



Ashfield Girls' High School



“Each different. Each talented. All valued.”

Medical Needs Policy

Author(s)	Mrs C Hoey – Vice Principal (Pastoral Care)
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Medical Needs Policy



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Mrs C Hoey (Vice Principal – Pastoral)



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Executive Summary

This policy outlines the school's comprehensive approach to supporting students with medical needs, ensuring their safety, well-being, and equal access to education.

The policy details the responsibilities of key stakeholders, including the Board of Governors, Principal, school staff, parents, and the School Health Service, in administering and managing medication for students. It emphasises the importance of confidentiality, proper record-keeping, and ongoing staff training to ensure effective medical support within the school.

Key provisions include:

- **Administration of Medication:** Clear guidelines on storage, self-administration, and emergency procedures, ensuring students receive prescribed medication safely.
- **Emergency Preparedness:** Protocols for handling medical emergencies, including the use of emergency inhalers and adrenaline auto-injectors for students with asthma and severe allergies.
- **Training and Awareness:** Regular staff training on medical conditions, first aid, and emergency response to support student health.
- **Parental Involvement:** Expectations for parents to provide up-to-date medical information, ensure timely medication renewal, and collaborate with the school on their child's healthcare needs.

This policy aligns with broader wellbeing and safeguarding policies, reinforcing Ashfield Girls' High School's commitment to the health, safety, and holistic development of all students. It is reviewed bi-annually to ensure it remains effective and up to date.



Section A (Aims of the Policy)

The Medical Needs Policy aims to ensure that all pupils with medical conditions receive appropriate care and support within the school environment. The policy is designed to:

- Provide a secure and supportive learning environment where pupils with medical needs can fully participate in school life.
- Ensure staff understand their responsibilities in supporting pupils with medical conditions.
- Facilitate the safe administration, storage, and disposal of medication in accordance with best practices.
- Promote effective communication between parents, pupils, school staff, and healthcare professionals to manage medical needs efficiently.
- Respect the confidentiality of medical information while ensuring key staff have access to necessary details.
- Establish clear emergency procedures to safeguard pupils' health and wellbeing in urgent medical situations.
- Provide appropriate training for staff to ensure they can assist with medical needs safely and competently.
- Regularly review and update procedures to align with best practices and legal requirements.

By implementing this policy, the school is committed to creating an inclusive and supportive environment that prioritises the wellbeing of all pupils.



Section B (Legislative Context and Linked Policies)

[Children's Services Co-operation Act \(2015\)](#)
[Special Educational Needs and Disability Order \(2005\)](#)
[The Addressing Bullying in Schools Act \(Northern Ireland\) 2016](#)
[The Children \(Northern Ireland\) Order 1995](#)
[The Education \(School Development Plans\) Regulations \(Northern Ireland\) 2010](#)
[The Education and Libraries Order \(Northern Ireland\) 2003](#)
[The Equality Act 1995](#)
[The Health and Safety at Work Order \(Northern Ireland\) 1978](#)
[The Human Rights Act 1998](#)
[The Relationships and Sexuality Education \(Northern Ireland\) \(Amendment\) Regulations 2023](#)
[The United Nations Convention on the Rights of a Child \(1998\)](#)

CCEA: Wellbeing Hub (2024)
 CCEA: Relationships and Sexuality Education Guidance (2019)
 DENI: Children and Young People's Strategy 2020-2030
 DENI: Children and Young Peoples' Emotional Health and Wellbeing Framework (2021)
 DENI: Every Child (2023)
 DENI: Every School a Good School (2009)
 DENI: Pastoral Care in Schools: Promoting Positive Behaviour (2011)
 DOH: Mental Health Strategy 2021-31
 ETI: Inspection and Self-Evaluation Framework (2017)
 PHA: Five Steps to Wellbeing
 Guidance on Identifying and Supporting Learners with Social, Emotional and Behavioural Difficulties (2014)
 Safeguarding and Child Protection in Schools (Updated September 2023).

Linked Policies

Safeguarding and Child Protection Policy
 Pupil Wellbeing Policy
 Attendance Policy
 Intimate Care Policy
 Behaviour for Learning and Positive Behaviour Policy
 Pupil Voice Policy
 Substance Misuse Policy
 Medical Needs Policy
 Special Educational Needs Policy
 Relationships and Sexuality Education Policy
 Health and Safety Policy
 Healthy Eating Policy
 Educational Visits Policy
 Mobile Devices Policy
 Bereavement Policy
 Equality and Inclusion Policy



Section C (Policy and Procedures)

Ashfield Girls' have a number of fully trained first aiders to assist in any medical emergencies. Further to this, we also have a Pupil Welfare Auxiliary, who assists in day to day care for pupils who are feeling unwell.

