# **Bevendean Primary School**



# Supporting Children with Medical Needs Policy

This policy was adopted in **January 2016**This Policy is due for review in **January 2018** 

Section 100 of the Children and Families Act 2014 places a duty on the Governing Body and Senior Leadership Team to make arrangements for supporting pupils with medical conditions. The aim 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.

This policy will be reviewed regularly and will be readily accessible to Parents/Carers and staff through our school website.

#### **Definitions of Medical Conditions**

Pupils' medical needs may be broadly summarised as being of two types:

- Short-term affecting their participation in school activities because they are on a course of medication.
- Long-term potentially limiting their access to education and requiring extra care and support (deemed special medical needs)

Diabetes and Epilepsy are also included under this policy. The school assesses all children on Ritalin or similar drugs, and those with asthma or nut allergies on a case by case basis.

Some children with disabilities may not have a medical condition but may have an individual risk assessment to ensure they are kept safe at school.

## **Policy Implementation**

All schools and academies are expected by OFSTED to have a policy dealing with medical needs and to be able to demonstrate that this is implemented effectively. The overall responsibility for the

successful administering and implementation of the policy is given to the Head Teacher. The Head Teacher is responsible for ensuring that:

- sufficient staff are suitably trained;
- cover arrangements are in place in case of staff absences or staff turnover;
- someone is always available and on site
- risks assessments for school visits and other school activities outside of the normal timetable

The Business manager will be responsible for briefing supply teachers.

The Inclusion Manager or teacher in charge of the HSF will be responsible for the drawing up and for the monitoring of individual health care plans and for any risk assessments needed for individual children.

All staff will be expected to show a commitment and awareness of children's medical conditions. All new members of staff will be inducted into the arrangements and guidelines set out in this policy.

# Procedures to be followed when notification is received that a pupil has a medical condition

When a child has been diagnosed with a medical condition, such as epilepsy, diabetes, allergies, etc., or when a child's condition has changed, it is the **parent's/carer's** responsibility to inform the school by contacting the Inclusion Manager. Through the meeting, a decision will be made about writing an Individual Health Care Plan, which may include the school seeking support and advice from health care professionals. The Inclusion Manager, will then ensure correct training is in place for any member of staff, if this is appropriate. The Individual Health Care Plan will be shared with relevant members of staff.

If training is needed, it may be that the child cannot attend school, until relevant members of staff have been trained.

#### **Individual Health Care Plans**

Individual Health Care Plans will be written and reviewed by the school nurse or other lead medical professional but it will be the responsibility of all members of staff supporting the individual children to ensure that the plan is followed. The class teacher will be responsible for the child's development and ensure that they and their medical conditions are supported at school.

Individual Health Care Plans help to ensure that the school effectively supports pupils with medical conditions, providing clarity about what needs to be done, when and by whom. They are essential in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed and supportive where medical conditions are long-term and complex. However, not all children will require one. The school, health care professional and parents/carers should agree, based on evidence, when a Health Care Plan would be inappropriate or disproportionate. If consensus cannot be reached, the medical professional is best placed to take a final view.

Individual Health Care Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. The plans will clearly state the key information and actions required to support the child effectively; the level of detail within plans will depend on the complexity of the child's condition and the degree of support needed (different children with the same health condition may require very different support). See appendix A for a template of the Individual Health Care Plan.

Individual Health Care Plans may be initiated, in consultation with the parent/carer, by a member of the school staff or a health care professional involved in providing care to the child. The Individual Health Care Plan must be completed by the Lead Professional (usually Inclusion Manager/ Teacher in charge of HSF) with support from parents/carers and a relevant health care professional, E.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate. The responsibility for ensuring it is finalised and implemented rests with the school.

The school will ensure that Individual Health Care Plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing and minimises disruption.

