St. Peter’s Church of England (VC)

Primary School

Medical Conditions Policy

Supporting Pupils with Special Medical Needs

January 2022

**Definition**

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

(a) Short-term affecting their participation in school activities which they are on a course of medication.

(b) Long-term potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

**Rationale**

LAs and schools have a responsibility for the health and safety of pupils in their care.

The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The employer is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

The Children and Families Act 2014, from September 2014, places a duty on schools to make arrangements for children with medical conditions. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

When planning for children with medical conditions the focus is on the needs of each individual child and how their medical condition impacts on their school life.

Clear and consistent arrangements show an understanding of how medical conditions impact on a child’s ability to learn, as well as increase their confidence and promote self-care.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with information.

Contact details for our School Nurse can be obtained from the School office. A copy of this policy is available to parents on our website.

**Aims**

The school aims to:

* assist parents in providing medical care for their children
* educate staff and children in respect of special medical needs
* arrange training for volunteer staff to support individual pupils
* liaise as necessary with medical services in support of the individual pupil
* ensure access to full education if possible
* monitor and keep appropriate records

**Entitlement**

The school accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils.

The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

* choose whether or not they are prepared to be involved
* receive appropriate training
* work to clear guidelines
* have concerns about legal liability
* bring to the attention of management any concern or matter relating to supporting pupils with medical needs

**Expectations**

It is expected that:

* parents will be encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative
* where parents have asked the school to administer the medication for their child they must ask the pharmacist to supply any such medication to be dispensed in a separate container, containing only the quantity required for school use. The prescription and dosage regime should be typed or printed clearly on the outside
* the school will only administer medicines in which the dosage is required 4 times a day. The name of the pharmacist should be visible. Any medications not presented properly will not be accepted by school staff. Pupils should not bring in their own medicine. This should be brought into school by the parent
* medication, eg for pain relief, will not be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed
* all medicines will be stored safely. Children should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to 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 eg on school trips

* that employees will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately
* the school will liaise with the School Health Service for advice about a pupil’s special medical needs, and will seek support from the relevant practitioners where necessary and in the interests of the pupil
* Any medicines brought into school by the staff e.g. headache tablets, inhalers for personal use should be stored in an appropriate place and kept out of the reach of the pupils. Any staff medicine is the responsibility of the individual concerned and not the school

**Policy into Practice**

There is a need for proper documentation at all stages when considering the issue of support for pupils with medical needs in school.

Implementation of the policy:

* the Headteacher is responsible for ensuring that sufficient staff are suitably trained
* all relevant staff will be made aware of the child’s condition
* we will ensure cover arrangements in case of staff absence or staff turnover to ensure someone is always available
* supply teachers will be briefed to make them aware of any children in their class with medical conditions
* risk assessments will be completed for school visits, holidays, and other school activities outside of the normal timetable
* All individual healthcare plans will be monitored and reviewed

**When notification is received that a pupil has a medical condition:**

* parents will be asked to provide details of the medical condition and the child’s needs
* a meeting will be set up including parents and all relevant members of staff
* an individual Health care plan will be prepared and agreed and shared with relevant staff

**Individual Health Plans**

Drawing up Individual Health Plans

This school uses an Individual Health Plan for children with complex health needs to record important details about the individual children’s medical needs at school, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Individual Health Plan if required, (see Appendix 1 ) Examples of complex health needs which may generate an Individual Health Plan following discussion with the school nurse and the school:

* diabetes
* gastrostomy feeds
* a tracheostomy
* anaphylaxis
* a central line or other long term venous access
* Severe asthma that has required a hospital admission within the last 12 months
* epilepsy with rescue medication

1. An Individual Health Plan form, accompanied by an explanation of why and how it is used, is sent to all parents/carers of pupils with a complex health need. This is sent at the start of the school year; at enrolment; when a diagnosis is first communicated to the school; at points of transition discussions, or when a new diagnosis has been made.
2. It is the parent’s responsibility to fill in the Individual Health Plan and return the completed form to the school. If the school does not receive an Individual Health Plan, all school staff should follow standard first aid measures in an emergency. The school will contact the parent/carer if health information has not been returned.
3. The finalised plan will be given to parents/carers, school and school nurse.
4. This school will ensure that a relevant member of school staff is present, if required, to help draw up an individual health plan for pupils with complex health or educational needs.

**School Individual Health Plan register**

Individual Health Plans are used to create a centralised register of pupils with complex health needs. An identified member of school staff has responsibility for the register at this school. This school has ensured that there is a clear and accessible system for identifying pupils with health plans/medical needs such as names being 'flagged' on the SIMs system. A robust procedure is in place to ensure that the child's record, contact details and any changes to the administration of medicines, condition, treatment or incidents of ill health in the school is updated on the schools record system.

