

Part 2 – Supporting Pupils with Medical Conditions

School Context

Linchfield Academy supports pupils with a range of medical conditions, including asthma, allergies/anaphylaxis, diabetes, epilepsy and other conditions requiring medication or additional support. Where a pupil has complex medical needs, the school will work with parents/carers and relevant healthcare professionals to ensure appropriate arrangements are in place.

1. Administration of Medicines

The school will support the administration of prescribed medicines where this is necessary to enable a pupil to attend school and participate fully in education.

Medication will only be administered:

- Where the appropriate parental/carer consent has been obtained.
- In accordance with the prescriber's instructions.
- In accordance with the school's medication procedures.
- By staff who have been appropriately trained or authorised.
- Where the medication is correctly labelled and in date.
- Where appropriate records are maintained.

Staff will not administer medication outside the agreed instructions unless there is an appropriate emergency procedure or clinical direction in place.

Medication will be administered by two members of staff where practicable, particularly for controlled drugs or where the school's risk assessment identifies this as appropriate.

All administration will be recorded on the school's Medication Administration Record (MAR).

2. First Aid Provision

The school will maintain appropriate first aid provision in accordance with its First Aid Policy and the needs of the school population.

First aiders will be appropriately trained and their qualifications will be monitored by **Becky Roberts and Katie Brockington**.

First aid provision will include arrangements for:

- Minor injuries and illness.

- Accidents occurring during lessons and activities.
- Medical emergencies.
- Asthma attacks.
- Anaphylaxis.
- Seizures.
- Diabetes-related emergencies.
- Other known medical conditions where emergency procedures are identified within an IHP.

First aid equipment will be checked regularly and replenished when required.

3. Delegated Clinical Duties

Where a pupil requires a clinical procedure that cannot reasonably be undertaken as part of normal first aid or medication administration, the school will work with appropriate healthcare professionals to determine whether the task can safely be delegated to trained school staff.

No member of staff will be expected to undertake a clinical task for which they have not received appropriate training or do not feel competent to perform.

4. Storage and Disposal of Medication

Medication will be stored securely, appropriately labelled and readily accessible when required in an emergency. Expiry dates will be checked regularly. Unwanted or expired medication will be returned to parents/carers or disposed of safely through an appropriate pharmacy route.

5. Emergency Response and Risk Assessment

The school will ensure that emergency arrangements are in place for pupils with medical conditions that could deteriorate rapidly or require urgent treatment.

IHPs and risk assessments will identify individual emergency procedures, medication requirements and staff responsibilities. Emergency medication will be readily accessible and emergency services contacted where required.

6. Integration into School Life

The school will ensure that pupils with medical conditions are fully included in school life wherever reasonably practicable.

Reasonable adjustments will be made where necessary.

The school will balance appropriate risk management with the pupil's right to participate fully in education and school life.

7. Working with Parents, Carers and External Agencies

The school recognises that effective support for pupils with medical conditions requires partnership working.

The exact agencies involved will depend on the individual pupil's needs.

Parents/carers will be encouraged to provide accurate and up-to-date information about their child's medical condition, medication and emergency arrangements.

The school will seek appropriate professional advice where staff require guidance about supporting a pupil's medical needs.

8. Record Keeping

The school will maintain appropriate records relating to pupils with medical conditions.

Information will initially be gathered through:

- Admission and registration information.
- Parent/carers medical forms.
- Information provided by healthcare professionals.
- Previous school records.
- Medication consent forms.
- IHPs.
- Emergency care plans.
- Relevant assessments.

Becky Roberts and Katie Brockington will be responsible for ensuring medical information is appropriately recorded and reviewed.

Information will be shared with staff on a need-to-know basis to ensure pupil safety.

Records will be stored securely and handled in accordance with the school's data protection and confidentiality requirements.

Medication administration records, incident forms and other relevant documentation will be retained in accordance with the school's record retention arrangements.

9. Individual Healthcare Plans (IHPs)

Where a pupil has a medical condition requiring specific support, the school will consider whether an IHP is appropriate.

The IHP will normally be coordinated by the **Becky Roberts**, in consultation with:

- The pupil, where appropriate.
- Parents/carers.
- Relevant healthcare professionals.
- The pupil's key staff.
- Other professionals where appropriate.

The IHP will set out the practical arrangements required to support the pupil.

It may include:

- Medical condition and treatment.
- Medication.
- Emergency procedures.
- Symptoms and triggers.
- Required adjustments.
- Physical activity arrangements.
- Educational visit arrangements.
- Emergency contacts.
- Staff responsibilities.
- Training requirements.

IHPs will be reviewed at least annually, or sooner where there is a significant change in the pupil's condition, medication or circumstances.

10. Wider Staff Training

The school will ensure that staff receive appropriate training to enable them to support pupils with medical conditions safely.

All staff will receive appropriate awareness information relating to medical conditions commonly encountered within the school.