When deciding what information should be recorded on Individual Health Care Plans, the following should be considered:

• the medical condition, its triggers, signs, symptoms and treatments;

- pupil's resulting needs, including medication (does, 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 (crowded corridors, etc.)
- specific support for the pupil's educational, social and emotional needs E.g. how absences
  will be managed, requirement for extra time to complete exams, use of rest periods or
  additional support in catching up with lessons, counselling sessions;
- the level of support needed (some children will be able to take responsibility for their own health needs), including emergencies. If a child is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring;
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a health care profession; 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;
- arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours;
- 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, E.g risk assessments;
- where confidentiality issues are raised by the parent/child, who will be given the information about the child's condition;
- what to do in an emergency, including whom to contact and contingency arrangements.
   Some children may have an emergency health care plan prepared by their lead clinician that could be used to inform development of their Individual Health Care Plan.

# **Purpose**

The purpose of this policy is to ensure that all children with medical conditions, both in terms of 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.

# **Roles and Responsibilities**

# **The Governing Body**

The Governing Body will make sure that arrangements to support pupils with medical conditions in school, including making sure Health Care Plans are in place, so that the child is able to participate fully in all aspects of school life.

The Governing Body is to ensure that sufficient staff have received appropriate training and are competent before they take on responsibility to support children with medical conditions. They will also make sure that any members of staff who provide support, are able to access information and other teaching support materials as needed.

#### The Headteacher

The Head Teacher is responsible for implementing the Governing Body's policy in practice and for developing detailed procedures. When any member of staff agrees to work with a child with medical needs, the Head will agree to their doing this and will ensure that staff have received the appropriate support and training. The Head will also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They will 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.

# **Bevendean Primary School Staff**

Some children with medical conditions may be disabled. Where this is the case, the Governing Body must comply with their duties under the Equality Act 2010. Some children may also have Special Educational Needs and may have an Education, Health and Care Plan (EHCP), which brings together health and social care needs as well as their special educational provision. For children with SEND, this guidance should be read in conjunction with the SEND Code of Practice.

If a child is deemed as having a long-term medical condition, the school will ensure that arrangements are in place to support them. in doing so, we will ensure that they can access and enjoy the same opportunities at school as any other child. The school, health professional, parents/carers and other support services will work together to ensure that children with medical conditions receive a full education, unless this would not be in their best interests because of the health needs. In some cases, this will require flexibility and involve, for example, programmes of

study that rely on part time attendance at school in combination with alternative provision arranged by the Local Authority and health professionals. Consideration will also be given to how children will be reintegrated back into school after long periods of absence.

Staff will not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any Individual Health Care Plans). At the school, we recognise that a first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Health care professionals, including the school nurse, who we have regular access to, will provide training and subsequent confirmation of the proficiency of staff in a medical procedure or in providing medication.

Teaching staff will ensure that health care plans are passed on to the new teacher at transition to ensure the smooth progress from one class to the next, including from Nursery. Each health care plan has a review date; after the review, the Inclusion Manager will make sure the updated health care plan is circulated as appropriate.

#### **Health Care Professionals**

At Bevendean Primary School, we have access to a school nurse, who is responsible for notifying the school when a child (of school age) has been identified as having a medical condition which will require support in school. She doesn't usually have an extensive role in ensuring that the school is taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's Individual Health Care Plan and provide advice and liaison, for example on training. The school nurse can also liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

Community nursing teams are also a valuable resource for supporting school staff with help, advice and training.

Other health care professionals, including GPs and paediatricians are responsible for notifying the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing health care plans. Specialist local health teams may be able to provide support for children with particular conditions such as asthma or diabetes.

# **Pupils**

Pupils with medical conditions should be able to provide information about how their condition affects them (depending on age). They should be as involved as possible in discussions about their medical support needs and contribute as much as possible to the development of and comply with their Individual Health Care Plan.

#### Parents/carers

Parents/carers have prime responsibility for their child's health and should provide the school with up-to-date information about their child's medical condition. Parents/carers are key partners and will be involved in the development and review of their child's Individual Health Care Plan. They are responsible for carrying out any action they have agreed to as part of its implementation, E.g. providing medicines and equipment and ensuring they or another nominated adult are contactable at all times. This includes parents applying for a place at the school, who should make sure any medical needs are included on the application form.

