

Woodsetton School



# Medication Policy

This policy was reviewed and updated in May 23

The next anticipated review date will be September 2023

c/o The Woodsetton School, Tipton Road, Dudley, West Midlands DY3 1BY  
Tel: 01384 818265 Email: [info@woodsetton.dudley.sch.uk](mailto:info@woodsetton.dudley.sch.uk)

## Introduction

On 1 September 2014 a new duty came into force for governing bodies to make arrangements to support pupils with medical conditions at school. The statutory guidance in this document is intended to help Woodsetton School meet its legal responsibilities and sets out the arrangements we will be expected to make, based on good practice. 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.

Parents/carers of children with medical conditions are often concerned that their child's 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 children'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 with children at Woodsetton

School feel confident that we will provide effective support for their child's medical condition and that pupil's feel safe. In making decisions about the support we provide, Woodsetton School has established relationships with relevant local health services to help us. We as a school will always fully consider advice from healthcare professionals and listen to and value the views of parents/carers and pupils.

This policy has been drawn up to support and welcome all pupils with medical conditions. This policy defines the ways in which Woodsetton School supports the needs of pupils with medical conditions (temporary or long-term), whilst safeguarding staff by providing clear guidelines and parameters for the support they offer. The medical policy is designed to deliver a clear communication plan for staff, parents/carers and pupils to ensure its full implementation.

We aim to provide all children with medical conditions the same opportunities as every other pupil at the school. We have a responsibility to make the school welcoming and supportive to pupils with medical conditions who currently attend and to those who may attend in the future.

This policy has been drawn up in accordance with the DfE guidance "Supporting Pupils at School with Medical Conditions statutory guidance for Governing Bodies of maintained schools and proprietors of academies in England December 2015".

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children 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 children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing

and emotional health. Reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall 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), also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

This school ensures that pupils with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

Most pupils will, at some time, have a medical condition which may affect their participation in school activities. For many this will be short term. Other pupils have a medical condition that, if not properly managed, could limit their access to education. Such pupils are regarded as having "MEDICAL NEEDS".

Other guidance has been obtained from:

- The British Epilepsy association, Training for schools website
- The Dudley (Shropshire Health) Guidance for the Management of Asthma in Schools
- The Dudley (Shropshire Health) Guidance for the Management of Anaphylaxis in School
- Supporting Pupils at school with Medical Conditions (Department of Health December 2015) Anaphylaxis Campaign [www.anaphylaxis.org](http://www.anaphylaxis.org).
- Children's allergy and anaphylaxis protocols for school [www.allergy.org.uk](http://www.allergy.org.uk).
- NICE anaphylaxis guidance and guidelines.
- NICE guidelines- administration of paracetamol.

### **What legislation is this guidance issued under?**

**Section 100 of the Children and Families Act 2014** places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. In meeting the duty, the governing board, proprietor or management committee must have regard to guidance issued by the Secretary of State under this section. This guidance came into force on 1 September 2014.

**Section 21 of the Education Act 2002** provides that governing bodies of maintained schools must, in discharging their functions in relation to the conduct of the school, promote the wellbeing of pupils at the school.

**Section 175 of the Education Act 2002** provides that governing bodies of maintained schools must make arrangements for ensuring that their functions relating to the conduct of the school are exercised with a view to safeguarding and promoting the welfare of children who are pupils at the school. Part 3, and in particular paragraph 7 of the Schedule to the Education (Independent School Standards) Regulations 2014 sets this out in relation to academy schools and alternative provision academies.

**Section 3 of the Children Act 1989** confers a duty on a person with the care of a child (who does not have parental responsibility for the child) to do all that is reasonable in all the circumstances for the purposes of safeguarding or promoting the welfare of the child.

There is no legal duty which requires school staff to administer medication. Woodsetton School ensures all staff have the appropriate training for supporting pupils with medical conditions and can safely administer medication to individual pupils. A care plan is written for all pupils with medical needs and a health and safety risk assessment will be undertaken for all medical and health related procedures.

### **Liability and indemnity**

The school's insurance arrangements covers staff providing support to pupils with medical conditions. The insurance policy at Woodsetton School provides liability cover relating to the administration of medication.

### **Principles**

Pupils with medical conditions are encouraged to take control of their condition, we aim to allow pupils and their parents/carers to feel confident in the support they receive from the school to do this.

Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. However, school staff may need to take extra care when supervising some activities to make sure all these pupils, and others, are not put at risk.

