

<b>Name of School:</b>	<b>Sparsholt C of E Primary School</b>
<b>Name of Headteacher:</b>	<b>Lynn Laver</b>
<b>Date Policy approved and adopted:</b>	<b>March 2018</b>
<b>Date Due for review:</b>	<b>March 2021</b>

## Supporting Pupils with Medical Conditions

### Introduction

Section 100 of The Children and Families Act 2014 places a duty on the Governing Body of this school, to make arrangements for supporting children at their premise with medical conditions. The Department of Education has produced statutory guidance 'Supporting Pupils with Medical Conditions' and we will have regard to this guidance when meeting this requirement.

We will endeavour to ensure that children with medical conditions are properly supported so that they have access to the full spectrum of education, including school trips and physical education. The aim of this policy is to ensure that all children with medical conditions, in terms of both their 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.

It is our policy to ensure that all medical information will be treated confidentially by the Headteacher and staff. All administration of medicines is managed in accordance with the Supporting Pupils with Medical Needs document. All staff have a duty of care to follow and co-operate fully with the requirements of this policy.

Where children have a disability, the requirement of the Equality Act 2010 will apply.

Where children have an identified special need, the SEN Code of Practice will also apply.

We recognise that medical conditions may impact social and emotional development as well as having educational implications. Our aim is to reduce this impact as much as possible.

### Key Roles & Responsibilities

The Governing Body is responsible for:

- Ensuring arrangements are in place to support pupils with medical conditions in school, to enable these pupils the fullest participation possible in all aspects of school life.
- Ensuring that sufficient staff are suitably trained to take on responsibility to support children with medical conditions.

The Headteacher is responsible for:

- Ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.

- Ensuring that all staff who need to know are aware of the child's condition.
- Having sufficient trained numbers of staff available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- The development of individual healthcare plans in liaison with school nursing support.

Adequately trained Support Staff and Admin Staff (under the guidance of Wendy Williams) are responsible for:

- Administering medicines. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

The School Link Nurse is responsible for:

- Notifying the school when a child has been identified as having a medical condition which will require support in school.
- Supporting staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.
- Providing advice and support to the school in relation to children with a medical condition.

## **Local Arrangements**

### **Identifying children with health conditions**

We will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers. We will follow the process outlined in the document 'Process for identifying children with a health condition' produced by the Southern Health School Nursing Team in conjunction with the Children's Services Health and Safety Team. We will use the 'Health Questionnaire for Schools' to obtain the information required for each child's medical needs to ensure that we have appropriate arrangements in place prior to the child commencing at the school to support them accordingly.

For new children starting at our school in other year groups, 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 our school mid-term, every effort should be made to ensure that arrangements are put in place within two weeks.

Where a formal diagnosis is outstanding or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition. We will ensure that every effort is made to involve some formal medical evidence and consultation with the parents.

## Individual health care plans

We recognise that Individual Healthcare Plans are recommended, in particular where conditions fluctuate, or where there is a high risk that emergency intervention will be needed. We also recognise they are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However, not all children will require one. The school, healthcare professional and parent will agree based on evidence whether a healthcare plan would be inappropriate or disproportionate.

Where children require an individual healthcare plan it will be the responsibility of the Headteacher in consultation with Wendy Williams, to work with parents/carers and relevant healthcare professionals to write the plan.

A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional involved in providing care to the child. The Headteacher in consultation with Wendy Williams will work in partnership with the parents/carer, and a relevant healthcare professional eg. specialist or children's community nurse, who can best advise on the particular needs of the child to draw up and/or review the plan. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the individual healthcare plan will be linked to or become part of that statement or EHC plan.

We may also refer to the flowchart contained within the document 'Process for identifying children with a health condition' for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

We will use the individual healthcare plan template produced by the DfE to record the plan. See Appendix A.

If a child is returning following a period of hospital education or alternative provision (including home tuition), we will work with Hampshire County Council and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

All plans are reviewed at least annually or more frequently if evidence is presented that the child's needs have changed. Plans are always developed with the child's best interests in mind and the school assesses and manages the risks to the child's education, health and social well-being to minimise disruption.

The following information will be recorded on individual healthcare plans:

- the medical condition, its triggers, signs, symptoms and treatments;
- 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;
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements 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;
- 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;

- 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, eg risk assessments;
- where confidentiality issues are raised by the parent, the designated individuals to be entrusted with information about the child's condition; and
- 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.

### **Staff training**

All new staff will be inducted on the policy when they join the school through New Staff Induction. Records of this training will be stored in individual personnel files.

All nominated staff will be provided awareness training on the school's policy for supporting children with medical conditions which will include what their role is in implementing the policy. This training will be provided when they begin this role and following a review of the policy.

The awareness training will be provided to staff by the Headteacher, in consultation with Wendy Williams.

We will retain evidence that staff have been provided the relevant awareness training on the policy by signed list of having read and understood the policy.

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confidence in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

A 'Staff training record- administration of medicines' form will be completed, to document the type of awareness training undertaken, the date of training and the competent professional providing the training.

### **The child's role**

Where possible and in discussion with parents, children that are deemed sufficiently competent will be encouraged to be involved in managing their own medical procedures with the support of a member of staff. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child refuse to take their medication - namely that their parent/carer will be contacted at the earliest opportunity.

