



As valued individuals we all belong to a respectful, caring, unique community where together we grow through fun, active learning.

Supporting pupils at school with medical conditions

October 2019

Introduction

This policy has been devised with reference to DfE: **Supporting pupils at school with medical conditions - Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (April 2014)**. Section 100 of the **Children and Families Act 2014** places a duty on school governing bodies to make arrangements for supporting pupils with medical conditions. The process of devising this policy has included collaboration with pupils, parents, support staff, teachers, Senior Leadership Team, members of our Governing Body, and health professionals. This policy is reviewed regularly and is readily accessible to parents and school staff.

Aims:

- We believe children with medical conditions can access and enjoy the same opportunities at school as any other child. We believe that pupils with medical needs should be properly supported in school so that they can play a full and active role in school life, remain healthy and learn. They should have full access to education, including school trips and PE.
- We aim to listen to and value the views of parents and pupils. We believe that parents should feel confident that our school will provide effective support for their child's medical condition and that pupils themselves should feel safe. We work closely with healthcare professionals, other support services and the local authority to help us make decisions about the support we provide as a school.
- We recognise that medical conditions can impact on a child's ability to learn, and in addition, there may be social and emotional implications associated with medical conditions (eg children may be self-conscious about their condition). We aim to increase each child's confidence around their medical needs and to work towards promoting self-care and independence.
- We recognise that many of the medical conditions that require support at school will affect quality of life and some may be life-threatening. We seek to ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

We recognise that if a child has long-term absences due to health problems, this not only has the risk of affecting their educational attainment, but may also affect their general wellbeing and emotional health, and may impact on their ability to integrate with their peers. We aim to support children to reintegrate back into school so that they fully engage with learning and do not fall behind when they are unable to attend. When a child has short term or frequent absences, through attending appointments connected to their medical condition, we aim to manage these effectively and put in place appropriate support to limit the impact on their educational attainment and emotional and general wellbeing.

Some children with medical conditions may be disabled, and where this is the case our Governing Body complies with its duty under the Equality Act 2010. Some may also have special educational needs (SEN) and may have an 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 SEN Code of Practice and our SEN Information Report/Policy.

Procedures to be followed when we are notified that a pupil has a medical condition.

We work closely with parents and other professionals to have as much information as possible about a child's medical needs before they start at our school, so that Individual Health Care Plans and training are in place as soon as possible and ideally in time for the start of the new term. In other cases, such as where there is a new diagnosis or a child moves to us mid-term, we make every effort to ensure that arrangements are put in place within two weeks. Where a child has to reintegrate into school after a period of absence, we work closely with parents, the child and the child's teacher and/or support staff to put appropriate support in place. Where it is known that a child will be leaving Mildmay to go to another setting, we aim to share information so that support arrangements can be in place in time for the start of the relevant school term in the child's new setting.

In cases where a child's medical condition is unclear, or where there is a difference of opinion, judgements may have to be made about what support to provide, based on the available evidence, and in consultation with parents. We aim to put in the right support to meet the child's needs.

Children with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that at Mildmay no child with a medical condition should be denied admission or prevented from taking up a place in our school because arrangements for their medical condition have not been made.

Individual healthcare plans

Individual Health Care Plans

These enable us to identify the level of support that is needed at school. Individual healthcare plans provide clarity about what needs to be done, when and by whom. Our plans capture the key information and actions that are required to support your child effectively. Plans are drawn up in partnership between school, parents, and a relevant healthcare professional, (eg school, specialist or children's community nurse). When appropriate, pupils may also be involved. During these discussions it is agreed who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school. Plans are particularly useful in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and they are helpful especially where a child's medical conditions are long-

term and complex. Plans are accessible to all who need to refer to them, whilst preserving confidentiality. Not all children with medical needs require a plan. This is discussed between school staff, relevant healthcare professionals and parents. If further clarity is required, the Headteacher is best placed to take a final view.

The plan sets out:

- the nature of the identified condition/s, triggers, signs and symptoms
- the resulting needs, treatment, support and management requirements
- specific support for educational, social and emotional needs arising (where necessary)
- what to do in an emergency, - the level of support needed, whom to contact, and contingency arrangements.

