

Supporting Pupils with Medical Conditions Policy

1. Definition

- 1.1 Pupils' medical needs may be broadly summarised as being two types:
 - I. Short- term affecting their participation in school activities when they are on a course of medication.
 - II. Long-term potentially limiting their access to education and requiring extra care and support.

2. Rational

- 2.1 This policy has been written in line with the recommendations set out within the Department for Education (DfE) 'Supporting pupils at schools with medical conditions' publication, December 2015.
- 2.2 Swanlea school is an inclusive community that welcomes and supports pupils with medical conditions. The school provides all pupils with any medical condition the same opportunities as others at school.
- 2.3 We will help to ensure they can:
 - be healthy
 - stay safe
 - > enjoy and achieve
 - make a positive contribution
 - > achieve economic wellbeing once they leave school.

3. Aims of this policy:

- 3.1 To outline the systems in place to support children with medical needs.
- 3.2 To safeguard against accidents arising from the storage and administrations of medicines.
- 3.3 To clarify that it is the responsibility of parents to ensure information regarding medical needs is accurate and in date medication is supplied in a timely manner.
- 3.4 To protect pupils and staff.
- 3.5 To avoid unnecessary exclusion of any child who is fit for school but who is completing a course of medical treatment.

4. Responsibilities

4.1 The Local Authority (LA) is responsible for:

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- Promoting cooperation between relevant partners and stakeholders regarding supporting pupils with medical conditions.
- Providing support, advice and guidance to schools and their staff.
- Making alternative arrangements for the education of students who need to be out of school for fifteen days or more due to a medical condition.

4.2 The Governing Body is responsible for:

- ➤ The overall implementation of the Supporting Students with Medical Conditions Policy and procedures of Swanlea School
- ➤ Ensuring that the Supporting Students with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- ➤ Handling complaints regarding this policy as outlined in the school's Complaints Policy.
- > Ensuring that all students with medical conditions are able to participate fully in all aspects of school life.
- Ensuring that relevant training provided by the LA/School is delivered to staff members who take on responsibility to support students with medical conditions.
- Guaranteeing that information and teaching support materials regarding supporting students with medical conditions are available to members of staff with responsibilities under this policy.
- ➤ Keeping written records of any and all medicines administered to individual students and <u>across the school population</u>.
- ➤ Ensuring the level of insurance in place reflects the level of risk.

4.3 The Head teacher is responsible for:

- ➤ The day-to-day implementation and management of the Supporting Students with Medical Conditions Policy and procedures
- > Ensuring the policy is developed effectively with partner agencies.
- Making staff aware of this policy.

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> Ensuring the correct level of insurance is in place for teachers who support students in line with this policy.

4.4 The SEN Co-ordinator is responsible for:

- Overseeing the liaison with healthcare professionals regarding the training required for staff.
- Making staff who need to know aware of a student's medical condition.
- ➤ Ensuring Individual Healthcare Plans (IHCPs) are written and updated.
- ➤ Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- Contacting the school nursing service in the case of any student who has a medical condition.
- ➤ If a student is hospitalised for a significant period of time, the SENCo with liaise with staff about providing work for the students and will make arrangements to have the work devolved and collected.

4.5 Staff members are responsible for:

- Taking appropriate steps to support students with medical conditions, including on trips and visits
- Where necessary, making reasonable adjustments to include students with medical conditions into lessons.
- Administering medication, if only they have agreed to undertake that responsibility.
- ➤ Undertaking training to achieve the necessary competency for supporting students with medical conditions only, if they have agreed to undertake that responsibility.
- Familiarising themselves with procedures detailing how to respond when they become aware that a student with a medical condition needs help.

4.6 School nurses are responsible for:

- Notifying the school when a student has been identified with requiring support in school due to a medical condition.
- Liaising locally with lead clinicians on appropriate support.

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- 4.7 Parents and carers are responsible for:
 - Keeping the school informed about any changes to their child's health.
 - > Providing the school with the medication their child requires and replenishing it prior to the expiry date.
 - ➤ It is the responsibility of parents/ carers to ensure their child's required medication is kept in date, failure to do so places the child at an unacceptable risk
 - Failure to provide required medication may result in your child being not to return to school until your their medication is replenished; this is to safeguard your child in case he/she were to have an medical emergency or accident.
 - Collecting any leftover medicine at the end of the course or year.
 - Discussing medications with their child prior to requesting that a staff member administers the medication.
 - ➤ Where necessary, developing an <u>Individual Healthcare Plan (IHCP)</u> for their child in collaboration with the SENCo, school nurse, other staff members and healthcare professionals.

4.8 The role of the student:

- > Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- Where possible and agreed, students will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be kept in the medical room, clearly labelled and signed in and out. There is also a Medical fridge available in the medical room which is to be used for storing medicines which need to be kept refrigerated. If students refuse to take medication or to carry out a necessary procedure, parents/carers will be informed so that alternative options can be explored.
- ➤ Where appropriate, students will be encouraged to take their own medication under the supervision of a member of staff.