It is the responsibility of the parents/carers to inform any organisation which is held at the school, including after school clubs, FABS etc. if your child has a food allergy or a medical need. This includes FABS discos, Christmas fair, summer fair, School's Out etc. If the organisation gives out food, it will be the parents'/carers' responsibility to provide alternative snacks for the child.

Parent's/carer's cultural and religious views will always be respected. Agreement will be sought before passing on information about a child's health to other school staff; sharing information is important if staff and parents are to ensure the best care for a child.

Parents/carers are responsible for children if their children have short term illnesses. If your child has a contagious illness, like measles, chickenpox, scarlet fever, stomach bugs etc., they should be kept at home until they are completely cleared. If a child has a stomach bug, **the advice from the School Nurse is that they should be kept off school for 48 hours after they were last ill.** 

If there are class parties, class cooking, children bringing in sweets/chocolates/cakes to celebrate their birthdays etc., parents/carers are requested to have small packets of sweets

or an alternative snack in school for their children so they are not left out. School staff will ensure that the children do not eat what they are not supposed to.

# **Managing Medicines in school**

At Bevendean Primary School, we have a well-equipped Medical area, which is managed by the school office.

Staff are available to administer first aid, to deal with any accidents or emergencies or to help if someone is taken ill. We also have a number of members of teaching staff who are trained and qualified as First Aiders, who are capable of giving first aid if, for example, your child is injured during sport.

First aid boxes are placed in all the areas of the school where an accident is considered possible or likely or where the first aid is most accessible: SENCO office in the upper school, PPA room, soft play room, community room, the community kitchen, the school office, medical room and the lower school girls' toilets; bum bags are also available for staff to take out when they are on playground duty. First aid boxes are always taken with us when groups of pupils go out of school on organised trips or to participate in sporting events.

All new pupils and staff are given information on where to go for help in the event of an accident, as part of their induction into the school. There are first aid notices around the school identifying the First Aid locations.

Records of all accidents and injuries are kept and there is a procedure in place for ensuring they are reviewed regularly to minimise the likelihood of recurrence.

If children knock their heads, i.e. not from a height, just touching another person, the knock is assessed by the first aider and the child has a cold compress put on the knock and is given a bumped head sticker and a letter to take home. If a child bumps their head, i.e. at speed against another child, from a height etc., the injury is assessed by the first aider and a cold compress is given. If there is any concern, they are sent to the office, where they are reassessed, make sure they have a bumped head sticker and a letter and will then make a courtesy phone call to the parents or carers. If there is no answer, a message is left. A record is kept of how the injury occurred and any action taken.

# Staff training and support

Staff working with children with medical needs will receive appropriate training from health care professionals. The Individual Health Care Plan will be reviewed at least annually and training updated as appropriate. The school will meet with health care professionals to review the care needs of individual children with medical needs. The school will be guided by the health care professionals about training needs so that staff are competent and have confidence in their ability to support pupils with medical conditions and to fulfil the requirements as set out in Individual Health Care Plans. Staff will be given an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. Where a child has a specific medical condition, staff will be trained by health care professionals, including through staff meetings as appropriate.

Staff will not give prescription medicines or undertake health care procedures without appropriate training (updated to reflect any Individual Health Care Plans).

#### 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 and this will be reflected in the Individual Health Care Plans.

Medicines will be kept so that they are safe but easily accessible for these children.

Children, who self-manage their own health needs, will be monitored by school staff in accordance with the Individual Health Care Plans.

# Administering medicine

All appropriate staff will be trained to administer medicine according to directions from parents.

If a child needs to take antibiotics, a dose will only be administered at school, if the prescription states four doses a day. If the prescription states three times a day, we request that parents give the medicine before school, straight after school and again before bed time.

Parents must sign a medication form giving the school permission to administer the medicine and a record is kept of the times and dosage given to the child.

The school will try to administer medicine as requested by the parents, but cannot guarantee to do so.

The school does not undertake to administer eye drops, ear drops, ointment, allergy cream or any 'invasive' medication. If it is vital, then the school will recommend that the child is either kept at home or the parents visit the school to administer it themselves.

No child is permitted to bring any medication to school or to keep any medication on their person, except asthma inhalers. All medication must be brought to the school office by the parents/carers and the permission form signed.

