

# St. Stephen and All Martyrs' CE Primary School



## **Supporting Pupils at School with Medical Conditions POLICY**

**RATIONALE:**

On 1<sup>st</sup> September 2014 a duty came into force for Governing Bodies to make arrangements to support pupils at school with medical conditions (Section 100 of the Children and Families Act 2014).

The Governing Board will ensure that arrangements are in place to support pupils with medical conditions and that these children can access and enjoy the same opportunities at school as any other child. The Governing Board will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. The governing board will ensure that arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will show an understanding of how medical conditions impact on a child's ability to learn as well as increase their confidence and promote self-care. They will also ensure that staff are properly trained to provide the support that pupils need.

**PURPOSE:**

Pupils with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child 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, Governors do not have to accept a child in school at times where it would be detrimental to the health of that child or others to do so.

See: [www.gov.uk/government/publications/school-admissions-code](http://www.gov.uk/government/publications/school-admissions-code)

**GENERAL GUIDELINES:**

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 Governing Body must comply with their duties under that Act. Some children may also have Special Educational Needs (SEN) and may have a Statement or 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 guidance should be read in conjunction with the Special Educational Needs and Disability (SEND) Code of Practice. For pupils who have medical conditions that require EHC plans, compliance with the SEND code of practice will ensure compliance with the statutory elements of this guidance with respect to those children.

See: [www.gov.uk/government/publications/send-code-of-practice-0-to-25](http://www.gov.uk/government/publications/send-code-of-practice-0-to-25)

When school is notified that a child has a medical condition, procedures are put in place to cover any transitional arrangements between schools, the process to be followed upon reintegration, or when pupils' needs change and arrangements for any staff training or support. For children starting at a new school, arrangements will be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis

or children moving to a new school mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.

School does not have to wait for a formal diagnosis before providing support to a pupil. In cases where a pupil's medical condition is unclear or where there is a difference of opinion, judgements will be made about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place.

Teachers and other school staff in charge of pupils have a common law duty to act in the place of the parent and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine. The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information.

This Policy will be reviewed regularly and will be readily accessible to Parents/Carers and staff through our school website.

#### **INDIVIDUAL HEALTHCARE PLANS:**

Individual Health Care Plans (IHCP's) will help school effectively support pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex. However, not all children will require one. The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Headteacher will take a final view. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided at Appendix A.

[\(See Appendix A and Healthcare Plan proforma\).](#)

#### **The school has a separate intimate care policy.**

- Plans will be drawn up in partnership between school, parents and a relevant healthcare professional e.g. specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils will be involved whenever appropriate as the aim is to capture the steps which school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education.
- Plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

- Where a child has a special educational need identified in a Statement or Educational Health and Care Plan (EHCP), the individual Health Care Plan (IHCP) will be linked to, or become part of that statement or EHCP.
- The level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support. Where a child has SEN but does not have a Statement or EHC plan, their special educational needs will be written in their individual healthcare plan.
- Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), school will work with the Local Authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

**Points considered when developing an IHCP:**

- 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 child's educational, social and emotional needs e.g. how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions.
- The level of support needed (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication this should 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 child's medical condition from a Health Professional, and cover arrangements for when they are unavailable.
- Who in the school needs to be aware of the child's condition and the support required.
- Arrangements for written permission from parents and the Headteacher, or delegated person, for medication to be administered by a member of staff or self-administered by the child during school hours.
- Separate arrangements or procedures for school trips or other school activities outside of the normal school timetable that will ensure that the child can participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent of a child the designated individuals to be entrusted with information about the child's condition.
- What to in an emergency, including whom to contact and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that

could be used to inform development of their individual healthcare plan.

## **ROLES AND RESPONSIBILITIES**

### **The Governing Board will:**

- ✓ make arrangements to support children with medical conditions in school and ensure that a policy is developed and implemented;
- ✓ ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions;
- ✓ provide continuing professional development provision opportunities.

### **Policy Implementation:**

The overall responsibility for the successful administering and implementation of this Policy is given to the Headteacher, including risk assessments for school visits and other school activities outside of the normal timetable.

### **The Headteacher will ensure that:**

- ✓ the school's policy is developed and effectively implemented with partners;
- ✓ all staff are aware of the policy and understand their role in its implementation;
- ✓ all staff who need to know are aware of the child's condition.

### **The Headteacher and/or Business Manager will:**

- ✓ ensure there are sufficient trained numbers of staff available to implement the policy and deliver against all IHCP's including in contingency and emergency situations. (Training should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions and to fulfil the requirements as set out in individual health care plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures);
- ✓ ensure cover arrangements are in place in case of staff absences or staff turnover to ensure that someone is always available and on site;
- ✓ be responsible for briefing supply teachers.

