



Supporting pupils with medical needs (including asthma) and those who cannot attend school

Review Frequency:	Every two years
Last reviewed:	Oct 22
Agreed by governors:	Dec 22
Next review date:	Oct 24

Trevithick Learning Academy recognises that it has a responsibility to support pupils with medical and mental health needs.

Medical Needs

The Academy follows the Department for Education's guidance on managing medicines in schools and early years settings:-

(https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/484418/supporting-pupils-at-school-with-medical-conditions.pdf)

Responsible Person

Nicola Garge is responsible for ensuring that the arrangements below are effectively implemented and maintained.

Medicine in Academy

Medicines will only be administered at Academy when it would be detrimental to a student's health not to do so. The Academy will store and dispense medication to students as long as:-

- It is prescription medication which has been prescribed by a medical practitioner with written instructions for its use; or
- It is non-prescription medication which has been supplied by the parent/guardian with written instructions for its use; and
- Written parental consent has been given.

The Academy does not keep or dispense any other medication [other than salbutamol for use with the emergency asthma kit (see below)].

Medication brought into the Academy must be clearly labelled with the student's name, dosage, method of administration and be in-date.

Medication will be available to identified students at all times of the day.

Self-Management of Medication

The Academy does not allow students to carry or manage their own medication.

Emergency Asthma Kits

The procedures for managing the use of the emergency asthma kit is based on Department of Health guidance:-

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/350640/guidance_on_use_of_emergency_inhalers_in_schools_September_2014_3.pdf

Staff authorised to dispense this medication have read the above guidance and have been given instruction in the recognition of the symptoms of an asthma attack and the appropriate procedures to follow.

The emergency inhaler contains Salbutamol and will only be available to students who have been

- diagnosed with asthma and prescribed an inhaler OR
- prescribed an inhaler as reliever medication.

In addition parental consent must be obtained for use of the emergency inhaler.

The Academy keeps a register of students who have been diagnosed with asthma or prescribed a reliever inhaler.

The emergency asthma kit will be stored and managed in the same way as any other prescription medication following the procedures above.

Storage of Medicine

Medicines will be securely stored in either the staffroom medicines cupboard or the fridge in the resource room.

All medicines must be signed in in the Medicines Log.

Any medicine given out or administered must be recorded in the Medicines Log.

Medicines can only be given out by members of staff.

Training

The responsible person will ensure that sufficient staff are suitably trained in the administration of medication and support of students with medical needs.

The responsible person will keep a record of all medical needs training.

Sharing of Information

The responsible person will ensure that relevant staff are made aware of any student's medical condition. This information will include, where appropriate:-

- Medical condition
- Side effects of medication
- Signs and symptoms
- Modifications and allowances
- Emergency actions

The responsible person will also ensure that relevant information is shared with cover staff etc.

Individual Healthcare Plans

The responsible person will work with (or identify an appropriate member of staff to work with) healthcare professionals and parent/carers to establish an effective healthcare plans where appropriate.

Healthcare plans will be reviewed if there is reason to suspect that the plan is no longer appropriate and at least annually. A healthcare plan review can be initiated by the Academy, healthcare professional or the parents/carers.

The needs of children with specific medical conditions which require specialist and intimate care as well as adjustments to the fabric of the building are covered by the Academy's Disability Access Plan, the Intimate Care Policy and within Individual Health Care Plans as they are specific to the needs of the individual child.

Risk Assessment

In addition to the healthcare plan the Academy will carry out individual risk assessments for any student where the student's medical needs introduce new risks to an activity or increase existing risks. This will include (but may not be limited to) individual risk assessments for off-site activities, sporting activities and practical lessons.

