NYES | Health and Safety

The Carlton & Faceby and Bilsdale CE Federation

School Medical Policy

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Adopted by	Governing Body Signed: John Ford (Chair of Governors)
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OFFICIAL - SENSITIVE

NYES | Health and Safety

SCHOOL MEDICAL POLICY

The Carlton & Faceby and Bilsdale CE Federation

General Statement

Our school welcomes and supports children and young people (CYP) with medical and health conditions. We aim to include all CYP with medical conditions in all school activities, including off site visits, differentiated as appropriate. We recognise that some medical conditions may be defined as disabilities and consequently come under the Equalities Act 2010.

In addition to this school policy, we also use the more detailed North Yorkshire 'Procedures for Supporting Children & Young People with Medical Conditions August 2021'

Aims

This policy aims to ensure that:

- Pupils, staff and parent/carers understand how our school will support pupils with medical conditions;
- Pupils with medical conditions are properly supported so that they can:
  - play a full and active role in school
  - remain healthy
  - achieve their academic potential
  - access the same opportunities as other pupils including school trips and sporting activities
- Parent/carers and pupils have confidence in the school's ability to provide effective support for medical conditions in school.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained;
- Making staff aware of pupils' conditions, where appropriate;
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions;
- Providing supply teachers with appropriate information about the policy and relevant pupils;
- Developing and monitoring Individual Health Care Plans (IHCPs).
- Working collaboratively with NYC and Health Services

The named person with responsibility for implementing this policy is Matthew Scott.

Legislation and Statutory Responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance on Supporting Pupils with Medical Conditions at School.

It has been written alongside NYC's Policy and Procedures for supporting children at school with medical conditions and children who cannot attend because of health needs.

Planning Ahead

We have a responsibility to plan ahead for pupils with medical conditions who may enrol for our school in the future and we do this by:

- Having some staff who have the duties of administering medicines and undertaking health care procedures written into their job descriptions.
- Ensuring other staff are aware that they may volunteer to do these duties and that they also have responsibilities in emergency situations.
- Having record keeping procedures in place for administering medication.
- Having storage facilities in place for medication.
- Having identified a suitable area within school for undertaking health care procedures.
- Having suitable toileting facilities for CYP which are clean, safe and pleasant to use.
- Having flexible policies which take into account medical conditions e.g. we do not refuse access to the toilet at any time to any CYP with a medical condition that requires this.
- Appointing a member of staff to be our Named Person for medical needs.
- following the guidance provided by the Local Authority in 'Procedures for Supporting Children & Young People with Medical Conditions' August 2021.

Governing Body Responsibilities

The governing body has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

Head Teacher's Responsibilities

The Headteacher holds overall responsibility for the following but may delegate some of the responsibilities to a named person:

- 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 CYP, school staff, pastoral support/welfare officers, teaching assistants, Health Services, NYC, parent/carers and governors.
- Ensure information held by the school is accurate and up to date and that there are good information sharing systems in place using Individual Health Care plans.
- Ensure CYP confidentiality.
- Make sure all staff are aware of this policy and understand their role in its implementation.
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all Individual Health Care Plans (IHCPs), including in contingency and

emergency situations.

- Ensure that all staff who need to know are aware of a child's condition.
- Take overall responsibility for the development and monitoring of IHCPs.
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- Contact the Growing Healthy 0-19 Service for advice, consultation and support for children and families with Emotional Health and Resilience needs.
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.
- Ensure absences due to medical needs are monitored and alternative arrangements for continuing education are in place.
- Check medication held in school for expiry dates and dispose of accordingly.
- Inform parents/carers when supply of medicine needs replenishing / disposing.
- Quality assure record keeping.
- Work together to quality assure staff competency in specific procedures.
- Regularly remind staff of the school medical policy and procedures.
- Where a CYP is open to the MES the head teacher will:
  - Identify a named school contact to liaise directly with the MES.
  - Ensure the named contact arranges regular Pupil Reintegration Education Plan (PREP) meetings in a timely way.
  - Ensure the CYP's teachers liaise directly with the MES and share appropriate resources (laptop/schemes of work/lesson plans etc) prior to provision from the MES starting.
  - Arrange an appropriate space in school for the CYP to have provision from the MES.
  - Ensure school is in regular contact with the CYP and parent/carer.
  - Maintain safeguarding responsibility and identify the Designated Safeguarding Lead (DSL).
  - Enter the CYP for exams and arrange access and invigilation arrangements.
  - Make arrangements for EHCARs and EHCP Reviews where appropriate.
  - Facilitate career interviews.
  - Be active in the monitoring of progress and the reintegration into school, using key staff to facilitate the reintegration into school.
  - Support transitions.

