

## **Paddock Wood Primary School**

### **Supporting Pupils with Medical Conditions Policy November 2018**

#### **Purpose of the Policy**

The aim of this policy is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

#### **Policy Implementation**

The Headteacher and SENCO will be responsible for ensuring that:

- sufficient staff are suitably trained,
- all relevant staff will be made aware of the child's condition,
- cover arrangements in case of staff absence,
- briefing supply teachers,
- risk assessments for school visits and other school activities outside of the normal timetable,
- monitoring individual healthcare plans.

#### **Notification of a medical condition**

When the school is notified that a pupil has a medical condition a meeting will be set up between the parents, SENCO and any other relevant outside agencies. The details of the condition and the implementations for the pupil should be discussed in detail, including emergency procedures, medication, the requirement for staff training or support, etc.

The school, parents and healthcare professional need to decide if an individual healthcare plan is appropriate (see next section).

The school does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence.

Every effort should be made to make sure arrangements are in place before the child starts school or if the child is already at school then within two weeks.

#### **Individual Healthcare Plans**

The SENCO is responsible for writing the individual healthcare plan. Plans written specifically for school journeys should be written with the involvement of a member of staff attending the school journey.

The plan needs to provide clarity about what needs to be done, when and by whom. They are essential in such cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed and helpful in cases where medical conditions are long-term and complex.

The format of healthcare plan used by this school is attached to this policy. Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional. Pupils should also be involved whenever appropriate. The aim should be to capture the steps which a school should take to help the child manage their condition and overcome any potential barriers to getting the most from their education. Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rest with the school. The healthcare plan will be linked to the EHC plan where appropriate.

The governing body will ensure the plans are reviewed annually.

Healthcare plans will be drawn up for any pupils returning to school following a period of hospital education or alternative provision to ensure the child reintegrates effectively.

The following information will be included on the healthcare plan:

- the medical condition, its triggers, signs and 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,
- specific support for the pupil's educational, social and emotional needs eg. How absences will be managed, use of rest periods and additional support in catching up with lessons, counselling sessions,
- the level of support needed. 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 cover arrangements for when they are unavailable,
- who in the school needs to be aware of the child's condition and the support required,
- written permission from parents and the Headteacher for medication to be administered by a member of staff, or self-administered by the pupil,
- separate arrangements required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, including risk assessments where appropriate,
- what to do in an emergency, including who to contact, and contingency arrangements.

### **Roles and Responsibilities**

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Partnership working between school staff, healthcare professionals, social care professionals, local authorities, and parents and pupils is critical.

Governing bodies will:

- ensure arrangements are in place to support pupils with medical conditions in school, including making sure this policy is developed and implemented,
- ensure that pupils with medical conditions are able to have the fullest participation possible in all aspects of school life,
- ensure there are sufficient staff who have received suitable training to support pupils with medical conditions.

Headteachers will:

- ensure that this policy is effectively implemented,
- ensure that all relevant staff are aware of the child's condition and know what to do in an emergency,
- have overall responsibility for the development of healthcare plans,
- make sure that school staff are appropriately insured,
- ensure the school nurse is contacted if thought appropriate.

School staff will:

- be asked to provide support to a pupil with a medical condition but cannot be required to do so,
- take into account the needs of pupils with medical conditions,
- receive sufficient training.

School nurses will:

- be accessible to the school for training and advice,
- notify the school when a child has been identified as having a medical condition,
- support the implementation of a healthcare plan.

Pupils (with medical conditions) will:

- provide information on how their condition affects them,
- be fully involved in discussions about their medical support needs.

Parents will:

- provide the school with sufficient and up-to-date information about their child's needs,
- notify the school of their child's medical condition,
- be involved in the development and review of the healthcare plan,
- provide medicines and equipment,
- ensure they or another nominated adult are contactable at all times.

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### **Staff Training and Support**

The governing body will ensure that staff will be supported in carrying out their role to support pupils with medical conditions. Staff will not give prescription medicines or undertake healthcare procedures without appropriate training.

Training needs will be identified when developing the healthcare plan and during meetings with the relevant partners. The SENCO will be responsible for arranging training which may be provided by parents or healthcare professionals as appropriate.

### **The Child's Role in Managing Their Own Medical Needs**

After discussion with parents, children who are competent should be encouraged to take responsibility for managing their own medicines and procedures. Children should be able to access their medicines for self-medication quickly and easily. Some children may require a level of supervision.

If a child refuses to take medicine or carry out a procedure, staff should not force them to do so, but follow the procedure agreed in the healthcare plan and parents should be informed.

### **Managing Medicines on School Premises**

Please see the 'Policy for the Administration of Medicines'.

The school will adhere to the following guidelines.

- 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.
- No child will be given aspirin unless prescribed by a doctor.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- The school will only accept prescribed medicines that are in-date, labelled, provided in the original container and include instructions for administration, dosage and storage. The exception to this is insulin which is supplied to school in a pen or pump.
- All medicines will be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers and adrenaline pens will be readily available to children and not locked away.
- Children who carry their own medicine will be monitored to ensure they do not pass them on to another child.
- The school will keep a record of all medicines administered to individual children.

- When no longer required, medicines will be returned to the parent.
- Sharps boxes will be used for the disposal of needles and other sharps.

### **Day Trips, Residential Visits and Sporting Activities**

The governing body will ensure that children with medical conditions are able to participate wherever possible in school trips, visits or sporting activities. Teachers should be aware of how a child's medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. Any relevant healthcare plans should be consulted when developing a risk assessment for a school trip or other outside school activity.

### **Unacceptable Practice**

School staff should 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 (although this may be challenged),
- 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,
- 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 the child.

### **Complaints**

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaint procedure.

### **Review of Policy**

The Governing Body will ensure the policy is reviewed every two years. The policy may be revised at other times if necessary to take account of any statutory regulation or associated guidance or changes in policy by Kent County Council's policy.

Issue Date: November 2018

Review Date: November 2020

Signed on behalf of the Governors.....

# Individual Healthcare Plan

Date	
Next Review Date	

Medical condition or diagnosis	Summary	Notes

Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact		G.P	
Name		GP Name	
Phone no.		Phone no.	

Who is responsible for providing support in school	Teaching Staff
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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, contraindications, administered by/self-administered with/without supervision

Daily care requirements

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