



# Medical Conditions Policy

**Policy for Supporting Children with Medical Needs**

**in conjunction with  
Medicine Administration Policy and Procedure**

**September 2021**

*Part of the Safeguarding Umbrella*

Approved by Governing Body

Review date September 2022

**Falcon Junior is an inclusive community that aims to support and welcome pupils with medical conditions. This school aims to provide all pupils with all medical conditions the same opportunities as others at school.**

**We will help to ensure they can:**

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being.
- The school ensures all staff understand their duty of care to children and young people in the event of an emergency.
- All staff feel confident in knowing what to do in an emergency.
- This school understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood.
- This school understands the importance of medication being taken as prescribed.
- All staff understand the common medical conditions that affect children at this school. Staff receive training on the impact medical conditions can have on pupils.
- The named member of school staff responsible for this medical conditions policy and its implementation is Mr E Savage

## **1. Falcon is an inclusive community that aims to support and welcome pupils with medical conditions**

- a. Falcon is welcoming and supportive of pupils with medical conditions who currently attend and to those who may enrol in the future. We aim to provide all children with all medical conditions the same opportunities and access to activities (both school based and out of school) as others at school. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- b. The school will listen to the views of pupils and parents.
- c. Pupils with medical conditions are encouraged to take control of their condition.
- d. Pupils and parents\* of pupils with medical conditions feel secure in the care their children receive at this school and the level of that care meets their needs.
- e. All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- f. Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability to learn.
- g. All staff understand the common medical conditions that affect children at this school. Staff receive training on the impact this can have on pupils.
- h. The school understands that all children with the same medical condition will not have the same needs.
- i. The medical conditions policy is understood and supported by the whole school and local health community.
- j. The school recognizes that duties in the Children and Families Act, the Equality Act relate to children with disability or medical conditions.

*\* The term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority.*

## **2. Falcon's medical conditions policy has been drawn up in consultation with a wide range of local key stakeholders within both the school and health settings**

a. This school has consulted on the development of this medical condition policy with a wide-range of key stakeholders within both the school and health settings. These key stakeholders include:

- pupils
- parents
- school nurse
- school staff
- governors
- the school employer
- and relevant local health services.

### **3. The medical conditions policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation**

a. Pupils are informed and regularly reminded about the medical conditions policy:

- in personal, social and health education (PSHE) classes
- through school-wide communication about results of the monitoring and evaluation of the policy.

b. Parents are informed and regularly reminded about the medical conditions policy:

- by including the policy statement in the school's prospectus and signposting access to the policy
- at the start of the school year when communication is sent out about Healthcare Plans
- when their child is enrolled as a new pupil
- via the school's website
- through school-wide communication about results of the monitoring and evaluation of the policy.

c. School staff are informed and regularly reminded about the medical conditions policy:

- through referral to the policy at staff meetings and through Healthcare Plans which are also distributed to parents
- at scheduled medical conditions training
- through the key principles of the policy being displayed in prominent staff areas at this school
- through school-wide communication about results of the monitoring and evaluation of the policy
- all supply and temporary staff are informed of the policy and their responsibilities through the Supply teacher packs

d. All other external stakeholders are informed and reminded about the school's medical conditions policy through referral to the school's website.

### **4. All staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this school.**

a. All staff at this school are aware of the most common serious medical conditions at this school.

b. Staff at this school understand their duty of care to pupils in the event of an emergency. In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.

c. All staff who work with groups of pupils at this school receive training and know what to do in an emergency for the pupils in their care with medical conditions.

d. Training is refreshed for all staff at least once a year.

e. Action for staff to take in an emergency for the common serious conditions at this school is displayed in prominent locations for all staff including classrooms, kitchens and the staff room.

f. This school uses Healthcare Plans to inform the appropriate staff (including supply teachers and support staff) of pupils in their care who may need emergency help.

g. This school has procedures in place so that a copy of the pupil's Healthcare Plan is sent to the emergency care setting with the pupil. On occasions when this is not possible, the form is sent (or the information on it is communicated) to the hospital as soon as possible.

