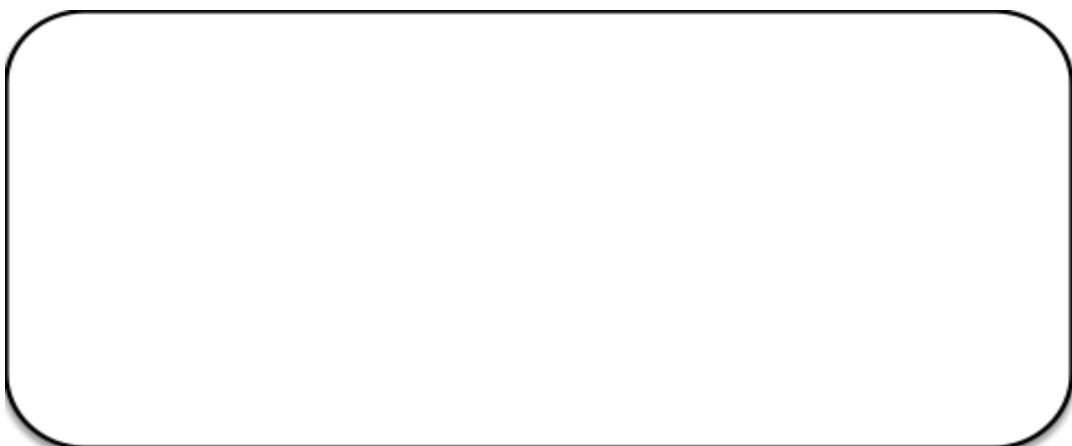




# Star Primary School Supporting Pupils with Medical Conditions including Asthma Children's Rights based Policy



Star Primary School, Hilda Road, London, E16 4NH

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T: 02074765336

E: [info@star.newham.sch.uk](mailto:info@star.newham.sch.uk)

# Supporting Pupils with Medical Conditions Policy

## Article 24 (health and health services)

Every child has the right to the best possible health. Governments must provide good quality health care, clean water, nutritious food, and a clean environment and education on health and well-being so that children can stay healthy. Richer countries must help poorer countries achieve this.

## Article 16 (right to privacy)

Every child has the right to privacy. The law should protect the child's private, family and home life, including protecting children from unlawful attacks that harm their reputation.

### Aims of this Policy

- This policy is written in regard to Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.
- To ensure pupils at school with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.
- To ensure that students health is not put in unnecessary risk, e.g. from infectious diseases, in line with our safeguarding duties. The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.

### Procedure

The Senior Leadership Team along with the Admission Team is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained.
- all relevant staff are made aware of a child's condition.
- cover arrangements in case of staff absence/turnover is always available.
- cover teachers are briefed as appropriate.
- risk assessments for visits and activities out of the normal timetable are carried out.
- individual healthcare plans are monitored (at least annually).
- transitional arrangements between schools are carried out.
- if a child's needs change, the above measures are adjusted accordingly.

### Expectations

Where children are joining Star Primary at the start of a new academic year, these arrangements should be in place for the start of term. Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan which details the support that the child needs. The school will need to make an online School Health Referral for the child:

[https://newham-self.achieveservice.com/service/Referral\\_to\\_School\\_Health\\_Service\\_and\\_Young\\_Carers\\_Service](https://newham-self.achieveservice.com/service/Referral_to_School_Health_Service_and_Young_Carers_Service).

If the parents, healthcare professionals and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept on the school's medical record.

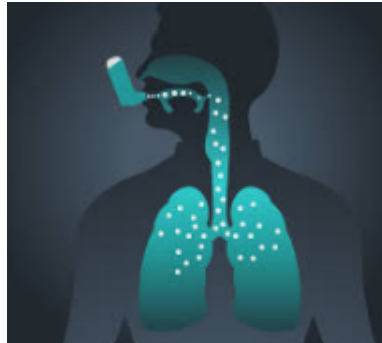
## Healthcare Plans (IHPs)

The following information should be considered when writing an individual healthcare plan:

- the medical condition, its triggers, signs, symptoms and treatments.
- the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues.
- specific support for the pupil's educational, social and emotional needs.
- the level of support needed including in emergencies.
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements.
- who in school needs to be aware of the child's condition and the support required.
- arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision).
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate.
- confidentiality.
- what to do if a child refuses to take medicine or carry out a necessary procedure.
- what to do in an emergency, who to contact and contingency arrangements.
- where a child has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan.