If an older girl suffers from period pains, Calpol may be left at the school office with a permission form signed to say the medicine may be given as necessary.

A record is kept of any verbal permission given during the day to administer medicines, such as Calpol.

# **Emergency procedures**

If a child has an Individual Health Care Plan, what constitutes an emergency will be clearly defined together with a clear explanation of what to do. All relevant staff will have copies of the Individual Health Care Plans and be familiar with emergency symptoms and procedures.

If a child needs to be taken to hospital, staff will stay with the child until the parent/carer arrives or accompany a child taken to hospital in an ambulance. All relevant records are kept in SIMS and Individual Health Care Plans are kept in a separate folder, ready to pass onto paramedics if necessary.

The school also holds an asthma inhaler for emergency use. Each year, parents/carers of children who suffer from asthma, are required to complete a form giving permission for use of the emergency inhaler if necessary. It is the responsibility of the parent/carer to ensure the medication is in date and to replace if the use by date has expired.

## **Extra-Curricular Activities**

Children with medical needs are encouraged to participate fully in the life of the school, including participating in day trips, residential trips and sporting activities. Staff will be made aware of the child's medical needs and given a copy of the child's Individual Health Care Plan. When going on a day trip or residential visit, there will be a member of staff present who knows how to support the

child and separate risk assessments will be carried out to ensure that the child is able to participate fully with adequate and appropriate adjustments. Parents/carers and health care professionals will be consulted as part of the risk assessment and in the planning stage to ensure adequate adjustment is made for the child.

### **Unacceptable Practice**

Although school staff should use their discretion and judge each case on its merits with reference to the child's Individual Health Care Plan, it is not generally acceptable practice to:

- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents/carers 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 Health Care Plans
- Send a child who has fallen ill, to the school office or medical room 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 children from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents/carers or make them feel obliged, to attend the school to administer medication or provide medical support to their child, including with toileting issues. No parent/carer 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.

# **Complaints**

Should parents/carers or pupils be dissatisfied with the support provided, they should discuss their concerns directly with school. if, for whatever reason, this does not resolve the issue, they may make a formal complaint via the Complaints Procedure outlined in the school's Compliments and Complaints Policy.

# **Bevendean Primary School**

... Healthcare Plan for a Pupil with Medical Needs ...

Name:					
Date of Birth:					
Condition:					
Class:	Teacher:				
Date:					
Review Date:					
		L			
	Contact Info	ormati	on		
	Family Contact 1			Family Contact 2	
Name:		Nam	e:		
Phone no.	(work)	Phon	ne no.	(work)	
	(home)			(home)	
	(mobile)			(Mobile)	
Relationship: Mot	her				
С	linic / Hospital Contact			G.P.	
Name:		Nam	e: (see er	mergency contact sheet)	
Phone no.:		Phon	ne no.:		
Details of pupil's	s individual condition / symptoms:				
If he has any of	the following reactions Care Requirem	nents:			
Describe what c	onstitutes an emergency for the pupil	, and th	he actior	to take if this occurs:	
Signed:		Sign	eq.		
(School / School Nurse)			(Parents / Carers)		

# **Bevendean Primary School**

... Healthcare Plan for a Pupil with Medical Needs ...

Name:		
Date of Bi	rth:	
Condition	:	
Class:	Teacher:	
Date:		
Review Da	ate:	
	Family Contact 1	Contact Information
Name .	Family Contact 1	Family Contact 2
Name:	( 1)	Name:
Phone no.	(work)	Phone no. (work)
	(home)	(home)
	(mobile)	(Mobile)
Relationship: I		
	Clinic / Hospital Contact	G.P.
Name:		Name: (see emergency contact sheet)
Phone no.:		Phone no.:
Details of pur	pil's individual condition / sy	ymptoms:
Care Require	ments:	
Describe wha	at constitutes an emergency	for the pupil, and the action to take if this occurs:
Pescinc Wild	a constitutes an emergency	ior the pupil, and the action to take it tills occurs.
Signed <sup>.</sup>		Signed:
(School / Scho	ool Nurse)	(Parents / Carers)