

## Supporting pupils with medical conditions Policy



## St Joseph's Catholic Academy

Name of person with overall responsibility for policy implementation:

Name of Health and Safety coordinator:

Name of SENCO:

*Name of Link Governor:* 

Date Policy has been adopted:

Date of review of Policy:

- Mrs L Hamilton
- Mrs L Philps
- Miss G McGough
- Mrs T Harding
- September 2023
- September 2024

This policy is written in regard to Statutory guidance – Supporting Pupils at School with Medical Conditions, updated September 2017 and 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. This policy is written in regard to the Equality Act 2010 and where appropriate takes into consideration the Special educational needs and disability code of practise: 0 to 25 years.

#### Aims

- To ensure pupils at 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**

The SENCO and H&S Coordinator are responsible for ensuring that whenever the Academy is notified that a pupil has a medical condition:

- SIMS is updated with the details, this may create a sufficient record of the child's medical condition and a copy will be kept in the Academy's medical record file and the class medical record file. A copy is sent home to parents.
- A meeting is arranged with parents if further information is required and an Individual Health Care Plan created if necessary.
- Individual healthcare plans are monitored (when circumstances change or reviewed annually)
- 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 by the class teacher
- if a child's needs change, the above measures are adjusted accordingly

Where children are joining The Academy 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.

Any pupil with a medical condition requiring medication or support in school should have an individual healthcare plan which details the support that a 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 Academy's medical record and the child's individual records.

At this academy we ensure that inhalers are readily available for pupils to access. Teachers are aware of which children require inhalers. An emergency reliever inhaler is kept in the Academy office. (See separate Asthma Policy)

#### Individual Healthcare Plans (IHPs) See Template A

The arrangements made through an individual health care plan should ensure that the focus is on the needs of each individual child and how their condition impacts on their school life. It should convey an understanding of how a medical condition can impact on the child's ability to learn, their confidence and promote self-care.

Where a child has an education, health, care plan (EHC) this will be monitored in line with the education needs of the child by the SENCo. If the child has a special educational need but not an EHC plan the medical needs will be considered in the relevant documentation (pupil passports). Special educational needs should also be considered in IHP's.

- 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 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
- Personal Care Plans for more complex, serious medical needs and Care Plans for allergies continue to be devised and monitored with the school nurse team. Care plans are on located in appropriate areas including specific classrooms and the Academy office.
- There are designated member(s) of staff who monitors Care Plans and medication stored in school
- Staff training is regularly updated in allergy awareness, use of Epi-pens, asthma and epilepsy

#### **Roles and Responsibilities**

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The Academy will work collaboratively with any relevant person or agency to provide effective support for the child. \*Where a child refuses to take medicine or carry out a necessary procedure then their parents/carers will be contacted, in the case of an emergency and ambulance will be called.

#### **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.

#### **Academy Staff**

• any staff member may be asked to provide support to pupils with medical conditions, including the administrating 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 the 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 Nurse Services**

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

#### Other healthcare professionals

- should notify the school nurse when a child has been identified as having a medical condition that will require support at school
- may provide advice on developing healthcare plans.
- Specialist local teams may be able to provide support for particular conditions (eg 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 Academy 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 eg
  provide medicines and equipment and ensure that they or another nominated adult are
  contactable at all times.

#### **Local Authority**

The Local Authority should provide support, advice and guidance to support children with medical conditions to attend full time. Where children would not receive a suitable education at this academy because of their health care needs the LA has a duty to make other arrangements. Further details can be found at <a href="https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school">https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school</a>

#### **Additional Notes**

• They Academy 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 not considered acceptable

- 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 for reasons associated with their medical condition 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, e.g. 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; or
- Prevent children from participating, or create unnecessary barriers to children
  participating in any aspect of school life, including school trips, e.g. by requiring parents
  to accompany the child.

#### **Administration of Prescription Medicine**

St Joseph's Catholic Academy agrees to administer prescription drugs **but only if the appropriate paperwork is completed from the office with signed consent from parents** as set out below.

#### Procedures for taking prescribed medicines which need to be taken during the school day

 Medicines will only be administered in this Academy when it would be detrimental to a child's health or attendance not to do so. For example when completing a "4 a day" dose of anti-biotics or other course of treatment.

# The academy will only accept medicines that have been prescribed by a doctor, dentist, or nurse prescriber

• Medicines should always be provided in the original container as dispensed by the pharmacist and include the prescriber's instructions for administration.

- Parents/Carers must sign a permission form from the office.
- Parents/Carers are also very welcome to come into the school to administer medicines at lunch/break times.
- Medicines will be stored in the school office or staffroom fridge, if applicable.

#### Procedures for managing prescription medicines on trips and outings

- Arrangements for administering any necessary medication will also need to be taken into consideration for any school visit.
- Staff supervising excursions should always be aware of any medical needs and the relevant emergency procedure. A copy of any IHPs should be taken on visits in the event of the information being needed in an emergency.
- Permission slips, medical forms and contact details will always be carried.
- Children will be responsible for their own asthma inhalers in KS2, named members of staff will be responsible for asthma inhalers for younger children. A named adult will carry the forms and any prescribed medicines needed for that day.

#### Roles and responsibility of staff managing administration of medicine

- Only named staff may be asked to administer prescribed medicines, names of these staff will appear on the IHP and the record of administrating medicine. (templates A and B).
- Named staff will annotate the record form on administering the medicine.
- Staff will be given training as required and additional training needs which are identified will need to be brought to the attention of the Senior Leadership Team.

#### Parental responsibilities in respect of their child's medical needs

• There is a need for a prior written agreement between parents and the Academy before any medicines shall be administered to a child.

