

Medical Treatment Policy

Policy Code:	HS2
Policy Start Date:	March 2024
Policy Review Date:	March 2027

Please read this policy in conjunction with the policies listed below:

- HR6 Data Protection Policy
- HR33 Records Management Policy
- HS5 Health and Safety Policy
- SW5 Safeguarding and Child Protection Policy
- SW11 Educational Visits Policy
- SW12 Attendance Policy
- SW13 Intimate Care Policy

1 Policy Statement

- 1.1 The Priory Federation of Academies Trust (The Trust) provides learning environments that are supportive and welcoming to pupil with medical conditions. The Trust aims to provide all pupil with medical conditions the same opportunities as other pupil. This will be achieved by ensuring that, all staff understand their duty of care, both to pupil and young people with long-term conditions and to pupil and young people in the event of an emergency, and that staff feel confident with the emergency procedures.
- 1.2 The Trust understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood – it also acknowledges the importance of medication being taken as prescribed. Staff will be briefed and will receive additional training (where appropriate) about meeting the needs of any pupil they may be working with who have additional medical needs.
- 1.3 This policy outlines the manner in which medical conditions will be managed in accordance with the DfE guidance *Supporting pupils at school with medical conditions (December 2015)*.
- 1.4 References to the Trust or Academy within this policy specifically include all primary, secondary and special academies within the Trust, as well as the Early Years setting at the Priory Witham Academy, Priory Apprenticeships and Lincolnshire ITT.
- 1.5 This policy does not form part of any member of staff's contract of employment and it may be amended at any time.

2 Roles, Responsibilities and Implementation

- 2.1 The Pay, Performance and HR Committee has overall responsibility for the effective operation of this policy and for ensuring compliance with the relevant statutory framework. This committee delegates day-to-day responsibility for operating the policy and ensuring its maintenance and review to the Head of Human Resources.
- 2.2 Leaders and Managers have a specific responsibility to ensure the fair application of this policy and all member of staff are responsible for supporting colleagues and ensuring its success.

3 Aims

- 3.1 The Trust will help to ensure pupils can be healthy, stay safe, enjoy and achieve, make a positive contribution, and achieve economic well-being.

- 3.2 To ensure that all pupil at school with medical conditions are properly supported so that they have full access to education, including school trips and physical education.

4 Procedures for dealing with sick or injured pupil

- 4.1 Staff should be aware that they are acting in loco parentis at all times during the educational day, and that their prime consideration is a duty of care to all pupil.
- 4.2 Pupil who are taken ill or injured should be sent, accompanied, to the appropriate medical room or office. In the case of serious injury the casualty should be treated immediately, at the location, ensuring dignity is maintained at all times, while the relevant emergency service is called.
- 4.3 If an emergency service is required then the member of staff with the ill or injured pupil should make the call, without hesitation. See Appendix 6 for further instruction.
- 4.4 If a pupil needs to be taken to hospital, a member of staff will always accompany them if necessary and will stay with them until a parent/carers arrives. The Academy will try to ensure that the staff member will be one the pupil knows. A staff member should inform a member of the Academy's SLT and/or the Academy's critical incidents team.

4.5 Illness or less serious injury.

At the medical room or office, a qualified First Aider will see the pupil if they are injured, or if the illness warrants it. If necessary, the parent/carers will be contacted to arrange for the pupil to either be collected or gain permission for the child to leave site, or they will be returned to normal activity within the Academy. At all times prime consideration must be for the sick or injured pupil.

4.6 Serious Injury.

If the injury is serious and the pupil is unable to walk or is unconscious, normal first aid procedures apply, ensuring that the emergency services are called.

4.7 Head injury

A member of the Pastoral team/First Aider will contact home if a pupil sustains a head injury, or is seen by a First Aider in relation to a head injury. If necessary, the school will contact the emergency services.