### **The Senco (Inclusion Team) will be:**

- ✓ responsible for the drawing up and for the monitoring of individual health care plans.

### **School Staff:**

- must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). In some cases, written instructions from the parent or on the medication container dispensed by the

- pharmacist may be considered sufficient, but it is for the school to decide, having taken into consideration the training requirements as specified in pupils' individual health care plans. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions;
- may be asked to provide support to children with medical conditions, including administration of medicines (although they cannot be required to do so);
- will receive sufficient and suitable training and achieve the necessary level of competency before they take on the responsibility to support children with medical conditions;
- will be expected to show a commitment and awareness of children's medical conditions. All new members of staff will be inducted into the arrangements and guidelines set out in this Policy. Supporting a child with a medical condition during school hours is not the sole responsibility for one person. School will work in partnership with healthcare professional, social care professionals, Local Authorities, Parents and Pupils.

#### **School Nurse:**

School has access to the 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.
- ✓ Advising on training that will help ensure that all medical conditions affecting pupils in the school are fully understood. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.
- ✓ Liaising with lead clinicians locally on appropriate support for the child and associated staff training needs.
- ✓ Providing advice and liaising with staff on the implementation of a child's IHCP.

#### **Other Healthcare Professionals including GP's and Paediatricians:**

- ✓ They should notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- ✓ Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes).
- ✓ Children will be fully involved in discussions about their medical support needs and contribute, and comply with, their IHCP as appropriate.

#### **Parents will:**

- ✓ 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 IHCP;
- ✓ provide medicines and equipment and ensure they, or another nominated adult, are contactable at all times.

## **Pupils:**

### **THE CHILD'S ROLE IN MANAGING THEIR OWN MEDICAL NEEDS**

- After discussion with parents, children who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected within individual healthcare plans.
- Wherever possible children will be able to access their medicines for self-medication quickly and easily. Some children may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff should help to administer medicines and manage procedures for them
- If a child refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but will follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

## **Local Authority:**

The Local Authority should provide support, advice and guidance to support children with medical conditions to attend full time. Where children would not receive a suitable education at St. Stephen's because of their health care needs the Local Authority has a duty to make other arrangements

## **Providers of Health Services:**

Providers of Health Services should co-operate with school in providing valuable support, information, advice and guidance

## **STAFF TRAINING AND SUPPORT:**

- The relevant healthcare professional will normally lead on identifying and agreeing with the school, the type and level of training required and how this can be obtained. However school may wish to choose to arrange training and ensure this remains up to date.
- Training will be sufficient to ensure that staff are competent and have confidence in their ability to support children. This includes an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. A record of the staff training will be kept. (See Appendix B)
- Staff will not give prescription medicines or undertake healthcare procedures without appropriate training – the training will be updated to reflect any IHP.
- A first-aid certificate does not constitute appropriate training in supporting children with medical needs.
- Healthcare professionals, including the school nurse, can provide confirmation of the proficiency of staff in a medical procedure, or in providing medicine.
- School has arrangements in place for whole school awareness training regarding supporting children with medical conditions (e.g. staff training days) to help ensure that all medical conditions affecting pupils in the school are fully understood. This includes

preventative and emergency measures so that staff can recognise and act quickly when a problem occurs

- The family of a child will be key in providing relevant information to school staff about how their child's needs can be met.

### **MANAGING MEDICINES ON SCHOOL PREMISES**

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child will be given prescription or non-prescription medicines without their parent's written consent for that particular medicine. Forms are available from the office or can be downloaded from the website (See Appendix C).
- No child will be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, will never be administered without first checking maximum doses and when the previous dose was taken. Parents will be informed when the dose was given.
- School will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage (exception to this is insulin, which must still be in date but may be available inside an insulin pen or a pump, rather than in its original container).
- All medicines will be stored safely. Children will be informed where their medicines are 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 children either in their class or the school office (consideration of this will be taken when off school premises e.g. school trips).
- School will keep controlled drugs that have been prescribed for a pupil securely stored and only named staff will have access. Controlled drugs will be easily accessible in an emergency. A record will be kept of any dosage used and the amount of the controlled drug held in school. (Appendix D).
- School staff may administer a controlled drug to whom it has been prescribed in accordance with the prescriber's instructions. School will keep a record of all medicines administered to individual children stating what, how and how much was administered, when and by whom. Any side effects will be noted.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharp boxes will always be used for the disposal of needles and other sharps.

