



St Mary  
Magdalene  
Academy

## **Supporting pupils at school with medical conditions policy**

St Mary Magdalene Academy is a Christian community of learning. We aim to nurture young people to become high achievers and to discover their vocation in the global society.

“Show by a good life that your works are done by gentleness born of wisdom”  
James 3.13

**ST MARY MAGDALENE ACADEMY**

<b>Approval Committee:</b>	<b>Full Governing Body</b>
<b>Review Committee:</b>	<b>Community Relations and Student Welfare (CR&amp;SW)</b>
<b>Author/responsible person:</b>	<b>Deputy Headteacher</b>
<b>Last reviewed:</b>	<b>24/05/2016</b>
<b>Next review date:</b>	<b>Summer 2018</b>
<b>Required to publish on website?</b>	<b>Yes</b>
<b>Statutory?</b>	<b>Yes</b>

# **SUPPORTING PUPILS AT SCHOOL WITH MEDICAL CONDITIONS POLICY**

## **1. Introduction**

St Mary Magdalene Academy is under a general duty to provide a safe place of work, with suitable arrangements, including welfare, Section 2 of the Health and Safety at Work Act 1974. Provision for First Aid is a requirement under the Health and Safety (First Aid) Regulations 1981.

This policy describes what facilities are in place; however, the Appendices outline the responsibilities of relevant personnel.

The Academy must ensure that there is adequate first aid provision for persons who may become ill or are injured, as part of their undertaking for the Academy.

The Academy will listen to children and parents but may challenge and ask for a second opinion if there is doubt or dispute about a child's medical condition. The headteacher (or delegated representative) will consult with the local authority and the NHS paediatrician based at the Northern Health Centre, Holloway Road, London N7. The local authority will also be asked to give advice if there is a dispute between the parents and the Academy.

## **2. Policy Statement**

The Academy is committed to providing sufficient numbers of first aid personnel to deal with accidents and injuries occurring at work.

To this end, the Academy will provide information and training on first aid to ensure that they meet the statutory requirements and the needs of each department are met.

Should persons have concerns about the provision of first aid within the organization, they should inform:

1. their line manager; and/or
2. The Headteacher; and/or
3. Health & Safety / Facilities Manager.

These concerns will be investigated and an assessment will conclude if any rectification is required.

## **3. Part A: Arrangements for Securing First Aid Provision**

### **3.1 First Aiders**

First Aiders are employees who have been assessed and are suitable for training and appointment as a nominated First Aider.

First Aiders are qualified personnel who have received training and passed an examination in accordance with Health and Safety Executive requirements. Incorporated into this will be refresher training at regular intervals and an examination to ensure that their skills are maintained.

The responsibilities of all First Aiders appointed by the Academy are to be found in a separate section below.

A full list of nominated first aiders can be found at the following locations: the Primary and Secondary reception areas; the teacher workrooms in the Secondary School; The Welfare Office in the Secondary School and The Pastoral Office.

### 3.2 Accident Book

First Aiders or any member of staff attending an accident / incident is required to complete an accident report. There are accident books located at: the Welfare Office near the Forum on the Ground Floor of the Academy and also at the Secondary and Primary Department reception areas.

### 3.3 First Aid Boxes

First Aid boxes are provided by the Academy as an integral part of the building. The policing and up-keep will be the responsibility of the Welfare Officer, however all First Aiders are required to report any boxes that need replenishing to the Welfare Officer.

If a person requires the use of any provisions held within a first aid box, then they should contact their nearest First Aider.

All boxes will contain the minimum supplies which are required by law:

1-10 Persons		11-50 Persons
6	medium dressings	8
2	large dressings	4
3	extra-large dressings	4
2	eye pads	4
6	triangular bandages	6
20	plasters	40
6	safety pins	12
10	alcohol free wipes	10
2	sterile saline 500ml <sup>1</sup>	2

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Eye irrigation where mains tap water is not available and/or there is a risk of injury to the eye.

Only specified first aid supplies will be kept; no creams, lotions or drugs, however seemingly mild, will be kept in first aid boxes.

### **3.4 First Aid Box Locations**

[ These are to be found at the following locations: Primary and Secondary reception areas; Primary and Secondary staff rooms; T2 (Design Technology workshop classroom); Secondary Welfare Office and lastly the Directors' offices on the first and second floors. .

