Supporting pupils with medical conditions policy

West Hill Primary School

(Incorporating children with medical needs who cannot attend school)



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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 governing board will implement this policy by:

- > Making sure sufficient staff are suitably trained
- > Making staff aware of pupil's condition, 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 the headteacher

2. Legislation and statutory responsibilities

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

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

3. Roles and responsibilities

3.1 The governing board

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

Some children with medical conditions may considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case the governing body must comply with their duties under that Act.

3.2 The headteacher

The headteacher will:

- > Make 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

3.3 Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

All staff in the school are made aware of any pupils with additional medical needs and the systems in place to support them. This information is regularly updated.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Staff must be aware of the pupils in their care (regular or cover classes) who have known allergies as an allergic reaction could occur at any time and not just at mealtimes. Any food-related activities must be supervised with due caution.

Pupils with known food allergies are supplied with a differently coloured tray when receiving school lunch and kitchen staff are informed of pupils who are at risk of anaphylaxis with photos of the pupils concerned and more detailed information in a folder which is stored within the kitchen office.

All staff accompanying children on off-site visits will be made aware of pupils with medical conditions involved in the trip and any relevant information necessary.

3.4 Parents

On entry to the school, it is the parent's responsibility to inform office staff of any allergies. This information should include all previous severe allergic reactions, history of anaphylaxis and details of all prescribed medication.

- > Provide the school with sufficient and up-to-date information about their child's medical needs
- > Be involved in the development and review of their child's IHP and may be involved in its drafting
- > Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment
- > Ensure their child's medication and medical devices (including spare medication) are labelled with their child's full name and are in date.
- > Ensure their child has regular reviews about their condition with their doctor or healthcare professional
- > Ensure their child has a written care/self-management plan from their doctor or healthcare professional to help their child manage their condition.

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. They are also expected to comply with their IHPs.

3.6 School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

The school nurse will be involved in the healthcare planning for pupils with medical needs as appropriate and may initiate and contribute to health care plans, ensure parental consent is obtained and recorded, provide training for school staff and advise on less common conditions and support pupils and parents as appropriate.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition and provide support for the child, parent and school as required and with the consent of the pupil and parent/carer.

Acute healthcare service personnel have a responsibility to have an agreed system for receiving information held by the school about children and young people's medical conditions to ensure best possible care, and understand and provide input into the school's medical conditions policy.

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.

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.

Notification may come through an EHCP, from a medical practitioner or from the parent/carer of the child.

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

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

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

For pupils who are diagnosed with asthma or with an allergy that leads to anaphylaxis parents must provide the school with a Care Plan from the hospital or GP. At West Hill we refer to this Care Plan as their IHP.

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 not a consensus, the headteacher 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.

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or 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 following will be considered alongside consultation with and direction from consultants, GPs, school nurse and other health teams 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 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 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

Individual Healthcare Plans are used by the school to ensure that pupils with medical conditions are effectively supported to access the curriculum and wider school life.

7. Managing medicines

Parents are responsible for ensuring any required medication supplied is in date and replaced as necessary.

Prescription medicines only will 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

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

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.

The school will only accept prescribed medicines that are:

- > In-date
- **>** Labelled
- > Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

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.

All pupils with asthma should have two reliever inhalers in school at all times.

Inhalers are stored in named containers in the medical room cupboard unless a pupil with asthma has a care plan in which case their inhaler and care plan are kept with the pupil in the classroom in a red first aid bumbag.

All pupils with allergies who have a Care Plan have a red first aid bumbag with them at all times which contains a copy of their Care Plan, inhaler and adrenaline pen.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

It is the parents' responsibility to ensure new and in date medication comes into school on the first day of the new academic year and whenever required.

All parents of pupils with a medical condition attending a school trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required. If this includes current issues of medication, a discussion is held with the parent about how the medical condition will be managed whilst on the trip.

7.1 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.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure cupboard in the sick room and only named staff have access.

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

West Hill has an Emergency Asthma Inhaler Kit and Emergency Adrenaline Pen –. Emergency Kits are only for the use of children with a diagnosed condition and who have a care plan issued by the Hospital specialist teams. These are kept in the medical room in an unlocked cupboard.

7.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

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
- > If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- > 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.

Action required in an emergency for serious conditions is displayed in prominent locations for staff in the staff room adjacent to the main noticeboard.

If there is a need for a child to be taken to hospital the parent will be informed, a member of staff (wherever possible someone familiar to the child) will always accompany the child and stay with them until a parent or responsible family member arrives. The school will ensure a copy of the child's healthcare plan is taken to the hospital with the child wherever possible.

9. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the headteacher. Training will be kept up to date.

Training will:

- > Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- > Fulfil the requirements in the IHPs
- ➤ Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

Parents and carers are asked if their child has any health conditions or health issues and so these should be recorded appropriately when the child is admitted to school. Parents are expected to update the school if their child's medical needs change.

The governing board will ensure that written records are kept of all medicine administered to pupils. 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.

IHPs are used to create a central register of pupils with medical needs which is kept confidential and secure. An identified member of staff has responsibility for maintaining and updating the register and will contact parents if any further information or clarification is required.

11. Liability and indemnity

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

12. Complaints

Parents with a complaint should discuss these directly with the headteacher in the first instance. If the headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

13. Children with health needs who cannot attend school

Local Authorities have a duty set out in Section 19 of the Education Act 1996 and the DfE Statutory Guidance 'Ensuring a good education for children who cannot attend school because of health needs'. Other related documents are The Equality Act 2010.

Wandsworth Hospital and Home Tuition Service information can be found at the following link: http://www.hhts.wandsworth.sch.uk/

14. Monitoring arrangements

This policy will be reviewed and approved by the governing board every year.

15. Links to other policies

This policy links to the following policies:

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

Appendix 1: Being notified a child has a medical condition

