

Supporting Pupils with Medical Conditions Policy

The Woodlands

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1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The Management Committee 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 healthcare plans (IHPs)

The named person with responsibility for implementing this policy is Pauline O'Brian.

2. Legislation and statutory responsibilities

This policy meets the requirements under <u>Section 100 of the Children and Families Act</u> <u>2014</u>, which places a duty on Management Committee's to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on <u>supporting</u> <u>pupils with medical conditions at school</u>.

3. Roles and responsibilities

3.1 The Management Committee

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

3.2 The Executive Headteacher / SLT

The Executive Headteacher / SLT is responsible for:

- Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- The day-to-day implementation and management of Supporting Pupils with Medical Conditions Policy and Procedures of The Woodlands.
- >Liaising with healthcare professionals regarding the training required for staff.
- > Identifying staff that need to be aware of a child's medical condition.
- > Developing Individual healthcare Plans (IHPs).
- >Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations.
- If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays/absences and emergencies.
- Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- Continuous two way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.
- >Ensuring confidentiality and data protection.
- >Assigning appropriate accommodation for medical treatment/care.

- > Considering the purchase of a defibrillator.
- >Voluntarily holding 'spare' asthma inhalers for emergency use.
- >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 healthcare plans (IHPs), 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 of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

Staff

Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help. A First Aid Certificate is not sufficient.
- >Knowing where controlled drugs are stored and where they key is held.
- > Taking account of the needs of pupils with medical conditions in lessons.
- >Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

Trained staff members are:

- Pauline O'Brien*
- Jade Lynas*
- Philippa Thorogood*
- o Karen Bloomfield*
- Majid Aslam*
- Sue Hewitson*

- Michaela Fairless*
- o Lisa Mawdsley
- \circ Jo Jarvis
- o Steph Hubber
- \circ Carole Wood
- Amanda Bellamy
- Vickie Heslop
- o Kath Winter
- o Kelly Bishton
- o Denise Taylor
- o Kim Wanless
- Katie Hebdon

Those marked with an * are high level trained

3.4 Parents

- Keeping the school informed about any new medical condition or changes to the child/children's health.
- >Participating in the development and regular reviews of their child's IHP.
- Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.

3.5 Pupils

- 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 IHPs.
- Compiling with the IHP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a health care professional and agreed by parents.

3.6 School nurses and other healthcare professionals

- Collaborating on developing an IHP in anticipation of a child with a medical condition starting school.
- Notifying the school when a child has been identified as requiring support in school due to a medical condition at any time in their school career.
- Supporting staff to implement an IHP and then participate in regular reviews of the IHP. Giving advice and liaison on training needs.
- > Liaising locally with lead clinicians on appropriate support. Assisting the Headteacher in identifying training needs and providers of training.

4. 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 parents and any relevant healthcare professionals will be consulted.

Education Health Needs (EHN) referrals

All pupils of compulsory school age who because of illness, lasting 15 days or more, would not otherwise receive a suitable full-time education are provided for under the local authority's duty to arrange educational provision for such pupils.

5. Being notified that a child has a medical condition

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 IHP.

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.

See Appendix 1.

6. Individual healthcare plans (IHPs)

The Executive Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to P O'Brian

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

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 IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Executive Headteacher / SLT will make the final decision.

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

IHP's will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Staffrooms are inappropriate locations under Information Commissioner's Office (ICO) advice for displaying IHP as visitor/parent helpers etc. may enter. If consent is sought from parents a photo and instructions may be displayed. More discreet location for storage such as Intranet or locked file is more appropriate. **However, in the case of conditions with potential life-threatening implications the information should be available clearly and accessible to everyone.**

IHP's will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an Education, Health and Care Plan the IHP will be linked to it or become part of it.

Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA/AP provider and school is needed to ensure that the IHP identifies the support the child needs to reintegrate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Management Committee and the Executive Headteacher / SLT / Parent Support Advisor will consider the following when deciding what information to record on IHPs:

- > 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 parents and the Executive Headteacher / SLT 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/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

7. Managing medicines

Prescription and non-prescription medicines will only be administered at school:

- >When it would be detrimental to the pupil's health or school attendance not to do so **and**
- >Where we have parents' written consent / verbal for non-prescription

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.