### **Aims**

- to ensure that children with medical needs receive proper care and support in school;
- to provide guidance to all staff, on the parameters within which they should operate when supporting pupils with medical needs;
- to define the areas of responsibility of all parties involved, pupils, parents/carers, staff, head teacher and the governing board;
- all pupils are aware of where they have to attend, to administer their own medication;
- pupils are encouraged with parent/carer and head teacher consent to carry their own emergency medication i.e. inhalers, epi pens etc.;
- all pupils with medical conditions have easy access to their emergency medication and where to go to obtain it.

## **Administration of medicines**

No pupils will be given medicines without written consent form being completed. Medication may need additional confirmation verbally from a parent as well as written permission (Appendix 2 - Parental Medication Administration Request).

It is the responsibility of the parent/carer to ensure that pupils have enough medication at school and that when expiry dates are reached the medications are disposed of accordingly and new ones provided. However, checks are made before administering medication.

Parents/carers of a pupil with a complex medical condition who may require emergency medication such as an adrenaline injector pen will be asked to provide consent on the individual health care plan for staff to administer accordingly.

Where pupils refuse medication or do not take daily medications on a regular basis it is not the role of the school staff to take on this responsibility, parents/carers will be informed of missed medications.

In the event of an accidental overdose of medication the school will contact the parent/carer as soon as possible and will also contact 111 for advice.

Our pupils are always encouraged to self-administer medication when appropriate to encourage independence, however staff will administer medication if necessary. Our medical room is a private area where pupils can self-medicate.

At Woodsetton, we have staff who are able to administer paracetamol for a pupil with a temperature and accompanying symptoms or mild/moderate pain in accordance with NICE guidelines.

Parents/carers will have completed a written consent form and they will be contacted prior to administration for verbal consent which in turn will be recorded on CPOMS. Consent will be for the duration of their child's time in Woodsetton School, parents can remove consent at any point.

Pupils are not permitted to carry any form of medication, all medications brought into school for short or long term use, must be agreed by the school.

NMC Standards for medicines management - Section 4 (Standards for practice of administration of medicines)

Some of our pupils medications are deemed as 'controlled drugs', this may be drugs used for ADHD such as Methylphenidate. The supply and possession of such medications are controlled by the Misuse of Drugs act and its associated regulations (2001).

## **Storage of medicines**

All medications except adrenaline injector pens and emergency epilepsy medication are kept in a locked cupboard in the medical room and have to be signed out and documented accordingly. Key members of staff have access to these cupboards. Adrenaline injector pens and emergency

epilepsy medication are kept in the individual child's class stock cupboard in a locked medication box. If used, these also have to be signed out and documented accordingly.

When medication requires refrigeration it will be kept in a medicines fridge in our medical office. The fridge temperature should be maintained between 2 - 8°C and is checked weekly.

All medicines, including paracetamol, should be in their original packaging with prescription labels attached, clearly marked with pupil's name and administration instructions.

### **Record Keeping**

- information regarding the administration of medication will be documented appropriately and will be readily available in case of an emergency;
- any changes to medication must be provided in writing by the parent/carer;
- we have documentation specifically related to diabetes where staff can record blood glucose levels and other relevant information.

### **School trips**

All staff attending an off-site school trip will take a copy of the pupil's health care plan and medication regime and carry out the appropriate risk assessment. Where possible some members of staff may be trained in the care of specific conditions such as epilepsy and there will always be attendance of a first aider.

A member of staff will be responsible for taking the medication supply that is needed and administer and document accordingly.

### **Disposal of medications/sharps**

Any medication that has reached its expiry date will not be administered to a pupil, parents/carers will be contacted and the medication will be kept in main reception for them to collect and dispose of at their local pharmacy.

It is the responsibility of the parent/carer to provide a sharps box/bin and to replace it when contacted by the school. All used sharps must be disposed of into the appropriate sharps containers and MUST NEVER be placed in bins around school.

### **Emollients/creams**

Where possible children using emollients and creams e.g. eczema will be encouraged to apply themselves. We have a medical office where the creams can be stored and applied privately. If assistance is needed in the application, gloves and aprons will be worn by the supporting staff.

Ideally children who suffer with eczema should be sat out of direct sunlight and away from radiators to avoid exacerbation of the condition. Risk assessments will be undertaken for teaching activities or visits outside of the normal school day.

When creams are required for intimate care purposes, this will be encompassed within the individual intimate care plan and separate parental consent will not be required.

