Policy for Supporting Pupils with Medical Conditions

Sir John Heron Primary School

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Policy for Supporting Pupils with Medical Conditions

This policy should be read in conjunction with the SEND policy.

This policy is written in regard to Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.

Aims:

- To ensure pupils at school with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

Procedure:

The Head teacher is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained.
- all relevant staff are made aware of a child's condition.
- cover arrangements in case of staff absence/turnover is always available
- supply and agency staff are briefed.
- risk assessments for visits and activities out of the normal timetable are carried out.
- individual healthcare plans are monitored (annually or earlier if parents notify school of changes).
- transitional arrangements between schools are carried out.
- if a child's needs change, the above measures are adjusted accordingly.

Where children are joining Sir John Heron at the start of a new academic year, these arrangements should be in place for the start of term. Where a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks or as soon as a member of the community nursing team or the school nursing team are available to come to school to meet with the SENCO or another member of SLT and one of the child's parents/ carers. Where a child joins mid-term, arrangements should be put in place before a start date is given, unless the family can provide the school with a Care Plan from their previous school or one issued by a doctor.

Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan which details the support that child needs. If the parents, healthcare professional and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any

implications for the child will be kept in the school's medical record and the child's individual record.

Individual Healthcare Plans (IHPs)

The following information should be considered when writing an individual healthcare plan:

- the medical condition, its triggers, signs, symptoms and treatments.
- the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues.
- specific support for the pupil's educational, social and emotional needs.
- the level of support needed including in emergencies.
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements.
- who in school needs to be aware of the child's condition and the support required.
- arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision).
- 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.
- confidentiality where appropriate.
- what to do in an emergency, who to contact and contingency arrangements.
- where a child has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan.

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

The Governing Body

- must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented.
- must ensure sufficient staff receive suitable training and are competent to support children with medical conditions.
- must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk.

The Head Teacher / SENCo

- should ensure all staff are aware of this policy and understand their role in its implementation.
- should ensure all staff who need to know are informed of a child's condition.
- should ensure sufficient numbers of staff are trained to implement the policy. and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured.
- is responsible for the development of IHPs.
- when necessary should contact the school nursing service in the case of any child with a medical condition who has not previously been brought to the attention of the school nurse.

School Staff

- any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions
- any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help
- will ensure that medicines kept in school are in date and will inform parents when they are nearing their expiry date
- will ensure any medicine is taken on educational visits
- will ensure that the individual health care plan is clearly displayed and that medicines are easily accessible

School Nurse

- are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school
- writing IHP and supporting staff on implementing a child's IHP and provide advice and liaison

Other healthcare professionals

- 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.
- specialist local teams may be able to provide support for particular conditions (e.g. asthma, diabetes).

Pupils

- should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP.

Parents

- must provide the school with sufficient and up-to-date information about their child's medical needs.
- are the key partners and should be involved in the development and review of their child's IHP.
- should carry out any action they have agreed to as part of the IHP implementation.
- must inform school promptly if the nature of their child's medical needs change (for example triggers, symptoms or dosage of medicine).
- must ensure that the school has sufficient supplies of the medication their child needs, and that these medicines are in date.
- The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.
- Make time to meet with the school SENCO if a Healthcare Plan needs to be written or reviewed.

The following practice is considered unacceptable:

- preventing children from easily accessing their medication and administering it when and where necessary.
- assuming children with the same condition require the same treatment.
- ignoring the views of the child, their parents; ignoring medical advice or opinion.
- sending children with medical conditions home frequently or preventing them from staying for normal school activities (unless specified in IHP).
- penalising children for their attendance record if their absences are related to their medical condition that is recognised under this policy.
- preventing children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively.
- to require parents to attend school to administer medication or provide medical support to their child, including toileting issues.
- preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips (such as requiring parents to accompany the child).

Medication in school

- The only medication that can be administered by staff in school is medication that is part of a child's Care Plan (see also Policy for Supporting Pupils with Medical Conditions). The Care Plan must state the dosage, the frequency and

the expiry date of the medication. Drugs must only be administered to a child by a teaching assistant who has the duty written into their contract and has received the training. No other medication can be given on a day-to-day basis i.e. paracetomol, Calpol etc.

