



Medical Needs Policy (including Asthma)

Policy Creation & Review	
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Last review date	April 2018
Ratified by Governing Body	April 2018
Previous Review Date(s)	June 2012 January 2012 January 2009
Next Review Date	April 2021

Purpose

To inform staff of medical needs and the procedures involved within the school, in order that medical needs are not a bar to learning.

Aims and Objectives

1. To make staff aware of symptoms of medical conditions of pupils within school.
2. To inform the staff of the medical procedures in case of medical emergencies.
3. To make staff aware of:
 - Storage procedures
 - Administration of medicine
 - Procedures for self administration
 - Necessary procedures for school trips
 - Record keeping procedures

Table of Medical Procedures

A list of medical conditions and possible symptoms and agreed procedures can be found in the appendix. The Co-ordinator will update the procedures annually in conjunction with the designated school nurse.

Storing Medication

Prescribed medicines that have been brought to school will be stored in the fridge if necessary, or in a locked medical cabinet. Medication that is in continuous use i.e. Asthma pumps, should be stored in a labelled box which is easily accessible, should a child need them. **All** medication should be clearly labelled with the name of the pupil. The name and dose of the drug and the frequency of administration. Where pupils need two or more prescribed medicines, each should be in a separate container.

Equal Opportunities

Regardless of the seriousness of the medical need, all children will be provided with access and opportunities to fully participate in all areas of the curriculum as far as possible.

Appendices

- Individual Health Care Plan proformas
- Medical Procedures table
- Parental consent medication letter
- Medical Needs Class List

The Medical Needs File

This is updated annually (or more frequently if pupils' needs change) and is stored in the Deputy Head Teacher's Office. It is used by staff supervising lunchtimes and during lunchtimes can be located in Topaz area. It is returned to the Deputy Head Teachers' office after lunch.

Contents of the file:

- The medical needs register – an up to date list of all pupils with a medical need or condition which the school needs to know about e.g. asthma, allergies. The register for each class must also be on display in that class.
- Individual health care plans for pupils with serious conditions which may need immediate attention and/or calling emergency services e.g. epilepsy
- Pupils receiving medication while at school – whether temporarily (e.g. antibiotics) or continuously (e.g. Ritalin). A copy of the consent letter should also be kept in the file. Medication cannot be given to a child without the signed consent letter.

By the end of each September the co-ordinator is to ensure all relevant medical class information has been collected and returned to the office.

General medical needs

These are completed as part of the admission procedures and during annual updating of records. It includes asthma, allergies, glasses, continuous medication etc.

Individual Health Care Plans

Pupils with more serious conditions have an individual health plan (Appendix 1). This is completed by the school and parents/carers and a copy is kept in the office, the child's class and in the medical needs file. Care plan should state expiry date of medication.

Pupils receiving medication while at school.

If the school is to administer prescribed medication (including asthma pumps) a parental consent letter must be signed. (See appendix). Adults with parental responsibility are responsible for informing the school of any changes. All medicines, including asthma pumps must be labelled with the child's name and class. Asthma pumps are stored in an accessible labelled box in the area, but all other medication is stored in a locked cupboard in the library/resources room. The key to this cupboard is kept in the office.

Any children who take continuous medication such as asthma pumps may take their medication by themselves but a parental consent letter must be signed and an adult must supervise the child. Medicine register is used by staff supervising at lunch time in Topaz area This is kept in the office at all times. Nursery pupils receiving medication - record of medication is kept in the pupil file in the nursery.

Other continuous medication, such as Ritalin also needs a parental consent letter. The child must be supervised taking the medicine by a permanent, police checked member of staff. The medicines register must be signed and filled in each time the medication is issued.

Non – prescription medication i.e. painkillers which include aspirin or paracetamol, must not be administered by **any** member of staff in school.

No medicines are to be taken into school by pupils.

If the pupils are carrying any medicines, including painkillers or homeopathic medicine, they will be confiscated and the Adult with parental responsibility will be notified by the office immediately.

If a child suffers from regular, acute pain, such as a migraine, the Adults with parental responsibility should authorise and supply appropriate painkillers, with written instructions. The child should be supervised (by a permanent, police checked member of staff) and notification given to the parents on the day.

No pupil should be given medication without consent of the person with parental responsibility. Any member of staff giving/ supervising medicine to a pupil should check:

- The pupils name
- Written instructions
- Prescribed dose
- Expiry date

The Adults with parental responsibility must be notified as a matter of urgency if the child is unable/unwilling to take the medication. If pupils refuse to take medication, school staff should not force them to do so. The office will inform Adult with parental responsibility when more medicine is needed. If there are any problems regarding medication which cannot be resolved by the school, the school nurse should be contacted.

Short term medication e.g. antibiotics, will not be administered by the school.

