



Southern Road Primary School

Policy for Supporting Pupils with Medical Conditions

July 2015

This policy was written with reference to the DfE guidance document: Supporting Pupils at School with Medical Conditions (September 2014).

1. Aims

- To ensure that pupils with medical conditions are properly supported so that they can have full access to education, including school trips and physical education.
- To ensure that all staff are clear about their roles.
- To ensure that Southern Road Primary School, parents, pupils, health professionals and other support services work together to ensure that pupils with medical needs can play a full and active role in school life.

2. Roles and Responsibilities

a) The Governing Body

- must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented.
- must ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- should ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

b) The Headteacher

- will ensure that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- will ensure that all staff who need to know are aware of a child's condition.
- will ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

c) SENCo

- will be responsible for the implementation of this policy.
- will be responsible for the completion of all Individual Health Care Plans and sharing it with the relevant stakeholders.

d) School Staff

- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Healthcare Plan.
- should receive sufficient training and achieve the necessary level of competency before they take on responsibility to support a child with a medical condition.
- will liaise with the SENCo or SLT regarding any changes to the condition of a child.
- any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.

e) Pupils

- should be fully involved in discussions about their medical support needs.
- know how to gain access to their medication in an emergency.
- let a member of staff know if they are feeling unwell.
- treat all medication with respect.
- Treat other pupils with and without a medical condition equally.

f) Parents/carers

- should provide the school with sufficient and up-to-date information about their child's medical needs.
- Should be involved in the development and review of their child's individual healthcare plan.
- must provide any medicines and/or equipment detailed in the healthcare plan and ensure they or another nominated adult are contactable at all times.

g) School Nurse

- will notify the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school.

- will support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.
- can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

h) Other healthcare professionals, including GPs and paediatricians

- should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- may provide advice on developing healthcare plans.

i) Providers of health services

- should co-operate with schools that are supporting children with a medical condition, including appropriate communication, liaison with school nurses and other healthcare professionals.
- provide valuable support, information, advice and guidance to schools, and their staff, to support children with medical conditions at school.

3. Support for Children with Medical Needs

Arrangements will be made to support pupils with medical conditions whether physical, mental or both. In doing so, we will ensure that such children can access and enjoy the same opportunities at school as any other child.

It is important that the focus is on the needs of each individual child and how their medical condition impacts on their school life, for example, their ability to learn, confidence and social and emotional implications. In particular, reintegration after a long-term absence should be properly supported.

Parents/Carers have prime responsibility for their children's health and should provide the school with information about any medical condition. The school will aim to establish good relationships and communication with parents in order that the pupil will be well supported.

4. Staff Training

Any member of school staff providing support to a pupil with medical needs should have received suitable training.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. In some cases, written instructions from the parent or on the medication container dispensed by the pharmacist may be considered sufficient. **A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.**

Whole school awareness training will be provided when necessary so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy. This will also be included in induction arrangements for new staff.

The family of a child will often be key members in providing relevant information to school staff about how their child's needs can be met, and parents/carers should be asked for their views. They should provide specific advice, but should not be the sole trainer.

The Governing Body will consider providing relevant professional development provision opportunities as appropriate.

5. Managing Medicines on the School Premises

This is not a policy for short-term illness and related medication for example antibiotics for an infection or paracetamol for a cold etc. The school remains insistent that under these circumstances it will not administer medication. This would be the responsibility of the parents or carers.

a) Procedures for Administering Medicines

- Parents/carers will fill out a consent form for administering prescription medication.
- When a child requires long-term medication an Individual Healthcare Plan will be completed.
- All medicines must be in date and labelled with the child's name, date of birth and dosage.
- A record will be kept each time the medicine is administered noting the child's name, medication, time and dosage.

Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.

b) Non-prescription medicines

The school will not administer non-prescription medication. The exception to this would be if a child regularly suffers from acute pain in which case appropriate pain killers could be administered but only with written advice from a GP or other healthcare professional.

c) Storage

Most medicines are kept in the medical room. All medicines are labelled and children know how to access them.

Some children may also keep an inhaler in their classroom,

Epi pens are stored in a labelled box in the School Office.

d) Refusing medication

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so. Parents should be informed so that alternative options can be considered.

e) Disposing of Medicines

When no longer required, medicines should be returned to the parent to arrange for safe disposal.

Sharps boxes should always be used for the disposal of needles and other sharps.

f) Emergency Procedures

Where a child has an individual healthcare plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures.

Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

g) School Trips and Sporting Activities

The school will actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities.

Staff are made aware of any medical needs and arrangements for taking any necessary medication are put in place.

Sometimes an additional adult might accompany a particular child.

There may also be the need to undertake a risk assessment for a particular child.

Teachers and coaches are aware of pupils in their care who have been advised to avoid or to take special precautions with particular activities.

6. Individual Healthcare Plans

Some children will require an Individual Healthcare Plan (IHP) to detail the support needed to manage their medical condition.

IHPs will be written when a pupil suffers from a long-term or complex condition or in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed.

Individual healthcare plans, (and their review), may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child.

Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional, eg school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate.

The aim should be to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

The SENCo will take the lead in writing the plan and ensure it is finalised and implemented.

IHPs are reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

The following information should be recorded on an IHP:

- the medical condition, its triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medication (dose, side-effects and storage) and other treatments, dietary requirements and environmental issues.
- where appropriate, 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, who will provide this support and cover arrangements for when they are unavailable. Also their training needs and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional
- who in the school needs to be aware of the child's condition and the support required;
- arrangements for written permission from parents 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 child can participate, eg risk assessments;
- where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Unacceptable Practice

It is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition eg hospital appointments;
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child.

Complaints

Should parents/carers or pupils 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 procedure.

Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.

Ultimately, parents (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

Liability

Through the London Borough of Newham, the school has appropriate insurance in place relating to the administration of medication.