

Danecourt School

Supporting Pupils with Medical Conditions Policy



Danecourt School

VALUED, RESPECTED,
SAFE & SUCCESSFUL

Approved by: Cathryn Falconer

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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)

2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), 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: [Supporting pupils at school with medical conditions](#).

This policy also complies with our funding agreement and articles of association.

Definitions of medical Conditions

Pupils' medical needs may be broadly summarised as being of two types: -

Short-term affecting their participation at school because they are on a course of medication

Long-term potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances. It is important that parents feel confident that the school will provide effective support for their child's medical condition and that pupils feel safe.

All pupils attending Danecourt have special educational needs (SEN) and have an Education, Health and Care Plan (EHCP). This policy should be read in conjunction with the 0-25 SEND Code of Practice and the school's SEND policy / SEN Information Report and the individual healthcare plan will become part of the EHCP. All children attending Danecourt are considered disabled and therefore the governing board **must** comply with their duties under the Equality Act 2010.

3. Roles and responsibilities

3.1 Collaborative Working

Supporting a child with a medical condition in school hours is not the sole responsibility of one person. Collaborative working between parents/carers, medical healthcare professionals and school staff is essential for this policy to be effective in enabling the needs of pupils with medical conditions to be met effectively.

3.2 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.

3.3 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
- 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

3.4 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.

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.

3.5 Parents

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 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

3.6 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils, as and when appropriate, 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.

3.7 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.

Healthcare professionals, such as GPs and pediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition.

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.

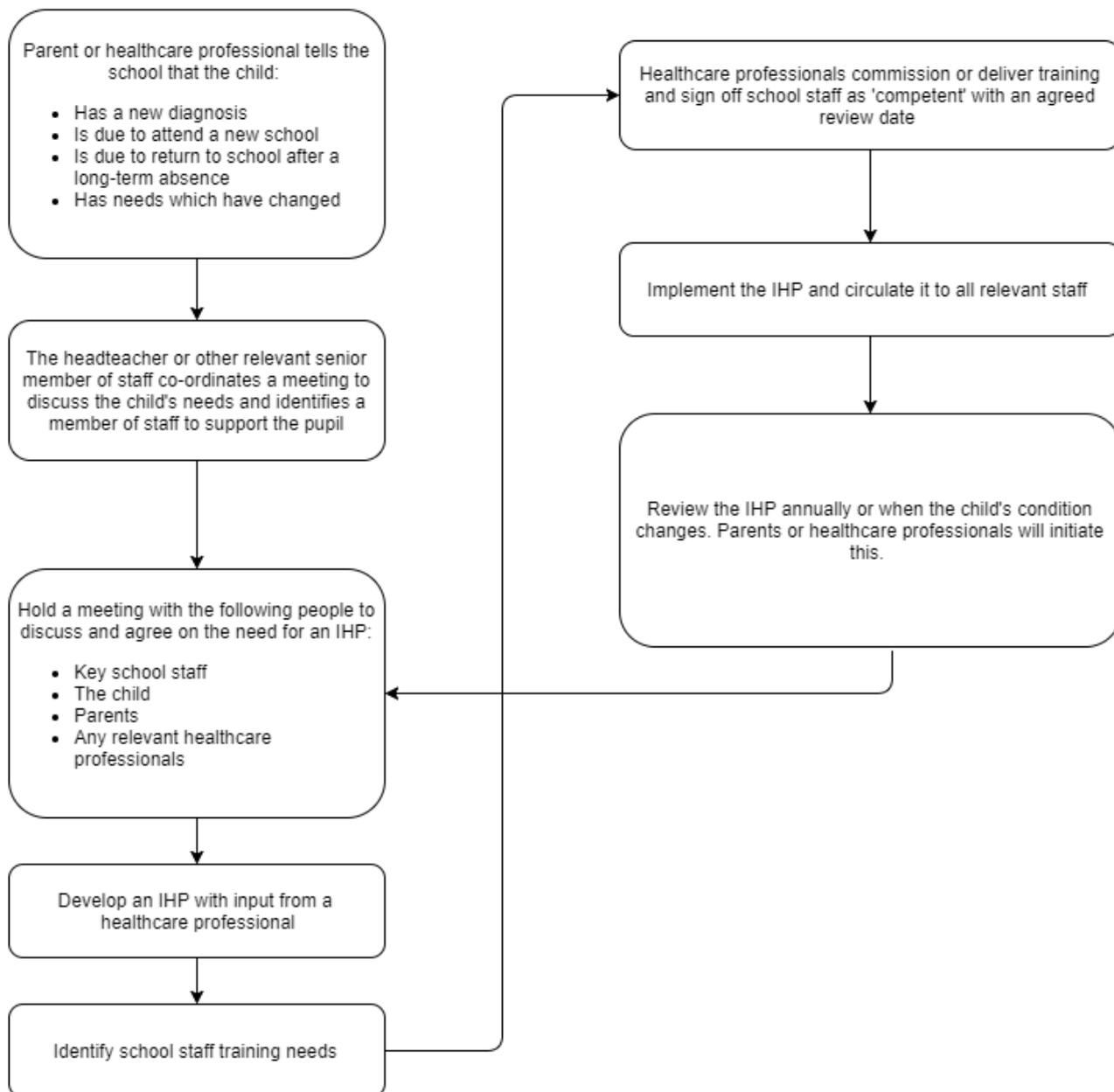
The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

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.

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.



6. Individual Healthcare Plans

Individual healthcare plans will help to ensure that staff effectively support pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases too, especially where medical conditions are long-term and complex.