### **Ice Packs**

We do have ice packs in school which are used for any serious injury deemed necessary to use one. Any injury is based on information/examination and professional judgment will be used. Calls home will be made for all head / serious injuries or if it is deemed necessary that the pupil needs further investigation.

### **Over the Counter Medication (OTC)**

To give OTC (over the counter medication) you need 4 things.

- Written consent by the parent
- The parent should clearly label the box or bottle
- Medication should be in the original packaging
- We have to ask if they have taken this medication before and ask if they had an adverse reaction.

Therefore, we can give meds such as Calpol for pain relief, but for no longer than 48 hours. After that medical advice should be sought.

**Emergency medication such as an epipen must be administered by a trained first aider, or trained member of staff.**

- Where children have conditions which may require rapid emergency action parents/carers should supply information from the pupil's GP/Consultant to the Headteacher, of the condition, symptoms and appropriate action to be taken following onset. To ensure continuity of the child's care there will be an individual health care plan compiled jointly with the school, parent/carer, child, school health care professional, relevant other agencies and Specialist Nurse (when necessary);
- All school staff will be made aware of any pupil whose medical condition may require emergency aid. All staff should be able to recognise the onset of the condition and take appropriate action i.e., summon a trained member of staff or call the emergency services when required;

- Care plans / individual risk assessments may be undertaken for some pupils with medical conditions – these will be completed by the school nurse following consultation with parents and other professional agencies;
- Consideration should will be given to school journeys, educational visits and other out of school activities. The action to be taken in these circumstances must be included in the pupil's health care plan;
- The school has a clear procedure for summoning an ambulance in an emergency. However, some life threatening conditions may require immediate treatment. These are generally related to four conditions that may result in:
  - prolonged epileptic seizure requiring Buccal Midazolam;
  - anaphylactic reaction requiring Adrenalin;
  - diabetic hypoglycaemia requiring Glucose or Glucogel;
  - acute asthmatic attack requiring Ventolin.

These emergencies will be attended by a trained first aider or trained member of staff if no first aider is available.

The school will ensure that all pupils with a medical condition have easy access to their emergency medication.

Any information given to the attending paramedic must only be taken from the pupil's individual health care plan if appropriate.

### **Contacting Emergency Services**

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information:

- your telephone number;
- give location as: Woodsetton School, Tipton Road, Dudley, DY3 1BY;
- give your name;
- give name of child and brief description of child's symptoms;
- inform ambulance control that a member of staff will be outside on entrance to carpark and the crew will be met and taken to the emergency.
- Speak clearly and slowly and be ready to repeat information if required.

### **Roles and Responsibilities of persons involved in caring for a pupil with a medical condition**

**Pupils (where possible):**

Have a responsibility to:



- treat other pupils with and without a medical condition equally;
- tell their parents/carers, 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;

### **Parent or Carer**

Has a responsibility to:

- fill in all the medical requests issued by the school;
- tell the school if their child has a medical condition;
- inform the school with medical evidence if their child requires medication during school hours;
- ensure the school has a complete and up to date individual health care plan if their child has complex medical needs;
- inform the school about any changes to their child's medication,
- inform the school of any changes to their child's condition;
- be aware that three times daily dosages can be spaced throughout the day and does not need to be during school hours;
- ask the prescriber if it is possible to adjust medication to avoid school time doses;
- ensure their child's medication and medical devices are labelled with their child's name;
- ensure the school has full and up to date contact details for them;
- ensure their child's medication is within expiry dates;
- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional.
- ensure pupil does not carry any medication, unless agreed by the school and appropriate paperwork is complete.

### **Staff**

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;
- call an ambulance in an emergency;
- understand the school's medical policy;
- know which pupils in their care have a complex health need and be familiar with the content of the pupil's Individual Health Care Plan;

- know the school's registered first aiders and where assistance can be sought in the event of a medical emergency;
- maintain effective communication with parents/carers including informing them if their child has been unwell at school;
- ensure pupils who need medication have it when they go on a school visit or out of the classroom;
- be aware of pupils with medical conditions who may be experiencing bullying or need extra social support;
- understand the common medical conditions and the impact these can have on pupils;
- ensure that all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in;
- ensure that pupils have the appropriate medication or food during any exercise and are allowed to take it when needed;
- follow universal hygiene procedures if handling body fluids;
- ensure pupils who have been unwell have the opportunity to catch up on missed school work;
- use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions.