### **RECORD KEEPING:**

Written records will be kept of all medicines administered to children. Parents will be informed if their child has been unwell in school, usually by a telephone call or text message.

### **EMERGENCY PROCEDURES:**

- Where a child has an IHCP this will clearly define what constitutes an emergency and explain what to do including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other children in the school should know what to do in general terms such as informing a teacher immediately if they think help is needed.



- If a child needs to be taken to hospital, staff will stay with the child until the parent arrives or accompany a child to hospital in an ambulance,

**When local emergency services are called staff will give precise details of the school site entrance (See Appendix E)**

**DAY TRIPS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES:**

The Governing board will ensure that arrangements are clear and unambiguous about the need to actively support children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. School will make arrangements for the inclusion of children in such activities with any adjustments as required unless evidence from a clinician states that this is not possible. A risk assessment will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included (refer to guidance on school trips)

**POINTS FOR CONSIDERATION:**

- School does not assume that every child with the same condition requires the same treatment
- School will not send children with medical conditions home frequently, or prevent them from staying for normal school activities, unless this is specified in their IHCP
- If a child becomes ill, they will not be sent to the school office unaccompanied
- School to take into consideration hospital appointments when monitoring attendance
- School does not prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- School will not require parents, or make them feel obliged, to attend school to administer medication or provide medical support to their child, including toileting issues. No parent will have to give up working because the school is failing to support their child's medical needs
- School will not prevent children from participating in any aspect of school life, including school trips, by requiring parents to accompany them.

**LIABILITY AND INDEMNITY INSURANCE:**

The School has an Insurance Policy that provides liability cover relating to the administration of medication.

Any parents of pupils dissatisfied with the support provided should discuss their concerns directly with the school. If this cannot be resolved parents may make a formal complaint via the schools complaints procedure, available from the school office or downloaded from the website.

The Headteacher will have overall responsibility that this Policy is implemented and that risk assessments for school visits are undertaken.

The Headteacher, SENCo or Business Manager, will ensure that sufficient staff are suitably trained, cover arrangements are in place, supply teachers are briefed and IHP's are monitored.

