**First Aid and Support for Pupils with Medical Conditions Policy**

# September 2023

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| Date approved:  | September 2023 |
| Approved by:  | Head of School  |
| Frequency of review:  | Annually |
| Next review due:  | September 2024 |

## Policy Statement

Impact North West Schools Ltd (INWS) is an inclusive community that welcomes and supports students with medical conditions so that they can play a full and active role in all aspects of school life, remain as healthy as possible and achieve their academic potential.

The Department for Education statutory guidance ‘Supporting pupils with medical conditions at school (2014) states:

*“Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition can be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with their safeguarding duties, governing bodies should ensure that pupil’s health is not put at unnecessary risk from, for example, infectious diseases.”*

This policy takes into account the school’s legal duties under the Children and Families Act 2014 to make arrangements to support students with medical conditions, as well as its duties under the Equality Act 2010. The policy also takes into account the common law ‘Duty of Care’ to students attending Trust schools which expects staff (and in particular teachers) to act reasonably and as a prudent parent would in the circumstances of school and in accordance with the guidance of a reputable professional body.

This policy details the school’s arrangements to support students with long term medical conditions. In this document ‘medical condition’ refers to any physical or mental health condition that requires ongoing health professional input.

# Section 1 First Aid

## Statement of Principle

INWS will undertake to ensure compliance with the relevant legislation with regard to the provision of First Aid for students, staff and visitors and will make sure that procedures are in place to meet that responsibility.

## Aims

* To identify the first aid needs of each school.
* To ensure that first aid provision is available at all times when people are on the school premises, and also, as far as possible, off the premises whilst on school trips.

The location of first aid boxes are in the upstairs and downstairs kitchens as outlined on the risk assessment.

## Objectives

* To appoint an appropriate number of suitably trained people as First-Aiders to meet the needs of each school and to maintain current qualifications for those people.
* To provide relevant training and ensure monitoring of training needs.
* To provide sufficient and appropriate resources and facilities.
* To inform staff and parents of the school’s first aid arrangements.
* To keep accident records and to report to HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

## First Aid Staff

Each school has a trained First-Aider. All have received at least 2 days of first aid training, approved by the Health and Safety Executive, in order to generally be on call within the school.

*The main duties of a First-Aider are to:*

* Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at school.
* When necessary, ensure that an ambulance or other professional medical help is called.

*We consider our First-Aiders to:*

* Be reliable and have good communication skills.
* Have the aptitude and stability to absorb new knowledge and learn new skills.
* Be able to cope with stressful and physically demanding emergency procedures.
* Be able to ensure that their qualification is always up to date.
* Always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible.
* Help fellow First-Aiders at an incident and provide support during the aftermath.
* Act as a person who can be relied upon to help when the need arises.
* Insist that any casualty who has sustained a significant head injury is seen by professionals at the hospital, either by sending them directly to hospital or by asking parents to pick up a student to take them to hospital.
* Ensure that a student who is sent to hospital by ambulance is either accompanied in the ambulance by an appropriate member of staff at the request of the paramedics if parent cannot be there and then met at hospital by parent/carer.
* Keep a record of each student attended to, the nature of the injury and any treatment given, in the book provided in the First Aid room. In the case of an accident, the Accident Book must be completed by the appropriate person, and the necessary forms sent to the Health and Safety executive
* First-Aiders will never administer paracetamol or other medications except for circumstances below.
* Ensure that prescribed medication is taken at home where possible.
* If it has to be taken in school a First-Aider will supervise a student taking it from a pharmacy labelled container after receipt of a letter from the parent.
* First-Aiders may administer an Adrenaline Auto-injector Device (such as EpiPen) if they are dealing with a life-threatening emergency involving a casualty who has been prescribed and is in possession of an Adrenaline Autoinjector Device (such as EpiPen) and where the First-Aider is trained to use it.
* Staff with management responsibility for the first aid service have management responsibility for ensuring uninterrupted compliance with these requirements.
* A First-Aider will be present at all offsite residential trips.

