

Supporting pupils with medical conditions

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Supporting pupils with medical conditions

We are wholly committed to pursuing a policy of inclusive education that welcomes and supports pupils with medical conditions. This policy is designed to support the management of medication and medical care in our school and to support individual pupils with medical needs. The policy is drawn up in consultation with the Headteacher and the school's SENCo and complies with DFE guidelines for 'Managing Medicines in Schools and Early Years Settings (2005).'

The school aims to provide a clear policy that is understood and accepted by all staff, parents and children, providing a sound basis for ensuring that children with medical needs receive proper care and support in school, and that for such children attendance is as regular as possible.

In order to comply with the above, the school's rules that must be followed and the standards maintained with signposting for further guidance. This document also highlights the risks to users, clients and the school and the potential consequences of breaching this policy.

This document will be available to the: Headteacher, Local Governing Body, employees within the Trust, volunteers, and any 3rd Party Contractors working for or on behalf of the school.

The policy includes:

- A clear statement of parental responsibilities in respect of medicines
- Roles and responsibilities of staff administering medicines
- Procedures for managing prescription medicines which need to be taken during the school day
- Procedures for managing prescription medicines on outings and trips
- Written permissions from parents for medicines
- Circumstances in which children may take non-prescription medicines
- Assisting children with long term medical needs
- Staff training
- Record keeping
- Safe storage of medicines
- Emergency procedures
- Risk assessment and management procedures
- Management of medical conditions

Responsibilities

Parents or carers have prime responsibility for their child's health and should provide the school with up-to-date information about their child's medical conditions, treatment and/or any special care needed. If a child has a more complex medical condition, parents or carers should work with the Headteacher and SENCo, or other health care professionals, to develop an individual healthcare plan, which will include an agreement on the role of the school in managing any medical needs and potential emergencies. It is the parent/carers' responsibility to make sure that their child is well enough to attend school.

All Teachers have a general professional duty to safeguard the health and safety of their pupils and to act "in loco parentis", that is, to act as any reasonable parent would. Section 100 of the Children and Families Act 2014 places a duty on schools to make arrangements for supporting pupils at

their school with medical conditions. Therefore, our school will, so far as is reasonably practicable and where resources permit, assist with the administering of prescribed medication to children where essential. The Headteacher will decide where prescribed medication is 'essential'. Staff will have access to information on pupils' medical conditions and actions to take in an emergency. Staff managing the administration of medicines and those who administer medicines will receive appropriate training and support from health care professionals.

The policy of the school is not to administer medication or medical care unless a pupil has a medical condition, which, if not managed, could prove detrimental to their health or limit access to education. The Headteacher accepts responsibility, in principle, for school staff administering or supervising the taking of prescribed medication or medical care during the school day only where it is absolutely necessary.

Short-term medical needs

If children are unwell and unable to cope with a busy school day, or if the child has an infectious or contagious condition, they should not be sent to school. If they become ill during the day, parents/carers will be contacted by the School Office in order that the child can be taken home.

Long-term medical needs

Where a pupil has a chronic illness, medical or potentially life-threatening condition, the school will initiate a health care plan to meet individual needs and support the pupil. This will be drawn up by the SENCO and health care professionals in consultation with the child's parents or carers. The plan will contain the following information:

- Definition and details of the condition
- Special requirements e.g. dietary needs, pre-activity precautions
- Treatment and medication
- What action to take/not to take in an emergency
- Who to contact in an emergency?
- Staff training where required
- The role the staff can play
- Consent and agreement

Where a child's needs are particularly complex, and could affect their ability to access the full curriculum or participate in other areas of school life, then special arrangements will be made. The PIMS Team and SENATAS may be contacted to support any adaptations to the curriculum.

In some cases, this might take the form of dedicated adult support, at certain times of the school day, where this is funded. Alternatively, the child's needs could be such that modifications to the learning environment and/or the provision of specialist aids will need to be considered.

Individual health care plans

A written, individual health care plan will be developed where needed, to clarify for staff, parents and the child, the support that will be provided and what training may be required. This will include:

- Details of the child's medical condition
- Any medication
- Daily care requirements
- Action to be taken in the event of an emergency
- Parents or carers details including emergency contact numbers

Those who may contribute to a health care plan include:

- The child, if appropriate
- The school nurse, specialist nurses, children's community nurses, the child's GP or other health care professionals (depending on the level of support the child needs)
- The parents or carers
- The Headteacher and SENCO
- The Teacher and TA
- PIMS Team
- Trust H&S Compliance Officer

It is good practice to have a health care plan endorsed by a health care professional and in many cases, it is essential to do so.

