ST JOHN'S C.E. PRIMARY SCHOOL GUIDANCE FOR SUPPORTING PUPILS WITH MEDICAL CONDITIONS

The named members of school staff responsible for this medical conditions policy and its implementation are:

NAME: Macci Dobie - Head Teacher

Stacey Man - Welfare Officer

Stacey Man - SENDCo

AIMS

- To ensure that all stakeholders are familiar with this policy and with processes and procedures as outlined
- To ensure stakeholders are aware of the latest requirements and developments in respect of children with medical conditions
- To ensure policy is circulated to all stakeholders via the school website
- To ensure policy is discussed and updated annually and all stakeholders are informed.

The school is an inclusive community that supports and welcomes pupils with medical conditions.

- The school is welcoming and supportive of pupils with medical conditions and provides them with the same opportunities and access to activities (both school based and out-of school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- The school listens to the views of pupils and parents/carers.
- Parents/carers feel confident that the care their children receive meets their needs.
- Staff understand (through training and consultation) that some medical conditions may be serious, adversely affect a child's quality of life and impact on their ability and confidence.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency (see Emergency Procedure).
- All stakeholders in the school community understand and support the medical conditions policy.
- Staff understand that all children with the same medical condition will not have the same needs; our school will focus on the needs of each individual child.

• The school recognises its duties as detailed in Section 100 of the Children and Families Act 2014. (Other related legislation is referenced in DfE guidance p21). Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, the school complies with their duties under that Act. Some may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this policy should be read in conjunction with the Special Educational Needs and Disability (SEND) code of practice.

The school's medical conditions policy is drawn up in consultation with key stakeholders within both the school and health settings.

• Key stakeholders include school nurse, school Welfare Officer, Head Teacher, school staff, Governors' 'Well Being' sub-committee.

The medical conditions policy is communicated to all stakeholders to ensure its full implementation.

- All stakeholders are informed of the medical conditions policy through informed meetings before it is placed on the school website. All staff understand, and are trained, in what to do in an emergency for children with medical conditions.
- All school staff, including temporary or supply staff, are aware of the medical conditions of the children they teach and understand their duty of care to pupils who have a medical condition, in an emergency. Information can be found in 'Information for Supply Teachers' folder.
- All staff employed in school at the time of training are taught what to do in an Anaphylaxis emergency and this is refreshed annually. In addition, any further medical training is dependent upon the needs of the children on roll.
- All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required have an individual healthcare plan (IHP), which explains what help they need in an emergency. The IHP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.
- All staff providing support to a pupil have received suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. In the first instance this training is provided to the Welfare Officer and other key staff who have direct contact with the child, by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or parent/carer. The school keeps an up to date record of all training undertaken and by whom.
- The school holds an emergency epipen and reliever inhaler for use by pupils; these can only be administered under the direction of the emergency services. The reliever inhaler can be used for pupils already known by the school.

• See 'Model process for developing individual healthcare plans' Appendix 1

All staff understand and are trained in the school's general emergency procedures.

- •All staff, including temporary or supply staff should be aware of the content of this policy, know what action to take in an emergency and receive updates at least yearly. The school nurse will provide annual training for all staff on the use of an epipen. Further training on more specific conditions (epilepsy, diabetes...) will be given as and when needed. All TAs are first-aid trained and attend re-training as required.
- •If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

The school has clear guidance on providing care and support and administering medication at school.

- •It is not school policy for staff to administer medication to pupils in school- this is the responsibility of the parents/carers and the school will facilitate for this to take place as necessary. However, in the event that a child may require medication during the school day in order that they may attend school, a medical form must be completed and signed by the parent/carer, authorising the school to administer medication, and in turn the school needs to sign to acknowledge that parental instructions can be carried out.
- Medication will only be administered by school staff when it would be detrimental to a child's health or school attendance not to do so, and this will be clearly stipulated on a child's IHP plan.
- •The school will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child; in the first instance medication will be administered by the school Welfare Officer but the school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. The governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- •The school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent.
- •When administering medication, for example pain relief, it is the parent's responsibility to inform the school if a previous dose was given and when the extra dose should be administered by school staff.
- •The school will make sure that a trained member of staff (1st aider) is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- •Parents/carers at this school understand that they should let the school know immediately if their child's needs change.

•In this school children are not permitted to self-medicate unless they are under the supervision of an adult, and set guidelines are followed. If a pupil misuses their medication, either deliberately or accidentally, or anyone else's, medical advice will be sought immediately and their parent/carer informed as soon as possible. The school's disciplinary procedures will be followed.