Training requirements will be identified through IHPs, risk assessments and advice from healthcare professionals.

A record of staff training and competency will be maintained by **Becky Roberts and Katie Brockington**.

11. Medication Administration and MAR Procedures

The school will use a standard **Medication Administration Record (MAR)** for medicines administered to pupils.

Before administering medication, staff must check:

1. The correct pupil.
2. The correct medication.
3. The correct dose.
4. The correct time.
5. The correct route.
6. The expiry date.
7. The instructions on the label and/or IHP.
8. That appropriate consent is in place.

Staff must:

- Wash or sanitise hands where appropriate.
- Check the medication carefully.
- Record administration immediately after it has occurred.
- Record any refusal, omission or problem.
- Report concerns promptly.
- Store medication safely after administration.

Staff must not:

- Administer medication that is not clearly labelled.
- Administer expired medication.
- Give medication belonging to another pupil.
- Alter a prescribed dose without appropriate authorisation.
- Leave medication unattended.
- Sign the MAR before medication has been administered.
- Administer medication if they are unsure about the instructions.

Any discrepancy or concern must be reported immediately to **Becky Roberts and Katie Brockington**.

The completed MAR will be checked periodically by **Becky Roberts and Katie Brockington**.

12. Emergency Medication

Emergency medication must be readily accessible while remaining appropriately secure.

This includes, where applicable:

- Adrenaline auto-injectors.
- Asthma inhalers.
- Emergency seizure medication.
- Diabetes emergency medication.
- Other prescribed emergency medication.

Medication will be stored in the School Office.

Where it is appropriate for a pupil to carry their own emergency medication, this will be determined according to their age, maturity, ability to manage their condition and the advice contained within their IHP.

Pupils may carry medication such as asthma inhalers or adrenaline auto-injectors where they are assessed as sufficiently responsible and competent to do so.

Where pupils are not yet able to self-manage, emergency medication will remain immediately accessible to appropriately trained staff.

Controlled drugs will be stored securely in accordance with applicable requirements while ensuring they remain immediately accessible in an emergency.

All emergency medication will be checked regularly for expiry dates and condition.

13. Over-the-Counter Medication

The school will only administer over-the-counter (OTC) medication where this is permitted under the school's agreed procedures.

Where the school permits the administration of medicines such as paracetamol or ibuprofen, the following will apply:

- Appropriate parental/carer consent must be obtained.
- Medication must be provided in its original packaging.
- The medication must be in date.
- Staff must follow the agreed dosage instructions.
- The pupil's age and any relevant medical information must be considered.
- Administration must be recorded on the MAR.
- Medication must not be administered where staff have concerns about the dose, frequency, interaction with other medication or the pupil's condition.

OTC medication will not be administered simply because a pupil requests it without the appropriate school procedure being followed.

14. Transfer of Medication Between Home and School

Parents/carers are responsible for ensuring that the school receives medication required during the school day.

Medication brought into school must:

- Be in the original packaging.
- Be clearly labelled.
- Be in date.
- Include clear dosage instructions.
- Be accompanied by the required consent documentation.

Staff receiving medication will check it against the relevant records.

When medication is no longer required, has expired or a pupil leaves the school, arrangements will be made for its return to parents/carers.

Medication must not be transferred between pupils.

15. Emergency Inhalers

Where the school holds emergency/spare asthma inhalers, these will be managed in accordance with current national guidance and the school's asthma procedures.

The school will ensure that:

- Emergency inhalers are readily accessible in the School Office.
- Relevant staff know their location.
- Appropriate spacers are available where required.
- Stock is checked regularly.
- Expiry dates are monitored.
- Use is recorded.
- Replacement medication is obtained when necessary.
- Staff understand when emergency inhalers may be used.

16. Medication During Educational Visits and Off-Site Activities

Pupils with medical conditions will be supported to participate in educational visits and off-site activities.

Before a visit, staff will consider:

- The pupil's IHP.
- Medication requirements.
- Emergency medication.
- Potential triggers.
- Access to emergency medical assistance.
- Staff training.
- Supervision arrangements.
- Transport.
- Activities and environmental risks.

Required medication will accompany the pupil and remain readily accessible throughout the activity.

Risk assessments will identify any additional control measures required.

No pupil will be unnecessarily excluded from an educational visit solely because they have a medical condition.

17. Hygiene and Infection Control

Staff will follow appropriate hygiene and infection-control procedures when supporting pupils with medical conditions.

This will include:

- Effective hand hygiene.
- Use of appropriate personal protective equipment where required.
- Safe disposal of clinical waste.
- Appropriate cleaning of equipment.
- Appropriate procedures for blood, bodily fluids and other potential contaminants.
- Following healthcare professional advice for pupils with specific infection-control needs.

18. Planned Hospital Admission

Where the school is informed of a planned hospital admission, staff will work with parents/carers and relevant professionals to plan for:

- The pupil's absence.
- Continuity of education where appropriate.
- Changes to medication.
- Changes to the IHP.
- Support required on return.

