THE MOUNTBATTEN SCHOOL

School Improvement Committee

Medical Policy

(inc. Administration of Medicines, First Aid, Supporting Students with Medical Conditions and managing allergens Policies)

July 2025

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Policy Statement

The Mountbatten School is committed to ensuring that all students are properly supported so they can play a full and active role in school life, remain healthy, safe, and achieve their academic potential. This includes comprehensive support for students with medical conditions, physical and mental health needs, as well as prompt and appropriate first aid care for any student who requires it during the school day.

This policy should be read in conjunction with other relevant school policies including Safeguarding, Health and Safety, and Behaviour policies.

Our aims are to:

- Ensure all students receive appropriate medical care and support, whether for ongoing conditions, acute illnesses, injuries, or medical emergencies
- Enable students with medical conditions to participate fully and safely in all aspects of school life
- Provide immediate and effective first aid response to any student requiring emergency medical assistance
- Establish clear procedures for the safe storage, administration, and management of medicines in school
- Implement robust protocols for identifying, managing, and responding to allergens and allergic reactions
- Provide clear guidance and regular training to all staff on supporting students with medical needs, administering first aid, and handling medical emergencies
- Ensure appropriate staff training and competency in first aid, medical condition management, and emergency response procedures

- Work collaboratively with students, parents/carers, healthcare professionals, and external medical services to provide comprehensive care
- Maintain strict confidentiality protocols while ensuring essential medical information is appropriately shared to safeguard student health and safety
- Create and maintain accurate records of medical conditions, treatments, incidents, and emergency responses
- Regularly review and update medical care procedures, risk assessments, and emergency action plans to ensure best practice

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Please note: The Mountbatten School does not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so. No student's health is to be put at unnecessary risk. Parents should keep their children at home if their state of health puts their child or others at risk, for example, infectious disease.

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1. Roles and Responsibilities

1.1 Headteacher

The Headteacher has overall responsibility for:

- Ensuring the school implements this policy effectively
- Ensuring all staff understand their duties regarding medical conditions
- Ensuring student medical information will be kept confidential and only disclosed to relevant school staff on a need-to-know basis
- Ensuring sufficient staff receive appropriate training
- Ensuring Individual Healthcare Plans are implemented and reviewed
- Making decisions about when a student cannot be supported in school
- Ensuring no student is denied admission or excluded from activities unnecessarily
- Working with other agencies to ensure students receive appropriate support
- Ensuring the policy is reviewed yearly, according to review recommendations and recent local and national guidance and legislation

1.2 All School Staff

All staff are responsible for:

- Understanding and following policy guidelines
- Being aware of students with medical conditions
- Knowing what to do in a medical emergency
- Allowing students immediate access to emergency medication
- Maintaining confidentiality regarding medical information

1.3 Teaching Staff

Teaching staff have additional responsibilities to:

- Check class lists for students with medical conditions at the start of each term
- Read and understand Individual Healthcare Plans for students in their care
- Avoid sharing food containing allergens with students
- Ensure students with medical conditions are not unfairly penalised for attendance related to their condition
- Allow students to manage their condition effectively (toilet breaks, medication, etc.)
- Use curriculum opportunities to raise awareness about medical conditions

1.4 First Aiders and Medical Staff

First aiders and medical staff are responsible for:

- Administering first aid and emergency treatment within their training
- Maintaining first aid equipment and supplies
- Keeping accurate records of treatment provided via Medical Tracker
- Calling emergency services when appropriate
- Supporting students with routine medical needs

1.5 Students

Students are expected to:

- Treat other students with medical conditions equally and with respect
- Tell a member of staff when they feel unwell or another student is feeling unwell
- Refrain from sharing medications with other students
- Treat all medication with respect
- Take responsibility for their own medication where appropriate
- Follow their Individual Healthcare Plan

1.6 Parents/Carers

Parents/carers are responsible for:

- Informing the school of their child's medical condition
- Providing complete and up-to-date information about their child's needs
- Ensuring prescribed medication is provided in date and properly labelled
- Informing the school of any changes to medication or medical needs
- Providing spare medication as required
- Ensuring their child has regular medical reviews
- Keeping their child at home when they are not well enough for school
- Working with the school to ensure their child's needs are met

2. Administration of Medicines

2.1 General Principles

The school will support students with administering medications when:

- Written consent has been provided by parents/carers
- Medication is prescribed by a healthcare professional
- The medication is in its original container with pharmacy label
- Clear instructions for administration are provided
- The medication is within its expiry date

2.2 Prescribed Medications

Acceptance Criteria:

- Medication must be in the original container with pharmacy label
- Label must include: student's name, medication name, dosage, frequency, expiry date
- Completed medication consent form must be provided
- Only reasonable quantities accepted (maximum 4 weeks supply)

Self-Administration:

- Students are encouraged to self-administer where appropriate and if considered competent by parent/carer
- Students must demonstrate competence and understanding

2.3 Non-Prescribed Medications

General Policy:

- Parent/carer should notify the school of any medications which require administration during the school day.