**Approved by the Governing Body Pupil and Inclusion Committee  
January 2015**

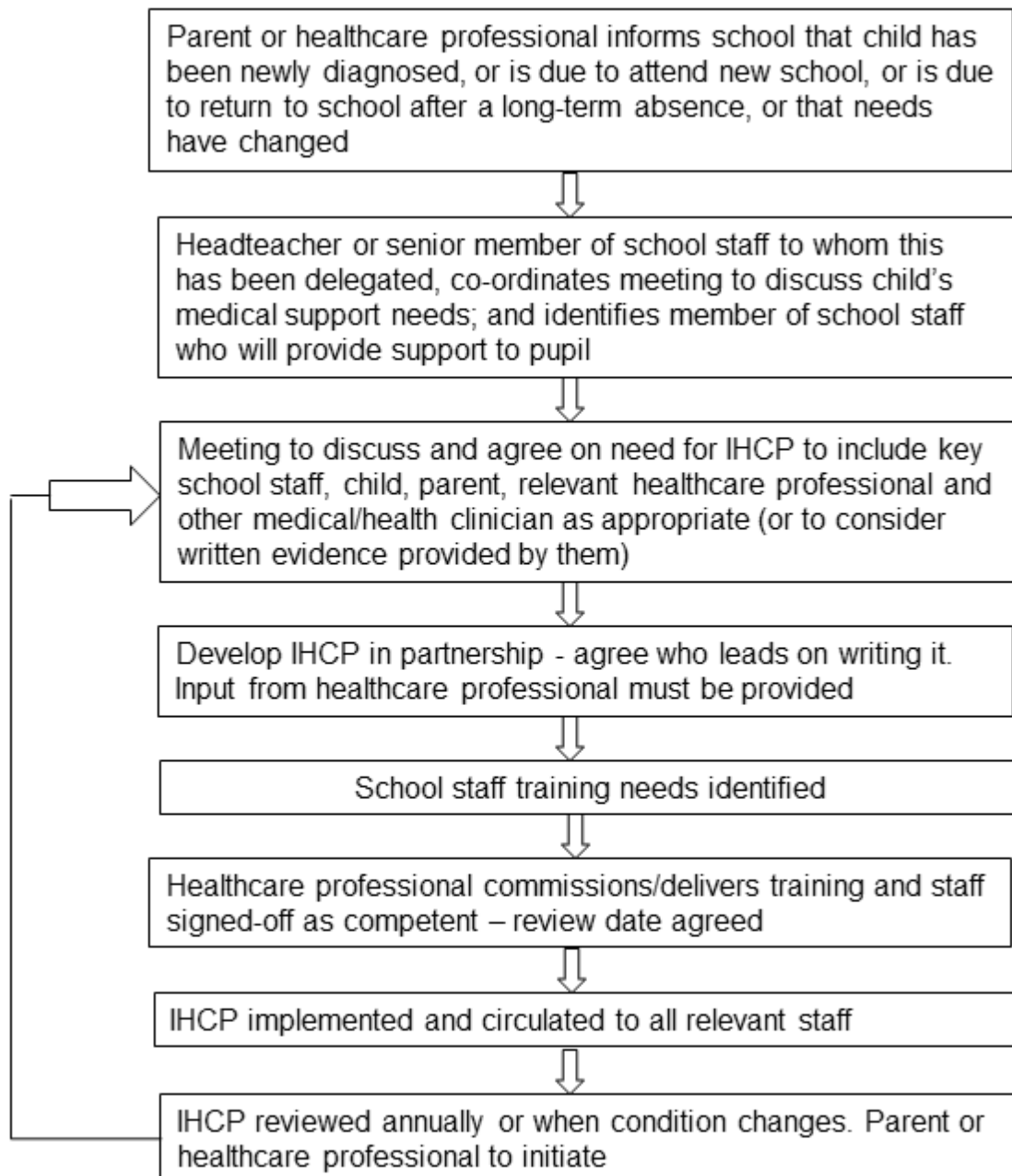
**Signature of  
Chair.....**

**Signature of  
Headteacher.....**

**Date of Review January 2016  
Date of next review: Summer 2017**

## Appendix A: (1)

### Model process for developing individual healthcare plans



# Appendix A: (2)

## Healthcare Plan for a Pupil with Medical Needs

### Individual Health Care Plan

Name of school/setting

--

Child's name

--

Year Group

--

Date of birth

--

Child's address

--

#### VERSION NO.

--

Medical diagnosis or condition

--

Date

--

Review date

--

#### Family Contact Information

Name

--

Phone no. (work)

--

(home)

--

(mobile)

--

Name

--

Relationship to child

--

Phone no. (work)

--

(home)

--

(mobile)

--

#### Clinic/Hospital Contact

Name

--

Phone no.

--

#### G.P.

Name

--

Phone no.

--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

## **Appendix A: (3)**

### **Letter inviting parents to contribute to Individual Health Care Plan development**

Dear Parent/Carer.

#### DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

## Appendix B

### Staff Training Record Sheet – Administration of Medicines

Name	
Type of training received	
Date training completed	
Training Provided by	
Profession and Title	

I confirm that (name of member of staff) has received the training detailed above and is competent to carry out any necessary treatment.

I recommend that the training is updated (suggested review date).

Trainers signature \_\_\_\_\_

Date \_\_\_\_\_

I confirm that I have received the training detailed above.

Staff signature \_\_\_\_\_

Date \_\_\_\_\_

# Appendix C: (1)

## Parental Agreement for Administration of Medicine in School

**St. Stephen & All Martyrs' CE Primary School has a policy that staff can administer medicine. HOWEVER we cannot give your child medicine unless you complete and sign this form.**

Name of Child	
Date of Birth	
Year Group	
Medical Condition or illness	

### Medicine

Name/type of medicine (as described on container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/ other instructions	
Are there any side effects we need to know about?	
Self-administration INDICATE YES/NO	
Procedures to take in an emergency	

**NOTE: Medicines must be in the original container as dispensed by the pharmacy**

### Contact Details

Name	
Daytime telephone number	
Relationship to Child	
Address	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school staff administering medicine in accordance with the school policy. I will inform the school, immediately in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature \_\_\_\_\_ Date \_\_\_\_\_



# Appendix C: (2)

## Record of medication administered to an Individual Child continued

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

# **Appendix D**

## **Contacting emergency services**

**Request an ambulance – dial 999, ask for an ambulance and be ready with the information below.**

**Speak clearly and slowly and be ready to repeat information if asked.**

1. School telephone number – 01204 333155
2. Your name.
3. School location – St. Stephen & All Martyrs' CE Primary School, Radcliffe Road, Bolton. (It is important that you give the full name of the school (St. Stephen & All Martyrs)).
4. State the School postcode – BL2 1NZ. Please note that postcodes for satellite navigation systems may differ from the postal code so offer more key details of exact location.
5. Provide the exact location of the patient within the school setting.
6. Provide the name of the child and a brief description of their symptoms.
7. Reiterate to Ambulance Control the full name and address of the school and state that the crew will be met by a member of staff and taken to the patient.