## Procedures

***a. Accidents***

During the school day

### *For students*

1. Students should immediately tell the nearest tutor or other adult. The accident victim should not be moved if they cannot walk without help.
2. Tutor or other adult at the scene of an accident needs to make a quick assessment of the severity of the accident.
3. If mobility is in doubt or considered dangerous, a First-Aider should be asked to come to the accident scene through the adult by phone or sending a student to get First Aid help.
4. First-Aider will assess the situation and advise calling an ambulance when necessary.
5. Parents should be contacted by a member of the first aid team by telephone.
6. The adult on the scene should stay with the casualty while waiting for assistance.
7. Adult witness should take witness statements as soon as possible to get a full picture of what happened when an ambulance has needed to be called.
8. An accident form must be completed by the First-Aider attending if an ambulance is called and details entered in the log book.

### *For Staff*

Staff who have had an accident on the school premises should report it to the designated First Aider who will enter details in log book and offer first aid and any other help required.

### *For Visitors*

Visitors should report accident to reception who will notify the designated First-Aider who will enter details in log book and offer first aid and any other help required.

***b. Illnesses***

1. In lessons - a student feeling ill should speak to their tutor who will assess. Tutor will assess the First-Aider on duty, if deemed necessary.
2. On a school trip – a student should speak to a tutor on the trip who will alert the First-Aider. The First-Aider will administer emergency first aid if necessary and inform the parent/carer and the school. The First-Aider should log the details of the incident and actions taken and give it to the school on return.
3. At an extra-curricular event on site, (rehearsals, sports events, performances etc.) a student should inform the tutor in charge who will contact one or more of: school staff available, parents/carers.
4. At an extra-curricular event off site, a student should inform the tutor in charge who will contact one or more of: the First Aid provision at the venue, parents/carers, school staff.
5. When parents are on site, parents will be responsible for their student’s welfare.
6. At any other event where part of the building is hired by an outside organisation - the external hirers are responsible for providing their own first aid provision.
7. Staff feeling ill – staff should use their discretion in deciding whether to call for first aid help by sending a student.

## Reporting and Record Keeping

INWS will notify the HSE in line with “Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995” (RIDDOR).

A copy of the document can be found at <http://www.hse.gov.uk/pubns/edis1.pdf>

Each school will keep a record of any first aid treatment given by First-Aiders and appointed persons. This record may be kept in the HSE Accident book.

*This will include:*

1. The date, time and place of incident.
2. The name of the injured or ill person.
3. Details of the injury/illness and what first aid or medication was given.
4. What happened to the person immediately afterwards (for example went home, resumed normal duties, went back to session, went to hospital).
5. Name and signature of the First-Aider or person dealing with the incident.

 *The information in the record book can:*

* Help the school identify accident trends and possible areas for improvement in the control of health and safety risks.
* Be used for reference in future first aid needs assessments.
* Be helpful for insurance and investigative processes.

All serious or significant incidents will be reported to parents by telephone.

## First Aid Materials, Equipment and Facilities

* All first-aid containers are marked with a white cross on a green background.
* Where possible first-aid containers are kept near hand-washing facilities.
* All staff will take precautions to avoid infection such as using single use disposable gloves, taking care when dealing with blood or other bodily fluids and when disposing of dressings or equipment.
* The Head of Schools is responsible for:
* Examining the contents of first-aid containers.
* Checking them frequently and restocking as soon as possible after use.
* Discarding items safely after the expiry date has passed/
* Keeping a log of first-aid container checks and restocking.

***First-aid containers are located in as follows:***

Kitchen Downstairs & Kitchen upstairs

First-aid containers will be given to a designated member of staff on each school trip.

