

Part 1

Name of policy	P14 Supporting pupils with medical conditions
Status of policy	This is a statutory policy
Consultation	This policy has been developed following consultation with parents, School Nurses, Lead First Aider, Staff, Senior Leadership Team and Pastoral Governors.
Relationship with other policies	This policy should be read in conjunction with: B1 Health and Safety policy C2 Educational Visits policy P4 Safeguarding & Child Protection Policy P8 Drugs policy P10 Complaints policy Health and Safety (First Aid) Regulations 1981
Date policy was agreed	15 th May 2023
Date for full implementation	Immediate
Date for review	Every three years – May 2026
Updates made:	Inclusion of Head Injury procedure – Annex A (Approved 5 th March 2024)

Part 2

Policy

1. The Governing Body is committed to ensuring the welfare of all members of the school community.
2. The Governing Body will follow 'Managing medicines in Schools & Early Years Settings' Department of Health guidance 2005 (Updated 2017) to ensure students have medication as prescribed in order to maintain normal attendance and performance at school. However, the Governing Body notes that there is no legal duty to require schools to administer medicines and therefore individual cases will be at the Headteacher's discretion.
3. The Headteacher will ensure that all staff understand the importance of recognising the health needs of students.
4. The Headteacher will ensure that managing medicine procedures are written in consultation with the Lead First Aider.
5. The Headteacher will ensure that all staff who administer medicines have appropriate training.
6. The Headteacher will ensure that procedures for administering medication and treatment will be with parental agreement. As such, members of staff will only manage and administer medicines in line with the expressed approval (written or verbal) of parents/carers and in accordance with the dosage and frequency instructions from a legitimate prescriber.
7. Parents and carers hold the prime responsibility for their child's health; the Headteacher is not in a position to take responsibility for any decisions regarding a student's health, other than to follow the instructions of the emergency services in terms of determining if a student requires referral to hospital following an accident.
8. Students will only bring medicines onto the school site when essential; that is where it would be detrimental to a student's health if the medicine were not administered during the school day. No student may self-administer medicines while on the school site apart from emergency medication e.g. asthma inhalers.
9. The Lead First Aider will accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist. Medicines will always be provided in the original container where practicable as dispensed by a pharmacist and include the prescriber's instructions for administration. The Lead First Aider will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosage on parental instructions. The Lead First Aider will accept non-prescription medication with parental consent.
10. Any member of staff with the permission of the Headteacher may administer a controlled drug for whom it has been prescribed. Staff administering medicine should

do so in accordance with the prescriber's instructions and appropriate to their level of training and expertise.

11. All matters regarding health and welfare of students will follow confidentiality protocols.
12. There is a legal duty for schools to support pupils with complex medical conditions. Following the Department of Health guidance 2014. (Current)
13. Edgbarrow School is an inclusive community that aims to support pupils with complex medical conditions at enrolment or when a diagnosis is first communicated to the school.
14. Pupils with complex medical conditions are encouraged to take control of their condition with support.
15. This school understands that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.
16. Edgbarrow School will keep health care plans for pupils with complex medical conditions.
17. Staff will receive training/information about the most common medical conditions (Asthma, Anaphylaxis and Epilepsy). All staff receive safeguarding induction training upon joining the school. This training includes what the school policy is on supporting pupils with medical conditions, where it can be found and how to respond in an emergency.
18. The school, healthcare professional and parent will agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the Headteacher is best placed to take the final view.
19. Where a child has Special Educational Needs (SEN) but does not have a statement or an Education, Health and Care (EHC) plan, their special educational needs will be mentioned on their HCP.
20. Where the child has an SEN statement, or an EHC plan, the HCP will be linked to or will become part of that statement or plan.
21. Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), Edgbarrow School will ensure that the Healthcare Plan identifies the support the child will need to reintegrate effectively.
22. There is a defibrillator installed at Edgbarrow School, for school and community use.
23. The Head Injury Policy is incorporated as Annex A: **Head Injury Policy** of this policy.

Monitoring and Evaluation

24. The Governing Body will appoint a Link Governor who will meet with the Lead First Aider and ensure that the following statutory requirements are being met:

i) Staff training and support

Governing bodies should ensure that the school's policy sets out clearly how staff will be supported in carrying out their role to support pupils with medical conditions, and how this will be reviewed. This should specify how training needs are assessed, and how and by whom training will be commissioned and provided.

The school's policy should be clear that any member of school staff providing support to a pupil with medical needs should have received suitable training.

ii) Record keeping

Governing bodies should ensure that written records are kept of all medicines administered to children.

iii) Complaints

Governing bodies should ensure that the school's policy sets out how complaints concerning the support provided to pupils with medical conditions may be made and will be handled.

The Link Governor prepare a written report for circulation to the Governing Body.

Annex A: Head Injury Policy

Introduction

The National Institute for Health and Clinical Excellence (NICE) defines a head injury as any trauma to the head other than superficial injuries on the surface of the face.

Knocks to the head are common in school and can be broken into two categories, minor and major.

Concussion is defined as a traumatically induced brain injury caused by a blow, bump or jolt to the head that can cause temporary loss of normal brain function.

