

Policy for
Supporting Pupils with Medical Conditions

1	Rationale	p.2
2	Aims	p.2
3	Organisation and resources	p.3
4	Inclusion	p.3
5	Roles and responsibilities	p.3
6	Training	p.4
7	Health Care Plans	p.4
8	School Visits	p.5
9	Links to other school policies	p.5
	Appendices	p.6

Governor Responsibility:	Learning & Community Committee
Staff Responsibility:	T. McMeakin & A. Moir
Review Period:	Bi-annual
Status:	Statutory
Reviewed:	Summer 2016
Next Review Date:	Summer 2018
Governor Signature	

Rationale

Children at school with medical conditions should be properly supported so that they can play an active part in school, remaining healthy and able to achieve their academic potential, with full access to education, including school visits and physical education.

The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. **Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.** However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information. The school takes advice and guidance from the "Supporting pupils at school with Medical Conditions: Statutory guidance" (DfE) which encourages self-administration of medication when possible. Contact details for our School Nurse can be found on the school website which also states that a copy of this policy is available to parents.

Aims

"A medical condition that is long term with acute episodes, requires ongoing support, and involves the need for medication and/or care whilst at school. The condition will need monitoring and could require immediate intervention in emergency circumstances." Some children with medical conditions may be disabled and some may also have special educational needs and may have a statement, or Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision. For children with Special Educational Needs and Disability (SEND), this guidance should be read in conjunction with the SEND code of practice and the school's Local Offer.

Parents of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences.

We aim to:

- Help parents to feel confident that we will provide effective support for their child's medical condition and that they feel safe.
- Develop strong, positive relationships to support decisions made about the support their child needs and what we can provide and listen to and value the views of parents and pupils.
- Ensure access to a fully inclusive education.
- Establish relationships with relevant local health services to help children and their parents where there is a need.
- To monitor and keep appropriate records.

Teachers are not required to administer medication or to support pupils with medical needs as part of their employment contract but they may volunteer to do so. All staff may wish to discuss this with their particular Teacher Association and County Council regarding their indemnity policy. In some cases the contracts for non-teaching staff or special support assistants may include references to the administration of medication and/or the undertaking of medical procedures. Such contracts will of course be agreed on an individual basis.

Organisation and resources

Children's medicines are managed by the Welfare Assistant and Teaching Assistants (TAs). Medicines and first aid equipment is stored and accessible to staff in the Medical Room on the Yellow Floor. All support staff, which is TAs and SMSAs (school meals supervisor assistant) and the PE co-ordinator are First Aid and paediatric first aid trained. .

The SENCo manages the work of the Welfare Assistant and works in partnership with staff and parents to ensure provision is well managed in order to meet the needs of the child.

Inclusion

We will ensure that every child identified with a medical condition is encouraged to make an active and full contribution to their learning. Guidance from parents and carers will be important in determining how well these children can participate. All members of the school staff will be informed of a child's medical condition on a need-to-know basis. Children will be carefully and sensitively monitored during activities that form part of the normal timetable including P.E., school visits, playtimes and lunchtimes. Where possible children may attend extra-curricular activities.

Where children with long-term medical conditions find it difficult to attend school, absence will be marked accordingly. If a child is going to be absent from school, for medical reasons, for more than 15 days (not necessarily consecutive days) the school in conjunction with the parents will fill in a medical CAF form which may result in Home Tuition.

When children have persistent health concerns with attendance below 90% school may refer to the school nurse.

Parents and/or health professionals will inform class teachers of the child's condition. When necessary, the school will work in conjunction with Haringey Home Tuition Services in identify ways of involving the child with their learning in the home or hospital environment. This can include video conferencing, separate project based work or simply sending work home via friends and family.

Roles & Responsibilities

The Governing body ensures:

- That arrangements are in place in school to support students with medical conditions. In doing so, they should ensure that such children can access and enjoy the same opportunities at school as any other child.
- That staff liaise with health and social care professionals, children and parents to ensure that those with medical conditions are effectively supported. The needs of each individual child must be considered and how their medical condition impacts on their school life.
- That the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties.

The SENCo ensures:

- That the school's policy covers the role of individual healthcare plans and meets the educational needs of individuals.
- Policy is reviewed regularly.