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Georgia Vince in consultation with relevant health and education professionals.

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

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 education, health and care (EHC) plan.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the headteacher, will consider the following 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

7. Managing medicines

Prescription medicines will only 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. Where and if appropriate, 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.

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

7.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so. All controlled drugs will be kept in a secure cupboard within a locked medical cabinet within the classroom.

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

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.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

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 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

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 – in the main office, classroom and in the offsite visits folder.

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.

The details of the school's insurance is purchased through the DfE – Risk protection Arrangements for Academy Trusts.

12. Complaints

Should parents\carers be unhappy with any aspect of their child's care at Danecourt they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to a member of senior leadership team, who will, where necessary, bring concerns to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parent\carer must make a formal complaint using the Danecourt Complaints Procedure.

13. Monitoring arrangements

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

14. 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

Appendices

- **Appendix 1**
 - Medical Form 1 – Non Prescription Medicine for Pupils
 - Medical Form 2 – Prescription Medicine for Pupils

- **Appendix 2**
 - Information for staff relating to the administration of medicine in school

- **Appendix 3**
 - Information for parents relating to the administration of medicine in school

- **Appendix 4**
 - Medication Administration Record (MAR)

- **Appendix 5**
 - Emergency Procedures Protocol

Appendix 1a – Medical Form 1 - Non Prescription Medication Form

Non Prescription Medication for Pupils



I agree that my child can be treated with the below non-prescription medication by staff at Danecourt School

Pupil Name: _____ Date of Birth: _____

Signed: _____ Print Name: _____ Date: _____

Parent / Carer (please delete as appropriate)

Symptom	Medication	Dose	Dose Frequency	Other Information
<i>Example: Pain relief</i>	<i>Calpol</i>	<i>5ml</i>	<i>Every 4 hours</i>	<i>Ensure that no other medicine containing paracetamol is being taken. Staff to contact parent prior to administration</i>

Appendix 1b – Medical Form 2 - Prescription Medication Form



Danecourt School

VALUED, RESPECTED,
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Hotel Road, Gillingham, Kent, ME8 6AA

Head of School: Mrs Cathryn Falconer

Tel: 01634 232589

email: office@danecourt.bptrust.org

Website: www.danecourtschool.com

MEDICINE IN SCHOOL

The school will not give your child medicine unless you complete and sign this form and the Headteacher has agreed that school staff can administer the medication.

DETAILS OF PUPIL

Surname: Forename:

M/F Date of Birth: Class:

Condition or illness:

MEDICATION

Name/Type of Medication (as described on the container)

For how long will your child take this medication:

Date dispensed:

Full directions for use:

Dosage and method:

Timing:

Special Precautions:

Side effects:

Self Administration:

Procedures to take in an emergency:

CONTACT DETAILS

Name: Daytime Telephone No:

Relationship to Pupil:

I understand that I must deliver the medicine personally to the bus escort/school office and accept that this is a service which the school is not obliged to undertake.

Date: Signature:



Appendix 2: Protocols for Recording Staff Training and Information for staff relating to the administration of medicine in school

Protocols for Recording Staff Training:

- Training will be recorded and be stored within the general staff training records
- The names of individual members of staff who are trained to administer medication or medical procedures will be recorded with the date of their training

Information for staff relating to the administration of medicine in school:

- Medication is to be administered by 2 members of staff
- Correct medication and dosage are to be checked by both members of staff.
- Staff members must sign their initials on the Medical Administration Form (MAR) every time medication is administered. Complete MAR's should be returned to the main school office to be filed.
- All medication must be in the correct packaging with the pharmacy sticker visible with the child's name, dosage, frequency and the name of the medication being given.
- Any changes to medication must be reported to school using the appropriate medication forms. This information should be reported to the main school office immediately so that any changes to the pupil's care plan can be made. The original medication forms must be kept in the child's main file in the office and copies within the classroom.

Appendix 3: Information for parents/carers relating to the administration of medicine in school

- It is the parents/carers responsibility to inform the school of any medication that your child is taking even if this medication is taken at home. This information will form part of your child's Individual Healthcare Plan.
- Prescribed medication will only be given by school staff when it is provided in its original packaging with pharmacy stickers visible. Parents/carers must also complete Medical Form 2 – Prescription Medicine for Pupils.
- The administration of non-prescription medications, also known as Homely Remedies, is permitted to treat minor illness experienced by the children as their parents/carers would in their own home.
- In order to administer non-prescription or homely remedies a parent/carer must have completed and returned Medical Form 1 – Non Prescription Medicine for Pupils.
- All non-prescription medications must be clearly labelled with your child's name.
- Any medication containing paracetamol can only be administered after a telephone call to parents/carers to ensure that no other product containing paracetamol has been given or may be given to prevent overdose.
- Records will be kept of all non-prescription / homely remedies administered in the same way as prescription medications using a Medication Administration Record.

Appendix 5: Emergency Procedures Protocol

1. Staff to ensure that pupil is safe and receiving appropriate treatment for example - first aid and/or emergency medication as outlined in their individual healthcare plan.
2. Staff to radio main office to inform SLT / office staff of incident.
3. Those involved with incident to switch to a different radio station to prevent disruption/distress to others.
4. Office staff to telephone for an ambulance, if and when required and to ensure that parent/carers are informed of incident.
5. Office staff to keep a running log of incident including details of any medicine administered.
6. If it is necessary for a child to go to hospital, a known member of school staff will accompany them until a parent/carer arrives.