School Trips

Our school encourages pupils with medical needs to participate in school trips wherever possible. The class teacher should complete risk assessment forms and pass to the Head Teacher. All staff supervising excursions should be aware of any medical needs. Administration procedures should be followed. A first aider is only required if stipulated in the child's health care plan.

Residential Trips

New medication consent forms need to be filled in for Residential trips as the amount of medication a child takes under school supervision is likely to change for the duration of the trip.

First Aid

- A list of current First Aiders and expiry date for training is displayed in each area, staffroom, Head teacher & main office. Staff are eligible for first aid training and should contact the Head or Deputy if interested.
- All members of staff are expected to deal with minor injuries such as grazes and should consult a first aider if a child has a bad cut, bang to the head or will not/cannot get up unaided from a fall. If a First Aider cannot be located, a member of the leadership team must be found.
- If a child is hurt at playtime and needs to be seen – to be cleaned up or to be seen by a first aider – a message should be sent to the staff room, making it clear what is required
- At lunchtime children/messages are sent to Topaz Area when help/attention is needed for a child.
- Gloves should be worn by any member of staff dealing with bodily fluids (gloves located in area cupboards and first aid bag (staff room or in Topaz Area at lunchtime)
- Any child being seen by a first aider will be issued a first aid injury note to take home
- Head injuries – logged in the first aid book by the first aider for any bangs to the head. The main office then calls the child's parents/carers to inform them of the injury.
- Additional information is supplied in the first aid procedures.

Children with ASTHMA

- We encourage children with Asthma to achieve their potential in all aspects of school life.
- We raise awareness of Asthma, the condition and Health and Safety Guidance.

References:

National Asthma Campaign: School pack DFEE Circular 14/96 Supporting Pupils with Medical Needs in School.

Definitions:

- Asthma = a condition that affects the airways.
Trigger = anything that irritates the airways causing symptoms of asthma to appear.
Reliever = an inhaler that is used when symptoms appear.
Preventer = an inhaler that is taken regularly to stop symptoms appearing.
Spacer = a clear plastic device that allows children to inhale a measured dose more effectively.

Medication

- Children are allowed immediate access to their inhaler
- Inhalers are kept in First Aid boxes/cupboards in the open area outside of the child's classroom
- Inhalers must be clearly labelled with the child's name and class.

P.E.

- All children are encouraged to participate fully in PE
- Teachers will remind children whose Asthma is triggered by exercise to take their reliever inhaler before the lesson.
- Children are allowed to use their inhaler during the lesson

Environment

- The school has a non-smoking policy
- Furry or feathery pets will not be kept in classes of children for whom this is a trigger.

School Trips/ Residential

- Inhalers are taken on all school trips and are kept by the adult leading the group the child is in.
- If this adult is a parent, the inhaler will be kept with the trip leader to supervise use.

Asthma Attacks

In the event of a child having an Asthma attack the following procedure must be followed.

1. Ensure the reliever is taken immediately
2. Stay calm and reassure the child
3. Help the child to breathe by loosening any tight clothing and encouraging them to breathe slowly and deeply. Sit the child upright or leaning slightly forward.
The child's parents must be informed about the attack.

Emergency Situations

Call the child's GP or an ambulance if :

- The reliever has no effect after 5 to 10 mins
- child is unable to talk
- child is getting exhausted
- You have any doubts at all about the child's condition.

Staff

- Staff administering asthma medication in an emergency are insured by the LA when acting in accordance with this policy.
- We will supervise children as they take their asthma medication when requested by Parents if they have signed the medical disclaimer.

Record Keeping

The school will keep a record of all pupils notified to us with asthma. The First aider will also keep a record each time a child has to use his/her inhaler. This will be made available to all relevant staff. Individual care plans should be drawn up for each student with asthma. The main purpose of the individual health care plan is to identify the nature of support needed at school. Those who may be involved include the headteacher, the parent or guardian, the child (depending on maturity), the class teacher, support staff members, and the school health service or the GP.

Care plans

Each child diagnosed with asthma will have a care plan which will judge the pupil's needs individually since children vary in their ability to cope with asthma. The plan will identify the severity of asthma, individual symptoms and triggers; arrangements for daily care (including type of medication and access arrangements); arrangements for medical emergencies including support from school staff; and necessary contact details for family and GP/clinic. Care plans will be reviewed bi annually to ensure that they are still relevant to the needs of the child.

Monitoring

- At the beginning of each academic year, class Medical Needs Class Sheets (see appendix) should be passed on to the incoming class teacher – Medical -Needs Co-ordinator will check that this happens;
- The medical needs co-ordinator will ensure that relevant medical information is in each class, eg. Individual emergency procedures, medical symptoms and procedures grid, list of medical needs;
- Medical Needs Co-ordinator to amend and update medical information when necessary.