### **School Nurse**

Has a responsibility to:

- help provide regular updates for school staff in managing the most common medical conditions at school at the school's request;
- provide information about where the school can access other specialist training;
- complete and update the Individual Health Care Plans in liaison with appropriate school staff and parents/carers in a timely manner;
- provide support and assistance to school staff communicating with parents/carers;
- arrange and supply training to school staff.

The school's health care specialists, are there to offer advice on the particular needs of the pupil. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

### **First Aiders**

Have an additional responsibility to:

- give immediate, appropriate help to casualties with injuries or illnesses;
- when necessary ensure that an ambulance is called;
- ensure they are trained in their role as a First Aider;
- if a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance. Schools need to ensure they understand the local emergency services cover arrangements and that the correct information is provided for navigation systems.

## **Headteacher**

The Executive Headteacher has a responsibility to:

- ensure the school is inclusive and welcoming and that the medical conditions policy is in line with local and national guidance and policy frameworks;
- ensure the policy is put into action, with good communication of the policy to all staff, parents/carers and governors;
- ensure every aspect of the policy is maintained;
- ensure that if the oversight of the policy is delegated to another senior member of staff ensure that the reporting process forms part of their regular meetings;
- monitor and review the policy at regular intervals, with input from governors, parents/carers, staff and other stakeholders;
- report back to governors about implementation of the health and safety and medical policy;
- ensure through consultation with the governors that the policy is adopted and put into action.

## **Governing Board**

The governing board must ensure that arrangements are in place to support pupils with medical conditions. In doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child.

Woodsetton School, supported by local authorities, health professionals and other support services will work together to ensure that all pupils with medical conditions receive a full education. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the local authority. Consideration may also be given to how pupils will be reintegrated back into school after periods of absence.

The governing board will ensure that the school's policy covers the role of individual health care plans, and who is responsible for their development, in supporting pupils at school with medical

conditions. However, not all children will require one. The school, health care professional and parent should agree, based on evidence, when a health care plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher is best placed to take a final view.

The governing board will ensure that plans are reviewed at least annually, or earlier if evidence is presented that the child's needs have changed. They should be developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption. Where the child has a special educational need identified, the individual health care plan should be linked to or become part of their EHC plan whenever possible.

The governing board will ensure that written records are kept of all medicines administered to children. Records offer protection to staff and pupils and will provide evidence that agreed procedures have been followed.

The governing board will ensure that the school's policy is explicit about what practice is not acceptable.

The governing board will ensure that the school's policy sets out what should happen in an emergency situation.

The governing board will ensure the school does not ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged).

The governing board will ensure that the arrangements they set up include details on how the school's policy will be implemented effectively, including a named person who has overall responsibility for policy implementation. Details should include:

- who is responsible for ensuring sufficient staff are suitable trained;
- a commitment that all relevant staff will be made aware of the pupil's condition;
- ensure cover arrangements are in place in case of absence or staff turnover;
- supply teachers are briefed correctly on pupils with medical conditions;
- that risk assessments are undertaken for school visits and other activities outside of the normal timetable;
- will ensure regular monitoring of individual health care plans;
- will check the school's data protection security to ensure records are kept securely and disposed of as required.

The governing board will also ensure that the school's policy sets out how staff will be supported in carrying out their role to support pupils with medical conditions, and how this will be reviewed. This should specify how training needs are assessed, and how and by whom training will be commissioned and provided.

The governing board will ensure that the schools arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school.

The arrangements should show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care.

In making their arrangements, the governing board will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The governing board will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

### **Staff training and support in medication administration**

No member of staff will administer medication without appropriate training. Annual training is required on the administration of:

- diabetic medication;
- adrenaline injector pens;
- buccal midazolam;
- inhalers.

All staff who participate in the administration of insulin or emergency medication will have undergone appropriate training.

Annual training includes asthma, epilepsy and diabetes awareness. Staff are also made aware of any new pupils due to start with a medical condition.

A list of current first aiders is located in the medical room and the main office.

A list is kept of all staff training and when updates are needed, this identifies which training and at what level is needed within the school.

Any member of staff who accepts responsibility for administering medications will have received the appropriate training and will understand the potential side effects and contra- indications.

### **Individual Health Care Plans**

It is essential for Woodsetton staff to have sufficient information about the medical condition of any of our pupils with health needs. A form will be sent out to all parents of pupils within the school requesting information about any medical conditions. (Appendix 1 Medical Details Form). This will then be confirmed by the child's GP. It is the responsibility of the parent/carer to provide up to date information. Once this information has been received the school will decide if the pupil needs an Individual Health Care plan.