Paracetamol Administration:

The school will keep its own stock of 500mg paracetamol tablets to reduce the risk of students carrying medicines and avoid confusion over what can be administered. Students who frequently require paracetamol will be asked to provide their own tablets, which will be kept securely labelled in the medical room.

In order for school to administer paracetamol to students the written consent of parents/carers is required.

Before giving paracetamol

- The student should be encouraged to get some fresh air and have a drink or something to eat. Paracetamol is only considered if these actions do not work.
- .Paracetamol will be given in the event of a headache,toothache,period pain or any type of mild to moderate pain.
- Only standard paracetamol may be administered, no combination medicines which contain other drugs can be given.

Administering paracetamol

- Students will be given one dose of paracetamol. If this does not work, parents or carers will be contacted.
- The responsible member of staff must witness the student taking the paracetamol and record the administration on Medical Tracker. A medical tracker notification will be e-mailed to parents.
- Paracetamol will only be given during morning or afternoon break unless an exit pass has been provided by the class teacher.
- The dose of paracetamol will be administered according to the student's age not weight. Parents must provide a medical letter if they require a greater dose to be administered.

Exclusions:

- No aspirin to be given to students under 16 unless prescribed
- No combination medicines containing multiple drugs

2.4 Emergency Medications

Students requiring emergency medication (e.g., inhalers, EpiPens, glucose) must:

- Carry their medication with them at all times (unless controlled drugs)
- Have spare medication stored securely in the Medical Room
- Have staff trained in emergency administration procedures
- Have clear emergency action plans in place

2.5 Controlled Drugs

Storage and Administration:

- Will be stored in a locked, non-portable container
- Only named staff may administer

- Detailed records must be maintained. Medication administration will be recorded in Medical Tracker and parents/carers will be informed via e-mail.
- Return to parents/carers for disposal

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3. First Aid Provision

3.1 First Aid Assessment

The school maintains a First Aid Needs Assessment (Form MBS 051) which:

- Determines appropriate first aid provision for the premises
- Is reviewed annually or following significant changes
- Considers student numbers, activities, and identified risks

3.2 Trained First Aid Staff

Emergency First Aid

- A proportionate amount of staff members complete Emergency First Aid at Work training
- Defibrillators onsite
- Regular refresher training provided

3.3 First Aid Equipment and Facilities

Equipment:

- First aid kits in each faculty and reception
- 5 travel first aid kits in school minibuses
- 4 defibrillators located at: Reception, Fitness Suite, PE Office, Sports Hall
- Emergency medication stored securely

Medical Room Facilities:

- Designated first aid room in Administration Building
- Equipped with: bed, running water, first aid kit, chairs, emergency equipment
- Lockable cabinet for medicines
- Accessibility equipment (evac chair, wheelchair)

3.4 First Aid Procedures

Emergency Response:

- First aiders take charge of emergency treatment
- Assessment of injury severity and appropriate response
- Call ambulance for serious injuries, head injuries, unconsciousness, or when unsure
- Contact parents/carers for all significant injuries
- Accompany student to hospital if parents cannot be contacted

Record Keeping:

- All first aid treatment recorded on Medical Tracker system
- Records include: name, date, type of accident, treatment provided
- Parents/carers informed of any first aid treatment

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4. Managing Allergens

Policy Overview

The school recognises that anaphylaxis is a severe, life-threatening allergic reaction that can occur within minutes of exposure to allergens. While we cannot guarantee a completely allergen-free environment, we implement robust measures to minimise risks.

4.1 Allergen Awareness

14 Major Allergens (Food Information for Consumers Regulations 2014):

1. Cereals containing gluten
2. Crustaceans
3. Eggs
4. Fish
5. Peanuts
6. Soybeans
7. Milk (including lactose)
8. Tree nuts
9. Celery
10. Mustard
11. Sesame seeds
12. Sulphur dioxide and sulphites
13. Lupin
14. Molluscs

4.2 School Approach

Catering Provision:

- School caterers avoid nuts, peanuts, pine nuts, sesame seeds
- Detailed allergen information available for all food items
- Compliance with Natasha's Law for pre-packed foods
- Separate storage and preparation areas for allergen-free foods
- Staff trained in allergen management

Limitations:

- School is not claimed to be 'allergen-free'
- Students bring food from home and external sources
- No restrictions on staff/visitor food consumption
- Students must not rely on false sense of security

4.3 Risk Management Measures

Information Sharing:

- Allergen information shared with all staff at start of year
- Updated lists with photographs distributed as needed
- Cover teachers informed of student allergies
- Annual EpiPen training for staff