The responsible member of school staff follows up with the parents/carers and health professional if further detail on a pupil's Individual Health Plan is required or if permission or administration of medication is unclear or incomplete.

**Ongoing communication and review of Individual Health Plans**

Parents/carers at this school are regularly reminded to update their child’s Individual Health Plan if their child has a medical emergency or if there have been changes to their symptoms (getting better or worse), or their medication and treatments change. Each Individual Health Plan will have a review date and should be reviewed at the point where a child’s needs change.

Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan.

Parents/carers have a designated route/person to direct any additional information, letters or health guidance to in order that the necessary records are altered quickly and the necessary information disseminated.

**Storage and access to Individual Health Plans**

Parents/carers and pupils (where appropriate) at this school are provided with a copy of the pupil's current agreed Individual Health Plan.

Individual Health Plans are kept in a secure central location at school.

Apart from the central copy, specified members of staff (agreed by the pupil and parents/carers) securely hold copies of pupils’ Individual Health Plans. These copies are updated at the same time as the central copy. The school must ensure that where multiple copies are in use, there is a robust process for ensuring that they are updated, and hold the same information.

When a member of staff is new to a pupil group, for example due to staff absence, the school makes sure that they are made aware of the Individual Health Plans and needs of the pupils in their care.

This school ensures that all staff protect pupils’ confidentiality.

This school informs parents/carers that the Individual Health Plan would be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day. This is included on the Individual Health Plan.

The information in the Individual Health Plan will remain confidential unless needed in an emergency.

**Emergency Procedures**

Where a child has an individual healthcare plan, this will define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils 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 taken to hospital by ambulance. Schools need to ensure they understand the local emergency services cover arrangements and that the correct information is provided for navigation systems.

**Day trips, residential visits and sporting activities**

Teachers should be aware of how a child’s medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. School will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. Risk assessments will take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely. (Following the Health and Safety Executive (HSE) guidance on school trips)

**Unacceptable practice**

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 unaccompanied or with someone unsuitable
* penalise children for their attendance record if their absences are related to their medical condition eg 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
* prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, eg by requiring parents to accompany the child

**Liability and indemnity**

Our staff are covered to administer medicines by our Insurance Policy (Provided by Essex CC) providing they have completed the required training.

**Complaints**

If parents are dissatisfied with the support provided they should discuss their concerns directly with the school.

If for whatever reason this does not resolve the issue, they may make a formal complaint via the school’s complaints procedure.

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.

Ultimately, parents (and pupils) will be able to take independent legal advice and bring formal proceedings if they consider they have legitimate grounds to do so.

**Appendix 1**

**Individual Healthcare Plan for ………………………………………………………...............**

**Agreed by…………………………………………………………………………………………………………………………..**

**Date agreed……………………………………………………………………………………...**

**Date for review…………………………………………………………………………………**

**Emergency contact details: ………………………………………………………………….**

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| 1. **The medical condition,** its triggers, signs, symptoms and treatments. |  |
| 1. **The pupil’s resulting needs,** including medication (dose, 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 eg crowded corridors, travel time between lessons. |  |
| 1. **Specific support for the pupil’s educational, social and emotional needs –** for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling. |  |
| 1. **The level of support needed,** (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring. |  |
| 1. **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 healthcare professional; and cover arrangements for when they are unavailable**.** |  |
| 1. **Who in the school needs to be aware of the child’s condition and the support required.** |  |
| 1. **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. |  |
| 1. **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, eg risk assessments. |  |
| 1. **Confidentiality: (If requested by parents);**   the designated individuals to be entrusted with information about the child’s condition.  Please confirm that this plan can be shared with emergency care staff should the need arise. |  |
| 1. **What to do in an emergency**, including whom to contact, and contingency arrangements. (Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan). |  |

Dear Parent/carer,

**Re: The Individual Health Plan**

Thank you for informing the school of your child’s medical condition. In accordance with **The Children and Families Act 2014,** from September 2014 we are working with parents to meet the needs of children with medical conditions in school. We will be following our agreed Medical Conditions Policy.

As part of this policy, we are asking all parents/carers of children with a complex health need to help us by completing an Individual Health Plan for their child. Please complete the plan enclosed and return it to the school office. If you would prefer to meet with a member of staff to complete the Individual Health Plan or if you have any questions then please make an appointment.

Your child’s completed plan will store helpful details about your child’s medical condition, current medication, triggers, individual symptoms and emergency contact numbers. The plan will help school staff to better understand your child’s individual condition.

Please make sure the plan is regularly checked and updated and the school is kept informed about changes to your child’s medical condition or medication. This includes any changes to how much medication they need to take and when they need to take it.

Thank you for your help.

Yours sincerely

Mrs Cole

Headteacher