## **5. All staff understand and are trained in the school's general emergency procedures**

a. All staff know what action to take in the event of a medical emergency. This includes:

- how to contact emergency services and what information to give
- who to contact within the school.

b. Training is refreshed for all staff at least once a year.

c. Action to take in a general medical emergency is displayed in prominent locations for staff. These include classrooms, the staff room, food preparation areas and sporting facilities.

d. If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent arrives. The school tries to ensure that the staff member will be one the pupil knows.

e. Generally, staff should not take pupils to hospital in their own car. This school has clear guidance from the local authority on when (and if) this is appropriate.

## **6. The school has clear guidance on the administration of medication at school**

a. This school has clear guidance on providing care and support and administering medication at school.

b. This school understands the importance of medication being taken and care received as detailed in the pupil's IHP.

c. This school will make sure that there are several members of staff who have been trained to administer the medication and meet the care needs of an individual child. This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place. ***Staff should complete and sign the Record of Medicine Administered to an Individual Child each time they give medicine to a child.***

d. This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the pupil to involve their parent, while respecting their confidentiality.

e. When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents will be informed. This school will not give a pupil under 16 aspirin unless prescribed by a doctor.

f. This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.

g. Parents at this school understand that they should let the school know immediately if their child's needs change.

h. If a pupil misuses their medication, or anyone else's, their parent is informed as soon as possible and the school's disciplinary procedures are followed.

## **7. This school has clear guidance on the storage of medication and equipment at school.**

a. This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment is readily available wherever the child is in the school and on off-site activities, and is not locked away. Pupils may carry their emergency medication with them if they wish/this is appropriate.

b. Pupils may carry their own medication/equipment, or they should know exactly where to access it.

c. Pupils can carry controlled drugs if they are competent, otherwise this school will keep controlled drugs stored securely, but accessibly, with only named staff having access. Staff at this school can administer a controlled drug to a pupil once they have had specialist training.

d. This school will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately.

e. This school will store medication that is in date and labelled in its original container where possible, in accordance with its instructions. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.

f. Parents are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of each term.

g. This school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

## **8. This school has clear guidance about record keeping.**

a. Parents at this school are asked if their child has any medical conditions on the enrolment form.

b. This school uses an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent, school staff, specialist nurse (where appropriate) and relevant healthcare services.

- c. This school has a centralised register of IHPs, and an identified member of staff has the responsibility for this register.
- d. IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- e. The pupil (where appropriate) parents, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care.
- f. This school makes sure that the pupil's confidentiality is protected.
- g. This school seeks permission from parents before sharing any medical information with any other party.
- h. This school meets with the pupil (where appropriate), parent, specialist nurse (where appropriate) and relevant healthcare services prior to any overnight or extended day visit to discuss and make a plan for any extra care requirements that may be needed. This is recorded in the pupil's IHP which accompanies them on the visit.
- i. This school keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.
- j. This school makes sure that all staff providing support to a pupil have received suitable training and ongoing support, to make sure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or the parent. The specialist nurse/school nurse/other suitably qualified healthcare professional will confirm their competence, and this school keeps an up-to-date record of all training undertaken and by whom.

**9. This school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.**

- a. This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.
- b. This school makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- c. All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- d. This school understands the importance of all pupils taking part in physical activity and that all relevant staff make appropriate adjustments to physical activity sessions to make sure they are accessible to all pupils. This includes out-of-school clubs and team sports.

e. This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

f. This school makes sure that pupils have the appropriate education/equipment/ food with them during physical activity.

g. This school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.

h. All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition. This school will not penalise pupils for their attendance if their absences relate to their medical condition.

i. This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCO who will liaise with the pupil (where appropriate), parent and the pupil's healthcare professional.

j. Pupils at this school learn what to do in an emergency.

k. This school makes sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of pupils 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.