#### **Non Prescription medicines**

- Parents may come into the academy to administer non prescription medicines but academy staff will not administer these.
- Children must not carry cough sweets, aspirin or other medicines in to the academy.

#### Safe storage of medicine

- Large amounts of medicine will not be stored and only those pertaining to the individual child will be kept.
- Medicines will be stored according to the instructions on the product. Medicines will be stored securely in the school office, staffroom fridge or in the classroom if safe to do so.
- Children should know where their medicines are at all times and have access to them
  immediately. Where relevant they should know who holds the key to the storage
  facility. Medicines such as asthma inhalers and adrenaline pens should always be readily
  available to children and not locked away.

#### **Record Keeping**

- The Individual Healthcare Plan (Template A) must be drawn up with parents relevant members of staff and if necessary medical professionals. This is kept in the main office medical record file and also a copy in the class health record file. It is to be updated as necessary.
- The attached form (Template B) must be completed and signed by parents and the member of staff receiving the medicine. This form must then be annotated by staff each time the medicine is administered and kept with the medicine.
- The school will keep a separate record of all medicines administered (Template C). This
  record sheet will be kept in the medication folder in the academy office. Class teachers
  also have copies of a record sheet should there be a need for staff administering
  medication in the classroom. Staff are required to complete this sheet when medicines
  have been administered.
- All children who have medical/health issues, either requiring medication or not have a
  record with a photograph produced from SIMS and a copy is kept in the office in the
  main medical folder and also a copy is kept in the class medical folder.
- Records of staff training are recorded on a spreadsheet and updated as necessary by the Academy Manager. Individual records of staff training are also kept.

#### **Emergency procedures**

- Where a child has an IHP this will clearly define what constitutes an emergency and explain what to do including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other children in the school should know what to do in general terms such as informing a teacher immediately if they think help is needed.
- If a child needs to be taken to hospital, staff should stay with the child until the parent arrives or accompany a child to hospital in an ambulance

#### **Maladministration of Medication**

- Prevention measures are in place to avoid maladministration from occurring. This
  includes, parents are to complete a copy of template B, this record is then kept in the
  medical folder. Medication is stored in a safe location away from children and is labelled
  with the child's name. Template C is completed by a staff member once medication has
  been administered. SLT complete recorded spot checks of medication administration.
- If a child has been given a higher dose of medication than prescribed, the child has been given the wrong medication or the child has not received the required medication the Principal and parent must be informed as soon as possible.
- Staff member must seek medical advice about the medical implications of maladministration for the child if required.
- A record of maladministration must be recorded.

• An investigation will take place to ensure control measures are adequate and to take preventive action as necessary.

#### Insurance

• The academy is a member of the Department for Education's Risk Protection Arrangement.

#### **Complaints**

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

#### **Monitoring, Evaluation and Review**

The Senior Leadership Team will continually monitor the quality of provision.

The school will review this policy regularly and assess its implementation and effectiveness. Model Process for developing Individual Health Plan;

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

## **Template A**

### **HEALTH CARE PLAN**

Required for administration of maintenance drugs (e.g insulin) or emergency drugs (e.g injections of adrenaline for acute allergic reactions; rectal diazepam for major fits; injections of glucagon for diabetic hypoglycaemia)

Medical Diagnosis or Condition:	
Date Condition Diagnosed:	
Medical Review Date:	
Clinic/Hospital Name and Contact Person:	
Telephone No.:	
Details of pupil's symptoms and description of medical needs:	
Daily care requirements e.g before sport, at lunchtime:	
Description of what constitutes an emergency for the pupil and action to be taken if this occurs:	
Follow-up care:	
Member(s) of staff trained to administer drugs:	

## **Individual Health Care Plan**

Name of school/setting	
Child's name	
Class	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no.	
G.P.	
Name	
Phone no.	
Who is responsible for providing support in school Name of main member of staff	

and two other staff members to provide support if the main member is absent.	
Describe medical needs and give deta treatments, facilities, equipment or dev	ils of child's symptoms, triggers, signs, vices, environmental issues etc
	administration, when to be taken, side effects, f-administered with/without supervision
Daily care requirements	
Specific support for the pupil's education	onal, social and emotional needs
Arrangements for school visits/trips etc	;
Other information	
Describe what constitutes an emergen	cy, and the action to take if this occurs
Who is responsible in an emergency (s	state if different for off-site activities)
Plan developed with	

Staff training needed/undertaken – who, what, when	
Form copied to	

# Template B ADMINISTRATION OF PRESCRIBED MEDICINES & TREATMENT CONSENT FORM

Pupil's Name:

Pupil's Address:

**IMPORTANT**: If your child suffers from asthma, could you please ensure that they have an inhaler

in school at <u>all times</u> – clearly labelled with name and instructions for use. Thank you.

Pupil's Date of Birth:	
Parents' Home Tel. No.:	
Parents' Work Tel. No.:	
Parents' Mobile Tel. No.:	
Name of Pupil's GP:	
GP's Tel. No.:	
Parent/carer to	sign as appropriate
(Please mark N/A if ar	y section is not applicable)
My child will be responsible for the self	
administration of medicines as directed	
below	
I agree to members of staff	
administering medicines/providing	
treatment to my child as directed below	
or, in the case of emergency, as staff	
may consider necessary	
I recognise that school staff are not	
medically trained	
Signature of parent or carer	
Date of signature	
Name of medicine required, Dose	
•	
frequency, Course finish date, Medicine expiry date	
Special Instructions	
Special ilisti uctions	
Allergies	
Other Prescribed Medicines	

## **Template C**

## Record of medicine administered to all children





Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name