Catering Protocols:

- Kitchen staff trained in allergen management
- Detailed ingredient information maintained
- Special provisions for school trips
- Clear labelling of allergen-free options

Student Education:

- Students encouraged to self-manage allergies
- Understanding of safe/unsafe foods
- Recognition of allergic reaction symptoms
- Importance of carrying emergency medication
- Peer awareness and support

4.4 Food Technology Specific Measures

Classroom Management:

- Food classrooms maintained as 'nut-free'
- No nut products permitted in food technology lessons
- Immediate removal of any nut products brought in error
- Separate, labelled equipment for students with allergies
- Annual reminder letters to parents

Safety Procedures:

- Clear allergen information displayed in technology office
- Individual teacher responsibility for student allergen awareness
- Separate storage for gluten-free ingredients
- Regular cleaning of shared equipment
- Alternative recipes provided as needed

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5. Asthma Management

Asthma is a common chronic respiratory condition affecting approximately 1 in 11 children. It causes inflammation and narrowing of the airways, leading to breathing difficulties. With proper management, students with asthma can participate fully in school activities.

5.1 Recognising Asthma Symptoms

Common Symptoms:

- Coughing (especially at night or early morning)
- Wheezing (whistling sound when breathing)
- Shortness of breath or difficulty breathing
- Chest tightness or pain
- Fatigue during physical activity

Asthma Attack Warning Signs:

- Increased breathlessness
- Persistent cough
- Chest tightness
- Difficulty speaking in full sentences
- Anxiety or panic
- Blue tinge around lips or fingernails (emergency situation)

5.2 Asthma Medications

Reliever Inhalers (usually blue):

- Provide quick relief during asthma attacks
- Should be available at all times
- Common medications: Salbutamol, Terbutaline

Preventer Inhalers (usually brown, red, or orange):

- Taken daily to prevent symptoms
- Reduce inflammation in airways
- Common medications: Beclometasone, Fluticasone

Spacer Devices:

- Improve medication delivery
- Particularly important for younger students
- Should be cleaned regularly

5.3 Emergency Asthma Attack Procedure

Immediate Response:

1. Keep calm and reassure the student
2. Help student to sit upright (not lying down)
3. Assist with reliever inhaler (usually blue)
4. Stay with student and monitor their condition

Inhaler Administration: Remove cap and shake inhaler, if using spacer, attach to inhaler, Student breathes out gently, Place lips around mouthpiece creating good seal Press inhaler while student breathes in slowly and deeply Hold breath for 10 seconds (or as long as comfortable), Wait 30-60 seconds before second puff if needed.

Call 999 if:

- Reliever inhaler has no effect after 5-10 minutes
- Student is too breathless to speak
- Student is becoming exhausted
- Lips or fingernails appear blue
- You are concerned about the student's condition

After the Attack:

- Inform parents/carers
- Monitor student for remainder of day
- Record incident in medical records
- Review Individual Healthcare Plan if necessary

5.4 Physical Activity and Asthma

Exercise Guidelines:

- Students with asthma should participate in PE and sports
- Warm-up and cool-down periods essential
- Reliever inhaler should be accessible during activity
- Alternative activities provided when air quality is poor
- Cold weather considerations (covering nose/mouth)

Activity Modifications:

- Allow breaks when needed
- Modify intensity based on student's condition
- Consider triggers (dust, pollen, cold air)
- Ensure adequate hydration

5.5 Asthma-Friendly Environment

Classroom Considerations:

- Good ventilation maintained
- Minimise exposure to dust and strong odours
- Be aware of seasonal triggers (pollen, cold air)
- Allow students to sit away from board cleaners/markers

School Environment:

- Regular cleaning to minimise dust
- Maintain air quality in all areas
- Consider weather conditions for outdoor activities
- Ensure chemical use doesn't trigger symptoms

5.6 Individual Asthma Management

Individual Healthcare Plans:

- Developed for all students with diagnosed asthma
- Include triggers, medications, emergency procedures
- Regular review with parents/carers and healthcare professionals
- Shared with relevant staff

Inhaler Management:

- Students encouraged to carry own reliever inhaler
- Spare inhaler kept in Medical Room

- Regular checks of expiry dates
- Replacement arrangements with parents/carers

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6. Individual Healthcare Plans

6.1 When Healthcare Plans Are Required

Individual Healthcare Plans are developed for students with:

- Long-term or complex medical conditions
- Conditions requiring emergency intervention
- Conditions affecting daily school activities
- Medications requiring supervision
- Specific dietary requirements

6.2 Healthcare Plan Content

Plans include:

- Student's medical condition and symptoms
- Medication details (name, dose, timing, side effects)
- Emergency procedures and contacts
- Specific care requirements
- Dietary needs and restrictions
- Activity limitations or modifications

