

Brixham Church of England Primary School



**Brixham C of E
Primary School**

Supporting Pupils with Medical Conditions

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Contents

1. Aims.....	3
2. Legislation and statutory responsibilities	3
3. Definitions	3
4. Roles and Responsibilities	4
4.1 The Local Authority	4
4.2 The Governing body	4
4.3 The Headteacher	4
4.4 Staff	4
4.5 Parents / Carers	5
4.6 Pupils	5
4.7 School nurse & other healthcare professionals.....	5
5. Equal opportunities	5
6. Being notified that a child has a medical condition	5
7. Individual Healthcare Plans (IHP's).....	6
8. Managing medicines	7
8.1 Controlled Drugs	8
8.2 Pupils managing their own needs	8
8.3 Unacceptable practice.....	8
9. Sun Cream.....	9
10. Emergency procedures.....	9
11. Head Bumps.....	10
12. Training.....	10
13. Record keeping.....	10
14. Liability and indemnity.....	10
15. Complaints.....	11
16. Monitoring arrangements	11
17. Links to other policies.....	11

1. Aims

This policy aims to ensure that:

- Pupils, staff and Parents / Carers 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

The governing body will implement this policy by:

- Making sure sufficient staff are suitably trained
- 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
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

The named person with responsibility for implementing this policy is the Headteacher

2. Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on Governing Bodies to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

3. Definitions

- 'Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. Being 'unwell' and common childhood diseases are not covered.
- 'Medication' is defined as any prescribed or over the counter treatment.
- 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- A 'staff member' is defined as any member of staff employed at Brixham Church of England Primary School

4. Roles and responsibilities

4.1 The Local Authority

- Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- Providing support, advice /guidance and training to schools and their staff to ensure Individual Healthcare Plans (IHP) are effectively delivered.
- Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

4.2 The Governing Body

- Will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

4.3 The Headteacher

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
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- 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
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

4.4 Staff

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.

Those Staff which 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.

Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

4.5 Parents / Carers

Parents / Carers 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.
- Carry out any action they have agreed to as part of the implementation of the IHP e.g. provide medicines and equipment
- Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.

4.6 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them.

Pupils should 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.

4.7 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.

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

5. 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.

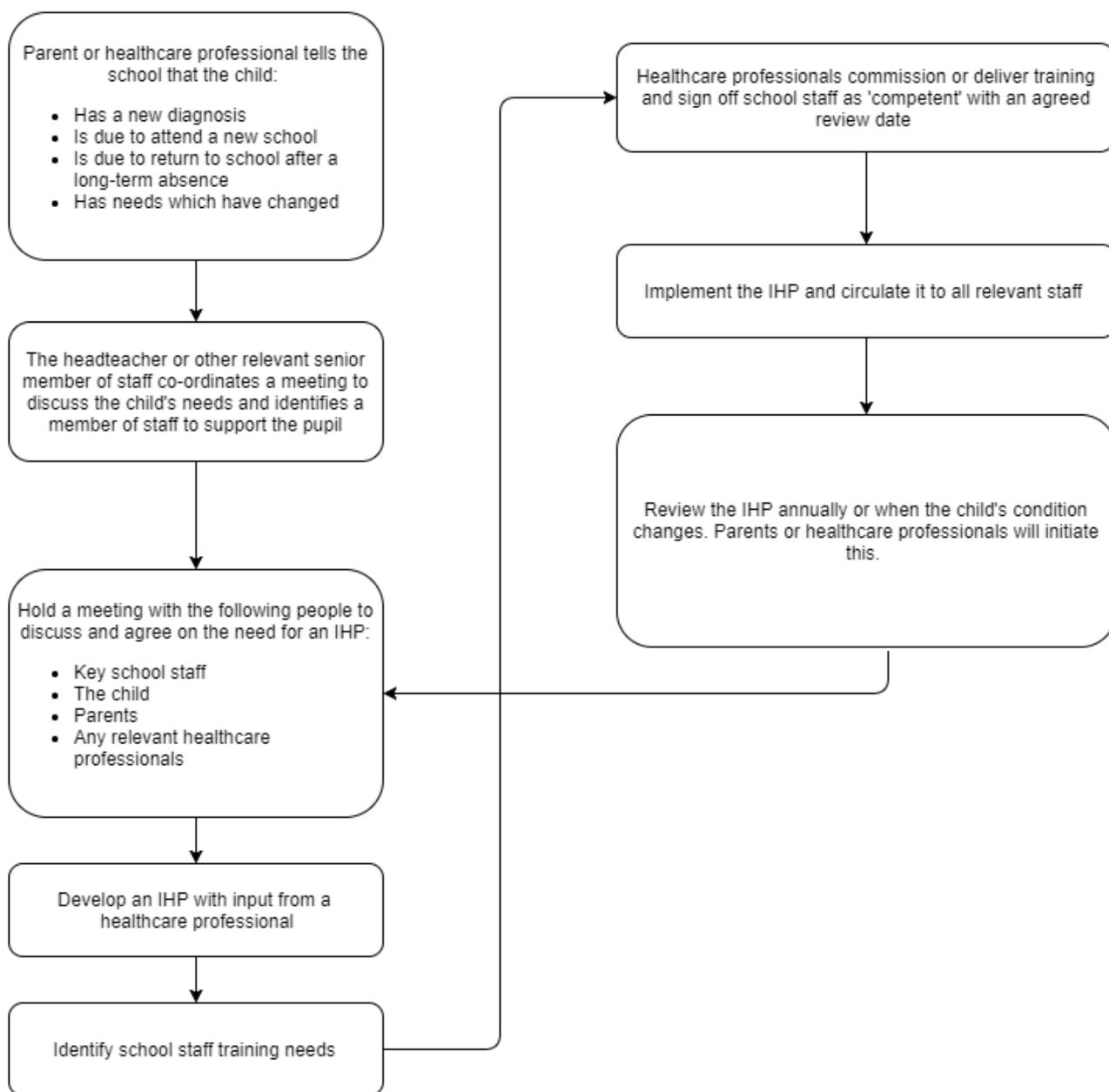
The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