The school will agree with parents how often they should jointly review a health care plan. The timing of this will depend on the nature of the child's needs. In most cases this will take place at the start of each school year; however, some plans will need to be reviewed more frequently depending on individual needs.

Health care plans and training are not transferrable, even when children have the same condition.

Prescribed medicines

Prescribed medicines should only be brought to school when essential; that is, where it would be detrimental to a child's health if the medicine were not administered during the school day. Medicines prescribed 'three times a day' should be administered 'before school, after school and at night". The school recognises that in extreme cases, staff may administer medication detailed below following completion of the appropriate medical form. Parents and carers are allowed into school to administer medication if they so desire.

Exceptions to this are pupils on health care plans who have individual medical needs requiring emergency medication to treat specific conditions, such as anaphylaxis.

Our school will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber and are presented in the original container dispensed by a pharmacist and include the pupil's name, prescriber's instructions for administration and dosage.

Non-prescribed medicines

Non-prescribed medicines will only be administered with prior written permission from parents in extreme circumstances such as residential trips. Staff will check the medicine has previously been administered without adverse effect and the appropriate medical forms must be completed.

Staff will never administer medicines containing aspirin unless prescribed by a doctor. Staff will never administer medication containing ibuprofen to children who are asthmatic.

Administering medicines

The school recognises that no child under 16 should be given medicines without their parent's written consent. Following written consent using the appropriate medical forms, any member of staff administering medicines to a pupil should check:

- The child's name
- Name of medication
- The prescribed dose
- Expiry date

• Written instructions provided by the prescriber on the label or container

If in doubt about any procedure, staff will not administer the medicine before checking with parents/carers or a health professional before taking further action.

A written record must be kept following administration of medicines to pupils, using the appropriate medical forms. These are witnessed by another member of staff.

If a child refuses to take a medicine, staff will not force them to do so, but will record this on the appropriate medical form and parents or carers will be notified of the refusal.

Record keeping

Parents should inform the school about the medicines their child needs to take and provide details of any changes to the prescription, or the support required in line with the directions above. Medicines should always be provided in the original container as dispensed by the pharmacist and include the prescriber's instructions.

Requests for staff to administer medication should be completed using their school's medical form. These should include:

- Name of child
- Name of medicine
- Dose
- Method of administration
- Time/frequency of medication
- Any side effects
- Expiry date

Forms should be kept in the register folder and referred to when administering medication. The medical form must be completed by staff following administration. If a child refuses medication, this must be recorded on the medical form and parents should be notified. Once complete, medical forms should be filed in the School Office.

Requests for updated medical conditions including asthma, are distributed to parents at the beginning of each school year. Returned information is collated by the School Office and registered and recorded. This information is disseminated by the SENCo regularly during staff briefings, to lunchtime staff, displayed confidentially in the staff room for immediate reference and recorded on SIMS. The medical note includes a photo of the child.

Updated medical conditions and reviews of policies and practice are monitored and disseminated by the SENCo as they are presented.

Storing medicines

Staff will only store, supervise and administer medicine that has been prescribed for an individual child. Medicines must be stored safely in the pharmacist's original container and clearly labelled with the child's name, the dosage, and instructions for administration.

Non-emergency prescribed medication is stored with the medical consent form in the School Office. Medication requiring refrigeration will be stored in the staff room.

Emergency medications such as Epi-pens and asthma inhalers should be readily available in a clearly labelled container in the class teacher's cupboard. Children should know where their

medicines are stored; they should not be locked away. Where children are considered safely able to take care of their own medicines, they will be supported to do so.

Parents are ultimately responsible for checking expiry dates on their children's medicines and replacing as necessary. The school will also check medication expiry dates once a year.

Disposal of medicines

Staff should not dispose of medicines. Parents and carers are responsible for ensuring that date-expired medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each year. Any medicines that have not been collected should be taken to a local pharmacy for safe disposal.

Sharps boxes should always be used for the safe disposal of needles. Parents should obtain these from their child's GP and return to a pharmacy for safe disposal.

Emergency procedures

All staff are aware of procedures when dealing with a medical emergency. These should be supervised by a trained First Aider.

All staff are aware of pupils on a health care plan and understand the need to follow agreed emergency support.