Pupils with complex medical needs will require a health care plan which will identify triggers, signs, symptoms, medication needs, other treatments and specialists contact details.

Parents/carers will be invited into school to commence development of this plan. Any supporting evidence should be brought into the meeting in order to give the school as much information as possible to allow us to help manage your child's condition.

Health care plans are stored in the medical room and are copied onto a secure drive which only staff have access to. The information in a health care plan will remain confidential unless there is a reason where it must be disclosed e.g. in case of emergency.

Individual Health Care Plans are used to create a centralised register of pupils with complex health needs. An identified member of school staff has responsibility for this register. This school has ensured that there is a clear and accessible system for identifying pupils with health care plans/medical needs such as names being 'flagged' on our school's information management system. A robust procedure is in place to ensure that the pupil's record, contact details and any changes to the administration of medicines, condition, treatment or incidents of ill health in the school is updated on the school's record system.

Each health care plan will have a review date but it is primarily the parents/carers responsibility to ensure that the school are provided with the most up-to-date information.

## **Asthma**

Woodsetton School recognises that asthma is a widespread, serious but manageable condition affecting many of our pupils. We encourage all pupils with asthma to achieve their potential in all aspects of school life. The school ensures that staff understand their duty of care to pupils in the event of an emergency and that they feel confident in knowing what to do. Staff are kept informed of all pupils with asthma and the procedures that they are required to follow.

From 1<sup>st</sup> October 2014 the Human Medicines (amendment) (No 2) Regulations 2014 allowed schools to buy salbutamol inhalers, without a prescription, for use in emergencies. The emergency salbutamol inhalers should only be used by children who have been diagnosed with asthma or for those who do not have asthma but require reliever medication, for whom parental consent for its use has been given. The emergency inhaler should be given if the pupil's inhaler is not available (for example, broken, empty or left at home).

**The manufacturer's instructions should be followed in storage and care procedures.**

- inhalers should be stored at the appropriate temperature, usually below 30°C;
- protected from direct sunlight and extreme temperatures; emergency inhalers should be clearly labelled so as not confuse with a pupil's usual medication;
- inhalers should be primed with two puffs before use to avoid blockages;
- cleaned regularly and after each use.

## **Salbutamol inhaler**

- salbutamol is used to open up the airways by relaxing the muscles, the aim is to relieve difficulty in breathing;
- salbutamol is a relatively safe medicine but like all medications may have adverse effects. Common effects of salbutamol are shaking, a headache or an increased heart rate. Symptoms tend to be mild and cease after a short period;
- the main risk of allowing schools to keep salbutamol as emergency inhalers is that it may be administered to a breathless child who does not have asthma. It is essential therefore that we ensure that inhalers are only used by children who have been diagnosed with asthma or require the use of a reliever and parental consent has been given.

## ASTHMA ATTACK

### Common signs of an asthma attack are

- persistent coughing;
- wheezing sound from chest;
- difficulty in breathing;
- nasal flaring;
- unable to complete a full sentence;
- chest tightness.

Before receiving the salbutamol, staff must check that the pupil is listed on the asthma register. Here it will identify if the pupil has a health care plan and if they normally take salbutamol or another medication. If the pupil is not on the register staff should not administer salbutamol and instead dial for an ambulance ASAP. It is the parent/guardians responsibility to update the school of any changes in medical status to ensure that we can provide the best care possible. The emergency asthma prevention procedure cannot take place if information is not kept up-to-date.

### What to do in an emergency

- reassure and keep pupil calm;
- encourage pupil to sit up straight as this will relieve breathing difficulties;
- use the pupils own inhaler if available, if not check the asthma register to identify whether emergency inhaler can be given. If not on list call for an ambulance.

A child may be prescribed an inhaler for their asthma which contains an alternative reliever medication to salbutamol (such as terbutaline). The salbutamol inhaler should still be used by these children if their own inhaler is not accessible – it will still help to relieve their asthma and could save their life

- remain with the pupil while two puffs of salbutamol is administered via a spacer;
- if there is no immediate improvement, continue to give a further 2 puffs every two minutes (maximum of 10 puffs);
- if the pupil improves and feels better they are able to return to school activities but must be reassessed if symptoms start again;
- if there is still no improvement call 999, if ambulance does not arrive within ten minutes follow the same procedure for giving the salbutamol;
- have a member of staff contact parents/guardian to inform them of situation.

### **Roles and responsibilities of staff**

When pupils join Woodsetton, our office staff will send out various medical forms which should be completed ASAP and sent back into school. This information is then made readily accessible to the relevant staff. All pupils are treated equally regardless of a medical condition.