School Staff Responsibilities

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

All staff 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 and implement the medical policy.
- Know which CYP in their care have a medical condition.
- Allow all CYP to have immediate access to their emergency medication.
- Maintain effective communication with parents/carers including informing them if their child has been unwell at school.
- Ensure CYP who carry their medication with them have it when they go on a school trip or out of the classroom e.g. to the field for PE.
- Be aware of CYP with medical conditions who may be experiencing bullying or need extra social support.
- Ensure all CYP with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- Ensure CYP have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

Teaching Staff Responsibilities

Teachers at this school have a responsibility to:

- Ensure CYP who have been unwell catch up on missed school work.
- Be aware that medical conditions can affect a CYP's learning and provide extra help when needed.
- Liaise with parent/carers, healthcare professionals and special educational needs co-ordinator if a CYP is falling behind with their work because of their condition.
- If a child is open to the Medical Education Service (MES) the CYPS's teachers will:
  - Liaise directly with the MES.
  - Share schemes of work, lessons plans and resources with the MES in a timely manner prior to the provision starting.
  - Moderate and standardise work completed by the CYP at least once a term.

First Aiders Responsibilities

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 within the school.
- When necessary, ensure that an ambulance or other professional medical help is called.
- Check the contents of first aid kits and replenish as necessary.

We have trained first aiders on site at all times throughout the school day who are aware of the most common serious medical conditions at this school. All PE teachers are first aid trained. Training is refreshed bi-annually.

School Educational Needs Co-Ordinator Responsibilities

The SEN Co-Ordinator has a responsibility to:

- Help update the school's medical condition policy.
- Know which CYP have a medical condition and which have special educational needs because of their condition.

- Ensure teachers make the necessary arrangements if a CYP needs special consideration or access arrangements in exams or coursework.
- Where a child has SEN but does not have an EHCP, ensure their SEN is mentioned in their IHCP.
- Where the child has a SEN identified in an EHCP, ensure the IHCP is linked to or a part of that EHCP.

CYP Responsibilities

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHCPs. They are also expected to comply with their IHCPs.

Pupils will:

- Treat other CYP with and without a medical condition equally.
- Tell their parent/carers, teacher or nearest staff member when they or another CYP is not feeling well. We remind all CYP of this on an annual basis.
- Treat all medication with respect.
- Know how to gain access to their medication (includes emergency medication).
- Ensure a member of staff is called in an emergency situation.

Parent/Carer Responsibilities

Parent/carers are expected to support their child by:

- Telling school if their child has / develops a medical condition.
- Immediately informing the school office in writing if there are any changes to their child's condition or medication.
- Ensuring that they/ their emergency representative is contactable at all times.
- Administering medication out of school hours wherever possible.
- Undertaking health care procedures out of school hours wherever possible.
- Ensuring they supply school with correctly labelled in date medication.
- Completing the necessary paperwork e.g. request for administration of medication.
- Collecting any out of date or unused medicine from school for disposal.
- Keeping their child at home if they are not well enough to attend school / infectious to other people.
- Ensuring their child catches up on any school work they have missed.
- Ensuring their child has regular reviews about their condition with their doctor or specialist healthcare professional.
- Being involved in the development and review of their child's IHCP and may be involved in its drafting.
- Carrying out any action they have agreed to as part of the implementation of the IHCP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.

Parent/carers who do not provide this support should be aware that we may not be able to fully support their CYP's medical condition in school.

Equal Opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parent/carers and any relevant healthcare professionals will be consulted.

Procedure To Be Followed When School Is Notified That A CYP Has A Medical Condition

Notification of a CYPs medical condition may come via a number of routes e.g. by parent/carers, Healthy Child nurse, admission forms etc.

Whatever the route the Headteacher / named person must be informed as soon as possible.

