

MEDICAL NEEDS POLICY

1. INTRODUCTION

The Governors, Principal and staff of Bradford Academy are committed to ensuring that students with medical needs receive care and support in school. Students should not be denied access to a broad curriculum simply because they are on medication or need medical support, nor should they be denied access to school trips etc. Every effort will be made to work with parents and students to ensure that students with medical needs experience the best possible care whilst at the Academy.

2. GUIDELINES FOR STUDENTS WITH LONG-TERM MEDICAL NEEDS

Students with medical conditions entering the Academy from our feeder primary schools will usually be identified through discussions with the Year 6 teacher on transition visits. Parents/carers are also requested to approach the Academy with information needed to ensure accurate and appropriate care for the student. Parents are also asked to complete a data form on entry identifying any medical needs. If a medical need arises following entry, parents/carers are asked to contact the Academy immediately. Parents may be asked to meet with a SENCO to agree a Care Plan if deemed appropriate.

Not all students with medical needs will require an individual care plan. A short written agreement with parents may be all that is necessary.

Where required, each plan will contain different levels of detail according to individual needs. The plan should clarify the help that can be provided. It should include details of symptoms, daily care requirements, detailed emergency procedures and family/medical contact details.

The parents should confirm all the medical information, in writing, and in cases of complex or serious conditions this should be verified by the GP and/or consultant, also in writing. The care plan should be developed in consultation with the parents, the GP and school health service and others as appropriate. For example it may be necessary to involve the catering provider in determining suitable meal arrangements for a food allergy sufferer. For the most severe conditions it is important to establish this, in consultation with the parents and the School Health Service. In some situations it may be necessary to involve specialist nursing support or the community nursing team. In some circumstances it may also be appropriate to involve the student.

All care plans are reviewed on an annual basis. This takes place during Annual Reviews for statemented learners and at least once a year during the Summer Term for others with a care plan. Interim reviews can be undertaken at any time when deemed necessary at the instigation of the parents/carers and/or health professionals such as diabetic nurse, community nurse, dietician, physiotherapist, etc.

Medic alert necklaces or bracelets are worn to alert others of a specific medical condition in case of an emergency. As these items can be a source of potential injury in games or practical activities, staff should consider whether, in certain circumstances, it would be appropriate to remove them temporarily and have them kept safe by the person in charge of the activity. In such cases, staff need to be alert to the significance of these bracelets/necklaces and be clear to whom they belong when removing and taking charge of them.

3. MEDICINES

Schools or other settings should not store large volumes of medicines. Staff should only store, supervise and administer medicine that has been prescribed for an individual student. Medicines should be stored strictly in accordance with product instructions and in the original container in which dispensed unless only 1 tablet is required daily for a short time, which should be clearly labelled with name, dosage, frequency and any other instructions.

Any medication brought into the Academy should be handed to the Designated First Aider or SENCO immediately, with a note from the parent/carer and information about how much and when the student needs to take the medication. If the student is on the DSP, this medication should be handed to the DSP Manager. If this involves any special form of administration, the parents must contact the Academy first so that arrangements can be made by the parents/health authority or Academy for this to occur.

If a medicine is approaching its expiry date, or is close to running out, the DSP Manager is responsible for contacting parents to remind them. Medicines are locked away in a cupboard in the Medical Room or in the medical cabinet in the SEN room – keys are held by the SENCO, SEN and DSP Managers, First Aider and Receptionist. The exceptions to this are:

- a) Medicines for asthma, anaphylaxis, diabetes and epilepsy. These medicines may be needed in emergency situations when immediate access would be essential. In some cases children would carry their own medication, e.g. inhalers for asthma, in line with their care plan.
- b) Medicines needing refrigeration. These will be kept in a refrigerator which is in the SEN room.

4. ROLES AND RESPONSIBILITIES

Roles and responsibilities are set out below:

The designated person with responsibility for students with medical needs is the SENCO. Her responsibilities are outlined as follows:

- Ensuring all information on the medical needs of students is kept secure, and up to date, on the CMIS system
- Delegation of the administration of medicines to the First Aider or DSP Manager, as agreed with parents/families, and the maintenance of necessary records;
- Ensuring safe storage of medicines;
- Communication with parents to ensure adequate supplies of medicines in school;
- Communication with parents to ensure that parents have completed the necessary authorisation forms, and the record keeping;
- Coordinate with the Assistant Principal (Learning Development) the necessary training of staff in all related matters and the maintenance of training records;

The delegated responsibility for day to day administration of medicines falls to the DSP Manager (DSP learners and those with Care Plans) and/or the duty First Aider. Their responsibilities are outlined as follows:

- Assist, as necessary with student self administration of medicines;
- Administration of medicines as agreed with parents/families, and the maintenance of necessary records.
- Ensuring that all relevant documentation is kept accurate and up-to-date, and entered on the CMIS

system as soon as is possible, at the very least on a weekly basis, but ideally on a daily basis