Where the child has a special educational need identified in an EHC plan, the individual healthcare plan is part of their EHC plan. Individual Health Care Plans are held by the Headteacher and reviewed at least annually or as required if a child's needs have changed.

People who may need to contribute to the plan are:

- the Headteacher
- the Parent or Guardian
- the child (if appropriate)
- class teacher
- support staff
- school staff who have agreed to administer medication or be trained in emergency procedures
- the school nurse, the child's GP or other health care professionals.

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. We work closely with school staff, healthcare professionals (and where appropriate, social care professionals), local authorities, and parents and pupils. The following section shows how we work in partnership to ensure that the needs of pupils with medical conditions are met effectively in our school.

Parents and Guardians:

- Parents are responsible for making sure that their child is well enough to attend school. Children should be kept at home when they are acutely unwell
- Parents are responsible for providing school with sufficient and up-to-date information about their child's medical needs and any treatment or special care needed in school. In some cases, parents may be the first to notify the school that their child has a medical condition

- Parents are key partners and are involved in the development and review of their child's individual healthcare plan with us. They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times. Whilst parents provide specific advice, they should not be the sole trainer for supporting their child's needs
- Parents are responsible for informing school of any changes to medical needs or medication
- Parents' religious and cultural views should always be respected

The Governing Body:

- Is legally responsible for fulfilling its statutory duties under legislation.
- Ensures that arrangements are in place to support pupils with medical conditions.
- Ensures that pupils with medical conditions can access and enjoy the same opportunities as any other child at the school.
- Works with the local authority, health professionals, commissioners and support services to ensure that pupils with medical conditions receive a full education.
- Ensures that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensures that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instils confidence in parents/carers and pupils in the school's ability to provide effective support.
- Ensures that sufficient members of staff are properly trained and are competent to provide the necessary support, and that they are able to access information and other teaching support materials as needed.
- Ensures that no prospective pupil is denied admission to the school because arrangements for their medical condition have not been made.
- Ensures that pupils' health is not put at unnecessary risk. As a result, it holds the right to not accept a pupil into school at times where it would be detrimental to the health of that pupil or others to do so, such as where the child has an infectious disease.
- Ensures that policies, plans, procedures and systems are properly and effectively implemented.

Our Headteacher:

- Ensures that our school's policy is developed and effectively implemented with partners. This includes ensuring staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- Ensures that all staff who need to know are aware of the child's condition, (including any supply staff) and that sufficient trained numbers of staff are available to implement the policy and deliver against individual healthcare plans, including in contingency (such as when a member of staff responsible for a pupil with medical needs is absent or unavailable) and emergency situations. This may involve recruiting a member of staff for this purpose.

- Has overall responsibility for the monitoring and development of individual healthcare plans, and ensures that school staff are appropriately insured and are aware that they are insured to support pupils in this way.
- Liaises with our Inclusion Manager/SENCOs and office staff to regularly (at least annually) review and assess any training needs in conjunction with the School Nurse or other health professionals who confirm staff members' proficiency.
- Oversees day to day decisions about administering medication if not otherwise described in an Individual Health Care Plan.
- Is responsible for making sure parents are aware of the school's policy and procedures for dealing with short and long-term medical needs.
- Should contact the school nursing service in the case of any child 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.
- Is involved in the development and agreement of risk assessments for school visits, and other school activities outside of the normal timetable, with regards to supporting pupils with medical needs

Teachers and Support staff:

- Have an awareness of pupils with medical needs in their class, and the nature of their condition, so that they can take into account the needs of these pupils, including when and where the pupil may need attention, or require necessary adjustments regarding school activities. They should be aware of the likelihood of an emergency arising and what action to take if one occurs. If staff are to administer medication, they may only do so if they have had appropriate training. A child's Individual Health Care Plan is discussed with their teacher so that they are aware of the pupil's needs and care.
- Identified in an Individual Health Care Plan receive sufficient and suitable training with appropriate medical professionals, and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.
- Individual Health Care Plans are located in relevant classes, the school office and staffroom, so that any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- Whole school awareness regarding this policy is carried out as part of new staff induction (include MDA training). Where there needs to be whole school staff training around a child's medical needs this is done at the start of a term, or as and when the child's needs arise.

