



STUDENT MEDICAL EMERGENCY POLICY

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Review Date: September 2023

Next Review Date: September 2024

Policy Statement

At REACH Learning Provision, we believe that ensuring the health and welfare of staff, students and visitors is essential to the success of the Provision. We are committed to:

- Providing adequate provision for first aid for students, staff, and visitors.
- Ensuring that students with medical needs are fully supported at the academy.

Procedures for administering medicines and providing first aid are in place and are reviewed regularly.

We will ensure all staff (including supply staff and volunteers) are aware of this policy and that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans.

We will also make sure that the academy is appropriately insured, and that staff are aware that they are insured to support students in this way. In the event of illness, a staff member will accompany the student to the medical room. Parent(s), carer(s) and the student's home school will be made of this as soon as possible.

In order to manage their medical condition effectively, REACH Learning Provision will not prevent students from eating, drinking, or taking breaks whenever they need to.

Students with Special Medical Needs – Individual Healthcare Plans

Some students have medical conditions that, if not properly managed, could limit their access to education. These children may be:

- Epileptic
- Asthmatic
- Have severe allergies, which may result in anaphylactic shock
- Diabetic

Such students are regarded as having medical needs. Most children with medical needs are able to attend REACH Learning Provision regularly and, with support, can take part in most Provision activities, unless evidence from a clinician/GP states that this is not possible.

An individual health care plan will help REACH to identify the necessary safety measures to support students with medical needs and ensure that they are not put at risk. REACH Learning Provision appreciates that students with the same medical condition do not necessarily require the same treatment.

Parent(s)/carer(s) have prime responsibility for their child's health and should provide the Provision with information about their child's medical condition. Parent(s)/carer(s) and the student if they are mature enough, should give as many details as possible of their condition to the Provision so that we can write up

their individual medical plan and distribute this to all staff and volunteers in the building.

General Principles

REACH Learning Provision employees have neither a legal nor contractual duty to administer medicines or provide health treatment.

Provision can dispense medicines for pupils to self-administer, provided the procedures in this policy are followed fully. However, these measures must not discriminate and must promote the good health of children. Legal responsibilities under The Health and Safety at work act remain those of the employer. Employees have a responsibility to:

- take reasonable care of their own and others' health and safety
- cooperate with their employers
- carry out activities in accordance with training and instructions
- inform the employer of any perceived risks.

Procedures for managing prescription medicines

- REACH holds confidential information on pupils' health which will be updated regularly. This information remains the responsibility of the parent(s)/carer(s).
- The child's own doctor is the person best placed to advise whether a child should or should not attend the Provision.
- REACH will consider requests made by parents in respect of the self-administration of medicines when:
 - A child suffers from chronic long- term illnesses / complaints such as asthma, diabetes, or epilepsy.
 - A child is recovering from a short- term illness but requires a course of antibiotics, cough medicines etc.
 - A child regularly needs analgesia, (e.g., for migraine or period pain).
- The request for medicine form must be used whenever a parent(s)/carer(s) wishes medication to be self- administered and must be resubmitted termly.
- The medicine must be brought to REACH by the parent(s)/carer(s) (the child may bring the medication if previously agreed with staff) and must be delivered personally to a member of senior staff. Where the need for medication is long-term, up to a term's supply of medication will be accepted.
- Medicines will be self-administered by the pupil, supervised by a member of REACH staff.
- REACH staff will complete the Administration Log each time medication is supplied to the pupil.
- REACH will not be held responsible for failure to dispense medication – the student should take responsibility for requesting it at the appropriate time.
- All medicines must be clearly labelled with owner's name, dosage, and contents.
- If staff have concerns about the nature of given medication, we reserve the right to refuse their administration. Parent(s)/carer(s) and the students home school will be advised of this immediately and will be consulted on alternative arrangements.

Record Keeping

Administration Logs will be kept on file at REACH Learning Provision for at least 12 months.

Safe storage and return of medicines

Generally non-emergency medication should be stored in a locked cupboard, accessible only by staff, preferably in a cool place.

REACH will consult with parent(s)/carer(s) over whether or not asthma inhalers are held by pupils or staff. If held by the pupil, parents will be asked to provide a labelled spare inhaler in case the regular one is lost / broken etc., that will be stored in the locked cupboard.

All emergency medication e.g., inhalers, EpiPen, dextrose tablets and anti-convulsant medication must be readily accessible but stored in a safe location known to the child and relevant staff.

All medicines must be clearly labelled with owner's name, dosage, and contents. Medication should always be kept in the original dispensed containers. Staff should never transfer medicines from original containers.

Medication should be returned to the child's parent/carer whenever:

- The course of treatment is complete
- Labels become detached or unreadable. (NB: Special care should be taken to ensure that the medication is returned to the appropriate parent/carer)
- Instructions are changed
- The expiry date has been reached

In exceptional circumstances, e.g., when a child has left REACH Learning Provision, it can be taken to a community pharmacy for disposal. Medication should not be disposed of in the normal refuse, flushed down the toilet, or washed down the sink.