6.3 Development and Review

Development Process:

- Led by School Nurse with involvement from parents/carers and healthcare professionals
- Student input included where appropriate
- Professional medical advice incorporated

Review Schedule:

- Annual review minimum via Medical tracker.
- Earlier review if the medical condition changes
- Following any medical incidents
- When medication changes
- If care needs change

6.4 Distribution and Access

Confidential Distribution:

- Stored electronically on Medical Tracker
- Secure storage in Medical Room
- Accessible to relevant staff only
- Electronic copies on school information system
- Emergency medication boxes include relevant plans

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7. Storage and Record Keeping

7.1 Medication Storage

General Storage Requirements:

- Locked medicine cabinet in Medical Room
- Out of reach of students
- Appropriate temperature control
- Original containers only
- Clear labelling system

Refrigerated Medications:

- Dedicated refrigerator in Medical Room
- Airtight, labelled containers
- Temperature monitoring
- Inaccessible to unsupervised students

Emergency Medications:

- Readily accessible during school hours
- Available for off-site activities
- Student-carried where appropriate
- Spare supplies maintained

Controlled Drugs:

- Double-locked storage
- Limited staff access
- Detailed administration records
- Safe disposal procedures

7.2 Sharps Management

Sharps Boxes:

- Students who use sharps should provide their own clearly labelled sharps disposal box.
- The sharps box should be puncture proof and securely closed.
- Students should dispose of sharps immediately after use, into their own box. Never in general waste bins.
- Parents or Carers are responsible for taking the sharps box home and arranging for safe disposal via a local pharmacy or council collection scheme.

7.3 Record Keeping

Administration Records:

- All medication administration recorded
- Date, time, medication, dose, staff signature
- Available to parents/carers
- Securely stored
- Regular audit procedures

Incident Records:

- Medical incidents recorded on Medical Tracker
- First aid treatment documented
- Emergency procedures followed recorded
- Parent/carer notification recorded
- Review triggers identified

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8. Educational Visits and Trips

8.1 Risk Assessment

Medical Considerations:

- Individual risk assessments for students with medical conditions
- Medication requirements and storage
- Access to emergency treatment
- Staff training needs
- Emergency contact procedures

8.2 Medication Management

Day Trips:

- Students carry their own emergency medication
- Spare medication is kept with the trip leader
- Packed lunches consider allergies and dietary needs
- First aid kit includes relevant supplies

Residential Trips:

- Sufficient medication supply plus emergency spare
- Secure storage arrangements
- Refrigeration requirements considered
- Sharps disposal arrangements
- Local medical facility information

8.3 International Trips

Additional Requirements:

- Medical authorization letters for medications
- Translation of medical information
- International emergency contact details
- Travel insurance considerations
- Local medical facility information
- Customs declarations for medications

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9. Emergency Procedures

9.1 Medical Emergency Response

Immediate Actions:

1. Ensure scene safety
2. Assess student condition
3. Provide appropriate first aid/medication
4. Call 999 if required
5. Contact parents/carers
6. Follow Individual Healthcare Plan
7. Document incident

9.2 Anaphylaxis Emergency Protocol

Severe Allergic Reaction Response:

1. Administer EpiPen immediately
2. Call 999 without delay
3. Position student appropriately (sitting or lying as comfortable)
4. Monitor vital signs
5. Prepare for second dose if needed (after 5 minutes)
6. Contact parents/carers
7. Accompany to hospital
8. Provide used EpiPen to paramedics

9.4 Diabetic Emergency Protocol

Hypoglycaemia (Low Blood Sugar):

1. Recognise symptoms (confusion, sweating, weakness)
2. Provide fast-acting glucose if conscious
3. Monitor improvement
4. Call 999 if unconscious or no improvement
5. Contact parents/carers
6. Document incident

Hyperglycaemia (High Blood Sugar):

1. Recognise symptoms (excessive thirst, frequent urination)
2. Allow access to water
3. Support with insulin if prescribed
4. Monitor condition
5. Seek medical advice if severe
6. Contact parents/carers

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10. Confidentiality

10.1 Information Sharing Principles

Need to Know Basis:

- Medical information shared only with staff who need it for student safety
- Student and parent/carer consent for information sharing
- Clear understanding of confidentiality boundaries
- Professional discretion in sensitive situations

10.2 Student Rights

Student Participation:

- Students involved in decisions about information sharing (age-appropriate)
- Respect for student privacy and dignity
- Consideration of student wishes where possible
- Support for developing independence

10.3 Data Protection

Compliance Requirements:

- Data Protection Act 2018 and UK GDPR compliance
- Secure storage of medical information
- Limited access to authorized personnel
- Regular review of information sharing arrangements
- Clear retention and disposal procedures

11. Complaints

Should parents/carers or students be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's Complaints Policy