All staff know how to call the emergency services

In the event of an emergency, every effort will be made to contact a parent or carer so that they may accompany their child to hospital. If this is not possible, a member of staff will accompany the child to hospital by ambulance and stay until the parent arrives. Health care professionals are responsible for any decisions on medical treatment when parents are not available.

If there is an emergency within the school i.e. if the fire alarm goes off, then it is the responsibility of staff to ensure that any essential medication is taken to the assembly point, for the child/children to whom it applies.

Educational visits

This school actively encourages children with medical needs to participate in educational visits. Staff will aim to facilitate reasonable adjustments to enable pupils with medical needs to participate fully and safely on visits. Risk assessments will be used to highlight any potential difficulties and ensure procedures are in place to support pupils. Additional staff/adults will be considered for this purpose where resources allow.

Prior to a residential visit, parents or carers must complete an up-to-date medical questionnaire about pupil's current general health and medication. Prescribed medication will be administered, providing parents have completed the appropriate medical form. Parents are invited to provide written consent to enable staff to act 'in loco parentis' and administer Calpol analgesia if required. Where this is refused, parents are requested to discuss alternative support measures with staff.

All medication or equipment which needs to be administered during the visit should be handed directly to the class teacher in accordance with the school's guidelines.

Accompanying staff will be aware of any medical needs and relevant emergency procedures. A copy of health care plans will be taken on all visits as well as emergency medication that may be required.

Children's parents or carers will not be required to accompany their own children on educational visits. If there is any concern about whether the school can provide for a child's safety, or the safety of other children on a visit, then parents will be consulted, and medical advice sought from the school health service or the child's GP.

Sporting activities

All children with medical conditions will be encouraged to participate as fully as possible in physical activities and extra-curricular sport. For many, physical activity can benefit their overall social, mental, and physical health & well-being. Staff will be sensitive to their individual needs and sufficient flexibility will be incorporated into the lesson for all children to be included in ways appropriate to their own abilities.

Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. This will include a reference to any issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Children are not permitted to share medicines. Only medicines prescribed for a particular child may be taken by that specific individual. School acquired blue inhalers can be used in an emergency situation for any child and will be disposed of afterwards.

Staff training

Staff training is provided to support the administration of emergency medications such as Epi-pens or insulin. Each school keeps a register of staff who have undertaken the relevant training. Only staff who have received this training should administer such medications.

If school staff need to be trained to administer medical procedures the school will contact the relevant health care professional, e.g. the school nurse, specialist nurse or children's community nurse. Parents cannot be responsible for leading this training, but parents and children will be asked to participate in the training and give evidence on how they prefer things to be done.

Parents and school staff cannot cascade training that they have received when the training is specific to an individual child.

School staff who have been trained are responsible for following and delivering the health care plan and if the child's condition changes, they will contact an appropriate professional and the parents, making them aware of the change and requesting further training if needed or an alteration to the plan.

The SENCo will liaise with health care professional and the trained staff to support and facilitate training refreshers and updates as needed.

School staff will request further training when needed, and professional updates.

Individual members of staff are responsible for identifying and communicating any changes that they notice in the child's care needs. The SENCo will inform parents and health care professionals in writing and discuss whether further training is needed.

In addition to all of the above, this school also has multiple First Aiders and Paediatric First Aiders. Training for them is also reviewed and updated regularly.

Medical conditions

Head injuries

Pupils who sustain a head injury must be reviewed by a First Aider in school. If a pupil has a visible wound, swelling or adverse reaction, parents will be informed and will be asked to assess their child personally. Where there are no residual effects, the pupil can remain in school whilst being observed. A bumped head form must be completed and sent home with the child.

Asthma, epilepsy, anaphylaxis, and diabetes

Parents have a duty and responsibility to notify the school if their child has any of these conditions and should provide details of any treatment and support they may require in school. Relevant health care professionals will liaise between parents, carers and school staff to ensure training ahs been provided for any relevant or emergency support or treatment. An individual health care plan will usually be compiled, detailing the course of action to be taken. The Trust has separate policies for Asthma, Epilepsy & Anaphylaxis which should always be consulted. These are available on Share Point via the PPAT info hub.

Absence from school for more than 15 days

For those children who attend hospital appointments or who are admitted to hospital on a regular basis, special arrangements may also need to be considered. In this event, advice may be sought from Medical/ PEVP panel who might offer additional support from the Link Education Centres.

Children with medical needs may be unable to attend school for many reasons relating to their condition and in this event the school will make arrangements to link the child to suitable learning opportunities and will facilitate their links with other children so that friendships are sustained.