Staff will not give a non-prescribed medicine to a child unless there is specific prior written permission from the parents. This is usually identified during the Induction process on the data collection form.

Should a pupil require medication during the school year, only reasonable quantities of medication should be supplied to the school (for example, a maximum of four week supply at any one time).

Please note that the school cannot make changes to dosages based on parental instruction – this needs to be clearly labelled on the medication.

Where the pupil travels on school transport with an escort, parents should ensure the escort has written instructions relating to any medication sent with the pupil, including medication for administration during respite care.

Each item of medication must be delivered to the Pupil Welfare Auxiliary or Authorised Person, in normal circumstances by the parent, in a secure and labelled container as originally dispensed. Each item of medication must be clearly labelled with the following information:

- pupil's name
- name of medication
- dosage
- frequency of administration
- date of dispensing
- storage requirements (if important)
- expiry date



Self-Administering Medication

Where it is appropriate to do so, pupils will be encouraged to administer their own medication, if necessary, under staff supervision. Pupils are permitted to bring a daily amount of their required medication. Pupils must not share or take someone else's medication. Medication not taken correctly may result in emergency procedures being implemented depending on the professional judgement of staff.

Refusing Medication

If a child refuses to take their medication, staff will inform the parents or carers of the refusal, as a matter of urgency, on the same day. If a refusal to take medication results in an emergency, the school's emergency procedures will be followed.

Staff will ensure that the pupil's parents or carers are contacted in this instance.

There is no legal duty that requires school staff to administer medication; this is a voluntary role. The administration of medication to children remains the responsibility of the parent or those with parental responsibility.

The school will make every effort to continue the administration of medication to a pupil whilst on trips away from the school premises, even if additional arrangements might be required. However, there may be occasions when it may not be possible to include a pupil on a school trip if appropriate supervision cannot be provided.

Infection Control

If a pupil is diagnosed with an infection (i.e. chickenpox) then the Public Health Agencies advice will be followed.

https://www.publichealth.hscni.net/sites/default/files/Guidance_on_infection_control_in%20schools_poster.pdf

Please note that it may be necessary to inform staff due to the risk to others.



Special Circumstances

Asthma

As permitted under the DENI guidance*, an emergency inhaler will be kept in school. This is to be used only in case of emergencies. This does not replace the need for pupils to carry their own inhaler if they have been prescribed one. The emergency inhaler should only be used when a pupil is showing signs of an asthma attack, and their own inhaler cannot be accessed or administered.

The emergency inhaler should only be used for a pupil who has asthma and who has written parental consent for the use of the emergency inhaler. An asthma register will be available with the emergency inhaler with a list of pupils who have been diagnosed with asthma and who have parental consent for the emergency inhaler.

The Pupil Welfare Auxiliary will carry out monthly checks on the emergency inhaler. This will also be double checked by another member of staff.

****Guidance for the use of emergency salbutamol inhalers in schools;
addendum to supporting pupils with medication needs.***



Adrenaline Auto-Injectors (AAI)

Ashfield Girls' High School holds two emergency Adrenaline Auto-Injectors (AAIs). This is allowed under the guidance from the Department of Health*.

The school office can store AAI, clearly labelled for emergency use.

Any pupil who has been prescribed an AAI by their Doctor must carry two AAIs on her person at all times.

Note: If a pupil does not have their two AAI and are due to go on an educational visit, they will not be permitted to attend.

In the case of a pupil having an anaphylactic reaction their own prescribed AAI should be used. Only in the instance of her own not being available or not working should one of the school's emergency AAIs be used.

The school's emergency AAIs will be held in an emergency anaphylaxis kit in the school office. The anaphylaxis kit must not be kept locked away but should be easily accessible at all times in case of an emergency.

The emergency anaphylaxis kit will include two in-date AAIs, an allergy register to identify pupils who have permission to use the AAI and advice of what to do in an emergency.

The Pupil Welfare Auxiliary will carry out monthly checks on the emergency anaphylaxis kit to ensure that everything is present. This will also be double checked by another member of staff.

Any child at risk of having an anaphylactic reaction should have an action plan in the school office.

The emergency AAI in the Emergency Anaphylaxis Kit should only be used for a pupil where both medical authorisation and written parental consent have been provided. An allergy register of pupils to whom this applies will be kept inside the Emergency Anaphylaxis Kit.

All staff will have an annual awareness session on anaphylaxis and advice on what to do in an emergency.

**** Guidance on the use of adrenaline auto-injectors (AAIs) in schools in Northern Ireland;***

An addendum to Supporting Pupils with Medication Needs (2008)



The Delivery, Storage and Disposal of Medication

Medication will be kept in a secure place, out of the reach of pupils. Unless otherwise indicated all medication to be administered in school will be kept in a locked medicine cabinet. The school will not accept items of medication in unlabelled containers.

The school will not accept items of medication in unlabelled containers.

Prescribed medication needs to be accompanied by written and signed instructions from the parent. It is the parents' responsibility to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date.

It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased.

School staff will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist for safe disposal.

Confidentiality

Staff at Ashfield Girls' will treat medical information sensitively. Each pupil will be treated as an individual. Parents will be consulted on who the information regarding their pupil's medical needs can be shared with.

Consideration should be given to whether pupils in a Form Class should know about a particular child's condition. It can be helpful both educationally and emotionally for other members of her form class to be aware of her needs. This will only be disclosed with the consent of the pupil's parent and if it is deemed appropriate to do so.

If permission is given to disclose information surrounding a pupil's medical need, this information will be handled as sensitively as possible.



Record Keeping

The school will keep records of all medicines given to pupils - time, date and route of administration will be recorded.

Staff who administer medication will complete and sign a record card each time they give medication to a pupil (AM4 and AM5).

Staff who volunteer to assist in the administration of medication will receive appropriate training/guidance through arrangements made with the School Health Service.

In Ashfield Girls' High School this is normally the Pupil Welfare Auxiliary or in her absence the First Aiders, Pastoral Team, Vice Principal or Principal.

First Aiders will be trained in accordance with Education Authority and Department of Education guidelines.

All staff will be informed annually of pupils with a medical condition and/or need for medication.

All staff will receive periodic training on medical conditions and emergency procedures that affect pupils in Ashfield Girls'.

Staff working with pupils who have a particular medical condition may be invited to undertake training which is child specific.

The Principal and Pupil Welfare Auxiliary will maintain a record of the medical training provided for staff.



Emergency Procedures

All staff will be made aware of the procedures to be followed in the event of an emergency. If a medical concern arises a member of the First Aid Team will be sent for.

In the event of an emergency with a pupil who has an Action Plan, the guidance on the plan will be followed.

All staff will be aware of how to call the emergency services. Parents will be contacted immediately and a member of staff will accompany the pupil to the hospital, remaining with her until her parent / carer arrives.

All incidents will be fully recorded.

In all emergency situations a teacher or other member of school staff will be expected to act as a responsible adult or parent and to act in the best interests of the child in recognition of their duty of care. If in doubt, staff should always phone for the emergency services.



Section D (Roles and Responsibilities)

Board of Governors:

- Have a written Wellbeing Policy in place.
- Ratify the policy and ensure that it is reviewed every two years, or when guidance changes.
- Monitor the effectiveness of the policy.

Principal:

- Has operational responsibility for the policy and its implementation.
- Ensure that the policy follows the appropriate DENI guidance.
- Ensure that staff are aware of the policy and its procedures.
- Provide professional learning opportunities.
- Ensure that the application of the policy is consistent and fair.
- Ensure the review of this policy, updating it when there is new guidance.

Vice-Principals:

- Ensure that the procedures outlined in this policy are followed.
- Provide professional learning about Medical Needs and the processes to follow when responding to concerns.
- Support staff when dealing with Medical Needs.
- Ensure staff are updated annually of medical needs within the school.
- Monitor, evaluate and review the policy's implementation and effectiveness.

Pupil Welfare Auxiliary:

- Ensure that action Plans are stored in a central place accessible to staff.
- Ensure that medication is securely stored in a locked cupboard, unless it is necessary for the medication to be readily available (i.e. EpiPens).
- Provide advice to pupils on a range of health issues.
- Administer and record medication, as agreed with parents.
- Provide first aid.

Staff:

- Are aware of this policy, linked policies, and apply them consistently.
- To demonstrate professional conduct
- To promote and safe and caring environment.
- Monitor pupil Medical Needs.
- Should support pupils, as outlined in their policy.
- Should participate in the monitoring, evaluation and review of this policy and its procedures.

Parents:

- Should be aware of the contents of this policy (and linked policies) about promoting their child's Medical Needs and support staff in the implementation of the policy.



Medical Needs Policy

- Should make sure that their child is well enough to attend school. A child's own doctor is the person best able to advise whether the child is fit to be in school and it is for parents to seek and obtain such advice as necessary.
- Should make the school aware that their child requires medication.
- Should notifying the school in writing if the pupil's need for medication has ceased.
- Should report any concerns they may have regarding their child's Medical Needs.
- Should report any concerns they may have regarding another child's Medical Needs.

Pupils:

- Should make staff aware of their Medical Needs, especially if they are feeling unwell.



Section E (Consultation, Communication, Monitoring and Evaluation of the Policy)

This policy has been developed in consultation with governors, staff, pupils and parents.

The policy will be monitored via a range of methods. It is based on addressing presenting issues, established by a range of methods including following Department of Education Northern Ireland guidance, pupil surveys, pupil discussions, those raised at Student Council meetings and parent discussions.