Contacts

Health Visitor CC & EYFS: Yinka Odunsi (02074457127/07852331483)

Newham School Nurse Beverly Hamilton

DHT/Inclusion Lead Janice Owen- Amadasun: EWPS School Contact

HEALTHCARE PLAN FOR PUPILS WITH MEDICAL NEEDS

Name of Child:.....

Date of Birth.....

Condition (s).....
.....

Medication Expiry Date: []

Symptoms requiring emergency action:
(from least severe to most severe):

- 1).....
2).....
3).....
4).....
5).....
6).....
7).....
8).....
9).....
10).....

Emergency contacts

Please list in order of priority (eg.1) Ambulance, 2) Parent, 3) Friend or Relative.

1) Name:.....
Relationship to child:.....
Telephone No:.....

2) Name:.....
Relationship to child.....
Telephone No:.....

3) Name:.....
Relationship to child:.....
Telephone:.....

4) Name:.....
Relationship to child:.....
Telephone:.....

5) Name:.....

Relationship to child:.....

Telephone:.....

General Practitioner

Paediatrician/ Clinic/ Hospital Contact

Name.....

Telephone No.....

Follow up care required after an Emergency:

Daily care requirements:

.....
.....
.....

Who will be responsible for implementing daily care requirements?

.....
.....
.....

Copies of emergency procedures will be displayed in the child's classroom and in the school office. A copy of his or her Healthcare plan will be kept in the child's classroom.

Medical Needs and Procedures - General

Medical Condition	Symptoms	Procedure
Anaphylaxis	<ul style="list-style-type: none"> *Extreme allergic reaction *Metallic taste/ itching in mouth *Swelling of face *Difficulty swallowing *Flushed complexion *Abdominal cramps *Nausea *Rise in heart rate *Collapse or unconsciousness * Wheezing/ difficulty breathing 	<p>Inject adrenaline (trained staff only) Call ambulance See specific health plan for procedure (displayed in office/ staff room/ classroom)</p>
Asthma (Asthma attacks)	<ul style="list-style-type: none"> *Coughing *Wheeziness *Difficulty breathing (particularly exhaling) *Possible blueness of skin and lips 	<p>Inhaler – children to use as necessary, to be stored in classrooms. Must be labelled with name. Nebulizer</p>
Cystic Fibrosis	*Diagnosis by trained medical professional	Physiotherapy (at home)
Diabetes	<ul style="list-style-type: none"> *Hypoglycaemic reaction *Hunger *Sweating *Drowsiness *Pallor *Glazed eyes *Shaking *Lack of concentration *Irritability 	<p>Give fast acting sugar eg. Glucose tablets, sugary drink, and chocolate bar Once recovered (10-15 mins later) give starchy food eg. a sandwich, two biscuits and a glass of milk. If uncertain call ambulance.</p>
Dry Skin	<ul style="list-style-type: none"> *Flakiness of skin *Itching 	Use of medication sent in from home with administration letter

N.B. Those procedures highlighted bold mean immediate action.

Heat Rash	*Redness of skin *Bumps/ change of skin texture	
Psoriasis	*Weeping skin *Itchiness	Medication sent from home with administration letter
Migraines	*Severe headache *Sensitivity to light sources *Flashing lights	Seat in a darkened quiet room and contact parents/ carers to send child home.
Nose Bleeds	*Blood from nasal orifice *Possible headache/ light headed	Tilt head forward. Seek first aid attention
Sickle cell	*Medically prescribed	Do not expose to extremes of temperature Follow trained medical advise as given
Water infection	*Needs frequent use of toilet	Allow child to use toilet on request
Eating problems (Anorexia/ bulimia)	*Tiredness *Unusual eating habits *Weight loss *Irritability *Low self esteem	Contact parents/ carers to seek professional medical advise.
Epilepsy	*Seizures *Strange sensations *Confusion *Convulsions *Lack of consciousness	See specific health plan for procedure (Displayed in office/ staffroom/ classroom)
Glasses	*Unable to focus vision	To wear glasses, needs to be made clear by parents/ carers if glasses are to be worn all day or for class tasks.
Hay Fever	*Sneezing *Watery/ Itchy eyes *Wheezing	Hay fever tablets to be provided from home with administration letter
Hearing	*Unable to hear clearly	Use of medication/ hearing tools provided by trained professional. Follow outside agencies advice when given

Those in *italic* require information/ medication from parents/ carers.

PARENTAL DISCLAIMER

I give permission for my childin.....class to
take..... supervised by staff at Ellen Wilkinson.

Dose

Timing

.....

I accept full responsibility for notifying Ellen Wilkinson Primary of the dosage and timing of the medicine to be administered. I accept that no blame can be attached to the persons supervising above medicines should there be incorrect dosage or adverse reaction to said medicines.

Name of Adult with
Parental Responsibility.....Date.....

Received by school.....Date.....

Signed on behalf of Ellen Wilkinson Primary School