### **3.5 First Aid / Medical Rooms**

These are located in the Primary School (next to Head Teacher: Primary's Office) and the Secondary School (next to the Forum on the ground floor).

### **3.6 Use of First Aid Room**

To ensure an adequate and appropriate first aid provision, The Academy has provided a room solely for rest and First Aid. This complies with the standards set out by the Health and Safety (First Aid) Regulations 1981. The Welfare Office is situated in the secondary building on the ground floor.

### **3.7 Serious Illness / Major Injury Referral**

With any injury / illness that requires urgent medical assistance, an ambulance must be called IMMEDIATELY from the Academy reception or the nearest available telephone. In the event of an ambulance being called from anywhere OTHER THAN FROM THE ACADEMY RECEPTION, then the person / first aider calling the ambulance must notify the reception ASAP giving the following information - nature of the accident and location of the injured party.

The full procedure for contacting an ambulance can be found in Appendix Two.

In all cases:

1. Under 16 Pupils: MUST be accompanied by a member of staff - ideally their teacher or their school support worker if available.
2. 16-18 yrs Pupils: the pupil MUST be accompanied by a member of staff.
3. 18+ Pupils: Mature pupils who are eighteen (or over) MUST be accompanied by a friend or member of staff.

**REMEMBER IN ALL CASES THE INJURED PERSON MUST BE ACCOMPANIED BY ANOTHER PERSON OTHER THAN THE DRIVER OF THE VEHICLE.**

Details of injuries will need to be entered in the appropriate accident book for all injuries and RIDDOR procedures followed in the case of serious injury.

For Further Advice / Assistance Consult David or Debbie Dolby Academy Welfare Officer

### **3.8 Responsibilities of First Aiders**

1. Be readily available.
2. Follow the principles and practices as laid down by the first aid course and manuals.
3. Comply with the aims of first aid:
  1. to preserve life;
  2. to prevent the condition worsening;
  3. to promote recovery.
4. Quickly and accurately assess the situation.
5. Identify the disease or condition from which the casualty is suffering; but not to treat any illness or injury which is beyond your capability.
6. Give immediate, appropriate and adequate treatment, bearing in mind that a casualty may have more than one injury and that some casualties will require more urgent attention than others.
7. Arrange, without delay, for the transfer of a casualty (should it be required) to their GP, Hospital Accident and Emergency Unit or home, according to the seriousness of the condition.
8. Stay with the casualty until they are handed over to the care of a Doctor, Paramedic, the Hospital Accident Emergency Unit or other appropriate person.
9. Not to ignore accidents or illness under any circumstances, or to refuse to give treatment and assistance if required to do so.
10. Not to undress any patient unnecessarily.
11. Safeguard the patient's clothing and possessions.
12. Maintain the highest practicable level of cleanliness whenever treating a patient.
13. Respect the patient's confidentiality at all times, and not to discuss the patient's condition with anyone other than relevant staff such as members of the Secondary Pastoral Team, SLT, parents of an injured pupil, or the Emergency Services.

14. Know your own work area intimately, paying special attention to potential hazards in that area and to know the correct treatment for injuries common to your area.
15. Promote accident prevention and safe working practice.
16. Maintain and ensure a record of all patients treated (i.e. accident book) is completed appropriately, no matter how trivial, and to submit such records in line with Academy Policy.
17. Attend refresher courses as necessary.
18. Inform the Academy Health and Safety Manager of any change in your circumstances, e.g. extension number, name, etc.
19. Readily produce their certificate of competence when requested to do so by an authorized person

#### **4. Medical Guidance**

For reference, background guidance on asthma, epilepsy, diabetes and anaphylaxis. Information on these conditions is provided either because they are either frequently encountered in schools or can have serious consequences. Other medical conditions may be encountered.

Details of secondary pupils with these conditions are provided to all necessary staff in the form of the Care and Attention List which is maintained by the Welfare Officer and updated every term.

##### **4.1 Individual Health Care Plans**

The Welfare Officer will write individual plans in partnership with the parent and relevant health care professionals.

The plan will be shared with relevant members of staff and reviewed annually or as appropriate if there are significant changes.

The plan will include details about the child's condition, treatment, symptoms and warning signs.

The plans will be kept in the Welfare Office and not put on display unless this is strictly necessary and agreed with the parents.