Notes for General Guidance

- 4.8 **Hospital Referrals** - No pupil should be sent to hospital without the parents/carers being informed. It is the responsibility of the First Aider or nominated person to contact parents and request that they either: come to the Academy to accompany their child to hospital or meet them at hospital, in which case a member of staff must accompany the injured pupil to hospital. The appropriate Pastoral Team should then be informed of action taken by the First Aider.
- 4.9 **Leaving the Academy** - Pupil who are unwell should ideally not be permitted to go home unaccompanied. They must be collected by a parent/carer or named contact. This should be coordinated through the First Aider/Pastoral Team. Pupil will only be allowed to leave site unaccompanied in exceptional circumstances and only with parental permission.
- 4.10 **Accidents after or during an academy activity** - If an accident occurs during or after an academy activity or academy visit, the member of staff in charge should arrange appropriate treatment for the pupil concerned. This may involve calling the emergency services.

5 Medication forms

- 5.1 Parents/carers are asked whether their child has any medical conditions upon enrolment. In the event that a child develops a medical condition (or requires medication previously not needed) then parents/carers should inform the respective academy *as promptly as possible*. The academy may ask for a full disclosure of any medication being taken by their child, both at home and in school.
- 5.2 Medication should only be administered at the Academy when it would be detrimental to a child's health or school attendance not to do so. Where it is possible that medication that can be administered at home, rather than at school, it should be administered at home. If a child is required to take medication during the academy day (or on an educational visit), parents/carers will be asked to complete a medication form (Medicine Administering Form – See Appendix 1).
- 5.3 If a pupil has a short-term medical condition that requires medication during the academy day (e.g. antibiotics), a medication form (Medicine Administering Form – See Appendix 1) asking for permission and explanation, will be given/sent to the pupil's parents/carers to complete, before medication can be administered/taken during the school day.

- 5.4 All medication (including both prescription and over the counter (OTC) or general sales list (GSL) medication) must be sent into the academy in its original packaging, with the original prescription label attached (for prescription medication). Medication will not be accepted or administered in any other packaging, nor will a photocopy of the prescription label/sales packaging be accepted.

6 Safe storage

- 6.1 Each Academy will identify a member of staff/designated person(s) who ensures the correct storage of medication at academy.
- 6.2 All prescription medication to be kept in a locked cupboard where only named staff will have access. However, at Willoughby Academy, all medication (except inhalers and auto-inject adrenaline, as these are kept with the pupil) is kept in a locked cabinet.
- 6.3 The identified member of staff will check the expiry dates for all medication stored at the academy every calendar month during the academic year.
- 6.4 All medication kept by the academy must be kept in a secure place, in a lockable cupboard in a cool dry place. Pupil with medical conditions will be informed where their medication is stored and how to access it (if they are able to self-administer). Staff will need to ensure that medication is accessible only to those for whom it is prescribed.
- 6.5 Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to pupils and not locked away.
- 6.6 The identified member of staff, along with the parents/carers of pupils with medical conditions, are to ensure all medication brought in to the academy will be clearly labelled. By this, it is meant that:
- Prescription medication will have a recent pharmacy label showing the pupil name, the name of the medication, route of administration, dose and frequency, along with the expiry date of the medication.
 - Over the counter (OTC) and general sale list (GSL) medication need to be in their original packaging, with the manufacturer's guidance on dose, frequency, length of course and expiry date also visible.
 - OTC and GSL medication will need parents/carers to label clearly with the pupil name.
- 6.7 All medication must be supplied and stored in its original containers, in accordance with point 6.6.