## Asthma Care at Star



### What is Asthma?

Asthma is a condition of the air passages - the small tubes that carry air in and out of the lungs. When a child or young person comes into contact with an asthma trigger the muscles around the small air passages tighten and the linings of the air passages become inflamed and irritated, making it difficult to breathe. Often thick sticky mucus is produced. Children and young people with asthma may have airways that are almost always sensitive and easily irritated. Individual children are affected by asthma in different ways. Some children may have very occasional symptoms such as coughing, shortness of breath or a feeling of tightness in the chest, whereas others may suffer these symptoms more frequently and some may even have symptoms every day (or night). Children and young people with asthma that is not under control may cough at night which interrupts their sleep and can make them tired during the school day.

### What is an Asthma Trigger?

A trigger is anything that irritates the airways and leads to asthma symptoms. There are many triggers and people may have different triggers because nobody's asthma is the same.

**Some common triggers are:-**

- Viral infections
- Dust (house dust mite)
- Pollen and moulds
- Smoking (including second hand tobacco smoke)
- Furry and feathery animals
- Exercise
- Pollution
- Emotion (laughter, excitement, stress)
- Chemicals and fumes/perfumes
- Changes in temperature

### **Supporting Students with Asthma at Star:**

At school most children will only need to take their inhaled medication. Children with Asthma medication at school have their own named reliever inhaler which is prescribed by their doctor or asthma nurse (with a prescribing qualification). Children with Asthma have inhalers either on them or nearby at all times to readily access.

Parents are required to complete the online School Asthma Card for their child outlining their medication, care and management of Asthma while at school.

### **Spare Inhalers:**

Star holds a spare salbutamol inhaler for emergency use, provided that parental consent has been given for its use in an emergency, should the child's own inhaler not be available.

### **Asthma Medication:**

#### **Blue Reliever Inhaler**

The most common asthma medications seen in school are blue reliever asthma inhalers, used by the majority of pupils. Blue reliever inhalers give immediate relief from asthma symptoms by dilating the small airways, opening up the air passages and making it easier to breathe.

#### **Brown Preventative Inhaler**

Not everyone with asthma will be prescribed preventer medicine. This protective effect builds up over a period of time so they need to be taken every day (usually morning and evening) even when you are feeling well, so pupils would normally take this at home. Preventers do not give immediate or quick relief when you are breathless but instead they reduce long-term inflammation. Preventer inhalers usually contain a low dose of steroid medicine. Preventers are usually brown, red or orange inhalers.

If students or pupils do not have their emergency reliever inhaler to hand the chances of a medical emergency developing increase. **Inhalers must therefore be readily accessible at all times.** Children's inhalers are kept inside the classroom in a clear, labeled container.

Inhalers should also be rapidly accessible to students when they are doing P.E or other activities which might trigger an attack.

**The spare inhaler is kept in the main school office in case of emergencies or in case the school is evacuated.**

### **How Star will manage a child having an Asthma Attack:**

At Star, First Aid trained Staff have up to date training in Asthma Care at School.

#### **The child or young person may be:-**

- Coughing
- Short of breath
- Wheezing

- Complaining of a tight feeling in the chest
- Unusually quiet
- Having difficulty speaking/completing sentences
- Complaining of tummy ache (younger children)

#### **What Staff at Star will do:-**

1. Keep calm and reassure the child
2. Encourage the child to sit up
3. Make sure the child takes two puffs of their reliever inhaler immediately (preferably through their spacer )
4. If there is no immediate improvement continue to give them two puffs of reliever inhaler (one puff at a time, remembering to shake between puffs)
5. If they don't feel better after taking their inhaler as above call 999 for assistance
6. If an ambulance does not arrive within 10 Minutes – Repeat Step 3 and 4

After a minor Asthma attack If the child or young person feels better after taking their reliever inhaler their normal activities should continue. The parent/carers will always be informed if their child has had an asthma attack or has been asking for their inhaler more than usual.