The Welfare Assistant ensures:

- That medical plans written in conjunction with the parents are implemented.
- That records of medicines administered at school are accurately and consistently kept by members of the staff.
- That annual training for all staff is organised e.g. epi-pen training, epilepsy awareness training, asthma awareness training so that all staff know how to respond in a medical emergency.
- That parents provide the school with sufficient and up-to-date information about their child's medical needs; prompted by the school's annual parental information check.
- A meeting to discuss new concerns is co-ordinated and the parents fully informed of how staff will support their child. In special circumstances a designated liaison member of staff will be identified so that the parents have a single point of focus for ongoing issues / concerns.

The Parents/Carers must ensure:

- That they keep their children at home if acutely unwell or infectious (to return to school after 48 hours after last bout of diarrhoea and/or sickness; excluded from swimming for 2 weeks).
- That they provide the Welfare Assistant with comprehensive information regarding their child's condition and medication and up to date contact information so that they, or an identified responsible adult, are contactable at all times.
- That any prescribed medication e.g. antibiotics (that which is required over and above administration three times per day) is handed to school with complete written and signed instructions from the parent.
- That each item of medication which must be delivered to the Welfare Assistant or class TA is accompanied by a signed medical consent form (available from the office)
- All medication is in a labelled container, as originally dispensed. Each item of medication must be clearly labelled with the following information:
 - Pupil's Name
 - Name of medication
 - Dosage
 - Frequency of administration
 - Storage requirements (if important)
- That they renew the medication when supplies are running low and ensure that the medication supplied is within its expiry date.
- A List '99 Check is carried out (through the school) should they require regular access to the Medical Room. If this is the case, parents will also be asked to sign the school's code of conduct. See Appendix 2.

Training

All trained staff will ensure they are aware of the protocols and procedures for specific pupils in school through attending training provided and reading care plans devised for individual pupils. Training regarding specific conditions will be delivered as required. This is usually within the term of a new pupil beginning school but if necessary before they commence their education at Tetherdown School. General training on awareness of medical conditions and their possible medication implications will occur annually. This will run in parallel with the school's first aid training, which will continue to be under the guidance of the Health and Safety Policy. The school nurse offers two-way support for school.

First aid training: all teacher assistants and school meal supervisors have an initial three day training course. This is refreshed every 2 years with a two day course.

Staff in contact with Reception children receive an additional half-day paediatric first aid training course.

The Headteacher ensures:

- That the correct level of insurance is in place and appropriately reflects the level of risk, with risk assessment being carried, when appropriate.

Healthcare Plans (HCP)

This is a record of a child's long-term and/or complex medical condition or the support needed to manage a disability or health condition. which may require on-going support. The Plan will be agreed with the child's parent. Healthcare Plans are also maintained by Local Authorities for looked after children – in this instance the Care Plan will contain a Personal Education Plan in addition to the health and social care elements.

A HCP covers

1. Personal data - contacts
2. Medical diagnosis
3. Emergency procedures and actions
4. Daily care (if necessary)
5. Medication needs (if necessary)
6. Special requirements e.g. dietary needs

A Healthcare Plan must be reviewed annually by parents, welfare assistant and SENCo. Parents must date and sign this document at completion. A copy is given to parents/carers and a further five copies of each HCP are kept at school; copy one is kept in the child's medical box; copy two is on display in the medical room; copy three is in the supply handbook; copy four is in class; copy five is in the staffroom (lever arched folder).

Pupils are not permitted to carry medication - with the exception of inhalers for asthma control, or specified medication identified in the Health Care Plan. No pupil is permitted to have any non-prescription drugs in school; this is to ensure that no pupil unwittingly or otherwise gives another pupil his or her medication. This approach is supported in school through our PSHE curriculum.

From Year 3 upwards, pupils with a prescription inhaler for asthma may carry it with them when moving around school or it should be stored in their tray whilst in class.

Non-emergency medication for pupils is stored in the medical needs cupboard in the staff room. This has a locked and unlocked compartment. The key is kept by the office staff and staff will be aware of where this is. A spare Epipen is stored with the pupil's class teacher.

Emergency medical supplies will remain stored in the medical room and remain organised under the Health and Safety Policy.