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- 6.8 Medication must be stored in accordance with Trust Policy and the manufacturer's instructions, paying particular note to temperature.
- 6.9 Some medication may need to be refrigerated. All refrigerated medication must be stored in an airtight container and must be clearly labelled with pupil's name, medication and expiry date. Refrigerators used for the storage of medication should only be used for that purpose and should be either inaccessible to unsupervised pupil or lockable.
- 6.10 It is the parent/carer's responsibility to ensure new and in-date medication comes into academy with the appropriate instructions and to ensure that the academy receives this. Any medication exceeding its expiry date cannot be taken or administered to pupils. It is the responsibility of the named member of staff to notify parents/carers when medication is about to expire, or has expired.
- 6.11 If a staff member is fit for work, but requires prescription medication, this medication must be stored in the same way as pupil medication. In the event that a member of staff brings OTC medication into work, this must be stored securely and out of reach of children at all times.

7 Administration / Supervision of taking of medication

- 7.1 Where possible, medicine should be self-administered by the pupil. However, in situations where this is not possible medicine must always be administered by a member of staff. Where possible, this member of staff should be named on the child's Individual Medical Care Plan.
- 7.2 No child under 16 should be given prescription or non-prescription medication without their parent/carer's written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents/carers.
- 7.3 Pupil should not bring onto site or keep prescription medication themselves unless this is outlined in the Individual Medical Care Plan (See Appendix 5); the exception to this being inhalers, glucose monitoring equipment and auto-inject adrenaline pens.
- 7.4 Any medicines that must be administered at the Academy will only be administered with the consent of the Headteacher and parents/carers. Nominated staff should supervise the self-administration of medication (to avoid the risk of double dosing) and maintain accurate records. They must be willing to undertake this task and must receive specific instructions and training, if necessary. There is no legal or contractual duty for any member of staff to

administer medication or supervise a pupil taking medication unless they have been specifically asked to do so, or unless the situation is an emergency.

- 7.5 In line with section 5 of this policy, if a pupil requires medication during the academy day, parents/carers must complete the relevant form (Medicine Administering Form) in Appendix 1. Parents/carers must inform the academy if there is a variation to the dose (supplying the academy with a new pharmacy label) or the medication is discontinued or changed, as a new form will need to be completed/records will need updating.
If necessary, the academy will assist in the completion of the form, but it must be signed by the parent/carer. The old medication/change of dose will be sent home.
- 7.6 The smallest practicable dose should be brought to the academy, preferably by the parent or carer, and be handed into the medical room. All medication needs to be in its original packaging that clearly shows the pharmacy label or the name of the medication, manufacturer's instructions and the expiry date.
- 7.7 Prescription medication will not be accepted by the academy without the prescription, or if the prescription label has been modified in any way. Staff are not permitted to administer medication, or allow a child to self-administer medication, in a different way to what is stated on the prescription (e.g. dose or method of administering e.g. tablets crushed/broken up).
- 7.8 A medication record book/chart will be maintained at the location at which medicines are administered and an entry will be made by the person supervising the administering of the medicine (or administering the medication if necessary). See Appendix 3. All records **MUST** be completed in pen (black or blue only) not pencil.
- 7.9 Certain medication can only be administered by a nominated person, who will be specifically trained by nursing or medical staff. However, wherever possible, and as detailed in the pupil's Individual Medical Care Plan, the pupil will self-administer under the supervision and accurately recorded by a nominated member of staff.
- 7.10 If a trained member of staff, who is usually responsible for administering medication is not available, the academy will make alternative arrangements to provide the service. This contingency should always be addressed in the risk assessment for off-site activities and educational visits.
- 7.11 In the Secondary settings, if it is necessary for pupil to bring Over the Counter Medicines (OTC) or General Sales List Medicines (GSL) onto site then they must inform a member of staff if they consume any. Parents/carers must ensure the pupil is capable of responsible self-administration; otherwise, the

medication must be kept in the medical room. The exception to this is at Willoughby Academy, where all medication, including OTC, will be kept in the class medication cabinet and locked at all times.

- 7.12 If pupils require medication to be administered by a member of staff, this should be witnessed by another member of staff, and in agreement with the academy.
- 7.13 If a member of staff is required to administer medication to a child, and this involves intimate care, then this must be done in accordance with SW13 Intimate Care Policy.