- If a child needs any other medication during school hours, it must be administered by their parent / relative.
- Before medication can be administered in school, parents/ carers must fill in a form at the school office (in the case of blue inhalers), or meet with the SENCO and school nurse/ health visitor to write an Individual Healthcare Plan. The school will require written evidence from a medical professional.
- If a child ceases to need medication, parents must go to the office and fill in a form acknowledging this. Any Care Plans we hold for the child when then be destroyed and medication sent home.

Medication other than inhalers

- If a child needs medication a healthcare plan will be written during a meeting attended by the Health Visitor or School Nurse, the pupil's parents and the SENCO and will be signed and reviewed either every year or when the child's health needs change.
- The medication must be clearly labelled and be for the named person. It will be kept in a locked cupboard or the medical room fridge if necessary. Permission forms/Care Plans will be kept in the office medical file and the SENCo medical file. Each child will have a care plan in their practical area. When it is administered this will be recorded in the medical file by a member of staff who has it written into their contract and who has under taken the correct training.
- The parents of children with a medical condition must fill in a medical form on admission to the school. The form will be kept in the child's file in the office and in the medical file in the child's classroom.

Asthma inhalers

- Written guidance regarding the required dosage of the inhaler, and permission for the inhaler to be used at school, is required from parents, and a form must be filled in at the school office.
- Inhalers will be kept in a cupboard in the child's classroom along with a copy of the guidance from parents. Children will have access to their inhalers at all times (provided they do not exceed agreed dosage).
- Each time a child uses an inhaler; this will be recorded with date, time and signature in the medical file. They will be supervised by a member of staff. Parents are required to have an extra inhaler for their child which can remain in school.
- If a child attends an after school club / PE session they must take the zippy wallet in which their individual inhaler and information is kept in and return it to their classroom when they have finished.
- Inhalers must be taken on educational visits and any other time a pupil goes out of school.

- Parents will be reminded one month prior to the inhaler expiring to replace the inhaler and bring this in to the main office.

Management of Asthma

- We recognise that asthma is a physical condition, not an emotional illness and that an attack is caused by a sudden narrowing of the air passages making it difficult to breathe.
- These passages are almost continuously inflamed or red or sore. Asthma can be controlled by, firstly avoiding known irritants and, secondly, by inhaling specific drugs. Drugs can be self-administered by the child concerned.

As a school we:

- welcome all pupils with asthma;
- encourage and help children with asthma to participate fully in all aspects of school life;
- recognise that asthma is an important condition affecting many school children;
- recognise that immediate access to inhalers is vital;
- do all we can to make sure that the school environment is favourable to children with asthma;
- ensure that other children understand asthma so that they can support their friends; and so those children with asthma can avoid the stigma sometimes attached to this chronic condition;
- have a clear understanding of what to do in the event of a child having an asthma attack;
- Work in partnership with parents, schools, school governors, health professionals, school staff and children to ensure the successful implementations of a school policy.

Management of Epilepsy

- A number of staff in school are qualified to administer emergency epilepsy medication. Clear procedures must be discussed with parents regarding management of a child's epilepsy and a care plan must be written.
- There are clear written procedures for dealing with each child's individual needs; these may entail use of emergency treatments.

In the event of a child having a number of seizures or a prolonged seizure, staff should inform the SENCo or Headteacher immediately and the child's Individual Health Care Plan must be followed.

Management of Allergic Reactions

- Parents must inform the school if their child might require medication in school due to an allergic reaction.
- The SENCO, parents and school nurse will then write an Individual Healthcare Plan for that child that sets out clearly the procedure that should be followed if the child has an allergic reaction. The Healthcare Plan must be

displayed in the area outside the child's classroom, and a copy will also be kept in the staffroom and in the medical file in the SENCOs office. All staff working with that child will also be informed of what the child is allergic to, and what to do in the instance the child has a reaction.

- Medication for children with allergies will either be kept in the medical box in the child's classroom or, in the case of epi-pens, in the locked cupboard in the practical area outside the child's classroom- these cupboards must have a label on them with information about where to find the key.
- All medication must be labelled and in date. All medication must be taken on educational visits and any other time a child leaves the school building.
- Children with food allergies will be given a badge to wear at lunchtime so that the dinner ladies are aware of any foods that will cause the pupil harm.
- The majority of school staff have been trained on administering an epi-pen in the case of a serious and life-threatening allergic reaction.

Complaints

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.