Risk assessment for off-site activities, in particular, will include consideration of:-

- Access to medication
- Appropriate storage of medication
- Staff training in administration of medication
- Emergency procedures

Unacceptable practice

To prevent unacceptable practice the responsible person will ensure that:

- Students have access to their medication at all times during the school day or during educational activities off-site.
- Healthcare plans reflect the needs of the student and take into account the views of parents/carers and advice of healthcare professionals

- Every effort is made to ensure that students with medical needs are able to stay in school for normal school activities (including lunch) unless there is a specific reason detailed in their healthcare plan not to do so.
- If the student becomes ill; ensure that he/she is accompanied to the school office/medical room by an appropriate person.
- Students with medical needs are not penalised in their attendance record if their absences are related to their medical condition, hospital appointments, etc.
- Toilet, food and drink breaks are provided where necessary in order to manage a student's medical condition.
- Arrangements for administering medication do not include the need for parent/carers to attend unless agreed by the parent, for example with very young children.
- Every effort is made to ensure that students with medical needs are able to take part in every aspect of school life including off-site activities, sporting events and practical lessons.

Complaints

Parents/carers are encouraged to contact Nicky Garge if they are concerned or dissatisfied in any way with the support provided by the Academy for a student with medical needs.

If concerns cannot be resolved in this manner; parents/carers can follow the Academy's complaint procedure.

Care and Management of Asthma

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.

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
- pollen
- furry or feathery animals
- exercise
- emotion (laughter, excitement, stress)
- chemicals and perfumes
- changes in temperature

How do we support students with asthma in school?

We provide whole school training on asthma as regular and annual updates each year. Trained and responsible staff first aiders are given regular updates throughout the year and when individual high-risk cases are known or concerns raised.

At school most children will only need to take their inhaled medication. Every child with asthma should have their own named reliever inhaler in school, prescribed by their doctor or asthma nurse (with a prescribing qualification). Children and young people with asthma should have their inhaler either on them or nearby at all times. Inhalers should never be kept in a locked cupboard or drawer.

In cases of emergency, staff must, of course, always be prepared to help and have a legal duty of care to act as any reasonably prudent parent would.

Spare (salbutamol) Inhalers are kept in the medical cupboard 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. (as advised by the Department of Health) There is no legal or contractual duty upon teaching staff to administer medication as outlined by the Department of Health advice. <https://www.gov.uk/government/publications/emergency-asthma-inhalers-for-use-in-schools>

Asthma Medication and Record Keeping

Most pupils with asthma will use an inhaler to take their medication. There are different types of inhalers- relievers and preventers. The most common reliever typically used in schools is salbutamol; usually a blue inhaler. The use of these within school is only permitted upon completion of the school Asthma Action Plan paperwork (see Appendix A).

Asthma Action Plan

I consent to the use of the emergency inhaler if required to support my child.
Parent/Carer Signature: _____

Name: _____ Date Agreed: _____
Review Date: _____

Known Triggers: _____ Personal Signs/Symptoms: _____

GO

You will see:

- Breathing is good
- No cough or wheeze
- You can work and play

CAUTION

You will see:

Use a preventer inhaler (usually brown)

Medicine	How Much?	How Often/ When?

Use a reliever inhaler (usually blue)

Legend:

- Green means Go Zone! Use preventer medicine
- Yellow means Caution Zone! Add quick-relief medicine
- Red means Alert Zone! Seek Medical Attention

Example of the Asthma Action Plan Document
(to be used for all children identified as asthmatic)

A general asthma log is kept as a record for each child who is registered as asthmatic and has a named inhaler in school. This is filled in by the member of staff who has administered the inhaler. This is used for any child identified as asthmatic with mild/moderate symptoms. For example they might need to have their inhaler administered on an ad-hoc basis dependent on their exposure to a trigger. Mild/Moderate asthma is generally controlled well by the 'preventer' inhaler used at home. Therefore you would not expect to be administering their reliever inhaler more than x3 times a week.

Asthma Medication Log (non-severe)

Please note in severe cases of asthma please use the Care Plan log
***Administering medicine more than x3 times weekly is categorised as chronic

Name of Child: _____

Date	Time	Amount Given	Administered by

Example of the Asthma Medication Log
(to be used for all children identified as having mild/moderate asthma)

In some circumstances, children are identified as having severe/chronic asthma. For example, they might have been previously identified as this from the asthma nurse or GP department. They might have volatile asthma that is sensitive to a wide range of triggers. Typically we would classify a severe/chronic asthma sufferer as anyone who is having to use their reliever inhaler more than x3 a week.