**10. This school is aware of the common triggers that can make medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks and has a written schedule of reducing specific triggers to support this.**

a. This school is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at school and on out-of-school visits.

b. School staff have been given training on medical conditions. This training includes detailed information on how to avoid and reduce exposure to common triggers for common medical conditions.

c. The school has a list of common triggers for the common medical conditions at this school. The school has written a trigger reduction schedule and is actively working towards reducing or eliminating these health and safety risks.

d. Written information about how to avoid common triggers for medical conditions has been provided to all school staff.  
See Appendix 1

e. This school uses Healthcare Plans to identify individual pupils who are sensitive to particular triggers. The school has a detailed action plan to ensure these individual pupils remain safe during all lessons and activities throughout the school day.

f. Full health and safety risk assessments are carried out on all out-of-school activities before they are approved, including work experience placements and residential visits, taking into account the needs of pupils with medical conditions.

g. The school reviews medical emergencies and incidents to see how they could have been avoided. Appropriate changes to this school's policy and procedures are implemented after each review.

## **11. Each member of the school and health community knows their roles and responsibilities in maintaining an effective medical conditions policy**

a. This school works in partnership with all interested and relevant parties including the school's governing body, all school staff, parents, employers, community healthcare professionals and pupils to ensure the policy is planned, implemented and maintained successfully.

b. The following roles and responsibilities are used for the medical conditions policy at this school. These roles are understood and communicated regularly.

### ***Employer***

#### **This school's employer has a responsibility to:**

- ensure the health and safety of their employees and anyone else on the premises or taking part in school activities (this includes all pupils). This responsibility extends to those staff and others leading activities taking place off-site, such as visits, outings or field trips
- ensure health and safety policies and risk assessments are inclusive of the needs of pupils with medical conditions
- make sure the medical conditions policy is effectively monitored and evaluated and regularly updated
- report to parents, pupils, school staff and the local authority about the successes and areas for improvement of this school's medical conditions policy
- provide indemnity for staff who volunteer to administer medication to pupils with medical conditions.

### ***Head teacher***

#### **This school's head teacher 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
- liaise between interested parties including pupils, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, school nurses, parents, governors, the school health service, the local authority transport service, and local emergency care services
- ensure the policy is put into action, with good communication of the policy to all
- ensure every aspect of the policy is maintained
- ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using pupils' Healthcare Plans
- ensure pupil confidentiality
- assess the training and development needs of staff and arrange for them to be met
- ensure all supply teachers and new staff know the medical conditions policy
- delegate a staff member to check the expiry date of medicines kept at school and maintain the school medical conditions register

- monitor and review the policy at least once a year, with input from pupils, parents, staff and external stakeholders
- update the policy at least once a year according to review recommendations and recent local and national guidance and legislation
- report back to all key stakeholders about implementation of the medical conditions policy.

***All school staff***

**All staff at this school 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
- understand the school's medical conditions policy
- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan
- allow all pupils to have immediate access to their emergency medication
- maintain effective communication with parents including informing them if their child has been unwell at school
- ensure pupils who carry their medication with them 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 it can have on pupils (pupils should not be forced to take part in any activity if they feel unwell)
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in
- ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

***Teaching staff***

**Teachers at this school have a responsibility to:**

- be aware that medical conditions can affect a pupil's learning and provide extra help when pupils need it
- liaise with parents, the pupil's healthcare professionals, special educational needs coordinator and welfare officers if a child is falling behind with their work because of their condition
- use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions.

***School nurse or school healthcare professional***

**The school nurse at this school has a responsibility to:**

- help update the school's medical conditions policy
- help provide regular training for school staff in managing the most common medical conditions at school
- provide information about where the school can access other specialist training.

***First aider***

**First aiders at this school have a responsibility to:**

- give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school
- when necessary ensure that an ambulance or other professional medical help is called.

### ***Special educational needs coordinators***

**Special educational needs coordinators at this school have the responsibility to:**

- help update the school's medical condition policy
- know which pupils have a medical condition and which have special educational needs because of their condition
- ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams or course work.

