



# Supporting Pupils with Medical Conditions Policy

**Revised: July 2018**

**Review date: September 2020**

Signed: \_\_\_\_\_

***Chair of Governors***

Signed: \_\_\_\_\_

***Headteacher***

*This policy also includes the school's administration of medicine policy.*

# Joydens Wood Junior School

## Supporting Pupils with Medical Conditions Policy

This policy should be read in conjunction with the (if applicable) SEND policy.

### **Introduction**

Joydens Wood Junior School wishes to ensure that pupils with medical conditions receive appropriate care and support at the school. All pupils have an entitlement to a full time curriculum or as much as their medical condition allows.

This policy is written in regard to Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.

The school will have regard to the statutory guidance issued. We take account of it, carefully consider it and we make all efforts to comply.

### **Purpose**

- To ensure pupils at the school with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

### **Procedure**

Miss Suzanne Hensher is JWJS's SENCo and is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- Sufficient staff are suitably trained.
- All relevant staff are made aware of a child's condition.
- Cover arrangements in case of staff absence/turnover is always available.
- Supply teachers are briefed.
- Risk assessments for visits and activities out of the normal timetable are carried out.
- Individual healthcare plans are monitored (at least annually).
- Transitional arrangements between schools are carried out.
- If a child's needs change, the above measures are adjusted accordingly.

Where children are joining JWJS at the start of a new academic year, these arrangements should be in place for the start of term. Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition requiring medication or support in the school should have an individual healthcare plan which details the support that child needs. If the parents, healthcare professional and school agree that a healthcare plan is inappropriate or disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

## Individual Healthcare Plans (IHPs)

The following information should be considered when writing an individual healthcare plan:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- specific support for the pupil's educational, social and emotional needs
- the level of support needed including in emergencies
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- 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 head teacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate
- confidentiality
- what to do if a child refuses to take medicine or carry out a necessary procedure
- what to do in an emergency, who to contact and contingency arrangements
- where a child has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan

## Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

### *The Governing Body*

- Must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented.
- Must ensure sufficient staff receive suitable training and are competent to support children with medical conditions.
- Must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk.

### *The Head Teacher*

- Should ensure all staff are aware of this policy and understand their role in its implementation.
- Should ensure all staff who need to know are informed of a child's condition.
- Should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured.
- Is responsible for the development of IHPs.
- Should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse.

### *School Staff*

- Any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so.
- Should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions.

- Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

### **School Nurses**

- Are responsible for notifying the school when a child has been identified as having a medical condition which will require support in the school.
- May support staff on implementing a child's IHP and provide advice and liaison.

### **Other healthcare professionals**

- Should notify the school nurse when a child has been identified as having a medical condition that will require support at the school.
- May provide advice on developing healthcare plans.
- Specialist local teams may be able to provide support for particular conditions (e.g. Asthma, diabetes).

### **Pupils**

- Should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP.

### **Parents**

- Must provide the school with sufficient and up-to-date information about their child's medical needs.
- Are the key partners and should be involved in the development and review of their child's IHP.
- Should carry out any action they have agreed to as part of the IHP implementation.

### **Notes**

- The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.
- The following practice is considered not acceptable:
  - preventing children from easily accessing their medication and administering it when and where necessary
  - assuming children with the same condition require the same treatment
  - ignoring the views of the child, their parents; ignoring medical advice or opinion
  - sending children with medical conditions home frequently or prevent them from staying for normal school activities (unless specified in IHP)
  - penalising children for their attendance record if their absences are related to their medical condition that is recognised under this policy
  - preventing children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively
  - to require parents to attend school to administer medication or provide medical support to their child, including toileting issues (no parent should have to give up working because the school is failing to support their child's medical needs)
  - preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips (such as requiring parents to accompany the child)

### **Insurance**

- Teachers who undertake responsibilities within this policy will be assured by the Headteacher that are covered by the school's insurance.

- Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Headteacher.

### Complaints

- All complaints should be raised with the school in the first instance.
- The details of how to make a formal complaint can be found in the school's Complaints Policy.

### After School (Clubs) Provision

- It is the sole responsibility of the club leader to liaise with the school regarding any medical conditions.
- Those providing provision who are not members of the school's staff will need to comply with the school's policy and oversee the support expected. It is their responsibility to ensure they liaise with the parents/carers and are fully informed of any medical conditions.



## Policy for the Administration of Medicines Managing medicines during the school day

Prescription medicines should only be taken during the school day when essential. **They must be in the original container including prescriber's instructions.**

Parents should be encouraged to look at dose frequencies and timing so that if possible medicines can be taken out of school hours. Parents can ask Doctors for timed-release medication for a minimum number of daily doses.

The National Service Framework encourages prescribers to explore medicines which:

- Need only be administered once a day or
- Provide two prescriptions - one for home use, one for school/setting use, so that the medicine can be kept in the original containers when the illness is long-term.

Medicines fall into two types:

Prescription medicines and b) Non-prescription medicines

### a) *Prescription*

- Named member of staff may administer such a drug for whom it has been prescribed, according to the instructions
- If agreed with the parents the school may look after the drug on behalf of the child
- The school will keep the drug safely locked up with access only by named staff and record keeping for audit and safety
- Prescription drugs should be returned to the parents when no longer required
- Ritalin, a prescription drug known as a "controlled drug" needs to be kept in a more secure environment than suggested above e.g. in a cupboard attached to a structural wall.

### b) *Non-prescription*

- Paracetamol can only be given to children when a parent is on school site and carry out such a task themselves or they have given written permission (it will be down to the Headteacher or Deputy Headteacher if they accept the written permission).
- The school staff will never give aspirin or ibuprofen unless prescribed by a Doctor and includes written permission from the parents to undertake this task.