Staff must ensure that they are familiar with the medical policy and be aware of the pupils they teach that have asthma. They should be clear about how to deal with an asthmatic pupil and the correct procedure to follow. They must ensure that pupils are carrying their inhalers with them when necessary. Pupils should not be excluded from school activities because of asthma, however they will not be forced to participate if they are feeling unwell.

### **Roles and responsibilities of pupils and parents/guardians**

Pupils are encouraged to make the relevant staff aware if they are feeling unwell and to self-medicate if necessary. Parents must ensure that their child has a spare inhaler. If this is not available to them then one of the emergency inhalers will be used.

### **Roles and responsibilities of the school healthcare professional**

Woodsetton School provides training to staff to ensure that they are competent and confident in the support that we offer pupils with asthma. They will liaise with parents/carers when necessary regarding the collection of medical information and developing a health care plan.

### **Diabetes**

Diabetes is abnormal fluctuations in blood sugar and can lead to someone with diabetes becoming unwell and if, untreated, losing consciousness.

There are two conditions associated with diabetes, hyperglycaemia (high blood sugar) and hypoglycaemia (low blood sugar)



## Hypoglycaemia – signs and symptoms

- hunger;
- feeling 'weak' and confused;
- sweating;
- dry, pale skin;
- shallow breathing.

The main aim in a hypoglycaemic attack is to raise the blood sugar level as quickly as possible (all pupils will have an emergency pack within school to achieve this).

If a pupil is reported as being unwell their hypoglycaemia kit must be taken to them. They should never be sent to get it as they are at risk of collapsing or fitting due to low blood sugars. Pupils must also ensure that they have their testing kit with them at all times including PE and Forest School.

Pupils will have an individual health care plan to outline what care and treatment is needed

### Treatment for **Hypoglycaemia**

- sit casualty down, do not allow them to walk in order to seek help;
- if conscious, give them a sugary drink, chocolate or other food. (Allow access to their emergency pack, this should always be brought to them);
- if there is improvement, offer more to eat or drink. Help the pupil to find their glucose testing kit to check their levels. Advise them to rest and inform parents/carer as soon as possible.

## Hyperglycaemia – signs and symptoms

- thirst;
- vomiting;
- fruity/sweet breath;
- rapid, weak pulse.

### Treatment for **Hyperglycaemia**

High blood sugar readings can be an indication of a hyperglycaemic attack which can be, in extreme cases, fatal. The parent/carer should be contacted and the pupil should be taken to hospital as soon as possible.

There is a fridge located in the Medical Room which is specifically used for medication requiring cold storage.

## **School Trips**

It is recommended by Diabetes UK that even if the pupil self manages their condition it is advisable that a member of staff trained in diabetes management attends the trip for additional support when needed. The Dudley Paediatric Diabetes team run regular diabetes awareness training for non-medical staff and are happy to be contacted prior to any school outing for advice.

It is the parent/carers responsibility to ensure that all appropriate equipment is sent with the pupil and a check of this should be done prior to leaving school.

All relevant information i.e. blood glucose and ketone readings, should be documented on appropriate forms and handed to the school nurse on return.

## **Allergic reactions and anaphylaxis**

This policy outlines the procedures that have been put in place at Woodsetton school to enable the appropriate management of allergic reactions and anaphylactic shock. Allergies are a growing health concern in school and 6–8 % of children have a proven food allergy (National Institute for Health and Clinical Excellence, 2011). In the last decade food allergy cases have doubled and this is set to increase according to the EACCI 2014.

A common allergy food source is peanuts but we are now seeing that more foods are triggering allergic reactions such as shellfish, tree nuts/seeds and kiwi fruit.

A severe allergic reaction can affect the whole body in seconds if contact is made with the trigger factor. This reaction, if not managed can be fatal.

The vast majority of children who have allergies are happily accommodated in schools and this is because of education, training and good communication between school and parents. With sound precautionary measures and support from staff school life may continue as normal.

Possible triggers of allergic reactions are often from skin contact but can also be from airborne contact.