### ***Health and Safety coordinator***

**The Health and Safety coordinator at this school has the responsibility to:**

- help update the school's medical conditions policy
- know which pupils have a medical condition and which have special educational needs because of their condition
- ensure all pupils with medical conditions are not excluded unnecessarily from activities they wish to take part in

### ***Local doctors and specialist healthcare professionals***

**Individual doctors and specialist healthcare professionals caring for pupils who attend this school, have a responsibility to:**

- complete the pupil's Healthcare Plans provided by parents
- where possible, and without compromising the best interests of the child, try to prescribe medication that can be taken outside of school hours
- offer every child or young person (and their parents) a written care/self-management plan to ensure children and young people know how to self manage their condition
- ensure the child or young person knows how to take their medication effectively
- ensure children and young people have regular reviews of their condition and their medication
- provide the school with information and advice regarding individual children and young people with medical conditions (with the consent of the pupil and their parents)
- understand and provide input in to the school's medical conditions policy.

### ***Emergency care services***

**Emergency care service personnel in this area have a responsibility to:**

- have an agreed system for receiving information held by the school about children and young people's medical conditions, to ensure best possible care
- understand and provide input in to the school's medical conditions policy.

### ***Pupils***

**The pupils at this school have a responsibility to:**

- treat other pupils with and without a medical condition equally
- tell their parents, teacher or nearest staff member when they are not feeling well
- let a member of staff know if another pupil is feeling unwell
- let any pupil take their medication when they need it, and ensure a member of staff is called
- treat all medication with respect
- know how to gain access to their medication in an emergency
- if mature and old enough, know how to take their own medication and to take it when they need it
- ensure a member of staff is called in an emergency situation.

## **Parents\***

### **The parents of a child at this school have a responsibility to:**

- tell the school if their child has a medical condition
- ensure the school has a complete and up-to-date Healthcare Plan for their child
- inform the school about the medication their child requires during school hours
- inform the school of any medication their child requires while taking part in visits, outings or field trips and other out-of-school activities
- tell the school about any changes to their child's medication, what they take, when, and how much
- inform the school of any changes to their child's condition
- ensure their child's medication and medical devices are labelled with their child's full name
- provide the school with appropriate spare medication labelled with their child's name
- ensure that their child's medication is within expiry dates
- keep their child at home if they are not well enough to attend school
- ensure their child catches up on any school work they have missed
- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.

\* The term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority.

### **12. The medical conditions policy is regularly reviewed evaluated and updated. Updates are produced every year.**

a. This school's medical condition policy is reviewed, evaluated and updated every year in line with the school's policy review timeline.

b. New Department for Children, Families and Schools and Department of Health guidance is actively sought and fed into the review.

c. In evaluating the policy, this school seeks feedback on the effectiveness and acceptability of the medical conditions policy with a wide-range of key stakeholders within the school and health settings. These key stakeholders include:

- pupils
- parents
- school nurse and/or school healthcare professionals
- headteacher
- teachers
- special education needs coordinator
- health and safety coordinator
- first aider
- all other school staff
- local emergency care service staff (including accident & emergency and ambulance staff)
- local health professionals
- the school employer
- school governors.

d. The views of pupils with various medical conditions are actively sought and considered central to the evaluation process.

## **Appendix 1 - Form 1**

Asthma awareness for school staff

### **What to do in an asthma attack**

- Keep calm.
- Encourage the child or young person to sit up and slightly forward .
- Make sure the child or young person takes two puffs of reliever inhaler (usually blue) immediately – preferably through a spacer.
- Ensure tight clothing is loosened.
- Reassure the child.
- Ring student services and ask for a first aider to come to the student. **If there is**

### **no immediate improvement**

- Continue to make sure the child or young person takes one puff of reliever inhaler every minute for five minutes or until their symptoms improve.

### **Call 999 or a doctor urgently if:**

- The child or young person's symptoms do not improve in 5–10 minutes.
- The child or young person is too breathless or exhausted to talk.
- The child or young person's lips are blue.
- You are in doubt.

Ensure the child or young person takes one puff of their reliever inhaler every minute until the ambulance or doctor arrives.

It is essential for people who work with children and young people with asthma to know how to recognise the signs of an asthma attack and what to do if they have an asthma attack.