The school has clear guidance on the storage of medication and equipment at school.

- •The school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, eg asthma inhalers, epipens etc are readily available wherever the child is in the school and on off-site activities, and are not locked away. It is the parent/carer's responsibility to ensure that all medication is in date.
- •Pupils should know exactly where to access their medication. Pupils do not carry their own medication- this is the responsibility of the 1st aider/supporting member of staff. If a parent is insistent on their child carrying their own medication it must be clearly stated on an IHP with a specific reason given. In the event of this happening spare medication must still be held by the school. If a controlled drug must be given in school, the Welfare Officer will administer it once they have had clear instructions from parents/specialist training from a health professional, including written permission and instructions.
- •This school will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes.
- •The school will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- •The Welfare Officer will keep a regular check on the expiration date of medication held at school and notify parents in good time when medication is due to be renewed.
- •The school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

This school has clear guidance about record keeping.

- •As part of the school's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.
- •The school uses an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare

services. Where a child has SEN but does not have an EHC plan, their special educational needs are mentioned in their IHCP.

- •This school has a centralised register of IHPs, and identified member of staff (Welfare Officer) has the responsibility for this register.
- •IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- •A copy of the pupil's IHP is given to parents, put in the class medical bag and kept on record by the Welfare Officer.
- •The school makes sure that the pupil's confidentiality is protected. •The school seeks permission from parents/carers before sharing any medical information with any other party.
- •An accurate record of all medication administered in class is kept in a book in the class medical bag, including the dose, time, date and supervising staff. The Welfare Officer monitors these records termly.

The school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

- •The school is committed to providing a physical environment accessible to pupils with medical conditions, wherever possible. The school is also committed to an accessible physical environment for out-of-school activities.
- •The school makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- •All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- •The school understands the importance of all pupils taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order to ensure they are accessible to all pupils. This includes out-of-school clubs and team sports. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- •The school understands that all relevant staff are aware that pupils should not be forced to take part in activities should they fall ill whilst at school. In these situations parents need to be informed in order that the child can go home. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these. Special circumstances aside, it is understood by staff, parents and governors that if a child is well enough to attend school then they should participate in all school activities.

The school makes sure that pupils have the appropriate medication/equipment/food with them during physical activity and offsite visits.

- •The school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- •All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- •The school will not penalise pupils for their attendance if their absences relate to their medical condition.
- •The school will refer pupils with medical conditions, who are finding it difficult to keep up educationally, to the Head Teacher who will liaise with the pupil (where appropriate), parent/carer and the pupil's healthcare professional, and the school SENCO.
- •Pupils learn what to do in an emergency (red triangle system). They know that medical bags accompany all off-site activities; they are aware of the location of the medical room and know how to seek assistance from the Welfare Officer if their teacher and 1st aider deem this necessary.
- •The school makes sure that a risk assessment is carried out before any out-of-school visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

The school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks and has a written schedule of reducing specific triggers to support this.

- •The school is committed to identifying and reducing triggers both at school and on outofschool visits.
- •School staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers.
- •The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with medical needs.
- •The school reviews all medical emergencies and incidents, when they occur, to see how they could have been avoided, and changes school policy according to these reviews.

Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

- •The school works in partnership with all relevant parties including the pupil (where appropriate), parent/carer, school's governing body, all school staff and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- •Key roles and responsibilities are outlined in Appendix 2.

The medical conditions policy is regularly reviewed, evaluated and updated if necessary.

•In evaluating the policy, the school seeks feedback from relevant stakeholders (where necessary) and amendments are made to reflect the current needs of the children. Should parents and pupils be dissatisfied with the support provided they should discuss these concerns with the Headteacher.

Appendix 1 Model process for developing individual healthcare plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed



Headteacher or senior member of school staff to whom this has been delegated, coordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil



Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)



Develop IHCP in partnership – agree who leads on writing it. Input from healthcare professional must be provided



School staff training needs identified



Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed



IHCP implemented and circulated to all relevant staff



IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Roles and responsibilities

Governing bodies – 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. They should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also 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.

Head Teacher – should ensure that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff who need to know are aware of the child's condition. They should also 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. Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are

appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child 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.

School staff – 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. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

School nurse – every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. This must be done before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses — should notify the school and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.

Pupils – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and will be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times.