##### **4.2 Asthma What**

**is Asthma?**

People with asthma have airways which narrow as a reaction to a trigger. Triggers can include cold air, grass pollen, animal fur and house dust mites. Attacks are characterised by coughing, wheeziness and difficulty in breathing, especially breathing out. The affected person may become distressed and anxious. About one in seven children have asthma diagnosed at some time and about one in twenty will require medical supervision.

## **Medication and Control**

Most pupils with asthma will relieve their symptoms using an inhaler. It is good practice to allow children with asthma to take charge of and to use their inhaler, with which they may need help. In a few severe cases an electrically powered nebulizer is needed.

4. parents/carers should provide a spare inhaler for their child's use in case the inhaler is left at home or runs out. Inhalers must be clearly identified with the pupil's name. A pupil must not use another pupil's inhaler.
5. Pupils must be allowed to take their inhaler with them on all off-site activities. Physical activity will benefit pupils with asthma in the same way as other pupils. They may, however, need to take precautionary measures and use their reliever before any physical exertion.
6. If a pupil is having an asthma attack, the person in charge should prompt them to use their inhaler if they are not already doing so. The pupil should be reassured. The pupil should sit rather than lie down. If the medication has had no effect after 5-10 minutes, or if the pupil appears very distressed, is unable to talk and is becoming exhausted then medical advice should be obtained and/or an ambulance called.

## **4.3 Epilepsy What is Epilepsy?**

People with epilepsy have recurrent seizures, the great majority of which can be controlled by medication. About one in 130 children has epilepsy and about 80% attend main stream school. Not all pupils with epilepsy experience major seizures (fits). Seizures may be partial (where consciousness is not lost) or generalised (where consciousness is lost).

## **Medication and Control**

7. The symptoms of epilepsy are generally well controlled by medication and seizures are unlikely during the school day. The majority of children with epilepsy suffer fits for no known cause. Flickering lights or some computer graphics can be a trigger for some pupils. Screens and

different methods of lighting can be used to enable photosensitive pupils to work safely at computers or watch TV.

8. Extra care and supervision may be needed in some activities such as swimming or work in laboratories. Offsite trips may need additional planning as part of the risk assessment. If necessary seek further advice. When drawing up a health plan parents/carers should be encouraged to tell schools about the type and duration of seizures their child may suffer. Nothing must be done to stop a seizure once it has begun except when medication is being provided by trained staff. An ambulance is to be called if a seizure lasts longer than usual or if one seizure follows another without gaining consciousness.

#### **4.4 Diabetes What is Diabetes?**

Diabetes is a condition where the person's normal hormonal mechanisms do not control their blood sugar levels. About 1 in 700 school-age children has diabetes.

#### **Medication and Control**

9. The diabetes of the majority of school age children is controlled by two injections of insulin each day. It is unlikely these will need to be given during school hours. Most children can do their own injections from a very early age. Children with diabetes need to ensure their blood sugar remains stable. They may use a testing machine at regular intervals.
10. Pupils with diabetes must be allowed to eat regularly during the day. This may include eating snacks in class time or before exercise. Special arrangements may be needed if the school has staggered lunch times. If a meal or snack is missed, or after exercise, the pupil may experience a hypoglycaemia episode (a hypo), when the blood sugar falls to a too low level. If a pupil has a hypo a fast acting sugar e.g. a glucose tablet or sugary drink should be given immediately. Starchy food such as biscuits should be given when the pupil has recovered, about 10 to 15 minutes later. If the pupil's recovery takes longer an ambulance should be called.

#### **4.5 Anaphylaxis**

##### **What is Anaphylaxis?**

Anaphylaxis is an extreme allergic reaction requiring urgent medical attention. The most common cause is food, in particular nuts, fish and dairy products. Wasp and bee stings can also cause allergic reaction. In its most severe form the condition can be life threatening.

## **Medication and Control**

11. Treatments for anaphylaxis include antihistamines, adrenaline inhaler or injection depending on the severity of the reaction. In the most severe cases a device for injecting adrenaline may be used. The device looks like a fountain pen and is pre-loaded with the correct dose. The needle is not revealed and the injection is easy to administer.
12. Responsibility for giving the injection should be on a purely voluntary basis and should not be done without proper training. Call an ambulance if there is any doubt about the severity of the reaction or if the pupil does not respond to the medication.
13. A detailed health plan will be required in cases of anaphylaxis. This plan will need input from parents/carers and health care professionals.

