaler in line with the schools wider policy on supporting pupils with medical conditions
7. that a record is kept of use of the emergency inhaler and informing parents or carers that their pupil has used the emergency inhaler
8. that a record is kept of use of the emergency epipen and emergency services and parents are informed that it has been administered that at least two staff members are trained and responsible for the protocol being followed. For further guidance please refer to the *Department of Health: Guidance on the use of emergency salbutamol inhalers in schools.*

Non- prescription medication

Where possible, it is encouraged that pain relief medicine such as paracetamol is administered at home by a parent/carer. St Aidan's will not be held responsible for any side effects to a pupil as a result of accessing non-prescribed medication.

As a general rule the Local Education Authority have advised:

1. A pupil under the age of 16 should never be given aspirin, or medicines containing ibuprofen unless prescribed by a doctor.
2. No pupil under the age of 16 should be given medication without their parent's written consent.



Emergency procedures:

All details of the IHCP should be adhered to implicitly by staff. In the case of an emergency an ambulance should be called and a first aid trained member of staff should remain with pupil until arrival. Parents will be contacted via telephone and all relevant documentation updated.

Pupils absent from Education

St Aidan's Catholic Academy will work closely with health care professionals to ensure suitable provision for any pupil missing education due to illness. Resources and teaching material will be shared electronically and via school books.

Points to consider:

The Misuse of Drugs Act 1971 and the St Aidan's Catholic School's Drugs Policy forbids any unlawful use of medicines. St Aidan's Catholic Academy maintains the right to refuse medication at any time, if the policy and guidelines are not followed. This policy provides a sound basis for ensuring that all pupils with medical needs receive proper care and support while attending the academy.

Policy Review

This policy document will be reviewed in October 2025

Signed by:

Dr C Emmerson
October 2024
Chair of Governors



Appendix 1

Individual Healthcare Plan:

Name of school/setting

St Aidan's Catholic Academy

Pupil's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to pupil

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 pupil'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

--



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Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

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



Appendix 2:

Parental agreement for setting to administer medicine

St Aidan's Catholic academy will not give your child medicine unless you complete and sign this form.

Date for review to be initiated by	
Name of school/setting	
Name of pupil	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	



NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name

Daytime telephone no.

Relationship to pupil

Address

I understand that I must deliver the medicine personally to

[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)

Date



Appendix 3:

Record of medicine administered to an individual pupil

Name of school/setting	
Name of pupil	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____



Record Sheet

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
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Time given

Dose given

Name of member of staff

Staff initials

Date

Time given

Dose given

Name of member of staff

Staff initials

Date

Time given

Dose given

Name of member of staff

Staff initials



Appendix 4

Staff training record – administration of medicines

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

I confirm that the member of staff named above has received the training detailed above and is competent to carry out any necessary treatment.

Head teacher signature: _____

Date: _____

I confirm that I have received the training detailed above.

Staff signature: _____

Date: _____

Suggested review date: _____



Appendix 5

USE OF EMERGENCY SALBUTAMOL INHALER : CONSENT FORM

Pupil showing symptoms of asthma / having asthma attack

1. I can confirm that my child has been diagnosed with asthma and has been prescribed an inhaler
2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:

Date:

Name (print).....

Pupils' name:.....



Appendix 6

Record of medicine administered to an individual pupil attending a school visit

Name of Pupil	Date and Time	Medication Name	Medication Strength	Quantity Administered	Person Administering	Staff Observer