8 Administration of emergency medication

- 8.1 The Trust will seek to ensure that pupil with medical conditions have easy access to their emergency medication at all times (including off site activities). Individual academies will ensure that all pupil and parents/carers understand the arrangements for a member of staff (and the reserve member of staff) to help them take their emergency medication safely.
- 8.2 If emergency medication is required by a pupil, that is not an inhaler, a glucagon kit or an auto-inject adrenaline pen, it should have a clear pharmacy label, escalation plan and needs to be kept in a locked cabinet. The keys should be readily available to all staff and not held personally by members of staff.

9 Misuse of medication

- 9.1 If a pupil refuses their medication, or it is felt that they are not administering their medication as prescribed, staff will record this. Parents/carers are to be informed of this immediately.
- 9.2 If a pupil misuses medication, be this their own or another pupil's, their parents/carers are to be informed immediately. The academy will seek medical advice by ringing 111, or 999 in the event of an emergency. In such circumstances, pupil will be subject to the academy's disciplinary procedures and, where appropriate, external referrals may be made in order to support the child.
- 9.3 If staff have any concerns about a child, no matter how small, they must speak to the setting's safeguarding team, in line with the Trust's SW5 Child Protection and Safeguarding Policy.

10 Safe disposal

- 10.1 Parents/carers will be asked to collect out-of-date medication, or it will be sent home with the child (of which parents/carers will be informed in advance).

- 10.2 If parents/carers do not collect out-of-date medication the medication will be taken to a local pharmacy for safe disposal by a nominated member of staff.
- 10.3 A named member of staff will be responsible for checking the dates of medication and arranging for the disposal of any that have expired. This check is done every calendar month during the academic year and should be documented (Central Register – See Appendix 2).
- 10.4 Sharps boxes are used for the disposal of needles. Parents/carers can obtain sharps boxes from the pupil GP or paediatrician on prescription. All sharps boxes in the academy will be stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis.
- 10.5 Collection and disposal of sharps boxes is arranged with the Local Authority's environmental services through the Academy's site manager.

11 Educational visits

- 11.1 All staff attending off-site visits should be aware of any pupil on the visit who have medical conditions. This should be taken into consideration when completing the visit risk-assessment. If there are pupil on the visit who have medical conditions then the Medical Risk Assessment will need to be completed in addition to the visit risk-assessment. (Please refer to SW11 Educational Visits Policy).
- 11.2 If a pupil participating in a visit has a medical condition the visit coordinator should be aware of the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed. If applicable, the visit co-ordinator should refer to the pupil Individual Medical Care Plan (See Appendix 5).
- 11.3 Any medication taken on an educational visit must be kept in a locked box or under the supervision of the visit co-ordinator and/or the medically trained staff on the visit.
- 11.4 If a sharps box is needed on an off-site or residential visit, a named member of staff must be responsible for its safe storage and return to a local pharmacy, to the academy or to the pupil parent/carer.

12 Individual medical care plans

- 12.1 Individual Medical Care Plans (See Appendix 5) are used to inform the appropriate staff about the individual needs of a pupil who has a complex health need and, in some instances, requires medication to be taken during the

academy day. It also enables identification of important individual triggers for pupil with complex health needs that cause symptoms and can lead to emergencies. Storage of such information will ensure that the academy's First Aiders and staff have a timely and accurate summary of a pupil current medical management.

12.2 Individual Medical Care Plans will be issued to pupil with complex health needs. Details about the individual pupil medical needs, their triggers, signs, symptoms, medication and other treatments will be recorded. Further documentation can be attached to the Individual Medical Care Plan if required. Examples of complex health need which may generate an Individual Medical Care Plan following discussion with the Academy are:

- Diabetes;
- Gastrostomy feeds;
- A tracheostomy;
- Anaphylaxis;
- A central line or other long term venous access;
- Severe asthma that has required a hospital admission within the last 12 months;
- Epilepsy with or without rescue medication; and/or
- Allergies that require an auto-inject adrenaline pen

12.3 Where necessary, a setting will work with medical professionals and/or medical evidence to generate the Individual Medical Care Plan. However, this is not essential for an Individual Medical Care Plan to be written.