### **Managing medicines on School Premises**

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the Headteacher is responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription medicines to a child without their parent's/carer's written consent (a 'parental agreement for Sparsholt Primary School to administer medicines' form will be used to record this – appendix C).

A documented tracking system to record all medicines received in and out of the premises will be put in place (appendix B).

The name of the child, dose, expiry and shelf life dates will be checked before medicines are administered.

We 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, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container. It is the responsibility of the parents/carer to track the 'use by' date of any stored medicine and ensure it is replaced before the date expires.

Children are able to use their own inhalers themselves and have access to their own inhaler when required. Staff should make sure that it is stored in a safe but readily accessible place, clearly marked with the child's name, and checked regularly to ensure in date.

Controlled drugs will be securely stored in a non-portable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school.

Emergency medicines will be stored in a safe location but not locked away to ensure they are easily accessible in the case of an emergency.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication ie. Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures (see storage section).

### **Storage**

All medication other than emergency medication will be stored safely in a locked cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premise.

Where medicines need to be refrigerated, they will be stored in a dedicated fridge in the office. Trained support and admin staff only have access to this medication.

Children will be made aware of where their medicines are at all times and which adult will administer their medication.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

### **Disposal**

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/ carers will be documented on the tracking medication form.

Sharps boxes will be in place for the disposal of needles. Collection and disposal of these will be arranged locally.

### **Medical Accommodation**

The staff room, office or head teacher's office will be used for all medical administration. The rooms will be made available when required.

### **Record keeping**

A record of what has been administered including how much, when and by whom, will be recorded on a 'record of prescribed medicines' form. The form will be kept on file. Any possible side effects of the medication will also be noted and reported to the parent/carers. *See Appendices B & C*

### **Emergency Procedures**

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. We will ensure other children in the school know what to do in the event of an emergency ie. informing a teacher immediately if they are concerned about the health of another child.

Where a child is required to be taken to hospital, a member of staff will stay with the child until their parents arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc that the school holds).

### **Day trips/off site activities**

We will ensure that teachers are aware of how a child's medical condition will impact on their participation in any off site activity or day trip, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

We will consider what reasonable adjustments we might make to enable children with medical needs to participate fully and safely on visits. We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. We will consult with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

### **Other issues**

The school has access to the village Defibrillator located by the front door of Sparsholt Village Hall.

### **Unacceptable practice**

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, 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, 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; or
- 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**

Staff at the school are indemnified under the County Council self-insurance arrangements.

The County Council is self-insured and have extended this self-insurance to indemnify school staff who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, we will ensure that staff at the school have parent's permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure.

**Complaints**

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If for whatever reason, this does not resolve the issue, they may make a formal complaint as per the school's complaints procedure.

<b>Signature of Headteacher:</b>	
<b>Date:</b>	<b>26<sup>th</sup> March 2018</b>



# Template A: individual healthcare plan

Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date


## Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)


## Clinic/Hospital Contact

Name

Phone no.


## G.P.

Name

Phone no.


Who is responsible for providing support in school

--

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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Name of medication, dose, method of administration, when to be taken, side effects, contra-  
indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

# Template B: medicines administration sheet

FIRST NAME		SURNAME		D.O.B		CLASS	
NAME OF GP			GP SURGERY		GP TELEPHONE		
MEDICINE NAME	STRENGTH	FORM (SYRUP, TABLET ETC)	AMOUNT NEEDED	FREQUENCY	ALREADY OPENED? Y/N		
DATE RECEIVED	QUANTITY RECEIVED		QUANTITY RETURNED	EXPIRY	SIGNATURE*		

\* Medicines received/returned. Staff signature with optional co-signature from parents/carers

DD/MM/YY	Time	Amount	Signature

If the pupil refuses their medication, please inform the parents/carers on the same day (or as soon as is practical) and record 'refused' in the amount column

# Template C: Parental Permission to Administer Medicines

## PARENTAL AGREEMENT FOR SPARSHOLT PRIMARY SCHOOL TO ADMINISTER THE MEDICINE

Dear parent/carer

We require your written permission to administer any medicines in school.

Please do not decant medicines into other containers. We can only accept medicines in their original container as disposed by the pharmacy, otherwise we might miss important instructions and warnings.

If your child refuses to take the medicine, we will make every effort to inform you on the same day.

Please hand the medicine over to the office staff personally.

For any medication on a long term basis, ask the pharmacy if they can supply a separate labelled supply just for the school (they might need another prescription to do this). We can then keep a separate supply at school without the need for you to send medicines in each day.

Any instructions for dosage and storage must be included along with the date the medicine was first opened.

We can no longer accept any other non-prescribed medicines e.g. Calpol, cough syrups, skin creams, antihistamines. If your child requires any of these medicines please arrange for them to be prescribed.

What type of help does your child need with this medicine (mark as appropriate):

I need someone to administer this medicine to my child

They can take the medicine themselves, but need the following supervision from staff:

Are there any side effects that the school needs to look out for?

I recognise that school staff are not medically trained

Parent's / carer's name

Signature

Relationship to pupil

Daytime telephone number

## Template C: 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  
Sparsholt C of E Primary School  
Woodman lane  
Sparsholt
4. state what the postcode is –SO21 2NR – 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

# Template D: 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