Other Health Professionals

We obtain support and advice as necessary to meet the needs of pupils with medical needs. We liaise with the following people:

- The local health authority - regarding information, support, training and funding

- Our school nurse notifies the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they do this before the child starts at school. The school nurse may also support staff around implementing a child's individual healthcare plan and providing advice and liaison around training. Where parents have difficulty understanding or supporting their child's medical condition themselves, the School Health Service can often provide additional assistance. However, the Headteacher should seek parents' agreement before passing on information about their child's health to other school staff or external professionals.
- GP's, consultants and community paediatricians (with the consent of the child's parents) notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may also provide advice on developing healthcare plans
- Community nursing teams also give advice and support in relation to children with medical conditions
- Specialist local health teams provide support in schools for children with particular conditions (eg asthma, diabetes).

Pupils:

- With medical conditions may be able to provide additional information about how their condition affects them. They should be involved in discussions about their medical support needs and contribute where possible to the development of their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.
- After discussion with parents, and wherever possible, children should be working towards increasing independence regarding their self-care and medical needs. Children who can take their medicines themselves or manage procedures will require an appropriate level of supervision. This should be reflected within individual healthcare plans. If it is not appropriate for a child to self-manage, then relevant staff help to administer medicines and manage procedures for them.
- If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed so that alternative options can be considered. If necessary, the school will call the emergency services.

Local Authority:-

- We also liaise with the local education authority regarding possible funding avenues to support children with medical needs, such as via Individual Pupil Resource Agreements (IPRA funding); and including medical needs information as part of Education Health and Care Plans (EHCP's).
- Local authorities work with us to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in our mainstream school because of their health needs, the local authority has a duty to make other

arrangements. Statutory guidance for local authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from schools for 15 days or more because of health needs (whether consecutive or cumulative across the school year).

- If necessary, we liaise with clinical commissioning groups and the local authority, seeking to strengthen links between health services and our school, in order for them to provide support and advice, (and to help with any potential issues or obstacles in relation to this)

Short term medical needs

At times, it may be necessary for a pupil to finish a course of medication at school, but where possible, parents will be encouraged to administer the medicine outside school hours. School staff will not give non-prescribed medication to children except in special cases at the complete discretion of the Headteacher and with discussions with the parents. In the case of children suffering regularly from acute pain, such as a migraine, the parents will authorise and supply appropriate painkillers together with written instruction about when the child should take the medication. A member of staff will supervise the pupil taking medication, keep a log of all medication taken and notify the parents in writing on the day painkillers are taken.

Long term medical needs

The school needs to have sufficient information of any pupil with long term medical needs, provided by either parents or medical health care professionals. We will then draw up a written health care plan for such pupils, involving the parents and relevant health professional. For pupils with Asthma, we ask parents to complete a 'School Asthma Card' detailing information about their asthma condition, including triggers, signs to indicate an attack, and reliever treatment. Similar information is sought for children at risk of Anaphylaxis.

Staff training and support

We ensure that staff are properly trained to provide the support that pupils need. We liaise with relevant healthcare professionals regarding the type and level of training required, and how this can be obtained, and how regularly it needs to be reviewed. We aim for staff to have sufficient training so that they are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. This includes an understanding of the specific medical conditions they are being asked to deal with, as well as their implications and preventative measures.

Managing medicines on school premises

No pupil is given medication without their parent's written consent. This consent gives details of the medication to be administered, including:

- name of medication
- dose
- method of administration
- other treatment

- any side effects
- medication is signed in upon receipt from parents, and signed out as administered or when sent back home.
- staff complete and sign a medication document given each time they give medication to a pupil. In such circumstances, wherever possible, the dosage and administration is witnessed by a second adult.
- if pupils can take their medication themselves, staff supervise this, bearing in mind the safety of other pupils. Written parental consent is necessary for this.
- staff who have training will be able to administer medication
- school will only accept prescribed medicines that are in date, labelled, provided in the original container, including instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available inside an insulin pen or a pump, rather than in its original container
- non-prescription medication may be administered when it would be detrimental to the pupils health not to do so , or when instructed by a medical professional

Storage of medication

Where practical, parents are asked to bring in the required dose each day. When the school stores medicine it is labelled with the name of the pupil, the name and dose of the drug and the frequency of the administration. Where a pupil needs two or more prescribed medicines, each should be kept in a separate container. Pupils know where their medication is stored and are able to access them immediately. Asthma inhalers are stored centrally in the school office and taken to outside activities with the child. Other medicines are kept in a secure place not accessible to pupils. If medicines require special storage such as refrigeration, these guidelines are followed where possible. When medication is taken out for a school trip, it is signed out by a member of staff, kept secure within a first aid bag, and then signed back in upon return. Any medication given to a child is logged.