12.4 Parents/carers should update their child's Individual Medical Care Plan if their child has a medical emergency, if there have been changes to their symptoms (getting better or worse), or their medication and/or treatments change. Each Individual Medical Care Plan will have a review date.

13 Paediatric First Aid

13.1 In line with the DfE's *Statutory framework for the early years foundation stage* each academy (where applicable) must have at least one person who has a current paediatric first aid (PFA) certificate on the premises and available at all times when early years foundation stage (EYFS) children are present, and must accompany EYFS children on outings. The certificate must be for a full course, consistent with the criteria set out in Annex A of the DfE's guidance, and the training must be renewed every three years and be relevant for people caring for young children and babies.

13.2 All staff who obtained a level 2 and/or level 3 qualification since 30th June 2016 must obtain a PFA qualification within three months of starting work in order to

be include in the required staff:child ratios at level 2 or level 3 in an early years setting. All staff who have completed the experienced-based route must obtain a PFA qualification before they can be included in the staff:child ratios at level 3. To continue to be included in the ratio requirement the certificate must be renewed every 3 years.

- 13.3 All academies with an EYFS setting should display, or make available to parents/carers on request, a list of staff who have a current PFA certificate.
- 13.4 Each setting should take into account the number of children, staff and layout of premises to ensure that a paediatric first aider is able to respond to emergencies quickly.

14 Infection control

- 14.1 Infections in young people are common. This is because a child's immune system is immature. Added to this, young children often have close contact with their friends/peers which means infections can spread easily. Many diseases can spread before the individual shows any symptoms at all (during the infectious period). For example, a pupil with chickenpox is infectious to others 1 to 2 days before the rash appears.
- 14.2 The Trust will follow guidance from Public Health England with regards to managing cases of infectious diseases. The guidance can be found at: <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>
- 14.3 The Trust recognises that preventative approaches are better than reactive ones and through promoting the routine use of good standards of hygiene it seeks to reduce the overall transmission of infection. This can be done through:
- The promotion of immunisation of pupil and staff
 - Encouraging good hand washing and providing facilities for this
 - Making sure the environment is kept clean

15 Policy change

- 15.1 This policy may only be amended or withdrawn by The Priory Federation of Academies Trust.



The Priory Federation of Academies Trust Medical Treatment Policy

This Policy has been approved by the Priory Federation of Academies Pay, Performance and HR Committee:

Signed..... Name..... Date:

Trustee

Signed..... Name..... Date:

Chief Executive Officer

Signed..... Name..... Date:

Designated Member of Staff

Please note that a signed copy of this agreement is available via Human Resources.

Appendix 1

Medicine Administering Form

Medication will not be held without this completed form
The Headteacher reserves the right to remove this service

Setting:			
Name of child:		Tutor group/Class:	
Medical condition or illness:			
Medication taken at home:			
Allergies:			
Name/type of medication: <i>(As described on container)</i>			
Expiry date: <i>(Of prescription)</i>			
Dosage and method of administration:			
Timing:			
Special precautions/other instructions:			
Are there any side effects the setting needs to be aware of?:			

Note: Prescription medication must have a recent pharmacy label showing the pupil name, the name of the medication, route of administration, dose and frequency, along with the expiry date of the medication.
Over the counter (OTC) and general sale list (GSL) medication need to be in their original packaging, with the manufacturer's guidance on dose, frequency, length of course and expiry date also visible.
OTC and GSL medication will need parents/carers to label clearly with the pupil name.