### **Common signs of an asthma attack are:**

- coughing
- shortness of breath
- wheezing
- tightness in the chest
- being unusually quiet
- difficulty speaking in full sentences sometimes
- younger children express feeling tight in the chest as
- a tummy ache.

### **After a minor asthma attack**

- Minor attacks should not interrupt the involvement of a pupil with asthma in school.
- When the pupil feels better they can return to school activities.
- The parents/carers must always be told if their child has had an asthma attack.

### **Important things to remember in an asthma attack**

- Never leave a pupil having an asthma attack.
- If the pupil does not have their inhaler and/or spacer with them, send another teacher or pupil to their classroom or assigned room to get their spare inhaler and/or spacer.
- In an emergency situation school staff are required under common law, duty of care, to act like any reasonably prudent parent.
- Reliever medicine is very safe. During an asthma attack do not worry about a pupil overdosing.
- Send another pupil to get another teacher/adult if an ambulance needs to be called.
- Contact the pupil's parents or carers immediately after calling the ambulance/doctor.
- A member of staff should always accompany a pupil taken to hospital by ambulance and stay with them until their parent or carer arrives.

## **Appendix 1 – Form 2**

Epilepsy awareness for school staff

### **Complex partial seizures**

#### **Common symptoms**

- The person is not aware of their surroundings or of what they are doing
- Plucking at their clothes
- Smacking their lips
- Swallowing repeatedly
- Wandering around

#### **Ring student services and ask for a first aider to come to the student Call 999 for an ambulance if...**

- You know it is the person's first seizure
- The seizure continues for more than five minutes
- The person is injured during the seizure
- You believe the person needs urgent medical attention

#### **Do...**

- Guide the person from danger
- Stay with the person until recovery is complete
- Be calmly reassuring

#### **Don't...**

- Restrain the person
- Act in a way that could frighten them, such as making abrupt movements or shouting at them
- Assume the person is aware of what is happening, or what has happened
- Give the person anything to eat or drink until they are fully recovered
- Attempt to bring them round
- Explain anything that they may have missed

### **Tonic-clonic seizures**

Common symptoms:

- the person goes stiff,
- loss of consciousness
- falls to the floor

**Do...**

- Protect the person from injury (remove harmful objects from nearby) Cushion their
- head
- Look for an epilepsy identity card/identity jewellery
- Aid breathing by gently placing the person in the recovery position when the seizure has finished
- Stay with them until recovery is complete Be calmly
- reassuring

**Don't...**

- Restrain the person's movements
- Put anything in their mouth
- Try to move them unless they are in danger
- Give them anything to eat or drink until they are fully recovered Attempt to
- bring them round

**Call 999 for an ambulance if...**

- You know it is the person's first seizure
- The seizure continues for more than five minutes
- One seizure follows another without the person regaining consciousness between seizures
- The person is injured
- You believe the person needs urgent medical treatment

## Appendix 1 – Form 3

### Anaphylaxis awareness for staff

#### ANAPHYLAXIS

##### Symptoms of allergic reactions:

##### Ear/Nose/Throat - Symptoms:

runny or blocked nose, itchy nose, sneezing, painful sinuses, headaches, post nasal drip, loss of sense of smell/taste, sore throat/swollen larynx (voice box), itchy mouth and/or throat and blocked ears.

##### Eye - Symptoms:

watery, itchy, prickly, red, swollen eyes. Allergic 'shiners' (dark areas under the eyes due to blocked sinuses).

##### Airway - Symptoms:

wheezy breathing, difficulty in breathing and or coughing (especially at night time).

##### Digestion:

swollen lips, tongue, itchy tongue, stomach ache, feeling sick, vomiting, constipation and or diarrhoea.

##### Skin:

Urticaria - wheals or hives-bumpy, itchy raised areas and or rashes.

Eczema -cracked, dry, weepy or broken skin. Red cheeks.

Angiodema - painful swelling of the deep layers of the skin.