Minimum contents:

* A leaflet giving general advice on first aid.
* 6 individually wrapped sterile adhesive dressings (assorted sizes conforming to St John’s Ambulance standards).
* 2 triangular bandages.
* 2 safety pins.
* 1 large (approx. 18cm × 18cm) sterile individually wrapped unmedicated wound dressing. - Individually wrapped moist cleansing wipes
* 1 pair of disposable gloves

**Parents’ Responsibilities**

1. Parents are responsible for providing emergency contact details and keeping them up to date.
2. It is the parent’s responsibility to provide details of medical conditions, to update the school concerning any changes.
3. It is the parent’s responsibility to provide up-to-date medication for their child, and to renew before the expiry date.

# Section 2 Support for Pupils with Medical Conditions

## Statement of Principle

No child can be refused admission to INWS simply on medical grounds, except where it would be detrimental to the health of the child or others to admit them.

INWS will undertake to ensure that all students on the school roll 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 as required by DfE statutory guidance ‘Supporting Children at School with medical conditions’, the Children and Families Act 2014 and the Equality Act 2010.

## Policy Aims and Objectives

* To minimise the risk of an adverse health event or health-related emergency while a student with a medical condition is at school or involved in school related activities.
* To be proactive in raising the awareness of and support offered to students with medical conditions.
* To ensure that staff members respond appropriately to an adverse health event or health-related emergency by seeking appropriate assistance or initiating appropriate treatment.
* To raise the awareness of high-risk health conditions and their management through education and policy implementation.
* To give parents and students confidence in INWS’ ability to provide effective support and show an understanding of how medical conditions impact on a child’s ability to learn as well as to increase their confidence and promote self-care where appropriate.

## Roles and Responsibilities

The Directors of INWS are responsible for approving this policy and ensuring it is implemented.

The Directors at INWS have overall responsibility for ensuring this policy is implemented in full in each school and to monitor the effectiveness of the policy and propose changes when required.

 *The* ***parents/carers*** *of a student with a medical condition are responsible for:*

* Notifying the school about their child’s medical condition.
* Working with the school to develop a plan that accommodates their child’s needs in all school related activities. The family should ask the student’s doctor, school nurse, paediatrician or other appropriate healthcare professional to help.
* Providing written medical documentation, instructions and medications as directed by a doctor.
* Replacing medications after use and before expiry.
* Ensuring their child is trained in self-care when appropriate.
* Reviewing policies and procedures and the Individual Healthcare Plan with the school staff, the student’s doctor and their child (if age appropriate) annually and after an adverse medical event has occurred.
* Communicating clearly all relevant issues to the school.
* If necessary information and up-to-date medication is not provided when required and as a result a student is put at risk then the school may seek authority for direct contact with the student’s healthcare professional and/or treat the matter as a child protection issue.

***Students*** *are responsible for (as appropriate to their age level):*

* Being proactive in the care and management of their medical condition.
* Learning to recognise personal symptoms and alerting an adult immediately if they are concerned about a possible adverse medical event.
* Always wearing their medical alert bracelet or some other form of medical identification if appropriate.
* Developing a supportive relationship with the school first-aider or trusted adult e.g. form tutor or Head of School and talking to them about identifying issues related to the management of their medical condition in school.
* Keeping emergency medications where appropriate, in an agreed suitable location. This may include carrying the medication with them at all times.
* Notifying an adult if they are being picked on or threatened by other students.
* Knowing their Health Care Plan as appropriate to their age.