### Managing medicines on trips and outings

Children with medical needs will be encouraged to take part in visits. The responsible member of staff will carry out a specific and additional risk assessment and a care plan will be drawn up considering parental and medical advice. This will allow reasonable adjustments to be made. Further detailed advice is found in "Including Me" by Jeanne Carlin. Best practice would be to translate these documents to the language of the country visited. The international emergency number should be on the care plan (112 is the EU number and works for mobiles in UK when out of reach of a signal.)

All staff will be briefed about any emergency procedures needed with reference to pupils where needs are known, and copies of care plans (where they exist) will be taken by the responsible person.

### Home to school transport

If a pupil's care plan describes emergency procedures, which might occur, on the journey to and from the school, then the escorts will be trained to carry out the duties and the care plan will be carried on the vehicle. Further advice is available through the Health Needs Education Service and school nurses.

### PE / Sports

Any restriction to PE / sports activities must be noted in the care plan. Flexibility will be planned to allow pupils to benefit in ways appropriate to them (this constitutes differentiation of the curriculum).

### Roles and responsibilities of staff managing or supervising the administration of medicines

The school acknowledges the common law 'duty of care' to act like any prudent parent. This extends to the administration of medicines and taking action in an emergency, according to the care plan.

Advice and guidance will be provided by the Schools Nursing Service, when needed, to carry out the actions in a care plan. Where a condition is potentially life-threatening all staff will need to be aware what action to take.

Specific advice and support from the Schools Nursing Service will be given to staff who agree to accept responsibility, as delegated by the Headteacher, for administering medicines and carrying out procedures.

When all planning to manage a condition has taken place, schools/academies can consult their insurer directly to check that their employees are covered.

In the event of legal action over an allegation of negligence, the employer rather than the employee is likely to be held responsible. It is the employer's responsibility to ensure that the correct procedures are followed; keeping an accurate record in the school is helpful in such cases. Teachers and other staff are expected to use their best endeavour at all times particularly in emergencies. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

The Headteacher is responsible for day-to-day decisions, such as:

- Ensuring staff receive advice, support and awareness raising training
- Ensuring all relevant information about pupil needs is shared
- Liaising with parents about agreement of care plans
- Ensuring that emergency plans are in place when conditions may be life-threatening
- Ensuring staff are aware of their common law duty of care to act as a prudent parent.

Teaching staff and other staff should:

- Be aware of emergency plans where children have life-threatening conditions and
- Receive appropriate documented training and support from health professionals, where they are willing to administer medicines.

### Children's medical needs – parental responsibilities

The school will liaise closely with parents, carers or those who hold this responsibility (such as in the case of Looked after Children) so that information is shared and the care plan reflects all information.



The care plan will be agreed jointly by the school and parents, and agreed with the advice of health professionals.

The school will seek parents' written agreement about sharing information on their children's needs where information needs to be shared outside of the school. However, in cases of emergency the health and safety needs of the child and the people affected must take precedence.

Parents should provide the school with information about their child's condition and be part of the health care plan arrangements, in all cases parents know their child best. They should sign the appropriate agreement forms for the administration of medicines (see Appendix 1a). The Headteacher should seek their agreement before passing information to other school staff.

### **Parents' written agreement**

It is the responsibility of parents to ensure that medicines sent to school are 'in date'. All medicines should be collected by parents at the end of term 2, 4 and 6. If new supplies are needed it is the responsibility of the parents to supply medication as needed.

### **Supporting children with complex or long-term health needs**

The school will aim to minimise any disruption to the child's education as far as possible, calling on the Health Needs Education Service for support and advice as needed, on the impact on learning and supportive strategies.

The school will carry out a risk assessment (as advised in Including Me) and a care plan, with the agreement of parents, and advice from health professionals (Appendix 2).

The school will call on the Community Nursing Service to deliver advice and support and receive appropriate documented training on procedures such as tube feeding or managing tracheotomies.

### **Policy on children taking and carrying their own medicines**

When administered by staff, drugs will be kept in a locked secure place and only named staff will have access. When drugs are administered, the school will keep records.

Epipens will be kept in the school office.

Where younger pupils have their insulin administered by staff then records will need to be kept.

Asthma medication will be kept in the school office and must be taken on school trips.

No child will be allowed to have any form of my medicine with them unless it is for a serious long term health need and permission has been given in consultation with the parent by the Headteacher or Deputy Headteacher.

### **Advice and Guidance to Staff**

The school will arrange and facilitate staff training for children with complex health needs, calling on:

- The School Nursing Service
- Community Children's Nurses
- Paediatric Diabetes Nurse Specialists
- Paediatric Epilepsy Nurse Specialists

- Eleanor Nurses
- The Health Needs Education Service
- The Specialist Teaching Service (about potential impact of medical / physical conditions and the implications on teaching and learning)

### **Storing medicines**

The school will keep medicines in a locked secure place, (not asthma pumps or epipens) with access only by named staff. Where refrigeration is needed, consideration should be given to purchasing a 'medical fridge'.

### **Emergency procedures**

The school will agree any procedures with parents and health care partners and the plan will be signed by all parties.

All staff will be made aware of the plans in order to discharge their common law 'duty of care' should the need arise.

### **Risk assessment and arrangement procedures (Care Plans)**

Where a pupil has a complex health need or requires long term medication, risk assessments and care plans will be drawn up and signed by parents, class teachers and health professionals as needed. Samples are available from the Health Needs Education Service and Specialist Nurses