- Ensuring all medicines stored in the Academy are in-date; informing parents if this is imminent and ensuring all out-of-date medicine is replaced and disposed of safely, in line with guidance given.
- Liaison with lead members of staff to check the lists of students attending offsite activities and the liaison between home and the teacher in charge of the activity, to ensure that staff are prepared to deal with any necessary medical need or issue;

5. ILLNESS IN THE ACADEMY

If a student is taken ill in a lesson and it is felt necessary for medical treatment the following may occur

- Student is sent to the First Aider (accompanied by another student if this is deemed necessary)
- Emergency First Aider is sent for if student is unfit to move
- First aid is administered when necessary. Parents/carers may be contacted depending upon the nature of the problem. If it is thought that some follow up may be needed, a letter will be sent home with the child.
- In more serious cases where hospital attention is deemed necessary, the Academy will attempt to contact parents/carers who will be expected to take their child to hospital unless this is an emergency.
- In an emergency, an ambulance will be called and the parent/carer contacted by the Academy. A member of staff may accompany the student to hospital.
- If parents cannot be contacted, the Academy will act in loco parentis and give permission for any emergency treatment. In this case, a member of staff will always accompany the student.

Please note the Academy is not allowed to administer drugs of any kind unless the medication has been sent in with the child and permission given.

6. FOOD MANAGEMENT – INTOLERANCES AND ALLERGIES

Even in its most severe form, allergies and severe allergic reactions (anaphylaxis) are very definitely manageable. All students with a diagnosed severe food allergy must have an individual care plan. Food/meal arrangements must be covered when the plan is drawn up. The care plan must be drawn up at a meeting involving the SENCO and/or DSP Manager and the parents and meal arrangements should be discussed at the same time.

We recommend that students with severe food allergies bring a home packed lunch. Where parents wish their children to be provided with school meals, a meeting takes place between the SENCO and/or DSP Manager and the parents. The school is responsible for arranging this meeting. At the meeting, the parents are made fully aware of the catering provider's food allergies/allergens policies and procedures. They can use this information to make an informed choice about whether or not they wish their child to receive meals. If the decision is made to provide meals, then the care plan must clearly set out what the arrangements are, agreed by parents/carers.

A critical element of managing the risk from food allergens is ensuring that appropriate "emergency arrangements" are in place. This is absolutely essential. These should be in place regardless of whether meals are provided by the school/setting.

The Academy's Catering Company position is that they have taken positive steps to reduce the likelihood that nuts will be found in any recipes/menus. Nuts are not used as ingredients. However, please note that, due to production methods of suppliers of raw ingredients, it is not possible for them to guarantee the child

will not come into contact with allergens.

Kitchen staff must be made aware by the SENCO/DSP Manager, of the children affected by possible allergies that they provide for. The basic relevant information from the care plan, including a photo of the child is shared with the kitchen staff via the Learning Gateway.

The school should be supplied with two epipens for each affected pupil. These will be kept in available positions within school, one at Student Services and one with the DSP Manager, in a box labelled clearly with the student's name and photograph. The date of the epipens will be checked at regular intervals by the DSP Manager and the First Aid Nurse, and contact made with parents as outlined in section 4 of this policy. For administration of epipens, see Appendix for guidance.

7. ACADEMY TRIPS, VISITS AND OFFSITE ACTIVITIES

Bradford Academy believes that all students are entitled to participate fully in activities associated with the Academy and will attempt at all times to accommodate students with medical needs, however, consideration must be given to the level of responsibility that staff can be expected to accept as indicated and agreed on the Care Plan, or in liaison with parents/carers for those without a Care Plan.

For work experience, the Careers officer and coordinator should make sure that any placement is suitable for a student with a particular medical condition. The Work Experience Coordinator is responsible for liaising with the coordinator, and the Bradford Connexions Service / Aspire-i over any students who may have Medical Needs, and where necessary an additional Risk Assessment on the placement undertaken. Students will be encouraged to share relevant medical information with employers. A risk assessment should be completed for all student placements. The school has the primary duty of care to assess the suitability of all off site provision. Equally there is a responsibility on the provider to undertake a risk assessment to identify significant risks and necessary control measures when children/young people are on site.

For journeys abroad and exchange visits it is advisable to have one copy of the parental consent form in the language of the country visited. Where a student requires and has a particular medical care plan, this should also be available in the host language. This is particularly important if students stay with host families during an exchange visit.

APPENDIX

POLICY ON ASTHMA

- The Academy welcomes students who have asthma and encourages them to participate fully in college activities.
- The Academy will advise staff on the practical aspects of asthma management and will liaise where appropriate with the Community and School Nursing Services.
- The Academy will keep a record of students with asthma as notified by parents on the medical register.
- The Academy expects that parents will inform staff of up to date details relating to the asthma of their son/daughter, together with clear guidance on the usage of medication, inhalers etc.
- The Academy expects all students to take responsibility for the bringing and caring for their inhalers, whether preventative or relief inhalers and the latter may be kept centrally where appropriate, but must be labelled clearly with the student's name if this is the case.
- The Academy will take steps to ensure that curriculum activities e.g. Science experiments, are carried out with the needs of asthmatic students in mind.
- The Academy expects that all students with asthma bring any inhalers needed to PE lessons and carry them with them during the lessons wherever possible. PE staff will advise students to carry them with them outside for lessons and not to leave them in the locked changing rooms to ensure they can be used promptly if needed during the lesson. It is acknowledged that asthma can have an impact on certain elements of the PE curriculum but also that it should not provide a barrier to learning if dealt with in line with medical guidance.