##### Symptoms of Severe Reaction/ Anaphylaxis:

These could include any of the above together with:

- Difficulty in swallowing or speaking.
- Difficulty in breathing -severe asthma
- Swelling of the throat and mouth
- Hives anywhere on the body or generalized flushing of the skin
- Abdominal cramps, nausea and vomiting
- Sudden feeling of weakness (drop in blood pressure)
- Alterations in heart rate (fast Pulse)
- Sense of Impending doom (anxiety/panic)
- Collapse and unconsciousness

#### TREATMENT

Ring student services and ask for first aider to come to student

Send a student or member of staff to student services to collect 2nd epipen and to ask them to ring for an ambulance and parents.

If student conscious keep them in an upright position to aid breathing. If unconscious then place in recovery position.

If student is conscious and alert ask them to self administer their epipen. If student unconscious, trained member of staff to administer epipen as per training. Record time of giving.

If no improvement within 5 minutes then 2nd epipen to be administered. Keep used epipens and give to paramedics when they arrive.

## **Appendix 1 – Form 4**

### **Diabetes awareness and treatment for staff**

#### **What is it?**

Abnormal fluctuations in blood sugar 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 is the more common emergency which affects brain function and can lead to unconsciousness if untreated.

#### **Signs and symptoms:**

##### **Hypoglycaemia:**

- Hunger
- Feeling 'weak' and confused
- Sweating
- Dry, pale skin
- Shallow breathing

##### **Hyperglycaemia:**

- Thirst
- Vomiting
- Fruity/sweet breath
- Rapid, weak pulse

#### **First aid aims**

##### **Hypoglycaemia:**

- Raise blood sugar level as quickly as possible
- Get casualty to hospital, if necessary

##### **Hyperglycaemia:**

- Get casualty to hospital as soon as possible

#### **Treatment**

##### **Hypoglycaemia:**

- Sit casualty down
- If conscious, give them a sugary drink, chocolate or other sugary food

If there's an improvement, offer more to eat or drink. Help the casualty to find their glucose testing kit to check their level. Advise them to rest and see their doctor as soon as possible.

- If consciousness is impaired, do not give them anything to eat or drink. Dial 999 for an ambulance

## **Hyperglycaemia:**

**Call 999 immediately**

### **Further actions**

If the casualty loses consciousness

- Open airway and check breathing
- Place them in recovery position
- Prepare to give resuscitation

## Legislation and guidance

### Introduction

+ Local authorities, schools and governing bodies are responsible for the health and safety of pupils in their care.

+ Areas of legislation that directly affect a medical conditions policy are described in more detail in *Managing Medicines in Schools and Early Years Settings*. The main pieces of legislation are the Disability Discrimination Act 1995 (DDA), amended by the Special Educational Needs and Disability Act 2001 (SENDA) and the Special Educational Needs and Disability Act 2005. These acts make it unlawful for service providers, including schools, to discriminate against disabled people. Other relevant legislation includes the Education Act 1996, the Care Standards Act 2000, the Health and Safety at Work Act 1974, the Management of

Health and Safety at Work Regulations 1999 and the Medicines Act 1968.

This section outlines the main points from the relevant legislation and guidance that schools should consider when writing a medical conditions policy.

### Managing Medicines in Schools and Early Years Settings (2004)

This provides guidance from the DfES (now DCFS) and DH on managing medicines in schools and early years settings. The document includes the following chapters:

- + developing medicines policies
- + roles and responsibilities
- + dealing with medicines safely
- + drawing up a Healthcare Plan
- + relevant forms.

Medical Conditions at School: A Policy Resource Pack is designed to work alongside *Managing Medicines in Schools and Early Years Settings*.

### Disability Discrimination Act 1995 (DDA) and the Special Educational Needs and Disability Acts (2001 and 2005)

+ Many pupils with medical conditions are protected by the DDA and SENDA, even if they don't think of themselves as 'disabled'.

+ The Commission for Equality and Human Rights (CEHR) (previously the Disability Rights Commission) publishes a code of practice for schools, which sets out the duties under the DDA and gives practical guidance on reasonable adjustments and accessibility. The CEHR offers information about who is protected by the DDA, schools' responsibilities and other specific issues.