In the event of a child having an Asthma attack the supporting member of staff will bring the inhaler to child not the child to the inhaler. The child must not be unsupervised or sent away. *In an emergency school staff are required under the common law, duty of care to act as any reasonably prudent parent. The school must contact parents or carers immediately after contacting 999.*

#### **Participation in School Activities**

The DfE advises that children with asthma should participate in all aspects of the school day, including physical activities and FIT Friday. Having asthma should not normally prevent the sufferer from taking part in sports and games. Some children may need to take their reliever medicines before any physical exertion. Warm-up activities are essential before any sudden activity especially in cold weather. Particular care may be necessary in cold or wet weather.

Children who feel unwell should never be compelled to take part in physical activities. In all cases where a child's condition appears to be adversely affecting their school work, the issue should be discussed with the child's parents. It should be made clear that asthmatic children need to take their reliever inhaler with them on all out of school activities, whatever activities are involved. Staff are required to take the spare inhaler with them on any school trip or visit. Pupils on residential trips may need to bring their brown preventative inhaler.

#### **DfE Guidance on Asthma Care at School**

'Supporting pupils at school with medical conditions' is available at:  
<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medicalconditions--3>

Department of Health Guidance on the use of Emergency Salbutamol Inhalers in Schools can be found at:  
<https://www.gov.uk/government/publications/emergency-asthma-inhalersfor-use-in-schools>

*Parents are encouraged to contact the Asthma UK Adviceline on 0300 222 5800 if they have any concerns or questions about their child's Asthma Management. Asthma UK is staffed by fully trained nurses from Monday to Friday 9.00am to 5.00pm.*

## Roles and Responsibilities

### Article 3 (best interests of the child)

The best interests of the child must be a top priority in all decisions and actions that affect children.

### Article 12 (respect for the views of the child)

Every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously. This right applies at all times, for example during immigration proceedings, housing decisions or the child's day-to-day home life.

### Article 5 (parental guidance and a child's evolving capacities)

Governments must respect the rights and responsibilities of parents and carers to provide guidance and direction to their child as they grow up, so that they fully enjoy their rights. This must be done in a way that recognises the child's increasing capacity to make their own choices.

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

#### **The Governing Body must:**

- make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented.
- must ensure sufficient staff receive suitable training and are competent to support children with medical conditions.
- must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

#### **The Head Teacher:**

- should ensure all staff are aware of this policy and understand their role in its implementation.
- should ensure all staff who need to know are informed of a child's condition.
- should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured.
- is responsible for the development of IHPs.
- should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse

#### **School Staff:**

- any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions.
- any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- prior to administering medicine staff check to ensure it is prescribed; it is for the correct child; the specified dosage and the expiry date.

- check the expiry dates of asthma pumps/creams/epi-pens etc. stored in the office on a monthly basis and alert parents when replacements are needed

### **School Nurses:**

- are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school.
- may support staff on implementing a child's IHP and provide advice and liaison.
- may write care plans in partnership with parents e.g asthma
- may attend professionals' meetings and EHCP/Annual Review meetings at request of SENDCo

### **Other 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 into 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 has regular reviews about their condition with their doctor or specialist healthcare professional
- Ensure their child has a written plan from their doctor or specialist healthcare professional to help their child manage their condition.
- Complete the school Asthma Card Online.



\* The term 'parent' implies any person or body with parental responsibility such as foster parent, carer, guardian or local authority. The DfE guidance 2014 lists the following unacceptable practices. This Guidance notes these issues and notes that it is important that there is a dialogue between school and parents so that the parent feels confident in the process.