*The* ***School’s dedicated First Aiders*** *are responsible for:*

* Contacting parents for required medical documentation regarding a child’s medical condition. (The responsibility lies with parents to ensure this information is provided)
* Ensuring that there is an effective system to regularly update and disseminate medical information to staff and others including supply staff.
* Ensuring that parents are reminded of their responsibilities to provide information for a current Individual Healthcare Plan.
* Ensuring that where students with known medical conditions are participating in school trips, the risk assessment and safety management plans for those trips include the student’s Individual Healthcare Plan.
* Ensuring that first-aid staff are trained in relevant emergency treatments as appropriate and that similar training/information is provided periodically to other staff as appropriate.
* Keeping a record of medication held for students and notifying parents when items are missing or expiring.
* Liaising with students with medical conditions and their parents.
* Ensuring students with common medical conditions are appropriately supported. This includes monitoring the operation of individual healthcare plans, ensuring staff involved in support are well informed and trained as appropriate, carrying out risk assessments and liaising with and taking advice from healthcare professionals (School Nurses, GPs, CAMHS, specialists etc.) as required.
* Liaising with school nurses, including referring cases to them when there are particular concerns and involving them/taking their advice concerning individual healthcare plans and risk assessments.
* Following up and report on missing medication or information with parents.

*The* ***Head of School*** *is responsible for:*

* Ensuring students with specific medical conditions constituting special educational needs are appropriately supported. This includes monitoring the operation of individual healthcare plans, ensuring staff involved in support are well informed and trained as appropriate, carrying out risk assessments and liaising with and taking advice from healthcare professionals (School Nurses, GPs, CAMHS, specialists etc.) as required.

***Teachers*** *are responsible for:*

* Participating in in-service training about managing medical conditions.
* Being familiar with information provided in the student health care plans for the students they teach, be aware of and implement the emergency plan if an adverse medical event is suspected.
* Determining and implementing suitable protocols regarding high-risk situations in the classroom.
* Responding immediately to reports of students being teased or bullied about their medical conditions.
* Following Individual Healthcare Plans and taking appropriate action in emergency situations.

***Leaders of off-site activities*** *are responsible for:*

* The activity leader is responsible for liaising with parents of students with medical conditions as appropriate and being familiar with and trained to be able to implement the individual healthcare plans of students on the trip.

***Others******involved in potentially high risk situations*** *are responsible for:*

• Other staff or contractors involved in potentially high risk activities for students with medical conditions may also be required to take action to minimise the risk of an adverse medical event.

## Identification, Registers and Individual Healthcare plans

students at school with medical conditions should be supported so that they have full access to education, including inclusion on school trips & PE, as far as possible.

School leaders may consult health & social care professionals, students and parents to ensure the needs of children with medical conditions are effectively supported.

## The School Identifies all Children with Medical Conditions

students with physical or mental health conditions are identified during the referral stage. This information is initially collected through the school referral which includes emergency contacts.

Parents/carers are responsible for informing the school of any new diagnosis, or changes to their child’s medical condition, as soon as possible. It is the school’s responsibility to act on this information.

INWS may require written confirmation of a medical diagnosis from a healthcare professional.

## The School Keeps a Record of all Children with Medical Conditions

INWS keeps a register of students with medical conditions to identify and safeguard these students. This register is held in a central, secure location, with access by staff as appropriate, and includes the child’s individual healthcare plan (where applicable).

INWS ensures that the student’s confidentiality is protected in line with the General Data Protection Regulation (GDPR) and will only share this information with relevant members of staff and healthcare professionals as appropriate.

## Medication

### The School has Clear Guidance on Administering Medication at School

Medication should only be administered at school when it would be detrimental to a child’s health or school attendance not to do so. Where clinically possible, parents/carers should request their prescribing clinician to prescribe medication in dose frequencies which enable them to be taken outside the school day.

If medication is required at school, this will only be given as detailed in the student’s medication consent form. If there is a short-term need parents/carers should contact the school to discuss and the medication consent form must be completed by parents/carers.

Impact North West LTD keeps an accurate record of all the medication administered, including the dose, time, date and supervising staff. Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Impact North West LTD supports staff who administer medication.

All staff are aware of the specific members of staff trained to administer medication or medical procedures in an emergency situation.

Staff who may be regularly expected to administer medication and undertake medical procedures should have this responsibility recognised in their job description. Staff are encouraged to volunteer for this role as part of their duty of care.