They must then:

- Seek further information about the condition.
- Determine with the support of parent/carers and relevant health professional whether an Individual Healthcare Plan is required.
- Identify any medication / health care procedures needed.
- Identify any aspects of a CYPs care they can manage themselves.
- Identify which staff will be involved in supporting the CYP.
- Identify what, if any, training is needed, who will provide this and when.
- Identify which staff need to know the details of the CYPs medical condition and inform them as appropriate.
- Ensure parent/carers written permission is received for any administration of medication

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

Individual Health Care Plans

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHCP. NB Please note that the IHCP would normally cover everything that would be covered in a Risk Assessment so it is unlikely that a separate risk assessment would be required.

The Headteacher has overall responsibility for the development of IHCPs for pupils with medical conditions.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Plans will be kept according to NYC guidance and the requirements of the UK GDPR.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done;
- When;
- By whom.

Not all pupils with a medical condition will require an IHCP. It will be agreed with a Health care professional and the parent/carers when an IHCP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Headteacher will make the final decision. Any decisions made and the reasons for them must be adequately recorded and the information shared with parent/carers unless there is a safeguarding concern.

Plans will be drawn up in partnership with the school, parent/carers and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any Education, Health and Care plan (EHCP). If a pupil has SEN but does not have an EHCP, the SEN will be mentioned in the IHCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the headteacher will consider the following when deciding what information to record on IHCPs:

- The medical condition, its triggers, signs, symptoms and treatments;
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons;
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring;
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the pupil's condition and the support required;
- Arrangements for written permission from parent/carers and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments;
- Where confidentiality issues are raised by the parent/carer/pupil, the designated individuals to be entrusted with information about the pupil's condition;
- What to do in an emergency, including who to contact, and contingency arrangements.

We send completed and signed Individual Health Care Plans electronically to insurance@northyorks.gov.uk this includes Individual Health Care plans detailed using the NYC template or any other format.

Administration of Prescribed Medication at School

Wherever possible we allow CYP to carry their own medicines and relevant devices and where CYP self-administer we will provide supervision as appropriate:

- We will only administer medication at school when it is essential to do so and where not to do so would be detrimental to a CYPs health.
- We will only accept medication that has been **prescribed** by a doctor, dentist, nurse prescriber or pharmacist prescriber and are in-date, labelled and provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage.
- The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.
- We will not give **Aspirin** to any CYP under 16 unless it is prescribed.
- We only give medication when we have written parental permission to do so.
- Where appropriate, CYP are encouraged to carry and administer their own medication with a spare being kept at the school office.
- Medication not carried by CYP is stored at the school office.
- Controlled drugs are stored in the locked medicine cabinet.
- CYP who do not carry and administer their own medication know where it is stored and how to readily access it.

Administration of Non-Prescribed Medication at School

Non-prescribed medication can only be administered in a school/setting where it is absolutely essential to the CYP's health and where it cannot be taken out of the schools/settings hours.

- When non-prescribed medicine in administered it must have prior written parental consent form and a record of administration form must be kept.
- The school/setting should ensure they treat the non-prescribed medication the same as if it were prescribed i.e. checking the packaging, expiry date, dosage, administration instructions, correct storage etc.
- Schools/settings should detail in their policy the circumstances in which they agree to administer non prescribed medications.
- Non – prescribed medication should be provided by the parent/carers.

The School will not routinely hold their own stocks of medication.

Administration of Medication – General

All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a CYP taking medication unless they have been specifically contracted to do so or it is in their job description.

For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to pupils but only with a parent/carer's written consent.

Some medicines require staff to receive specific training on how to administer it from a registered health professional.

CYP Who Can Manage Their Own Needs

We encourage all CYP to manage as much of their own needs as is appropriate. The Headteacher / named person will determine after discussion with parent/carers whether a CYP is competent to manage their own medicine and procedures. Where a CYP has been recently diagnosed, or has an additional disability/condition e.g. visual impairment, we support them to gradually take on more of their own care, over time, as appropriate with the aim of them becoming as independent as possible.

We aim for our CYP to feel confident in the support they receive from us to help them do this.