The above information is, to the best of my knowledge, accurate at the time of writing.
I give consent for my child to take their medication in accordance with any medical guidance provided.
I will complete a new Medical Administration Form if there is any change in dosage or frequency of the medication and inform the school if the medication is stopped. I am aware that a new prescription will be required if there is a change to dose.
I recognise that The Priory Federation of Academies Trust is not legally bound to provide this service, and it may be withdrawn at any time.
I will ensure I can be contacted during Academy hours.

Signed:

Print name:

Date:

Appendix 2 – Central Register for Stored Medication

Central Register – stored medication

School:	Person(s) responsible:	Expiry date of medication checklist:											
		Month 12	Month 11	Month 10	Month 9	Month 8	Month 7	Month 6	Month 5	Month 4	Month 3	Month 2	Month 1
Name of child: (Tutor group)	Name of medication:	IMCP: <i>Tick if complete</i>											
		MAF: <i>Tick if complete</i>											
		Medicine returned:											
		Expiry date of medication:											

Appendix 3 - Record of medicine administered to an individual child

Record of medicine administered to an individual child

[illegible]

Appendix 4

Personal Emergency Escape Plan (PEEP)

Name:			
Reason for PEEP: <i>(Please specify if temporary)</i>			
Setting:			
Normal building / floor / room:			
Informed of fire evacuation by:	<i>(e.g. normal fire alarm, pager, other – please specify)</i>		
Evacuation requirements:			
How many people need to assist you?			
Names / departments of people assisting:			
Back-up assistants / departments:			
Do you need to be shown the escape routes?			
Do you need help with your assistance dog?			
Do you need to have doors opened?			
Will you require more time as you move slowly?			
Will you need assistance moving your wheelchair to the assembly point?			
Do you need to hold the arm of your assistant(s)?			
Equipment provided (including means of communication):			
Additional information/documents:			
Member of staff signature:		Date:	
Signed by Individual:		Date:	

Once complete please attach the pupil's timetable and submit a copy to the Site Manager and relevant staff.

Appendix 5 Individual Medical Care Plan

Setting:			
Name of child:		Tutor group/Class:	
Medical diagnosis or condition:			
Medication currently prescribed:			
Describe medical needs and give details of child's symptoms and triggers:			
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications:			
What constitutes an emergency, and the action to be taken if this occurs:	Attach NHS medical escalation plan is applicable.		
Can the medication be self-administered?:		If no, please outline any additional training information which will be required:	
Daily medical care requirements:			
Storage of medication:			

Arrangements for school visits: <i>(Please state any specific needs for residential visits)</i>	<i>Please refer to the Federation's Educational Visits Policy should you require further information.</i>
Staff member(s) with responsibility:	
Do staff require any specialist training?:	
Headteacher's agreement:	It is agreed that this child can receive the above listed medication as directed in this Individual Medical Care Plan.
Signed:	
Print name:	
Date:	
Parent/Carer agreement:	I agree that the medical information contained in this plan may be shared with individuals involved with my child's care and education (this includes individual emergency services). I understand that I must notify the setting of any changes in writing.
Signed:	
Print name:	
Date:	
Healthcare professional agreement:	I agree that the information is accurate and up to date. Or: Please see attached NHS escalation/treatment plan. <i>Delete as appropriate</i>
Signed:	
Print name:	
Date:	

Appendix 6 – Contacting Emergency Services

CONTACTING EMERGENCY SERVICES

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

1. Your telephone number.
2. Give your location as follows.
3. State the name, address and postcode of the Academy if on-site, and as much detail of the location you can if off-site.
4. Give exact location in the Academy of the person needing help.
5. Give your name.
6. Give the name of the person needing help.
7. Give a brief description of the person's symptoms (and any known medical condition).
8. Inform ambulance control of the best entrance and state that the crew will be met at this entrance and taken to the student.
9. Don't hang up until the information has been repeated back to you.
10. Inform site staff to meet the paramedics and escort them to the location of the student(s).
11. Ideally the person calling should be with the student, as the emergency services may give first aid instruction.
12. Never cancel an ambulance once it has been called.