

Aims

Pupils, staff and parents understand how our school will support pupils with medical conditions

Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

Responsibility

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The Headteacher will:

Make sure all staff are aware of this policy and understand their role in its implementation

Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations

Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way

Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

The Assistant Head for Inclusion will:

Take overall responsibility for the development of IHPs.

Contact the school nursing service in the case of any pupil 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

Making staff aware of pupil's condition, where appropriate.

Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions

Staff will:

All work together to support pupils with medical needs. Supporting pupils with medical conditions during school hours is not the sole responsibility of one person.

Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the

administration of medicines Although administering medicines is not part of a teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

All staff will know what to do and respond accordingly when they become aware that

a pupil with a medical condition needs help.

Staff will only accept and administer prescribed medication that is in date and labelled including instructions for administration, dosage and storage (an exception to this is insulin which must still be in date but will generally be available to schools inside an insulin pen or pump)

Staff will not administer medication to a child's eyes.

Staff will ensure that a sharps box is used for the disposal of needles and other sharps

Parents will:

Provide the school with sufficient and up-to-date information about their child's medical needs

Be involved in the development and review of their child's IHP and may be involved in its drafting

Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment

Should ensure all necessary prescribed medicine is in school and is within its expiry date

Are required to arrange for the safe disposal of medicines which are no longer needed to be kept by the school or are out of date.

Contact their health professional who prescribed the medicine to request an IHP if their child is below school compulsory age and is in the school nursery. (The IHP needs to be in place before a child can start at the nursery).

Pupils will:

Be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

Be responsible for the safe keeping of any medicine if they are deemed to be responsible enough to do so.

Be aware of where their medicine is kept

School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. May liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.

May support staff on the implementation of a child's Individual Healthcare Plan (IHP) and provide advice

Healthcare professionals, such as GPs and community paediatricians, will liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

Health professionals (e.g. G.P or community paediatricians) are responsible for providing an IHP for a non-compulsory school aged child who attends the school's nursery.

Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Being notified that a child has a medical condition

Medical information is gained from a number of sources- parents, school nurse, health visitors, health professionals, previous school.

When the school is notified that a school aged pupil has a medical condition, the process outlined in appendix A will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school. In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort should be made to ensure that arrangements are put in place in readiness for the child's start date. In some cases staff training may need to take place before the child can attend the school safely.

A parent/care of a nursery aged pupil will need to notify the school of any medical needs their child has and an IHCP is required from a health professional and provide to the school before the pupil can start at the school nursery.

Some pupils may have a medical condition that does not require any medical support in school. A record of the child's medical condition is kept by the school and can be transferred to another school with the common transfer file. Staff have access to their relevant year group's medical list. A summary of the whole school medical needs list is available to staff via the medical notice boards in the staffroom and school admin office.

For pupils with a medical condition that requires medication or support in school will have an IHP (for example type 1 diabetes, epilepsy, severe allergy). Class teachers and key staff receive a copy of the IHP. All other staff are made aware of children with medical needs. Induction arrangements for new staff includes medical needs. Supply teachers are made aware of children's medical needs on arrival at the school as appropriate. IHP's are written with the involvement of a Health professional e.g. nurse, health visitor or school nurse.

Individual Health Care Plans:

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

What needs to be done

When

By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the individual with responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication (dose 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 e.g. crowded corridors, travel time between lessons. (See Appendix B for an example layout)
- Specific support for the pupil's educational, social and emotional needs e.g. how absences will be managed, requirements for extra time to complete exams, the level of support needed including in emergencies. (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, confirmation of proficiency and cover arrangements
- 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 headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours, with appropriate levels of supervision .

-Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable will ensure the child can participate. Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition, what to do in an emergency, including who to contact and contingency arrangements.

-Where a child has SEN but does not have a statement or EHC plan, their special educational needs should be mentioned in their IHP

Sometimes a separate IHP is required to include medical needs whilst away on a residential trip.

IHPs are reviewed at least annually. Plans should be drawn up in partnership between the school, parents and the pupil (where appropriate). An IHP review may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child if needs change.

General Medical attention.