Safe Storage - General

- The Headteacher ensures the correct storage of medication at school.
- The Headteacher / named person ensures the expiry dates for all medication stored at school are checked annually and informs parent/carers by letter in advance of the medication expiring.
- Some medications need to be refrigerated. These are stored in a clearly labelled airtight container in the fridge located in the staff kitchen. This area is inaccessible to unsupervised CYP. Pupils will be informed about where their medicines are at all times and be able to access them immediately.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.
- Medicines will be returned to parent/carers to arrange for safe disposal when no longer required.

Safe Disposal

Parent/carers are asked to collect out of date medication.

If parent/carers do not collect out of date medication, it is taken to a local pharmacy for safe disposal.

Disposal of medication is recorded on the administration of medication record.

School Trips

Staff organising our school trips ensure:

- They plan well in advance.
- They seek information about any medical / health care needs which may require management during a school trip. This is specifically relevant for residential visits when CYP may require medication / procedures that they would not normally require during the daytime.
- That any medication, equipment, health care plans are taken with them and kept appropriately during the trip.
- They do a risk assessment which includes how medical conditions will be managed on the trip. Staff are aware that some CYP may require an individual risk assessment due to the nature of their medical condition.

Unacceptable Practice

School staff use their discretion about individual cases and refer to a CYP's Individual Healthcare Plan, where they have one, however; it is not generally acceptable to:

- Prevent CYP from accessing their inhalers or other medication.
- Assume every CYP with the same condition requires the same treatment.
- Ignore the views of the CYP and their parent/carers.
- Ignore medical evidence or opinion although this may be challenged.
- Send CYP with medical conditions home frequently or prevent them from staying for normal

school activities e.g. lunch unless it is specified in the CYP's Individual Healthcare Plan.

- Send an ill CYP to the school office or medical room without a suitable person to accompany them.
- Penalise CYP for their attendance record if their absences relate to their medical condition e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition.
- Require parent/carers, or otherwise make them feel obliged to come into school to provide medical support to their child, including toileting issues and manual handling issues.
- Prevent CYP from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips e.g. by requiring the parent/carer to accompany the CYP.

Emergencies

We are aware that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood.

We have a procedure in place for dealing with emergencies and all staff know they have a duty to take swift action. The Headteacher / named person ensures that all staff feel confident in knowing what to do in an emergency. Details of how to call an ambulance are kept by the phone at the school office. This procedure is revisited annually at whole school staff meetings.

If a CYP needs to be taken to hospital, an ambulance will be called and, if parent/carers are not available, a member of staff will accompany and school will phone the parent/carers to meet the ambulance at casualty. The member of staff will stay with the CYP until a parent/carer arrives. Health professionals are responsible for any decisions on medical treatment in the absence of a parent/carer.

Staff will not take a CYP to hospital in their own car unless it is an absolute necessity and never unaccompanied.

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHCPs will clearly set out what constitutes an emergency and will explain what to do.

Staff Training

Staff who support CYP with specific medical conditions must receive additional training from a registered health professional. Training requirements are determined via Individual healthcare plans. The Head teacher / named person is responsible for ensuring staff are suitably trained by liaising with the relevant healthcare professional. Any member of staff who is trained but feels unable to carry out these duties competently (for example due to having an injury/condition themselves or due to further training being required) must report this as soon as possible to the Headteacher / named person who will make appropriate arrangements.

The Headteacher / named person keeps a training record and ensures training is refreshed as appropriate. The Headteacher is involved in determining the competency of a member of staff in undertaking specific procedures.

Staff who complete records are shown by the Headteacher / named person how these are to be completed and managed. The Headteacher / named person quality ensures this on an annual basis.

Arrangements for induction of new staff are that the medical policy is provided and discussed at induction.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. In some cases, written instructions from the parent/carer or on the medication container dispensed by the pharmacist is sufficient and the Headteacher / named person will determine this.

Whole School Staff Awareness Training

We aim for all staff to receive basic awareness training in the following more common conditions:

- Asthma,
- Epilepsy,
- Allergic reaction.

This training is delivered by an accredited first aid provider during refresher training (bi-annually).

Record Keeping

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parent/carers will be informed if their pupil has been unwell at school.