In this instance, an asthma care plan needs to be completed **instead** of a general asthma log. This is a more detailed log that is shared between home and school on a daily basis. (similar to a home-school communication log) This allows severe asthma issues to be raised promptly with home when a child needs reviewing by a trained healthcare professional.

The raising of a child from a mild/moderate category to a severe therefore requiring an Asthma Care Plan **should always be shared with the SENDCo** to ensure that the appropriate services be notified of this change of circumstance.

Emergency Procedure

An ambulance will be called if:

- There is no improvement after 10 puffs of the reliever inhaler
- The child remains struggling to breathe or cannot talk
- The child is exhausted
- You have any doubts at all about the child's condition

While awaiting medical assistance the use of the reliever inhaler can be repeated every 30-60 seconds. All previous asthma attack procedures will be adhered to to ensure the child is as calm as possible and continually monitored.

Ensuring a Good Education for those that cannot attend school because of Health Needs

The Government's policy intention is that all children, regardless of circumstance or setting should receive a good education to enable them to shape their own futures. Therefore alternative provision and the framework surrounding it should offer good quality education on par with that of mainstream schooling, along with the support pupils need to overcome barriers to attainment. The named policy: *Ensuring a good education for children who cannot attend school because of health needs Statutory guidance for local authorities January 2013* is located below.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/941900/health_needs_guidance_accessible.pdf

There will be a wide range of circumstances where a child has a health need. At Trevithick we aim to provide education as soon as it is clear that the child will be away from school for 10 days or more or where we have been informed of a short period of absence. We have close contact with medical professionals and families to ensure that work set is appropriate and not detrimental to their health and wellbeing. We also work closely with the local authority to ensure that, where needed, children with identified health needs are able to access a reduced or a part time timetable if needed to support them. This is reviewed every 2 weeks alongside the LA.

Evaluation:

The effectiveness of this policy is monitored by Will Johnson to ensure that it:

- Continues to effectively meet the needs of the children, staff and wider stakeholders of the Academy
- Responds to any issues that have arisen which may impact upon the ability of the Academy to follow the principles of the policy
- Meets the needs of legislation and it changes and requires amendments to policy and procedures
- Meets the very particular needs of children and staff joining the school whose condition requires them to be recognised within the parameters of this policy.

Asthma Action Plan



Name:	Date Agreed:
	Review Date:
Known Triggers	Personal Signs/Symptoms



Green means Go Zone!
Use preventive medicine

Yellow Means Caution Zone!
Add quick-relief medicine

Red means Alert Zone!
Seek Medical Attention

GO

You will see:

- Breathing is good
- No cough or wheeze
- You can work and play

CAUTION

You will see:

- Cold-like symptoms
- Cough
- Tight Chest
- Mild wheeze

**Please note a reliever may be given prior to extensive exercise*

TAKE ACTION

You will see:

- Medicine is not helping
- Breathing is hard and fast
- Nose opens wide
- Ribs show
- Can't talk

CALL 999 IMMEDIATELY

Signed: _____

Name: _____

Use a preventer inhaler (usually brown)

Medicine	How Much?	How Often/When?

Use a reliever inhaler (usually blue)

Medicine	How Much?	How Often/When?

Continue with inhaler and call 999

What to do in an asthma attack

- Sit up straight - try to keep calm.
- Take one puff of your reliever inhaler (usually blue) every 30-60 seconds up to 10 puffs.
- If you feel worse at any point OR you don't feel better after 10 puffs call 999 for an ambulance.
- If the ambulance has not arrived after 10 minutes and your symptoms are not improving, repeat step 2.
- If your symptoms are no better after repeating step 2, and the ambulance has still not arrived, contact 999 again immediately.

Name of Child _____

Asthma Care log

Date	Missed school	Couldn't Sleep	Limit Activity	Used reliever Medication	No symptoms	Wheezy	Chronic	Home Symptoms
Today my child...				 Please specify Time Amount				