- Any temporary adjustments.

The school will maintain appropriate communication with the family during the period of absence, while respecting their circumstances and wishes.

19. Reintegration Following Hospitalisation

Following hospitalisation, the school will work with the pupil, parents/carers and relevant professionals to support a safe and successful return to school.

This may include:

- Reviewing or creating an IHP.
- Obtaining updated medical information.
- Staff training.
- Adjusting the school timetable temporarily.
- Additional rest periods.
- Adjustments to physical activity.
- Additional pastoral support.
- A phased return where appropriate.

The school will review arrangements as the pupil's condition improves.

20. Supporting Pupil and Staff Welfare Following a Serious Incident

A serious medical incident can affect pupils, staff and the wider school community.

Following a significant incident, the school will consider whether additional support is required, including:

- Debriefing for staff.
- Pastoral support for pupils.
- Support for witnesses.
- Communication with parents/carers.
- Referral to appropriate professional support.
- Review of procedures and risk assessments.

Information will be shared sensitively and on a need-to-know basis.

21. Child Death

In the extremely distressing event of the death of a pupil, the school will follow its safeguarding, critical incident and bereavement procedures.

The school will work with the family, relevant agencies and the Trust to ensure that:

- Appropriate notifications are made.
- The family is treated with dignity and sensitivity.
- Staff and pupils receive appropriate support.
- Communication is coordinated carefully.
- The impact on the wider school community is considered.
- Any required investigation or reporting is completed.
- Lessons are identified where appropriate.

The school will follow any statutory reporting requirements and Trust procedures.

22. When a Pupil Feels Unwell

If a pupil with a medical condition feels unwell, staff will follow the pupil's IHP where one is in place.

Staff will:

- Listen to the pupil and take their concerns seriously.
- Consider known symptoms and triggers.
- Follow the pupil's medical/emergency plan.
- Contact an appropriately trained member of staff where required.
- Administer medication where authorised and required.
- Contact parents/carers where appropriate.
- Seek emergency medical assistance where necessary.

A pupil will not be sent home without appropriate consideration of their medical needs and the school's normal procedures.

23. Risk Assessments for Off-Site Activities

Risk assessments for educational visits and off-site activities will consider the needs of pupils with medical conditions.

This will include:

- Medication requirements.
- Emergency medication.

- Staff competency.
- Access to healthcare.
- Travel arrangements.
- Accommodation.
- Food and allergy risks.
- Physical activities.
- Environmental triggers.
- Emergency evacuation arrangements.

The risk assessment will be shared with relevant staff before the activity.

24. Supporting Pupils as Active Partners in Their Medical Care

The school will support pupils to develop age- and stage-appropriate independence in managing their medical condition.

The level of independence expected will reflect the pupil's age, maturity, understanding and individual circumstances.

25. Serious Incidents and Near Misses

Serious incidents, medication errors and significant near misses will be recorded, investigated and reviewed by the Headteacher and Medical Conditions Lead. Findings will be used to review IHPs, risk assessments, training and procedures.

Significant incidents and lessons learned will be reported to the Local School Board (LSB)

26. Reporting and Compliance to the LSB and Trust Board

The Headteacher will provide the LSB with appropriate information regarding compliance, training, IHPs, medication checks and significant incidents. Where required, relevant information will be escalated from the LSB to the Trust Board.

27. Roles and Responsibilities

Headteacher

The Headteacher has overall responsibility for ensuring that the school has effective arrangements for supporting pupils with medical conditions.

Medical Conditions Lead

The Medical Conditions Lead will coordinate day-to-day implementation of this policy, including:

- Maintaining medical-condition records.
- Coordinating IHPs.
- Monitoring medication arrangements.
- Checking MARs.
- Monitoring staff training.
- Coordinating emergency medication checks.
- Liaising with parents/carers and healthcare professionals.
- Monitoring incidents and near misses.

Staff

All staff are responsible for:

- Familiarising themselves with relevant medical information.
- Following IHPs and school procedures.
- Attending required training.
- Responding appropriately to medical emergencies.
- Reporting concerns, incidents and near misses.
- Maintaining confidentiality.

Parents/Carers

Parents/carers are expected to:

- Provide accurate medical information.
- Provide medication in accordance with school requirements.
- Inform the school of changes to medication or medical conditions.
- Attend IHP reviews where appropriate.
- Ensure medication remains in date.
- Collect medication when requested.

Pupils

Pupils will be encouraged to participate in their medical care in an age- and stage-appropriate manner and to communicate concerns to trusted adults.

Appendices

Appendix 1 – School Medication Administration Record (MAR)

Appendix 2 – Individual Healthcare Plan (IHP) Template

Policy owner: Linchfield Academy

Medical Conditions Lead: Becky Roberts & Katie Brockington

Approved by: CIT

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