At Woodsetton School we will

- establish clear procedures which are followed by staff in order to meet the needs of the pupils with additional medical needs;
- liaise with healthcare professionals, parents/carers, staff and pupils to develop an Individual Health Care Plan;
- ensure effective communication of individual pupil needs to all relevant staff within the school;
- ensure first aid training includes the management and emergency care of anaphylaxis;
- request that parents of pupils with packed lunches give careful thought to eliminating food that may pose a threat to a pupil with allergies;

- ensure that all educational visits will be risk assessed so that staff can provide effective control to minimise the risk of potential exposure to allergens;
- appropriate staff will be trained in the use of adrenaline injector pens and will understand the pupils' Individual Health Care Plan and any possible treatment that may be needed;
- as far as practical, we will provide a safe and healthy environment where pupils with allergies can participate equally in all aspects of school life;
- encourage self-awareness and management;
- raise awareness about allergies and anaphylaxis in school;

Our school nurse will annually review your child's health care plan but it is the responsibility of the parent to ensure that the school is kept up-to-date with any changes.

It is crucial that each pupil with severe allergies has an adrenaline injector pen nearby at all times (kept in classroom and taken around school when moving to different locations by staff) and a spare pen that is kept in the medical room.

Although checking the expiry dates of a pupil's medication is the parent's responsibility, they are checked regularly and when they are out of date parents will be notified to bring a new one into school. The old one will then be sent home for safe disposal at a pharmacist.

All staff will receive annual updates in allergic reactions and anaphylaxis management from one of our school nurses. They will also be updated of any changes on a regular basis.

The school position is not to guarantee a completely allergen free environment, rather to minimise the risk of exposure, encourage self-responsibility and plan for an effective response to possible emergencies.

**Tips on how parents/carers can help the allergic child include:**

- notify the school of the pupil's allergies. Ensure there is clear communication;
- work with the school to develop a plan that accommodates the pupil's needs throughout the school including in the classroom, in dining areas, during school sponsored activities and on the school mini-bus. Ask your doctor, allergy specialist or paediatrician to help;
- provide written medical documentation, instructions and medications as directed by a doctor. Replace medications after use or upon expiry;
- educate the pupil in allergy self-management, including what foods are safe and unsafe, strategies for avoiding allergens, how to spot symptoms of allergy, how and when to tell an adult of any reaction, and how to read food labels;
- review policies and procedures with the school staff, school welfare officer, the pupil's doctor and the pupil (if age appropriate) after a reaction has occurred.

### **Pupil responsibilities (where possible)**

- be sure not to exchange food with others;
- notify an adult immediately if you eat something you believe may contain the food to which you are allergic;
- avoid eating anything with unknown ingredients;
- be proactive in the care and management of your food allergies and reactions
- developing a relationship with the school first-aider or trusted adult
- learning to recognise personal symptoms;
- notify an adult if they are being picked on or threatened by other pupils as it relates to their food allergy;
- knowing the overall pupil Health Care Plan and understand the responsibilities of the plan;
- develop greater independence to keep themselves safe from anaphylactic reactions.

### **Given that anaphylaxis can be triggered by miniscule amounts of allergen, food anaphylactic pupils must be encouraged to follow these additional guidelines:**

- proper hand washing before and after eating and throughout the school day;
- avoiding sharing or trading of foods or eating utensils with others;
- avoiding eating anything with unknown ingredients or known to contain any allergen;
- eating only food which brought from home unless it is packaged, clearly labelled and approved by their parents;
- placing food on a napkin rather than in direct contact with a desk or table.
- Teachers are responsible for:
  - acquiring knowledge of the signs and symptoms of severe allergic reaction;
  - being familiar with information provided in the pupil health care plans, be aware of and implement the emergency plan if a reaction is suspected;
  - participate in in-service training about pupils with life-threatening allergies including demonstration on how to use the Epi-pen;
  - determining suitable protocols regarding the management of food in the classroom (particularly in high-risk subjects);
  - reinforcing appropriate classroom hygiene practices
  - responding immediately to reports of pupils being teased/bullied about their food allergies;
  - follow Health Care Plan and call 999 when life-threatening allergy related symptoms occur.

### **Catering Staff are responsible for:**

- ensuring supplies of food stuffs are nut free or labelled “may contain nuts” as far as possible;
- ensuring suppliers of all foods and catering are aware of the school minimisation policy;
- being aware of pupils and staff who have severe food allergies;

- clear labelling of items of food stuffs that may contain nuts.
- Again, training will be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with allergies, and to fulfil the requirements as set out in individual health care plans. Staff will have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

In addition to the above, since 1<sup>st</sup> October 2021, it is the responsibility of Dudley Client & Catering Service to ensure full compliance with all aspects linked to Natasha's Law (October 2021).

