

## CHILDREN WITH MEDICAL NEEDS POLICY

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### Principles:

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including day trips, residential visits and sporting activities.
- The governing body and school leaders will ensure that arrangements are in place to support pupils with medical conditions. In so doing, they will ensure that such pupils can access and enjoy the same opportunities at school as any other pupil.
- In making their arrangements, the governing body and school leaders will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The governing body and school leaders will therefore ensure that the focus is on the needs of each individual pupil and how their medical condition impacts on their school life.
- The governing body and school leaders will consult health and social care professionals, pupils and parents/carers to ensure that the needs of pupils with medical conditions are effectively supported.
- The governing body and school leaders will ensure that the school's arrangements give parents/carers and pupils confidence in the school's ability to provide effective support for medical conditions in school.
- No pupil with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made.
- However, in line with safeguarding duties, pupils' health must not be put at unnecessary risk from, for example, infectious disease. A pupil with a medical condition does not therefore have to be accepted in school at times where it would be detrimental to the health of that pupil, or others to do so.

### Policy implementation:

The school has two named staff who have overall responsibility for the implementation of this policy. They are the Head teacher and the School Business Manager.

These named people are responsible for ensuring that:

- Sufficient staff are suitably trained
- All relevant staff are aware of the pupil's condition

- All necessary records and documents, including the pupil's Individual Health Care Plan (IHCP), are accessible to those that need them but that they are treated as confidential and stored accordingly
- Cover arrangements are in place in case of staff absence or staff turnover to ensure someone is always available
- Supply teachers are adequately briefed
- Additional service providers (e.g. after school sports club coaches) are aware of a pupil's condition and any relevant procedures, including emergency procedures
- Risk assessments are carried out for school visits and other school activities which are outside of the normal timetable, and  Monitoring of individual healthcare plans is undertaken.

### **School Procedures:**

Once the school has been notified that a pupil has a medical condition which requires additional support, the school will develop an 'Individual Health Care Plan' (IHCP) or a Risk Assessment for that pupil.

Where a pupil is new to the school, arrangements should be in place in time for the start of the relevant school term.

Where a pupil is moving between schools or a new diagnosis is received mid-term, every effort should be made to ensure that arrangements are put in place within two weeks.

The school recognises that it does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will need to be made about what support to provide based on available evidence.

**Individual Health Care Plans (IHCPs)** IHCPs should help to ensure that the school effectively supports pupils with medical conditions.

They should clearly state what needs to be done, when and by whom and, as a consequence identify the level of training required for specific members of staff

The school, healthcare professional and parents/carers should agree, based on available evidence, whether an IHCP would be appropriate or disproportionate.

IHCPs may vary in format depending on the needs of each pupil.

The level of detail within an IHCP will vary depending upon the complexity of the pupil's condition and the level of support required.

Where a pupil has 'Special Educational Needs' (SEN) but does not have a statement or Education, Health and Care Plan (EHCP), their SEN should be mentioned in their IHCP.

IHCPs and their review may be initiated, in consultation with parents/carers, by a member of the school staff or a healthcare professional involved in providing care to the pupil.

Effective plans should be drawn up in partnership between the school, parents/carers, relevant healthcare professionals and, where appropriate, the pupil.

The aim of an IHCP is to identify the steps which the school should take to help the pupil manage their condition and overcome any potential barriers to getting the most from their education.

Those involved in producing the plan should agree who will take the lead in writing the plan but the responsibility for ensuring that it is finalised and implemented, rests with the school.

All plans must be reviewed at least annually, or earlier if evidence is presented that the pupil's needs have changed.

All plans should be developed with the pupil's best interests in mind and ensure that the school assesses and manages risks to the pupil's education, health and social well-being and minimises disruption.

Where a pupil has a SEN identified in an EHCP, the IHCP should be linked to, or become part of that statement of EHCP,

Where a pupil is returning to school following a period of hospital education or alternative provision, including home tuition, the school should work with the local authority and education provider to ensure that the IHCP identifies the support the pupil will need to reintegrate effectively.

When deciding what information should be recorded on an IHCP, the following points should be considered:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs including medication 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 etc.
- 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 etc.

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The level of support needed, including in emergencies. If a pupil is self-managing their medication, this should be clearly stated with the 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/carers and the head teachers for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Any separate arrangements or procedures required for school trips or other school activities outside of the normal school time table that will ensure that the pupil can participate (e.g. risk assessments)
- Where confidentiality issues are raised by the parents/carers or pupils, the designated individuals to be entrusted with information about the pupil's condition, and
- What to do in an emergency, including whom to contact and contingency arrangements. Some pupils may have an emergency healthcare plan prepared by their lead clinician that could be used to inform the development of their IHCP.

### **Roles and responsibilities:**

#### **The Governing Body must ensure that:**

- Arrangements are in place within the school to support pupils with medical conditions, including making sure that a policy for supporting pupils with medical conditions is developed and implemented
- Pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life, including day trips, residential visits and sporting activities
- Sufficient staff have received suitable training and are competent before they take on responsibility to support pupils with medical conditions, including the administration of prescriptive medicines. For children with particular medical conditions (e.g. diabetes, allergies etc.) appropriate training will be arranged for key staff.
- Designated staff can access the necessary information and teaching support materials as needed.