All staff are able to provide initial care and attention to a child's fall or bump in the playground. When attention is provided e.g. cleaning of a bump/cut with an antiseptic wipe, the school adult will record this in the school medical book. If a child has received a bump that has caused a bruise or swelling, they will be provided with a letter to inform their parent/carer to monitor their progress later in the day and a telephone call home. Some children may also be provided with a cold compress to reduce first signs of swelling.

Emergency procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do (see appendix F).

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

Training

Training will be sufficient to ensure 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 the IHPs. School ensure they have a sufficient number of paediatric and first aid trained staff to cover the whole school site from breakfast club to the end of L'after club, as well as offsite school trips. Such staff will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with Lainesmead Primary School. Training records are kept (see example in Appendix E). Training is updated annually and usually delivered by the school nurse or other health agencies. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.

Managing Medicines

Only prescription medicines will be administered at school (unless advised differently by a health professional) with parental permission (see appendix C) or when it would be detrimental to the pupil's health or school attendance by not doing so.

The school will only accept prescribed medicines that are: In-date, Labelled, Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines should be stored safely. Children should know where their medicines are at all times and be able to access them. Medicines and devices such as asthma inhalers should be always readily available to children. A pupil can be responsible for their own inhaler. Generally in EYFS/Key stage 1, inhalers are stored with the class teacher, in Key stage 2 inhalers may be stored in the child's own drawer/bag. Staff and pupils should be responsible for ensuring they carry any medicines on all school trips/ visits.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

Record keeping

Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents should be informed if their child has been unwell at school.

Records are kept to record the administration of any medication (see appendix C) or medical attention to a pupil at school (medical books). IHPs are kept in a readily accessible place which all staff are aware of.

Liability and indemnity

As a maintained school Lainesmead ensures that the appropriate level of insurance is in place and appropriately reflects the level of risk.

Complaints

If parents have any queries regarding their child's medical needs and provision they should contact their child's class teacher in the first instance.

If parents have a complaint concerning provision for their child they will be referred to the school's complaint procedures.

Unacceptable Practice.

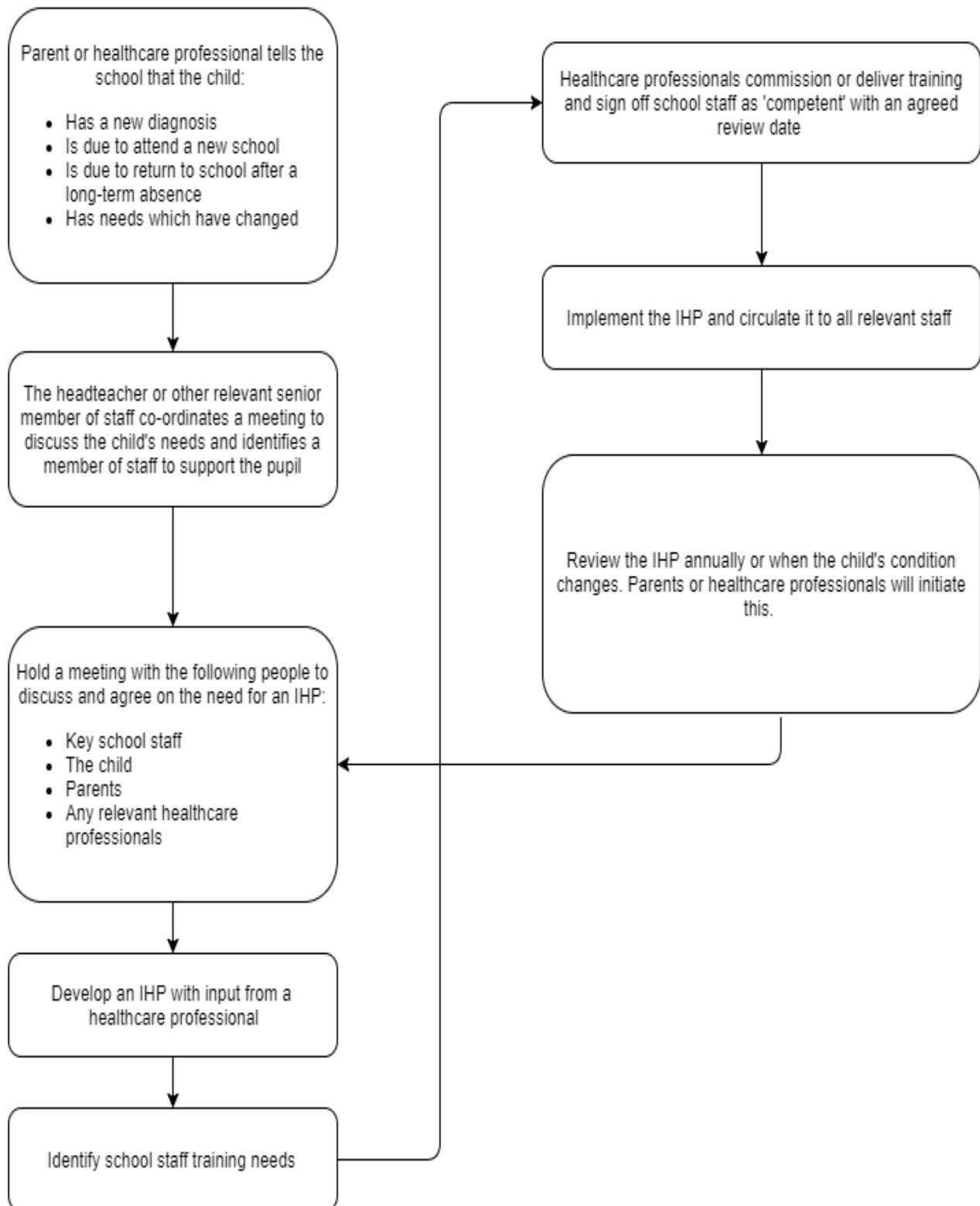
Notes taken from the DFE 'Supporting pupils with Medical conditions' 2014