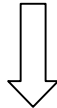
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In the event of an emergency the following procedure should be followed:

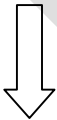
Do not attempt to move the child



Call for help



Observe for signs of **AIRWAY OBSTRUCTION**-WHEEZING, FACIAL SWELLING, ITCHY THROAT  
**BREATHING DIFFICULTIES**-SHORTNESS OF BREATH, NOISY BREATHING **CIRCULATION**  
**PROBLEMS**-PALE, CLAMMY, BLUE, RAPID PULSE

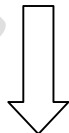


At first sign of severe reaction, call **999**

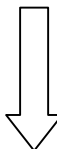


Follow **INDIVIDUAL HEALTH CARE PLAN** and medicate if necessary re: medication and  
adrenaline injector pen (if in doubt give adrenaline)

*NB Medications are labelled emergency injector pens located in Medical Room*



If adrenaline is being given, make a note of the time, adrenaline can be repeated after 5- 15  
minutes if symptoms continue



In all instances attempt to keep the child calm and inform parent/carer

## Key points and reminders

- Pupils in school with a medical condition will be fully supported so have access to education, including school trips and physical education;
- Woodsetton School will ensure that healthcare professionals, parents and pupils are consulted regularly to ensure that our pupils are being adequately supported;
- Not all pupils will need an Individual Health Care Plan but may still need medicines on a regular basis;
- Overall responsibility for the Individual Health Care Plans is with the Headteacher however the Deputy Headteacher oversees liaison with the school nurse re these;
- Hard copies of health care plans are kept in the Medical Room and scanned copies can be located on the shared drive and CPOMS;
- Individual pupil details will be updated on the system by the office staff.

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## Appendix 1

Dear Parent/Carer

IMPORTANT: Please can you complete the form on the reverse of this letter, even if you have already completed one very recently. We need to update our pupil information

To ensure that we fully support every pupil at Woodsetton, we request that all parents and carers provide us with up-to-date information of any medical conditions or needs that may impact on your child's welfare and/or their ability to learn effectively.

A central requirement of the school's policy is for an Individual Health Care Plan to be prepared, setting out what support each pupil requires and how this will be provided. Individual care plans are developed in partnership between schools, parents, pupils and relevant healthcare professionals.

We will need to make judgments about how best to support your child's medical needs within school so they are able to participate fully in school life. The level of detail within the plans will depend on the complexity of their condition and the degree of support needed.

Once the information has been provided, we will contact your child's GP to confirm diagnosis and we may arrange a meeting with you to start developing your child's Health Care Plan.

Could you please complete the form on the reverse of this letter and return it to school as soon as possible. I would be happy to discuss this further with you if you require any further information or assistance,

Yours Sincerely

Mr D Stanton

Executive Headteacher



MEDICAL DETAILS FORM

Pupil name:			
DOB:		Form:	
Doctors name and practice address:			
Do you give permission for the school to call a doctor in an emergency?			YES/NO
Do you give permission for the school to administer first aid in an emergency?			YES/NO
Do you consent to contact being made with GP to confirm diagnosis of condition?			YES/NO
Please provide details below of any medical conditions that the school should be aware of, and of any emergency action that should be taken (eg asthma, epilepsy, allergies etc)			
Any other health needs:			
Date completed:	Parent/Guardian sign:		

PLEASE RETURN THIS FORM TO SCHOOL AS SOON AS POSSIBLE

## Appendix 2

### Parental Medication Administration Request

Woodsetton School will not give any medication unless this form is completed and signed. All medication must be provided in the original packaging.

I request and authorise that my child is supported in taking the following medication.

Name of pupil		Date of Birth	
Address		Contact numbers	
School setting	<b>Woodsetton School</b>	Class	
Name of medication			
Special precautions e.g, take after eating			
Any side effects to be aware of / allergies			
Time of dose		Dose	
Start date		Finish date	

This medication has been prescribed for my child by the GP/other appropriate medical professional whom you may contact for verification (where applicable).

Name of medical professional	
Contact telephone number(s)	

I confirm that:

It is necessary to give medication during the school setting (daily/to be given at a set time/taken before eating).

I agree that the medication can be returned home with my child at the end of the treatment course/half term/end of academic year.

This medication has been given without adverse effect in the past.

The medication is in the original packaging, indicating the contents, dosage and child full name and it is within the expiry date.

Signed (parent/carer)		Date	
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**Register of medication administered**

Name of child: \_\_\_\_\_ Class: \_\_\_\_\_

Date	Time	medication	Given by	Witnessed by	comments