### **5. Management of Medicines- A Summary for Parents/Carers**

5.1 The Academy policy is that drugs or medicines may NOT be brought to school without permission.

5.2 Permission to bring a drug to school will only be granted if it is essential that a dose is taken during school hours and following the receipt of a written and signed request by a parent/carer.

5.3 No pupils will be given medicine without the parental consent unless there is a clear and dire emergency and ambulance/emergency personnel are in attendance.

5.4 Academy staff in the Secondary School will only be able to administer a single dose of paracetamol if the pupil's parent has completed the Medical Form that is upon admission to the Academy. 5.5 All products must be clearly labelled with the name and the form of the pupil for whom the drug has been prescribed. Details of the drug dosage must also be clearly shown.

5.6 Pupils using inhalers should keep this with them at all times. The Academy should be provided with a spare, clearly labelled at the beginning of the school year. This should be retrieved at the end of the school year.

5.7 The Academy keeps a medicine register in each reception. It is essential that this register is kept up-to-date.

5.8 All communications relating to pupil welfare should be directed to the respective Head of Year.

## **6. Complaints**

- 6.1 The Academy will work with parents to ensure that children and young people with medical conditions are treated fairly and in a way that will promote good health outcomes.

All complaints should be made under the Academy's Complaints Policy. Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the relevant Headteacher or their delegated representative. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

## Appendix One: School Health Questionnaire

### Confidential

We want to ensure your child has a happy and successful time at our Academy. To help us achieve this we need to know of any medical condition which may affect your child at school. This is very important if your child may need to take medicine or receive treatment during the school day.

The information on this form is held in confidence. It will only be released to staff who need the information to deal with your child.

<b>Pupil's Name:</b>		<b>Doctor's Name:</b>	
<b>Date of Birth:</b>		<b>Doctor's Telephone:</b>	
<b>Home Address:</b>		<b>Doctor's Address:</b>	

<b>Medical Conditions</b>
<i>Please list any medical conditions which may affect your child at school. (e.g. Asthma, Diabetes, Severe Allergy etc.)</i>
<b>Details of Symptoms and Severity etc.</b>

<b>Details of any medicine required or current treatment.</b>	
<b>Any Special Requirements (e.g. at lunchtime, before sport)</b>	
<i>If you wish to discuss any health issue for your child please contact the Academy. We emphasise all information is in confidence.</i>	
<b>Request for the school to supervise the self-administration of medication</b>	
<i>The school will not supervise your child taking his/her own medication unless you sign and complete this form.</i>	
<b>Medication:</b>	
<b>Name / type of Medication</b> <i>(as described on the container)</i>	
<b>For how long will your child take this Medication?</b>	
<b>Date Dispensed:</b>	
<b>Full Directions for Use:</b>	
<b>Timing:</b>	
<b>Special Precautions:</b>	
<b>Side Effects:</b>	

Self-Administration:	
Emergency Procedures:	
<b>Contact Details:</b>	
Name:	
Daytime Phone Number:	
Relationship to pupil:	

I understand that my son/daughter is responsible for self-medication. The Academy is not obliged to undertake this service.

Name: \_\_\_\_\_  
 \_\_\_\_\_

Date:

Relationship to pupil: \_\_\_\_\_

Signature: \_\_\_\_\_

## **Appendix Two: Procedure For Calling An Ambulance**

### **STAY CALM AND IN CONTROL**

Request for an ambulance to Saint Mary Magdalene Academy

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

1. State the condition and if relevant nature of injury to the casualty
2. Give our telephone number 020 7697 0123
3. Give our location as follows:

Saint Mary Magdalene Academy, Liverpool Road, London, N7 8PG

4. Give exact location of the casualty in the Academy, being clear to explain if the nearest entrance is via the Liverpool Road or Sheringham Road receptions.
5. Give your name.
6. Member of staff to meet ambulance crew and take them to the casualty. Ensure somebody is ready to allow an ambulance onto the site via the Liverpool Road pupil entrance if necessary.

**SPEAK CLEARLY AND SLOWLY AND BE READY TO REPEAT INFORMATION IF ASKED.**

<b>Approval Committee</b>	<b>Review Committee</b>	<b>Last reviewed</b>	<b>Next review date:</b>
CR &SW	CR &SW	24/05/2016	Summer 2018