It is the parent(s)/carer(s) responsibility to replace medication which has been used or expired, at the request of REACH Learning Provision staff.

Emergency Medication

Anyone caring for children has a duty of care to act like any reasonably prudent parent. In exceptional circumstances the duty of care could extend to voluntarily administering medicines and/or acting in an emergency. Staff and volunteers at REACH will be made aware of any pupil with specific medical needs and training put in place for staff who have volunteered to administer emergency medication. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

Analgesics (painkillers) and other non-prescription medicines

REACH Learning Provision staff are not permitted to provide any non-prescription medication to young people, including analgesics, that have not been supplied by the parent(s)/carer(S) with an accompanying request form (see attached).

Young people should not bring any non-prescription medicines to REACH Learning Provision for self-administration without the consent of their parent(s)/carer(s) via a request form.

If a parent(s)/carer(s) wishes their son/daughter to self-administer non-prescription medicines during the Provision teaching day, they should follow the procedure for managing prescription medicines below.

For children who regularly need analgesia (e.g., for migraine), an individual supply of their analgesic can be kept in the school. The use of non-prescribed medicines should normally be limited to a 24hr period and in all cases not exceed 48hrs. If symptoms persist medical advice should be sought by the parent.

NB: Children under 16 should never be given medicines containing aspirin or ibuprofen unless prescribed by a Doctor.

Asthma Guidelines

(Inhalers: Salbutamol, Ventolin, Salamol, Terbutaline, Intal / Cromogen, Becotide, Pulmicort, Flixotide)

- REACH will consult with Parent(s)/carer(s) over whether or not inhalers are held by pupils or staff.
- Inhalers will only be allowed in the premises once parent(s)/carer(s) have completed the administration of medicines form.
- Parent(s) will be asked to provide a labelled spare inhaler in case the regular one is lost / broken etc.
- Parent(s)/carer(s) must advise REACH of inhaler expiry dates.
- Inhalers are only to be used by / for the pupil for whom they are prescribed.

Nebulisers

Some children need to use an electric device called a nebuliser. In such cases, they will only be allowed following liaison with parent(s)/carer(s) and REACH Staff.

Art

Some art materials may cause difficulty for asthmatic pupils. Staff should be aware of this.

EpiPen guidelines:

Some pupils may suffer anaphylactic shock through a severe and sudden reaction to insect bites, nut allergy etc. Staff will be made aware of any young person who requires an EpiPen and how and when it would be administered. When necessary, training will be provided to staff members.

First aid guidelines

The First Aid responsible person should be consulted in cases of first aid. In all cases of the administration of first aid, parent(s)/carer(s) should be informed at the end of the day. In more serious cases, parent(s)/carer(s) should be contacted immediately and advised of the need to take the child to a doctor.

The students home school will also be notified of any first aid incidents. In emergency cases, an ambulance should be called and the parent(s)/carer(s) and students home school, informed immediately.

A member of REACH staff cannot give permission for any treatment at a hospital casualty department (blood transfusions etc.)

Further information is available in the First Aid Policy. Young people with known medical conditions (including allergies) will be identified in the medical alert booklet available in the staff room and main office.

Miscellaneous

The following will not be administered by REACH staff:

- Diabetes injections
- Cystic fibrosis chest massage
- Tracheotomy procedures
- Catheterisation
- Rectal valium insertion
- Other invasive procedure

PARENT/CARER REQUEST FOR USE OF MEDICINE

STUDENT'S NAME			
Name of medicine			
Time of dose(s)			
Dose amount			
Start date		Finish date:	
Any special instructions? (e.g., take with food)			
Any expected side effects REACH staff should to know about?			
Is this medicine prescribed by a doctor?		Yes / No <i>(delete as appropriate)</i>	
If 'Yes', please provide the doctor's name and contact telephone number			

Parent(s) / Carer(s) Declaration

I understand that:

- The above medicine must be delivered to the Provision personally
- The responsibility for this medication remains mine and I will advise the Provision of changes to the information given
- My son/daughter will self-administer this medicine under the supervision of REACH staff
- REACH is under no obligation to administer medicines
- This form must be fully completed and resubmitted termly if medicine is to be allowed.

Signed:		Print name:	
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To be completed by REACH Learning Provision staff:

<i>Medicine and completed form received by:</i>	<i>(name)</i>	<i>(date)</i>
<i>Name of staff responsible for carrying out this request:</i>		

ADMINISTRATION LOG

To be completed by REACH staff each time requested medication is provided to pupil for self- administration.

Name of young person	
Name of medication	
Medication expiry date	

Date	Time	Dose	Signature	Comments

Parent/Carer Request Forms and Administration Logs must be kept in the REACH for at least 12 months.