#### **Head Teachers should ensure that:**

- The school's policy is developed and effectively implemented with partners
- All staff are made aware of the policy and the school's obligation to support pupils with medical conditions and understand their role in the process, including the induction of new staff
- IHCPs are developed for individual pupils as required
- Sufficient trained staff are available to implement all IHCPs including dealing with emergencies
- School staff are appropriately insured to support pupils with an IHCP as employees of the school
- They contact the school nursing service in the case of a pupil who has a medical condition that may require support at school but who has not, as yet, been brought to the attention of the school nurse.

#### **School staff should be:**

- Aware that they may be asked to provide support to pupils with medical conditions, including the administration of medicines, although they cannot be required to do so
- Included in meetings regarding a pupil's medical condition if they have been identified as a key member of staff who is providing support

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Aware of the needs of pupils with medical conditions that they teach, including those that they take on day trips, school residential visits and sporting activities

- Briefed and receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility to support pupils with medical conditions, and
- Aware of how to respond to a pupil with a medical condition when s/he needs help, what constitutes an emergency in each particular case and how to respond.

**Parents/carers should:**

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of IHCPs, and □ Carry out their role/s as designated within that plan

**Pupils should:**

- Help the school as best as they are able to depending upon their age by informing the school as to how their condition affects
- Be involved as much as possible in the discussions about their condition and the development of their IHCP, and
- Comply with the plan as best as they are able to, including the management of their own medicines and procedures as outlined in their IHCP.

**Managing medicines on school premises:**

- St Joseph's Catholic Primary School recognises its common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency. Staff at St Joseph's Catholic Primary School are therefore expected to do what is reasonable and practical to support the inclusion of all pupils. However, as they have no legal or contractual duty, specific staff may be asked, but cannot be directed, to administer medicine. This means that class teachers for example cannot be expected to administer medication although they may agree to do so following training or guidance
- All medicines will only be accepted for administration in school on completion of the consent form (see school website) by a parent or carer. Non-prescription medicines will be administered if there is a compelling reason for doing so, for example, seasonal use of over the counter anti-histamines. Medicines should only be brought into school for administration during the school day when essential. Parents are encouraged to look at dose frequencies and timing and if possible time this to happen out of school hours. In the case of some prescription medicines parents are asked to request doctors for timed-release medication for a minimum number of daily doses and if possible provide two prescriptions - one for home use, one for school/setting use.
- Any medicine for school administration will be checked and agreed by the school office staff who will only accept prescribed medicines that are in-date, labelled with the pupil's name, provided in the original container as dispensed by a pharmacist and including instructions for administration, dosage and storage. The exception to original packaging is insulin, which must be in date but will generally be available inside an insulin pen or a pump rather than in its original container.  
Note: The school accepts no responsibility for out of-date prescribed medication. No other medication should be brought into school by the children, including cough sweets, eye drops, skin cream etc. Please inform the school office of any medical changes.

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For longer term medication, all medicine will be stored securely. Pupils should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility.

- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be readily available to pupils and not locked away. This is particularly important to remember when outside the school premises.
- Pupils who have been prescribed a controlled drug may legally have it in their possession but must be aware that passing it to another child for use is an offence.
- The school should keep all controlled drugs that pupils are not self-managing securely stored in a non-portable container which only named members of staff should have access to. They should however be easily accessible in the event of an emergency.
- School staff can only administer a controlled drug to the pupil for whom it has been prescribed and following appropriate instruction or training
- School staff should administer medicine in accordance with the prescriber's instructions.
- The school must keep a record of all medicines administered to individual pupils, stating what, how and how much was administered, when and by whom. Any observed side-effects should be noted.
- Wherever possible, staff should administer medicine in the presence of another staff member. Both staff members should sign the administering medicine checklist that is kept with the pupil's medicine.
- When no longer required, medicines should be returned to the parents/carers who are responsible for arranging for their safe disposal. □ Sharp boxes should always be used for the disposal of needles and other sharps.

### **The provision and use of emergency salbutamol inhalers in school:**

The school has adopted the policy of keeping emergency salbutamol inhalers at school. The same principles however apply to all pupils with respect to the administration of asthma controlling drugs in that unless advised specifically by a medical practitioner, only those pupils prescribed an asthma reliever will be permitted to use these.

As with all prescriptions, staff should only administer an asthma reliever in the presence of another staff member. Both staff members should sign the administering medicine checklist that is kept with the pupil's medicine.

### **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 IHCPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

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

All staff will receive training so 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.

### **Record keeping**

The governing body / IEB 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.

### **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.

### **Unacceptable Practice:**

Although school staff should use their discretion and judge each case on its merits, with reference to the pupil's IHCP, it is not generally acceptable practice to:

- Prevent pupils from easily accessing their inhalers and medication and administering their medication as and when necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents/carers, or ignoring medical evidence or opinion (however this may still be challenged)
- Frequently send pupils with medical conditions home or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCP
- Penalise pupils for their attendance record if 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 in order to manage their medical condition effectively
- Require parents/carers or make them feel obliged to attend school to administer medication or provide medical support for their child, including toileting issues
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requesting parents/carers to accompany the child.

### **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

### Complaints:

Parents/carers who are dissatisfied with the support provided by the school should, in the first instance, discuss their concerns directly with school.

If for whatever reason, this does not resolve the issue, parents/carers may pursue their complaint more formally by following the procedures as outlined in the school's Complaints Policy.

### Appendix 1: Being notified a child has a medical condition