**The following protocols are considered good practice:**

- allowing children to easily access their medication and administering it when and where necessary.
- acknowledging that children with the same condition may require different treatment.
- taking into account the views of the child, their parents and medical advice or opinion.
- enabling children with medical conditions to stay in school for normal school activities (unless specified in IHP).
- understanding that children's medical conditions recognised under this policy may impact on their attendance record.
- encouraging children to drink, eat or take toilet breaks whenever they need to in order to manage their medical condition effectively.
- ensuring that parents are aware that staff have been trained to administer medication or provide medical support to their child, including toileting issues.
- supporting children to participate in any aspect of school life, including school visits.
- detailed reporting and recording procedures are in place, (see appendices).

**Staff awareness & training :**

- Staff are aware of the most common serious medical conditions at this school and they 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
- Staff are aware that there is no legal or contractual duty to administer medication, or supervise a pupil taking medication, unless they have been specifically contracted to do so
- Staff who work with groups of pupils at this school receive training and know what to do for the pupils in their care with medical conditions.
- Training is refreshed for all staff at least once a year

**Complaints**

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Other policies dealing with the treatment of children with medical conditions include:

Equal Opportunities Policy  
Equalities Duty Policy  
Inclusion Policy  
Positive Handling Policy  
Teaching and Learning Policy  
Vulnerable Children Policy  
Anti-Bullying Policy  
Child Protection Policy  
Health and Safety  
Staff Handbook (medicine in school)  
Complaints Procedure  
Intimate Care

## Appendix A: Individual Healthcare Plan

Name of school/setting				
Child's name				
Group/class/form				
Date of birth				
Child's address				
Medical diagnosis or condition				
Date				
Review date				
<b>Family Contact Information</b>				
Name				
Phoqne no. (work)				
(home)				
(mobile)				
Name				
Relationship to child				
Phone no. (work)				
(home)				
(mobile)				
<b>Clinic/Hospital Contact</b>				
Name				
Phone no.				
<b>G.P.</b>				
Name				
Phone no.				

Who is responsible for providing support in school	
----------------------------------------------------	--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

--



Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

**Permission to administer medicines**

Child's name: \_\_\_\_\_ Class: \_\_\_\_\_ Date: \_\_\_\_\_

My child has been suffering from: \_\_\_\_\_ but is now fit and able to attend school.

I give permission for the school first aider \_\_\_\_\_ and in their absence \_\_\_\_\_ to administer prescribed medicine to my child as detailed below:

Name of medicine: \_\_\_\_\_

Dosage: \_\_\_\_\_

On these days: \_\_\_\_\_

Signed (parent): \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

### Record of medicines administered

[illegible]

**Appendix C - Medical Information Notification Form**

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Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date:

ACTION – *Office Use Only*

Updated on SIMS ☐ \_\_\_\_\_ Informed Teacher ☐ \_\_\_\_\_ copy in medical file ☐ copy in pupil ☐

**Appendix D**

# Medication Form

## Record of Medicine administered by an individual child and supervised by an adult.

This form must be completed if a child needs and form of medication whilst at school

Name of child:		
Class:		
Date medicine was provided by parent:		
Name and strength of medicine:		
Dose and frequency of medicine:		
Expiry Date:		
Quantity received:		
Quantity returned:		
Procedure for child taking medicine: <ul style="list-style-type: none"><li>•</li><li>•</li><li>•</li><li>•</li></ul>		
Name of staff member responsible for supervising child taking medicine:	Signature:	Date:
Name of parent:	Signature:	Date:



## Appendix E: record of medicine administered to all children

Name of school/setting	
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Date  
medicine

Child's name  
of staff

Time

Name of

Dose given

Any reactions

Signature

Print name


## Appendix F: Medical Information Booklet

This document is regularly updated and contains confidential information

By order of the Governing Body of Star Primary School

(Signed) \_\_\_\_\_ Dated \_\_\_\_\_  
(Head Teacher)

(Signed) \_\_\_\_\_ Dated \_\_\_\_\_  
(Governor)

Policy Date: September 2022

Review Date: September 2023