The following records are kept in school

Name of record	**Location of record**	**Who completes it**	**Who quality assures it and how often**
Whole school administration of medication record	Medical folder	HT Admin Teaching staff Support staff	HT, annually or when needs change
Individual administration of medication record - for CYP who have frequent and regular medication	Medical folder	HT Admin Teaching staff Support staff	HT, annually
Staff training log – including first aid	**Training folder**	**Admin**	**HT, annually**
School Medical Register	**Medical folder**	**HT**	**HT, annually or as needs change**

All these records will be kept securely and in accordance with NYCs Records Retention and Disposal Schedule and the requirements of the UK GDPR. All electronic records will be password protected.

Enrolment Forms

We ask on our enrolment form if a CYP has any medical /health conditions and again at regular times.

School Medical Register

We keep a centralised register of CYP with medical needs. The Headteacher / named person has responsibility for keeping the register up to date.

Asthma

School staff are aware that, although it is a relatively common condition, asthma can develop into a life-threatening situation.

We have a generic asthma plan in place in school which details how asthma attacks are managed (appendix 1).

CYP who have asthma will not have an Individual Healthcare Plan unless their condition is severe or complicated with further medical conditions.

The Headteacher and Governing body have chosen to keep emergency Salbutamol inhalers and spacers in school for use by CYP who have a diagnosis of asthma and whose parent/carers have given us written permission for their CYP to use it. This would be in rare circumstances where an inhaler has become lost or unusable. Parent/carers are informed by standard letter if their child has used the school's emergency inhaler.

The named person is responsible for managing the stock of the emergency school Salbutamol inhalers.

The emergency salbutamol inhalers will be kept in the locked medical cabinet. Along with a register of CYP whose parent/carers has given permission for these to be used as appropriate.

The Headteacher / named person is responsible for ensuring the emergency inhalers and spacers are washed as necessary

School Defibrillator

As part of our first aid equipment, we have chosen to purchase a defibrillator. We have notified our local NHS ambulance service of this decision and our first aiders are trained in its use. The Headteacher / named person is responsible for checking the unit is kept in good condition. This is done on a weekly basis.

Data Protection

We will only share information about a CYPs medical condition with those staff who have a role to play in supporting that child's needs. In some cases, e.g. allergic reactions it may be appropriate for the whole school to be aware of the needs. In other cases, e.g. toileting issues, only certain staff involved need to be aware. We will ensure we have written parental permission to share any medical information.

Refer to the school's obligations under the UK General Data Protection Regulation (GDPR) and relevant policies.

School Environment

We will ensure that we make reasonable adjustments to be favourable to CYP with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

Physical Environment

We have an accessibility plan which outlines how we aim to develop our facilities and staffing to meet potential future health care needs e.g. improved physical access, improved toilet facilities.

Education and Learning

We ensure that CYP with medical conditions can participate as fully as possible in all aspects of the curriculum and ensure appropriate adjustments and extra support are provided.

Teachers and support staff are made aware of CYP in their care who have been advised to avoid or take special precautions with particular activities.

We ensure teachers and PE staff are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these triggers.

Staff are aware of the potential for CYP with medical conditions to have special educational needs (SEN). The school's SEN coordinator consults the CYP, parent/carers and pupil's healthcare professional to ensure the effect of the CYPs condition on their schoolwork is properly considered.

Home to School Transport

Parent/carers are responsible for informing SEN transport or Integrated Passenger transport if their child has a medical need that they may require assistance with during the journey to and from school.

Dignity and Privacy

At all times we aim to respect the dignity and privacy of all CYP with medical conditions we do this by only sharing information with those who have a role in directly supporting the CYPs needs.

Liability and Indemnity

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The details of the school's insurance policy are:

Our federation subscribes to the DFE's Risk Protection Arrangement (RPA).

NYCs insurance policy can be viewed on NYC intranet. Insurance policies should be accessible to the staff who are providing the support. NYC Liability Insurance does cover staff when undertaking a Health Care procedure. However, if alternative or additional arrangements are required then these will be dealt with by Insurance and Risk Management on an individual case. It is therefore essential that copies of IHCPs are sent to NYC Risk Management and Insurance following parental consent. Due to the numbers of IHCPs, CYPS Insurance and Risk Management will only contact a school if they have a query or if they think additional cover may need to be taken out. If schools require a receipt for their message, they should add a tag for this.