ASTHMA ATTACKS - WHAT TO DO

- If an asthmatic student becomes breathless and wheezy or coughs continually:
 - Keep calm. It's treatable.
 - Let the student sit down in the position they find most comfortable, usually sitting down and leaning forward. Do not make them lie down.
 - Let the student take their usual reliever treatment - normally a blue inhaler. If the student has forgotten their inhaler, and you do not have prior permission to use another inhaler:
 - Call the parents
 - Call a First Aider
 - Failing that, call the family doctor

Check the attack is not severe - see below.

- Wait 5 - 10 minutes.
 - If the symptoms disappear, the student can go back to what they were doing.
 - If the symptoms have improved, but not completely disappeared, call the parents and ask the student to take another dose of inhaler while waiting for them.
 - If the normal medication has had no effect, see severe asthma attack below.

WHAT IS A SEVERE ASTHMA ATTACK?

Any of these signs mean severe:

- Normal relief medication does not work at all.

- The student is breathless enough to have difficulty in talking normally.
- The pulse rate is 120 per minute or more.
- Rapid breathing of 30 breaths a minute or more.

HOW TO DEAL WITH A SEVERE ATTACK

Follow the Academy protocol or:

- Call the family doctor.
- Ask the doctor to come immediately
- Call for an ambulance.
- Get someone to inform the parents.
- If the student has an emergency supply of oral steroids (prednisolone, prednesol) give them the stated dose now.
- Keep trying with the usual reliever inhaler every 5-10 minutes and don't worry about possible overdosing.
- Avoid giving the pupil a "reassuring hug" as s/he will need her arms, shoulders, rib muscles to help them to breath.
- Do not take the student outside for "fresh air" as cold air may increase the asthma attack.

TRIGGER FACTORS FOR SEVERE ASTHMA

- Anxiety
- Small furry animals
- Chemicals
- Exercising
- Cold air

POLICY ON DIABETES

- The Academy welcomes students who have diabetes and encourages them to participate fully in college activities.
- The Academy will advise staff on the practical aspects of diabetes management and will liaise where appropriate with the Community and School Nursing Services.
- The Academy will keep a record of students with diabetes and will make central access available for emergency rations and medication.
- The Academy expects that parents will inform staff of details relating to the diabetes of their son/daughter, together with clear guidance on the usage of medication etc. It may be deemed necessary to draw up an agreed Care Plan.
- The Academy expects all students to take responsibility for the management of their diabetes and will provide appropriate support where necessary.
- It is essential to follow the Health and Safety Policy for the disposal of needles. The Academy has a sharps box for the purpose.

POLICY ON EPILEPSY

- The Academy welcomes students who have epilepsy and encourages them to participate fully in college activities.
- The Academy will advise staff on the practical aspects of epilepsy management and will liaise where appropriate with the Community and School Nursing Services. Advice to staff on epilepsy attacks

will be published in the Care Plan if one is in place.

- The Academy will keep a record of students with epilepsy as notified by parents on the medical register.
- The Academy expects that parents will inform staff of details relating to the epilepsy of their son/daughter, together with clear guidance on the usage of medication etc. It may be deemed necessary for the parents(s) to meet with the SENCO and draw up a care Plan.
- The Academy expects all students to take responsibility for the management of their epilepsy and will provide appropriate support where necessary.

POLICY ON ADMINISTERING EPIPENS

The purpose of this policy is to describe to parent, governors, and staff the measures taken by the school to protect those children who may need to receive the administration of an epipen. This policy only describes in outline the causes and symptoms of anaphylaxis. Staff will receive detailed training from the school nurse.

Anaphylaxis can be triggered by foods (nuts, shellfish, dairy products) or non-foods (wasp and bee stings, certain medicines, even exercise). The symptoms of anaphylaxis can be identified by effects on the respiratory system, cardiovascular system, gastrointestinal system, skin, nervous system, genitourinary system. In the event of an attack it is important to administer an epipen as soon as possible and then call 999 for an ambulance.

All members of staff have been trained by the school nurse about anaphylaxis and the administration of epipens. Each September there will be a training session for new members of staff and anyone who requests refresher training.

At the beginning of each year, the names and photographs of all children at risk will be issued to staff via the updated medical register. Photos of these children are also on display in the SEN Office, Student Services and Reception. However, it is important to recognise that in a large school like the Academy, it is very difficult for all members of staff to know all children, and that a leading responsibility for monitoring for anaphylaxis falls to those adults that have most frequent contact with individual children.

After receiving advice from the school nurse, it has been agreed that each child should have two epipens in school. These will be kept in available positions within school, one at Student Services and one with the DSP Manager, in a box labelled clearly with the student's name and photograph. The date of the epipens will be checked at regular intervals by the DSP Manager and the First Aid Nurse