School Visits

When preparing risk assessments staff will consider any reasonable adjustments they might make to enable a child with medical needs to participate fully and safely on visits. Additional safety measures may need to be taken for outside visits and it may be that an additional staff member, a parent/carer or other volunteer might be required to accompany a particular child. Arrangements for carrying and administering any medicines will need to be planned as part of the risk assessment and visit planning process. A copy of the HCP should be taken on trips and visits in the event of information being needed in an emergency. This information must be handled sensitively.

This policy should be read in accordance with the following policies:

Policy for intimate care

Health & Safety Policy

Equal opportunities policy

Disabilities and Equal Access (DEA) Policy

Recruitment Policy

Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (DfE September 2014).

Appendix 1

Recruitment of staff to support children with medical needs.

Very occasionally having met with parents to discuss the needs of their child the school will decide to recruit a suitable person to provide appropriate support, e.g. to ensure the administration of insulin for those children diagnosed with Type 1 diabetes. Staff in school will be approached in the first instance, to consider the identified position, its level of responsibility and any training needs. Staff are not expected to provide such support without consultation and the school cannot designate a member of staff to be responsible for the medical needs of a child should they not wish to. Therefore, we follow the guidelines within our recruitment policy for recruiting staff to such a position:

To obtain expression of interest among the staff team:

- Internal advert published to all staff within 5 working days of the initial meeting with parents. Closing date 5 working days from publication.

Should there be no expression of interest:

- External advert published to all local advertising sources (as appropriate) within 5 working days of the above closing date.
- New closing date 10 working days from publication.
- Shortlisting and interviews within 5 working days of the closing date.
- Start date identified as “as soon as possible”. However, candidates employed elsewhere may well be required to give at least 1 month’s notice.
- On appointment: new member of staff will require 1 day induction before commencing duties.
- Confirmation of contract for the new employee is subject to two satisfactory references, appropriate checks (including DBS, List '99, satisfactory medical check, right to work in the UK, qualifications, etc.) If for any reason the school is not satisfied that the member of staff is safe to work with children the contract may be terminated.

All timelines are approximate depending on circumstances which may be beyond our control.

Appendix 2

Access to Medical Room: code of conduct

I undertake to support the school's approach to the management of sensitive information and recognise the need for confidentiality whilst working in the medical room with my child. I agree to follow the protocols outlined below:

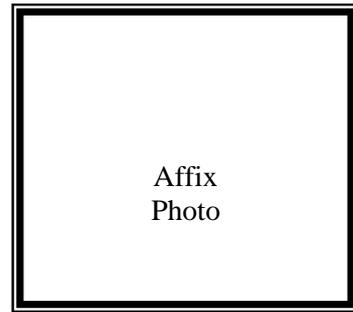
- I am aware that some information about children is displayed on the wall for swift access by staff dealing with children in a medical emergency. I will not share any child's medical information with another adult.
- I understand that the medical room door should not be closed when I am inside whilst being mindful of the need for privacy.
- Should there be a medical emergency whilst I am using the medical room I will do my best to vacate the area as quickly as possible.
- I will not attempt to deal with a private situation involving other children or adults.
- I will respect the protocols advised to me whilst administering medication and will leave the medical room in a fit and tidy state for other users.
- After administering my child's usual medicine I will return it to its correct place.
- If I have any queries I will make contact with my designated liaison member of staff as soon as possible.

Thank you for your co-operation.

Child's name in class

Full name

Signed Date



Health Care Plan

Today's date		
Child's name		
Group/class/form		
Date of birth		
Child's address		
Medical diagnosis or condition		
Date of diagnosis		
Review date of care plan		
Family Contact Information		
Name (1)		
Relationship to child		
Phone no.	work	home
	mobile	
Name (2)		
Relationship to child		
Phone no.	work	home
	mobile	
Clinic/Hospital Contact	GP	
Name	Name	
Phone no.	Phone no.	

Who is responsible for providing support in school

First aiders, class teachers

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, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs (**SEN**)

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*)

First aiders, class staff

Arrangements for school visits/trips etc

Other information

To be completed by school staff

Plan developed with

Parent, Mrs Moir and Mrs McMeakin

Staff training needed/undertaken – who, what, when

1st aiders have training every 3 years

Form copied to

6 copies: 1 staffroom, 1 classroom, 1 supply handbook, 1 in child's medical box and on the wall of medical room, 1 copy for the office.

Signatures:
