

Philosophy

Lainesmead Primary School is an inclusive school. We believe in providing every possible opportunity to develop pupils' full potential. All pupils will have access to a broad and balanced education, including the National Curriculum, and are fully integrated into the life of the school. The school is committed to providing equal opportunities for all, regardless of race, faith, gender or capability in all aspects of school. We promote self and mutual respect and a caring and non-judgmental attitude throughout the school

Aims

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.

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.

Responsibility

The governing body with the support of the Headteacher and the Assistant Head must ensure that arrangements are in place to support pupils 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.

School staff

-any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. 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.

-should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.

- should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

- will only accept and administer prescribed medication that are 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)

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

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

School Nurses /Health visitors

- are responsible for notifying the school/nursery when a child has been identified as having a medical condition which will require support in school.
- may liaise with lead clinicians locally on appropriate support for the child and associated staff training needs.
- may support staff on the implementation of an child's Individual Healthcare Plan (IHCP) and provide advice

Other healthcare professionals, including GPs and paediatricians

- should notify the school nurse/health visitor when a child has been identified as having a medical condition that will require support at school.

Parents

- should provide the school with sufficient and up-to-date information about their child's medical needs.
- should ensure all necessary prescribed medicine is in school and is within its expiry date
- are key partners and should be involved in the development and review of their child's IHCP and may be involved in its drafting.
- should carry out any action they have agreed to as part of the IHCP implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.
- 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

Pupils

- should wherever possible be fully involved in discussions about their medical support needs and contribute and comply with, their IHCP.
- 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

Guidance

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision.

Medical information is gained from a number of sources- parents, school nurse, health visitors, health professionals, previous school. For children starting school, arrangements should be in place in time for the start of the relevant school term. 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

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 in the school's medical records and the child's CTF 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.

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 pupils take responsibility of their inhaler which may be stored in the child's own drawer. Staff and pupils should be responsible for ensuring they carry any medicines on all school trips/ visits.

For pupils with a medical condition that requires medication or support in school will have an IHCP (for example type 1 diabetes, epilepsy, severe allergy). Class teachers and key staff receive a copy of the IHCP. All other staff are made aware of children with medical needs via the information displayed on the medical needs notice board (staffroom) which has pupil photos and a summary of their 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. IHCP's are written with the involvement of a Health professional e.g. nurse, health visitor or school nurse.

A flow chart for identifying and agreeing the support a child needs and developing an IHCP is provided at annex A.

The following should be considered when writing an IHCP:

- 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
- 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 that will ensure the child can participate
- confidentiality
- what to do in an emergency, including whom 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 IHCP
- if a separate IHCP is required to include medical needs whilst away on a residential trip.

IHCPs are reviewed at least annually. Plans should be drawn up in partnership between the school, parents and the pupil (where appropriate). An IHCP 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.

Training should 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 individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. 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.

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

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 or medical attention to a pupil at school. (See Appendices)

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.

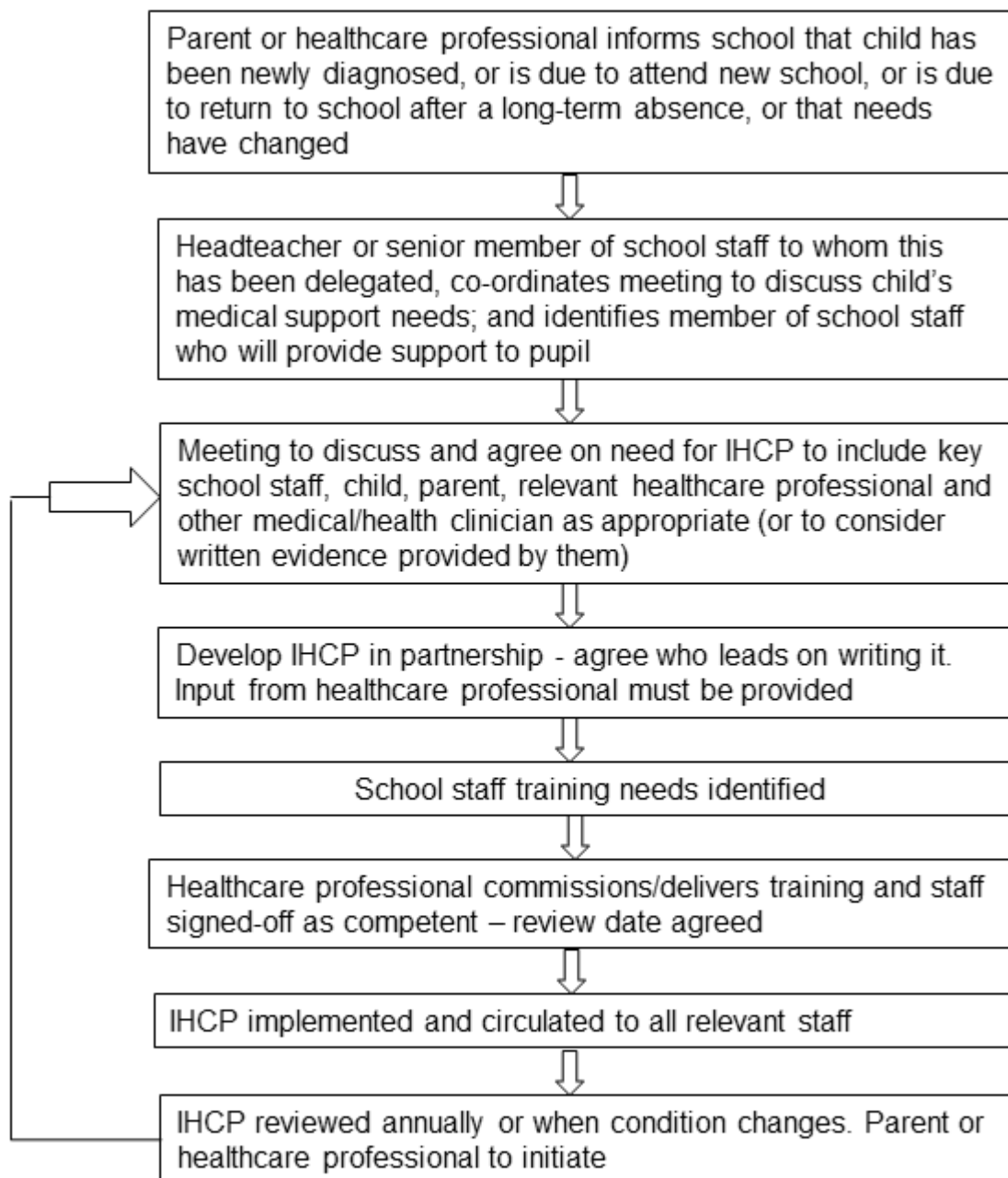
Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.

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

Although school staff should use their discretion and judge each case on its merits 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.

Annex A: Model process for developing individual healthcare plans



Appendix A: 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 B: parental agreement for setting to administer medicine
Lainesmead Primary School 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 D: 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 E: 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 F: 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 what support the each 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 Chapman