St Ippolyts CE (Aided) Primary School

"Love one another. As I have loved you, so you must love one another"

John 13:34



Supporting Children with Medical Conditions Policy

Date of Issue: June 2022

Supporting Children with Medical conditions

Legal Framework

The policy framework describes the essential criteria for how a school can meet the needs of children and young people with long-term conditions. It is in line with DfE statutory guidance on Supporting Pupils with Medical Conditions (2014) for governing bodies of maintained schools and proprietors of academies in England

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statut

ory_guidance_on_supporting_pupils_at_school_with_medical_conditions.pdf

This policy should be read alongside the **First Aid Policy**.

Guiding Principles

- This school is an inclusive community that supports and welcomes pupils with medical conditions.
- This school is welcoming and supportive of pupils with medical conditions. It provides children
 with medical conditions 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.
- This school will listen to the views of pupils and parents/carers.
- Pupils and parents/carers will feel confident in the care they receive from this school and that the level of that care meets their needs.
- Staff understand the medical conditions of pupils at this school, and will be aware that if
 they are serious, they may 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.
- The whole school and the local health community understand and support the medical conditions policy.
- This school understands 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, this school complies with their duties under that Act. Some may also have special educational needs (SEN) and may have an Education, Health and Care (EHCP) 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.
 - 2. This school's medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

Stakeholders include pupils, parent/carers, school nurse, school staff, governors, and relevant local health specialist services.

 The medical conditions policy is supported by a clear communication plan for staff, parent/carers and other key stakeholders to ensure its full implementation.

Pupils, parent/carers, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

What this looks like in our school

- 1. All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.
- All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency and this is refreshed at least once a year.
- All children with medical conditions that are complex, long-term or where there is a high risk
 that emergency intervention will be required at this school 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.
- This school makes sure that 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. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or parent/carer. The specialist nurse/school nurse/other suitably qualified healthcare professional will confirm their competence and this school keeps an up to date record of all training undertaken and by whom.
- This school has chosen not to hold an emergency salbutamol inhaler or epipen for use by pupils. This decision is reviewed annually.
- 2. 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. There will be a briefing on all children with an IHP at least annually to all staff. School nurses will provide annual training/ links to online training for common conditions eg asthma, allergies, epilepsy.

- For children with diabetes, an Individual Health Care Plan will be drawn up. This will
 designate the number of competent people required to be fully trained to deliver care. The
 Inclusion Manager, together with the School nurse will ensure annual training is kept up to
 date.
- 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 will accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

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

- Sometimes children will have had medicine at home if they are a bit unwell. We encourage parents to let the class teacher know if their child has been unwell enough to need pain relief, so that we can keep an eye on them during the day.
- For short term medication (eg. a course of antibiotics), parents are encouraged to time doses around the school day (pharmacists can support with this). In addition, parents are welcome to come into school to deliver medication when required. For short term medication, members of staff will not normally administer medication.
- For short term adjustments to mobility (eg. Following an operation, or a broken limb),
 a risk assessment will be prepared with the child (if appropriate), parent/ carer,
 healthcare professional and Inclusion Manager. This will be completed before a child
 returns to school. In some instances, it may be appropriate for a child to receive home
 learning whilst they are recuperating, or if they are physically unable to access school.
 Advice will be sought from the ESMA team if required.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so. This is likely to be for ongoing, long term prescribed medication at the request of both parents' and healthcare professionals. If a request to give medication is received, the Inclusion Manager will complete a risk assessment to decide whether this request can be safely authorised. Medication will not be allowed on site until this risk assessment has been completed.
- This 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. This will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances.
- When administering medication, this school will check the maximum dosage and when the previous dose was given. Parents/carers will be informed.
- This school will make sure that a trained member of staff 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.
- If a child misuses their medication, or anyone else's, the parent is informed as soon as possible.
- 4. This school has clear guidance on the storage of medication and equipment at school.

- This 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,
 epi-pens etc are readily available wherever the child is in the school and on off-site activities,
 and are not locked away. Asthma inhalers and antihistamine medication are kept in the child's
 classroom, and epipens are stored in the cupboard (unlocked) outside Class 2.
- Pupils may not carry their own medication/equipment, but they should know exactly where to access it.
- Pupils are not permitted to bring their own medications to self-administer, for example lozenges for sore throats, creams/lotions. This also applies to handgel or similar. The only exception to this is lip balms (if these are named, they will be held in each classroom).
- This school will store controlled drugs (such as those for ADHD) securely in a locked box, with only named staff having access. Staff at this school can administer a controlled drug to a pupil once they have had specialist training.
- 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.
- This 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. Parents must complete a 'green' form which gives authority to give medicine, and this will be stored with the medication. It is expected that most children who have medication on site will also have a written Individual Health Care Plan detailing the use of this medication.
- Parents/carers are asked to collect all medications/equipment at the end of the school year, and to provide new and in-date medication at the start of each year. It is the parents' responsibility to ensure that they communicate any updates to medical needs or medication.
- This 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.

5. 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.
- This 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, the Inclusion Manager, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEN but does not have anEHC plan, their special educational needs are mentioned in their IHP.

- This school has a centralised register of IHPs, and the Inclusion Manager has the responsibility for this register.
- IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- Parents/carers, class teachers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care. A copy of each child's IHP is also available in the school office.
- This school makes sure that the pupil's confidentiality is protected.
- This school seeks permission from parents/carers before sharing any medical information with any other party.
- This school keeps an accurate written record of all medication administered, including the dose, time, date and supervising staff.
- 6. This 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.
- This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.
- This 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 and emotional problems that pupils with medical
 conditions may experience and use this knowledge, alongside the school's antibullying 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.
- This 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 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.
- 7. This school makes sure that pupils have the appropriate medication/ equipment/ food with them during physical activity and offsite visits.
- This 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.
- We sometimes get requests from parents for children to stay in at playtime, miss swimming, not take part in PE etc. Our approach is that, other than in exceptional circumstances, if a child is well enough to come to school, then they are well enough to take part in all curriculum areas. For information, 'exceptional circumstances' may include a child on crutches, or with a condition that is supported by a medical letter excusing them from certain lessons.

- 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.
- This school will not penalise pupils for their attendance if their absences relate to their medical condition. In the case of significant absences, a referral will be made to ESMA (Education Support for those with Medical Absences) to ask for support to maximise an individuals' learning.
- This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the Inclusion Manager who will liaise with the pupil (where appropriate), parent/carer and the pupil's healthcare professional.
- Pupils at this school learn what to do in an emergency.
- This 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.
- 8. This 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 risks.
- 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.
- This school reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.
- 9. Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.
- This school works in partnership with all relevant parties including the pupil (where appropriate), parents/carers, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- All children with High Risk Medical conditions are briefed to ALL members of staff at least annually. Any member of staff will be able to identify and respond to a child with a known medical condition (eg. Asthma, allergies). Staff will be able to ask for advice from the Lead First Aider / Paediatric First Aider if they require more support for a condition they have not been trained in (eg. Diabetes, epilepsy).
- 10. The medical conditions policy is reviewed and updated annually.

Ratified by Governors on: June 2022

Frequency of policy review: Annual

Policy to be reviewed on: June 2023

Policy maintained by: Inclusion Manager

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, co-ordinates 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