Schools' responsibilities include:

+ not to treat any pupil less favourably in any school activities without material and sustainable justification

+ to make reasonable adjustments that cover all activities – this must take into consideration factors such as financial constraints, health and safety requirements and the interests of other pupils. Examples of reasonable adjustments can be found in the DfES resource: *Implementing the DDA in Schools and Early Years Settings\**

+ to promote disability equality in line with the guidance provided by the DCSF and CEHR through the Disability Equality Scheme.

\*DfES publications are available through the DCSF.

### **The Education Act 1996**

Section 312 of the Education Act covers children with special educational needs, the provisions that need to be made and the requirements local health services need to make to help a local authority carry out its duties.

### **The Care Standards Act 2000**

This act covers residential special schools and responsibilities for schools in handling medicines.

### **Health and Safety at Work Act 1974**

This act places duties on employers for the health and safety of their employees and anyone else on their premises. This covers the head teacher and teachers, non-teaching staff, pupils and visitors.

### **Management of Health and Safety at Work Regulations 1999**

These regulations require employers to carry out risk assessments, manage the risks identified and to communicate these risks and measures taken to employees.

### **Medicines Act 1968**

This act specifies the way that medicines are prescribed, supplied and administered.

### **Additional guidance**

Other guidance resources that link to a medical conditions policy include:

- + Healthy Schools Programme – a medical conditions policy can provide evidence to help schools achieve their healthy school accreditation
- + Every Child Matters: Change for Children (2004). The 2006 Education Act ensures that all schools adhere to the five aims of the Every Child Matters agenda
- + National Service Framework for Children and Young People and Maternity Services (2004) – provides standards for healthcare professionals working with children and young people including school health teams
- + Health and Safety of Pupils on Educational Visits: A Good Practice Guide (2001) – provides guidance to schools when planning educational and residential visits
- + Misuse of Drugs Act 1971 – legislation on the storage and administration of controlled medication and drugs
- + Home to School Travel for Pupils Requiring Special Arrangements (2004) – provides guidance on the safety for pupils when traveling on local authority provided transport
- + Including Me: Managing Complex Health Needs in School and Early Years Settings (2005).

## **Further advice and resources**

### **Department for Education**

Piccadilly Gate

Store Street

Manchester

M1 2WD

**Phone 0370 000 2288**

### **The Anaphylaxis Campaign**

PO Box 275

Farnborough

Hampshire GU14 6SX

**Phone 01252 546100**

**Fax 01252 377140**

**info@anaphylaxis.org.uk**

**www.anaphylaxis.org.uk**

### **Asthma UK**

Summit House

70 Wilson Street

London EC2A 2DB

**Phone 020 7786 4900**

**Fax 020 7256 6075**

**info@asthma.org.uk**

**www.asthma.org.uk**

### **Diabetes UK**

Macleod House

10 Parkway

London NW1

7AA

**Phone 020 7424 1000**

**Fax 020 7424 1001**

**info@diabetes.org.uk**

**www.diabetes.org.uk**

### **Epilepsy Action**

New Anstey House

Gate Way Drive

Yeadon

Leeds LS19 7XY

**Phone 0113 210 8800**

**Fax 0113 391 0300**

**epilepsy@epilepsy.org.uk**

**www.epilepsy.org.uk**

**Long-Term  
Conditions Alliance**  
202 Hatton Square  
16 Baldwins Gardens  
London EC1N 7RJ  
**Phone 020 7813 3637**  
**Fax 020 7813 3640**  
**info@ltca.org.uk**  
[www.ltca.org.uk](http://www.ltca.org.uk)

**Council for Disabled Children**  
National Children's Bureau  
8 Wakley Street  
London EC1V 7QE  
**Phone 020 7843 1900**  
**Fax 020 7843 6313**  
**cdc@ncb.org.uk**  
[www.ncb.org.uk/cdc](http://www.ncb.org.uk/cdc)

**National Children's Bureau**  
National Children's Bureau  
8 Wakley Street  
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**Phone 020 7843 6000**  
**Fax 020 7278 9512**  
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