4.9 Training of staff

- > Teachers and support staff will receive training on the Supporting Students with Medical Conditions Policy as part of their new starter induction.
- Teachers and support staff will receive regular and ongoing training as part of their development.

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- ➤ Teachers and support staff who undertake responsibilities under this policy will receive appropriate external training.
- ➤ No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility.
- ➤ No staff member may administer drugs by injection unless they have received training in this responsibility

5. Identification of students with medical needs

- 5.1 Upon admission to Swanlea parents are asked to disclose any medical needs.
- 5.2 It is the parent/ carer's responsibility in the first instance to inform school of any medical needs affecting their child.
- 5.3 Where the school is aware of a pupil with a chronic illness or a potentially life threatening condition, the school nurse will create an individual health care plan (IHCP) for managing the medical needs in school, in collaboration with the student, parent, SENCO and any other relevant professionals.
- 5.4 The Health Care Plan will include the following information, where appropriate:
 - > Definition and details of the condition
 - Food and drink management
 - Precautionary measures
 - Treatment
 - Emergency procedures to be adopted
 - Staff training where required
 - > Staff indemnity
 - Consent and agreement
- 5.5 Each Health Care Plan is located in the staffroom, first aid room, with Ms. Reilly and the child's Inclusion file (in the Inclusion Admin office). Where it involves emergency procedures, e.g. the use of an 'Epipen', then a copy is also with the medication.
- 5.6 To ensure pupils are kept safe Health Care Plans will be easily accessible whilst preserving confidentiality.
- 5.7 Health Care Plans will be reviewed at least annually, or more frequently if there is a change to a pupil's needs.

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6. Record Keeping and information sharing

- 6.1 Parents / carers must complete a medical form when the child starts school. This information will include their doctor's name and contact details in addition to any medical information.
- In the event of any changes parents must provide the school with up-to-date information. It is a parent's responsibility to inform school of these changes immediately.
- 6.3 Records of accidents occurring on school premises or on school visits will be kept in the accident book in the first aid room.
- 6.4 Medical information is shared on each child's SIMs record and in the medical folders kept in the Inclusion Admin Office and First Aid Room.
- 6.5 There are procedures in place for supply and sessional staff. Each member of staff is provided with a class list which has a photo of each child as well as details of any medical needs and/or SEND.

7. Medicine storage and administration

- 7.1 All medicines are locked in a secure cabinet in the medical room. There are three keys which are kept locked in code access safes accessible to the following members of staff only:
 - Associate Assistant Head Teacher/ SENCo, J Bergin-Miah
 - Pretrina Bryden, Medical Lead
 - > Teresa Reilly, HLTA
 - > Emily Tighe, Safeguarding Lead
- 7.2 Staff are not permitted to give prescription medicines or undertake healthcare procedures without appropriate training.
- 7.3 Prescription or Over the Counter medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

 No child under 16 will be given prescription or non-prescription medicines without their parent's written consent. A Request for the Administration of Medication form will be filled out prior to staff accepting the medication for storage and administration.
- 7.4 Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- 7.5 Swanlea School will only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
- 7.6 All medicines are stored safely. Children know where their medicines are at all times and are able to access them immediately. Where relevant, they should know who holds the key to

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the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on school trips.

- 7.7 When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes are always used for the disposal of needles and other sharps.
- 7.8 A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Otherwise all controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs are easily accessible in an emergency. A record is kept of any doses used and the amount of the controlled drug held.
- 7.9 School staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines do so in accordance with the prescriber's instructions. School keeps a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted in school.

8. Absence from school due to sickness

- 8.1 Where pupils are unfit to attend school due to illness, it is expected that parents/carers make the necessary arrangements for the child to be collected from school and cared for off the school site.
- 8.2 In the interests of other pupils and staff, it is expected that pupils are kept away from school in accordance with the quarantine recommendations set by the LA and recommendations set out by the Department for Health in response to infectious diseases
- 8.3 Where a student is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the ongoing need of the chid.
- 8.4 Children who are absent from school for a period of 15 days due to illness will be referred to the local authority for consideration as to whether individual tuition is necessary.

9. Emergencies

- 9.1 In the case of a pupil becoming ill at school, the child will be accompanied by an adult to see a First Aider or member of the Senior Leadership Team (SLT) and, if necessary, parents/carers will be contacted.
- 9.2 In any instance of a bang to the head, parents will be notified after it has been recorded in the accident book in the school office.
- 9.3 Should a child require a paramedic or ambulance, the emergency services are contacted first and the parents are called straight after this contact has been made.

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10. Trips

- 10.1 All trips and educational visits off-site adhere to a common reports system.
- 10.2 A list of all pupils is produced with parent/ carers contact details and medical/ SEND needs highlighted.
- 10.3 A copy of the list is held by the school office manager and the trip organiser. A further copy of the list together with any medication required is taken on the trip/ visit by the trip lead. Should the trip lead not be trained in the administration of medication potentially required by a student on a trip, a trained member of staff will be made available to support.

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

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