- >Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.
- If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form.

- No child will be given any prescription or non-prescription medicines without written parental consent/or a telephone conversation that is logged, except in exceptional circumstances.
- Where a pupil is prescribed medication by a healthcare professional without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- A maximum of four weeks' supply of the medication may be provided to the school at one time. However, long term medication e.g. C.D drugs can held on a longer term basis.
- Controlled drugs may only be taken on school premises by the Parent/Carer of the individual to who whom they have been prescribed and passed to the named member of staff. Passing such drugs to others is an offence which will be dealt with under the Drug and Alcohol Policy.
- Medications are currently stored in strong medical cabinets, firmly attached to the wall and within a locked area with limited access and limited key holders.
- These guidelines comply with existing Health & Safety Policy and Child Protection Policy.
- Any medications left over at the end of the course will either be returned to the child's parents or returned back to a local pharmacist, (Boots, Ferryhill) logged out by appointed Woodlands staff and signed for by Pharmacy staff.
- >Written records will be kept of any medication administered to children.
- >Pupils will never be prevented from accessing their medication.
- General posters about medical conditions (diabetes, asthma, epilepsy etc.) are recommended to be visible in staff areas.

- The Woodlands cannot be held responsible for side effects that occur when medication is taken correctly.
- Staff will not force a pupil, if the pupil refuses to comply with their health procedure, and the resulting actions will be clearly written into the IHP which will include informing parents.

The Woodlands Management Committee have decided to voluntary administer medication on a case by case basis for temporary illness with parent consent on the day of illness. This will be discussed with parent/carer and pupil on admission to The Woodlands.

Any medication taken under these circumstances (short-term medication) will be

- >Logged and signed.
- A phone call made to the Parent/Carer to discuss the prescribed or OTC (over the counter) medication and enquire if any medication had previously been taken by the pupil that day.
- If medication is needed for a course of tablets e.g. antibiotics, an IHP will be completed and signed. Should O.T.C medication be requested for more than 3 consecutive days, Staff will request that Parent/Carers seek an appointment with their G.P.
- Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.
- Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

All medicines will be stored safely. 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 parents to arrange for safe disposal when no longer required.

Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs</u> <u>Regulations 2001</u> and subsequent amendments, such as morphine or methadone.

Controlled drugs may only be taken on school premises by the Parent/Carer of the pupil to who whom they have been prescribed and passed to the named member of staff. Passing such drugs to others is an offence which will be dealt with under the Drug and Alcohol Policy.

Controlled drugs are currently stored in strong medical cabinets, firmly attached to the wall and within a locked area with limited access and limited key holders.

These guidelines comply with existing Health & Safety Policy and Child Protection Policy.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

Transport Arrangements

- Where a pupil with an IHP is allocated school transport the school should invite a member of DCC Transport team who will arrange for the driver or escort to participate in the IHP meeting. A copy of the IHP will be copied to the Transport team and kept on the pupil record. The IHP must be passed to the current operator for use by the driver/escort and the Transport team will ensure that the information is supplied when a change of operator takes place.
- For some medical conditions the driver/escort will require adequate training. For pupils who receive specialised support in school with their medical condition this must equally be planned for in travel arrangements to school and included in the specification to tender for that pupil's transport.
- Most pupils attending The Woodlands arrive by taxi. After initial arrangements have been made at the Admission Meeting arrangement for further supplies:
- > Pupils must not transport medication into or out of The Woodlands
- >Taxi Drivers cannot transport medication (parents must not use this system)
- If further supplies are needed and parents/carers are unable to get to the Woodlands, a Split Prescription can be obtained from the Doctor (e.g. the dosage split over two prescriptions) one for parents to get for home and the second to enable named person at the Woodlands to go to Pharmacy and use the Delivery Scheme. This will ensure medication is where it should be and with the relevant person.
- Named staff from the medical team along with a copy of the IHP can collect medication and bring into the Woodlands School sites if Parent/Carer is unable to do this.
- Medication will not be accepted unless the packaging is intact, the label is correctly dated and there are no signs of it being tampered with. The name of the pupil and the prescriber must be clear and relevant and it must be handed to the named school person. At the end of each full term, arrangements are made with parents for any surplus medication to be removed from site. If this is not done, the named person must dispose of the items at the local chemist. C.D drugs are logged by the pharmacist and then disposed of.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- >Assume that every pupil with the same condition requires the same treatment