If you are concerned that someone has suffered a head injury whilst in school, please ensure that they are seen by a first aider. If in doubt, sit them out. Help is always available in school

If the person is unconscious due to a head injury please call 999.

Part One

All head injuries in school should be assessed by a first aider.

Serious Head Injury

- Unconscious or reduced consciousness (can't keep eyes open)
- Clear fluid from either or both ears and nose
- Bleeding from either or both ears
- Any sign of skull damage or penetrating injury
- The person has had previous brain surgery
- A forceful blow to the head at speed (i.e. from a height of 1m or more)
- The person is intoxicated by drugs or alcohol
- Any safeguarding concerns (e.g. non-accidental)

If you are concerned by any of the above please call an ambulance or take person (if safe) immediately to A&E

Ongoing symptoms of concussion to be aware of

- Problems understanding, speaking, reading or writing
- Change in eyesight
- General weakness
- Loss of feeling in part of the body or problems with balancing and walking.
- Seizure/convulsions
- Problems with memory surrounding the events either before after the injury.
- Vomiting
- Increased drowsiness
- Irritability or altered behaviour
- A headache that won't go away

Process in school

- **If serious head injury, call ambulance immediately and inform parents.**

If conscious:

- Inform first aider/bring to medical if they are safe and able to move.
- Treat head injury.
- Watch for signs of concussion.
- Inform parents that they have had a head injury.
- If the child is deemed well enough to return to class, send e-mail to teachers in the classes that the children have remaining to inform them they have had a head injury.
- Do CPOMS to alert of head injury.

See Part Six for Flow Chart

Part Two

Policy

1. The Governing Body is committed to ensuring the welfare of all members of the school community.
2. This policy is based on guidelines produced by the National Institute for Health and Care Excellence (May 2023)
3. The aim of this policy is to ensure all staff have a clear understanding of the procedure to follow should someone sustain a head injury.
4. This policy is for staff, parents, guardians and students of Edgbarrow School.
5. All head injuries should be taken seriously to safeguard the health and welfare of children and young people.
6. The Governing Body will appoint a Link Governor who will meet with the Lead First Aider and ensure that the statutory requirements are being met.

Part Three

Record Keeping

- a. All records of head injuries will be recorded on the medical spreadsheet and CPOMS.
- b. Parents/carers must notify the school if pupils return to school following concussion. They must all provide any paperwork/advice given by health care professionals if they have been seen.
- c. If parents have been advised that it is a staggered return then they are responsible for informing the head of year and form tutor who can let teachers know.

Part Four



Head Injury Advice*

(To be given to pupils for them to read and take home)

One should seek immediate medical attention if they have developed any of the following since the injury happened:

- Problems understanding, speaking, reading or writing
- Loss of feeling in part of the body or problems with balancing or walking
- General weakness
- Changes in eyesight
- Seizure (also known as a convulsion or fit)
- Problems with memory of events before or after the injury
- Persistent headache that won't go away
- Any vomiting
- Increasing drowsiness (some is to be expected).
- Irritability or altered behaviour such as being easily distracted, not themselves, no concentration, or no interest in things around them.

If you have any concerns call 111 for further advice.

***As per National Institute for Health and Care Excellence**

Part Five

Dear all,

Please be aware that NAME has visited the medical room today with a head injury. They have been reviewed and are well enough to return to class at this point. They have been given the below advice to take with them. Please alert myself or a first aider if you have any concerns.

- Problems understanding, speaking, reading or writing
- Loss of feeling in part of the body or problems with balancing or walking
- General weakness
- Changes in eyesight
- Seizure (also known as a convulsion or fit)
- Problems with memory of events before or after the injury
- Persistent headache that won't go away
- Any vomiting
- Increasing drowsiness (some is to be expected).
- Irritability or altered behaviour such as being easily distracted, not themselves, no concentration, or no interest in things around them.

Kind regards,

Keely

Keely Benn BSc Hons
Lead First Aid

Part Six

TREATING A HEAD INJURY IN SCHOOL

Is the person showing signs of a serious head injury as defined below:

- Unconscious or reduced consciousness (can't keep eyes open), clear fluid from either or both ears and nose
- Bleeding from either or both ears
- Any sign of skull damage or penetrating injury
- The person has had previous brain surgery
- A forceful blow to the head at speed (i.e. from a height of 1m or more)
- The person is intoxicated by drugs or alcohol



No:

- If safe, call for a first aider or ensure they are accompanied to the medical room.
- Assess for signs of concussion.
- Treat injury e.g. ice pack.
- Inform parents.
- Do a CPOMS to ensure it is recorded.
- Give the patient a head injury advice form so that they are aware of signs of concussion (Appendix 1).

**YES – CALL AN AMBULANCE
ON 999 AND INFORM
PARENTS**

Concussion

- Problems understanding, speaking, reading or writing
- Change in eyesight
- General weakness
- Loss of feeling in part of the body or problems with balancing and walking.
- Seizure/convulsions
- Problems with memory surrounding the events either before after the injury.
- Vomiting
- Increased drowsiness
- Irritability or altered behaviour
- A headache that won't go away

If returning to class:

- Inform all teachers in their remaining lessons that they have had a head injury in school (Appendix 2) in case of delayed onset of concussion.

If concerned:

- Call parents to collect and ask them to take home for further observation or to be seen at A & E.