The Medical Needs Policy will be reviewed by all stakeholders and, if required, updated:

- following any incident which highlights the need for such a review.
- when directed to by the Department of Education Northern Ireland and in light of new guidance.
- Every two-years (as identified on the front cover of this policy).

To appropriately monitor the effectiveness of the policy, the Board of Governors shall:

- be updated regularly on any regulation changes, respective of medical needs in school.
- identify current issues, trends and priorities for action.
- assess the effectiveness of strategies aimed at ensuring that pupils' needs are met in relation medical needs.



Appendix 1: Local Contacts

Supporting Pupils with Medical and Associated Needs **Local Contact Numbers**

Name	Designation	Contact Details
Mrs L Hanvey	Principal	028 9047 1744
Mrs C Hoey	Vice Principal (Pastoral Care)	028 9047 1744
Ms T Rossborough	Special Needs Co-ordinator	028 9047 1744
Ms J Bomber	Pupil Welfare Auxiliary	028 9047 1744
-	School Health Service	028 9056 5900
Ulster Hospital	Local Hospital	028 9048 4511
Children's Hospital	Local Children's Hospital	028 9024 0503

**Appendix 2: Emergency Call Form**

EMERGENCY CALL FORM

TO BE DISPLAYED BY THE OFFICE TELEPHONE

REQUEST FOR AN AMBULANCE





Appendix 3: Adrenaline Auto-Injectors – Emergency Use

Date

Parent
Address

Dear Parent

RE: Adrenaline Auto-Injectors

I am aware that your daughter has an Allergy Action Plan.

As per the Department of Education Northern Ireland Guidance on the use of Adrenaline Auto-Injectors (2018), we have two emergency Adrenaline Auto-injector devices for use in our school. The adrenaline auto-injectors will be used in line with the manufacturer’s instructions, for the emergency treatment of anaphylaxis in accordance with the Human Medicines (Amendment) Regulations 2017.

This means that in addition to your daughter’s EpiPens that are either carried on her person or stored in the school office, the school have two additional ‘back-up’ adrenaline auto-injectors (EpiPens) for the emergency treatment of anaphylaxis.

If you give your consent for these to be used in the event of an emergency (i.e. that your daughter takes a reaction and her EpiPen does not work) – please sign the consent form below.

Yours faithfully

Mrs C Hoey
Vice Principal (Pastoral Care)

Adrenaline Auto-Injectors (EpiPens)

I give permission for my daughter _____ to use / be assisted to use the school’s emergency adrenaline auto-injectors, as per her Allergy Action plan, should an emergency arise.

Signed (Parent / Carer) _____ Date: _____

Appendix 4: First Aiders

Ashfield Girls' High School



STAFF TRAINED IN FIRST AID

Staff Member	Role	Floor	Room	Extension
Miss J Bomber	Pupil Welfare Auxiliary Medical	Ground	Office	250
Mrs G McClintock	Teacher of Physical Education	Ground	PE Dept / 118	251 / 237 232
Mrs J Miller	Office Staff	Ground	Office	203
Mrs E McKenna	Head of Progress / Information and Communications Technology	Ground	107	227
Mrs F Pourgholi-Jamison	Technology & Design Technician	Ground	T&D	222
Mr G Patterson	Head of Progress and Teacher of Science	First	205	261
Miss C Moore	Classroom Assistant - Learning Zone	First	LZ	265 / 266
Miss L McKittrick	Classroom Assistant - Learning Zone	First	LZ	265 / 266
Mr C McCauley	Science Technician	First	206	260
Miss M Lee	Teacher of History	Second	319	304

Updated May 2025



Appendix 5: Induction Form (Medical Details)

Medical Details

28. Does the pupil have a medical condition? *

Yes

No

29. Please provide further information about the pupil's medical condition.

Enter your answer

30. Is the pupil under the care of a consultant / hospital team?

Yes

No

30. The Pupil Welfare Auxiliary can provide medical care and administer medication. Do you give permission for the pupil to have: *

	Yes	No
The provision of Paracetamol/ Ibuprofen (if required during school)	<div></div>	<div></div>
The provision of Cetirizine Hydrochloride (for hayfever and allergy relief)	<div></div>	<div></div>
The provision of Anthisan Cream (for relief of insect bites/stings)	<div></div>	<div></div>
The provision of Milk of Magnesia (for nausea)	<div></div>	<div></div>
The provision of Hypoallergenic plasters	<div></div>	<div></div>
The safe storage of prescribed medication for supervision of self administration (pharmacy label attached)	<div></div>	<div></div>
If your child has been diagnosed with Asthma do you consent to the use of the school salbutamol inhaler, if their own is unavailable	<div></div>	<div></div>



Challenging girls today; creating women of value in the future



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