### Storing Medication and Equipment

INWS that all medication is stored safely, and that students with medical conditions and staff know where they are at all times.

INWS allows students to carry their own medication/equipment if this is appropriate to their individual healthcare plan and has been risk assessed. Parents/carers should check that this medication is in date.

INWS ensures that medication is in date and labelled in its original container where possible (although insulin will generally be supplied in an insulin injector or pump), and in accordance with its instructions including storage temperature.

### Emergency Inhalers and Adrenaline pens

INWS allows students to keep their own inhalers and adrenaline pens if appropriate or stored securely but accessible if not.

INWS’ emergency asthma inhalers and adrenaline pens are available for students for whom written parental consent and medical authorisation for use has been given. They are stored in a secure location but not locked away.

### Training

INWS ensures that all staff, including temporary staff, are aware of this ‘First Aid and Supporting Pupils with Medical Conditions’ policy and their role in implementing the policy as part of induction.

All staff know which named members of staff should be called on in the event of a medical emergency and are familiar with the procedure for calling the emergency services. All staff are aware that if a student is taken to hospital by ambulance, a member of staff must accompany them and remain with them until a parent or carer arrives. Pupils should not be taken to hospital in staff cars**.**

### Inclusion

INWS ensures that arrangements are made for students with medical conditions to participate in all aspects of the curriculum where reasonably possible

The needs of students with medical conditions are adequately considered so that they can participate fully in all structured and unstructured activities, extended school activities and residential visits.

It is important that all students have the opportunity to take part in physical activity (including out-of-school clubs and team sports). All relevant staff should make appropriate adjustments to physical activity sessions in accordance with a student’s needs. This may involve ensuring that students have the appropriate medication/equipment/food with them during physical activity.

INWS makes sure that a risk assessment is carried out before an educational visit. The needs of students with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required. This will require consultation with parent/carers and students and may require advice from the relevant healthcare professional to ensure that students can participate safely.

### Medical Conditions and their Impact on Attendance and Learning

 INWS understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a student’s medical condition.

Where a student has frequent absences or a prolonged absence due to a medical condition, it is expected that parents/ carers will work with the school and healthcare providers to ensure relevant information is available as part of a coordinated care/support approach.

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), the school will work with the referring school to ensure that the child receives the support they need to reintegrate effectively.

### Complaints

INWS responds to all concerns and complaints related to implementation of this policy, in line with the school’s complaints policy.

**MEDICAL CONSENT FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Child:** |  | **Date of Birth:** |  |
|  |
| **Name and telephone number of Authorised Prescriber (e.g. G.P.):** |
|  |
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|  |  |
| --- | --- |
| **Medication Name** |  |
| **Time to be taken (am)** |  |
| **Time to be taken (pm)** |  |
| **Dosage to be administered by staff** |  |
| **Method** (e.g. tablets, liquid medicine) |  |

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|
| **Please confirm any specific instructions for medication administration by school staff and return the completed form to the Head of Schools.**  |

**Parent/Guardian Authorisation:**

I/we request that medication be administered for my child as described and directed above. I/we confirm permission for appropriate staff to administer the medication.

I/ we agree to the terms below:

1. Each Item of medication must be delivered to the centre, in normal circumstances by the parent. Each item of medication must be in its original box with the prescribed dosages clearly labelled.
2. It is the responsibility of the parents to notify the centre in writing if the student’s need for medication has ceased or changed.
3. It is the parent’s responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.
4. The school will not make changes to dosages on parental instructions unless a new consent form is completed.

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name:** |  | **Last Name:** |  |
| **Relationship to Child:** *(e.g. Mother/Father/Guardian)* |  |
| **Contact telephone number:** |  |
| **Signature:** |  | **Date:** |  |

**Medication Record**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date**  | **Student’s Name**  | **Time**  | **Name of Medication**  | **Dose given**  | **Signature**  | **Print name**  | **Comments**  |
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