School staff should use their discretion and judge each case individually 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 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 pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents 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;
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips.

Appendix A

See flow chart of process below:



Appendix B: individual healthcare plan (Swindon School Nursing service)

**Swindon Primary Care Trust
School Nursing Service
Supporting Children in School with Medical Needs
Individual Health Care Plan**

(Medical Procedure / Condition)

Name:

Address:

Date of Birth:

School:

Review Date:

Emergency Contact Number: (1)

(2)

General Practitioner:

Hospital Contact:

Condition/Procedure:

Date of Health & Safety Risk Assessment (To be carried out by school):

Names of School Staff who have volunteered to be involved in this child's care.

Staff training dates:

Outline of procedures / condition requiring management:

Name: Date of Birth:

I accept that this is a service that the school is not obliged to undertake.

Signature (s)..... Date.....

Relationship to pupil.....

Head Teacher..... Date.....

School Health Nurse..... Date.....

Copy to: **Parents**

Parent Information Booklet Given School Consultant / GP / CMO

Appendix C: parental agreement for setting to administer medicine

Lainesmead Primary School and Nursery

Parent/carer agreement to administer medicine

Please complete and sign this form if your child has a medical condition/illness that requires prescribed medication, in line with the school medical policy.

N.B **School cannot administer eye drops**

Name of child	
Date of birth	
Class /teacher	
Medical condition or illness	

Medicine

Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing /frequency	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy.

School cannot administer medicine that is not prescribed

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver/collect the medicine personally via the admin office	Medicine received by office YES NO

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to Lainesmead school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Appendix E: staff training record - administration of medicines

**SCHOOL NURSING SERVICE
SUPPORTING CHILDREN WITH MEDICAL NEEDS IN SCHOOL**

Staff Training Record

(Please keep this form it is important to keep a record of staff training, with respect to insurance cover for all staff involved)

Topic/Type of Training:

School:

Date:

Led by:

Self- Assessment Forms given:

Training Plan given:

Review Date:

I have attended the above training and have received a "Self Assessment Form"

Names

Pupil's Name: School: D.O.B

Appendix F: contacting emergency services

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

1. your telephone number
2. your name
3. your location as follows [insert school/setting address]
4. state what the postcode is - please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. put a completed copy of this form by the phone

Appendix G: model letter inviting parents to contribute to individual healthcare plan development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out the support the pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

Mrs A Chapman