- > Ignore the views of the pupil or their parents
- > Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- > Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. 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 pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- > Administer, or ask pupils to administer, medicine in school toilets

8. Emergency procedures

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

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

Day trips, residential visits and sporting activities

- The named person is to arrange for medication to be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, and sports activities and not prevent them from doing so unless a clinician states it is not possible.
- To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits will be separate to the normal day to day IHP requirements for the school day.
- >Offsite Education providers to follow this policy.

9. Training

- Newly appointed teachers, supply or agency staff and support staff will be offered training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.
- > The clinical lead for each training area/session will be named on each IHP.
- No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy. They will notify Health & Safety DCC, and Risk, Insurance & Governance manager, DCC.

10. Record keeping

The Management Committee will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

11. Liability and indemnity

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

- Teachers who undertake responsibilities within this policy will be assured by the Executive Headteacher that are covered by the LA/school's insurance.
- Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Executive Headteacher.

12. Complaints

All complaints should be raised with the school in the first instance.

The details of how to make a formal complaint can be found in the School Complaints Policy.

13. Monitoring arrangements

This policy will be reviewed and approved by the Management Committee yearly.

Definitions

- Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibilities for, or who of a care of a pupil.
- 'Medical condition' for these purposes is either a physical or mental health condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short term condition, a long term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.

> 'Medication' is defined as any prescribed or over the counter treatment

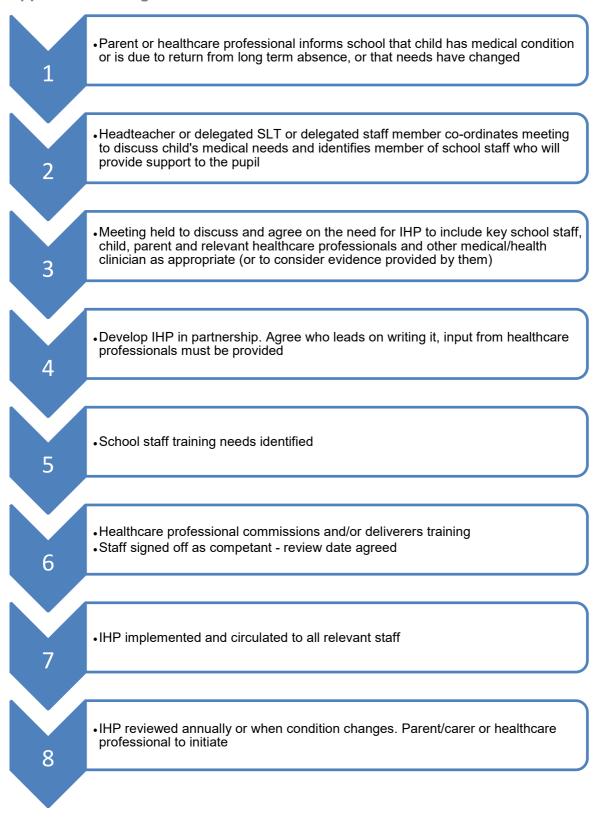
'Prescribed medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.

A 'staff member' is defined as any member of staff employed at The Woodlands.

14. Links to other policies

This policy links to the following policies:

- >Accessibility plan
- Complaints Policy
- > Equality information and objectives
- >First aid Policy
- > Health and safety Policy
- Safeguarding Policy
- Special educational needs information report and policy



Appendix 1: Being notified a child has a medical condition