NYC maintained schools must send completed and signed IHCPs electronically to:

InsuranceAndRiskManagement@northyorks.gov.uk

This includes IHCPs detailed using the NYC template or any other format.

In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer.

Complaints

Parent/carers with a complaint about their child's medical condition should discuss these directly with the headteacher in the first instance. If the headteacher cannot resolve the matter, they will direct parent/carers to the school's complaints procedure.
For details on how to make a complaint around medical issues in school please follow our school complaints procedure available from the school office.

Monitoring Arrangements

This policy will be reviewed and approved by the governing board every year.

Distribution of the School Medical Policy

Parent/carers are informed about this school medical policy:

- Via the school's website, where it is available all year round

School staff are informed and reminded about this policy:

- Via online school medical register
- At scheduled medical conditions training / school training days
- Whole school staff meetings

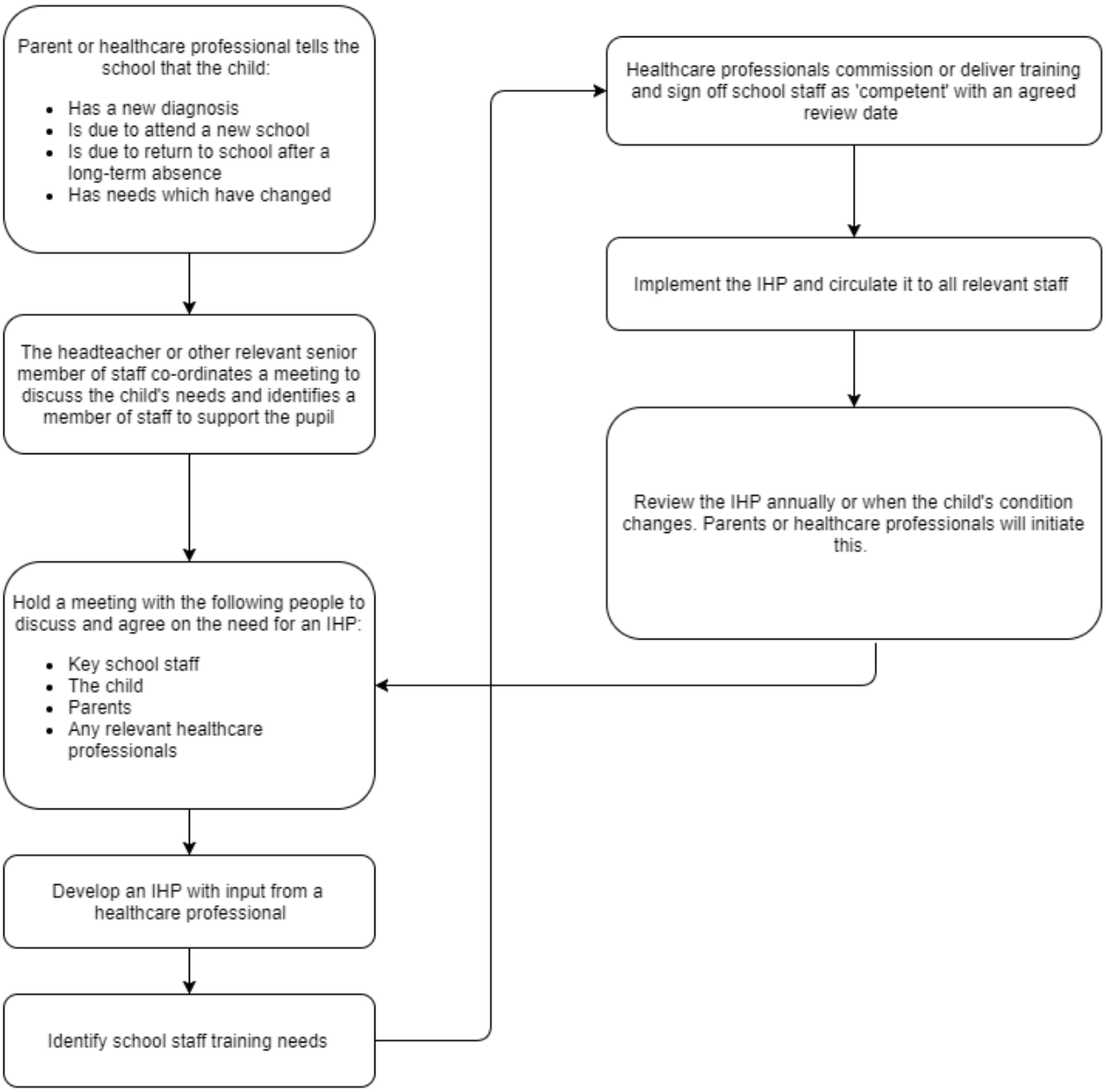
Governing Bodies should review this policy annually