Disposal of medicines

Parents must collect medicines held at school at the end of each term. Parents are responsible for the disposal of expired medicines. Sharps boxes should always be used for the disposal of needles and other sharps.

Hygiene/infection control

Staff follow basic universal precautions. Staff use protective disposable gloves and take care when dealing with blood or other body fluids and disposing of dressing or equipment.

First Aid and illness

If a child requires first aid treatment, wherever possible this will administered by a trained first aider. Any treatment given will be recorded in the 'first aid' log.

If a child becomes ill, they will be taken to the school office and remain there under supervision whilst waiting for collection by their relative/named contact.

Record keeping

Written records are kept of all medicines administered to children. Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents are informed if their child has been unwell at school.

Emergency procedures

Where a child has an individual healthcare plan, this clearly defines what constitute an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in school should know what to do in general terms, such as telling a teacher if they think help is needed.

Allocated staff have appropriate training with updates in First Aid and know how to call the emergency services. If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, (this may include accompanying a child taken to hospital by ambulance).

The administration of medication for epileptic and anaphylactic seizures requires specific training and procedures. We ensure appropriate training to named staff to administer emergency rescue medication following the protocol drawn up by the child's doctor. In the event of absence of trained staff, emergency back-up procedures will be followed, and an ambulance called. Parents or carers will be contacted in the event of a seizure or need for the anaphylaxis procedure.

Day trips and sporting activities

We make arrangements for the inclusion of pupils in activities such as school trips and visits, or in sporting activities. School staff are aware of how a child's medical condition may impact on their participation, but there is flexibility for all children to participate according to their own abilities with any required adjustments, unless evidence from a clinician such as a GP states that this is not possible. Risk assessments are drawn up in consultation with parents, pupils and advice from relevant healthcare professionals, in preparation for such activities so that pupils with medical conditions can participate as fully and safely as possible. School trip risk assessments are also uploaded to Essex Council's Evolve website in line with Health and Safety Executive guidance. Some pupils may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary. Teachers are aware of relevant medical conditions and emergency procedures.

OTHER CONSIDERATIONS

Use of defibrillators – Sudden cardiac arrest is when the heart stops beating and this can happen to people at any age and without warning. When it does happen, quick action (in the form of early CPR and defibrillation) can help save lives. A defibrillator is a machine used to give an electric shock to restart a patient's heart when they are in cardiac arrest. We have a defibrillator as part of our first aid equipment and the local NHS ambulance service knows of its location. Staff members appointed as first aiders are trained in the use of CPR.

Asthma inhalers – Once regulations are changed, schools will be able to hold asthma inhalers for emergency use. This is entirely voluntary, and the Department of Health is producing a protocol which will provide further information.

Unacceptable practice

Whilst school staff may use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every child with the same condition requires the same treatment
- ignore the views of the child or their parents; or ignore medical evidence or opinion
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans
- if the child becomes ill, send them to the school office unaccompanied or with someone unsuitable
- penalise children for their attendance record if their absences are related to their medical condition eg 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 child, 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 children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany their child.

Liability and indemnity

Our Governing body ensures that the appropriate level of insurance is in place and appropriately reflects the level of risk. Insurance policies provide liability cover relating to the administration of medication, but at times additional individual cover may need to be arranged for some health care procedures.

Our school treats medical information confidentially. We agree with parents who will have access to records and information about a pupil. If information is withheld from staff they cannot be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith.

Complaints

If parents or pupils are dissatisfied with the support provided for their pupil with a medical condition, we encourage them to discuss their concerns directly with us as a school, by approaching our SENCOs or Headteacher, and if necessary also meeting with our SEN Governor. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure to the Governing Body. Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted. Ultimately, parents (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

Appendix: Model process for developing individual healthcare plans