Links to Other Policies

This policy links to the following policies:

First Aid
Supporting pupils with medical conditions
Health and Safety
Child Protection and Safeguarding

Being Notified a CYP has a Medical Condition



OFFICIAL - SENSITIVE

Appendix 1

How asthma attacks are managed

An asthma attack is treated by **opening the airways quickly**, **getting oxygen levels safe**, and **reducing airway inflammation** so the attack does not come straight back.

Recognising an asthma attack

An asthma attack may include:

- Wheezing, coughing, chest tightness or shortness of breath
- Needing the reliever inhaler more than usual
- Reliever not lasting as long as normal
- Difficulty speaking in full sentences
- Breathing becoming fast, hard or frightening
- Peak flow dropping, if the person uses a peak-flow meter

Severe warning signs include being too breathless to talk, walk or eat, blue/grey lips or fingers, exhaustion, confusion, drowsiness, or the reliever inhaler not helping. These need emergency help.

Immediate management: at home, school or work

If using a blue reliever inhaler, usually salbutamol

1. **Sit upright.** Do not lie down.
2. **Stay as calm as possible** and loosen tight clothing.
3. **Use the reliever inhaler with a spacer if available.**
4. Take **1 puff every 30–60 seconds, up to 10 puffs**. Shake the inhaler between puffs.
5. **Call 999** if the person feels worse at any point, is not improving after 10 puffs, or you are worried.
6. If the ambulance has not arrived after 10 minutes and symptoms are not improving, **repeat up to 10 puffs**.

This is the standard UK advice from the NHS and Asthma + Lung UK. (nhs.uk)

If using a MART or AIR inhaler

Some people now use a combined inhaler as both preventer and reliever, often called **MART** or **AIR** treatment. In that case, the emergency instructions are different:

Take **1 puff every 1–3 minutes, up to 6 puffs**, then call 999 if not improving or getting worse. (nhs.uk)

Because inhaler types vary, the person's own asthma plan should state whether they use a blue reliever or MART/AIR inhaler.

When to call 999 immediately

Call 999 if:

- The person is struggling to breathe
- They cannot speak normally
- They are getting worse despite reliever inhaler
- They need more than 10 puffs of blue reliever
- Their lips/fingertips look blue or grey
- They become drowsy, confused, exhausted or floppy
- You do not have their reliever inhaler
- It is a child and you are worried
- This feels different or more severe than usual

Never drive someone to hospital if they are severely breathless and deteriorating; call an ambulance.

After the attack

After symptoms settle, the person should not just carry on as normal. Follow-up is important because the airways can remain inflamed.

Usual aftercare includes:

- Review by GP/asthma nurse, ideally within a few days
- Check inhaler technique
- Check whether preventer treatment needs increasing or changing
- Update the written asthma action plan
- Replace used/empty inhalers
- Identify triggers, such as infection, pollen, smoke, exercise, animals, damp/mould, missed preventer doses, or NSAID painkillers in sensitive people
- Consider whether a spacer is needed

Anyone who has needed emergency treatment, steroids, or an ambulance should have their asthma plan reviewed.

Simple wording for a generic plan

Asthma attack management:

Sit the person upright and keep them calm. Give their reliever inhaler using a spacer if available. For a blue salbutamol inhaler, give 1 puff every 30–60 seconds up to 10 puffs. Call 999 if symptoms worsen, if there is no improvement after 10 puffs, or if there is any concern. If the ambulance has not arrived after 10 minutes and symptoms are not improving, repeat up to 10 puffs. Do not leave the person alone. After any attack, arrange an asthma review.

For MART/AIR inhalers:

Follow the person's own asthma plan. General UK advice is 1 puff every 1–3 minutes up to 6 puffs, then call 999 if not improving or worsening.