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 / Carers and any relevant healthcare professionals will be consulted.

6. Being notified that a child has a medical condition

When the school is notified that a pupil has a medical condition, the process outlined below 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.



7. Individual Care Plans (IHP's)

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the school SENDCO

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 / Carers 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 / Carers and a relevant healthcare professional, such as the school nurse, specialist or pediatrician, 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 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 Headteacher and SENDCO 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, 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, e.g. 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, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil'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 pupil's condition and the support required
- Arrangements for written permission from Parents / Carers and the Headteacher 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 pupil can participate, e.g. risk assessments
- 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

8. Managing medicines

Prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so **and**
- Where we have Parents / Carers written consent

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

The School will not administer non-prescribed medicines.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents / Carers will always be informed.

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.

A maximum of 4 weeks supply of medications may be provided to the school at any one time.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to Parents / Carers to arrange for safe disposal when no longer required.

- **Emergency salbutamol inhaler kits may be kept voluntarily by school**

Brixham Church of England Primary School cannot be held responsible for side effects that occur when medication is taken correctly.

8.1 Controlled drugs

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil 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. Monitoring arrangements may be necessary. Schools should otherwise keep 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 should be easily accessible in an emergency.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

8.2 Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with Parents / Carers and it will be reflected in their IHPs.

Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform Parents / Carers so that an alternative option can be considered, if necessary.

8.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary

- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their Parents / Carers
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- Send them to the school office or medical room unaccompanied or with someone unsuitable if they become unwell.
- Penalise pupils 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 / Carers, 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 pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring Parents / Carers to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

9. Sun Cream

An application of high factor sunscreen should be **administered by parents** before school. This coupled with sunhats, water, use of shade and our uniform (which covers a significant percentage of the children's bodies should significantly reduce the risk of heat stroke and sunburn.

10. Emergency procedures

Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.

Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.

If a pupil needs to be taken to hospital, a member of staff will remain with the child until their Parents / Carers arrive.

If a member of staff is asked to call the emergency services, they must:

1. State what has happened;
2. The child's name;
3. The age of the child;
4. Whether the casualty is breathing and/or unconscious;
5. The location of the school.

11. Head Bumps

If your child should bump their head whilst at school, we will take the following action:

If a child bumps their head a member of staff will telephone the parents to inform them of the injury and advise them of what steps, if any, need to be taken i.e. collect from school for observation at home.

In the case of a severe bump causing serious concern, the school will immediately call the ambulance service and inform the parents by telephone.

All children sustaining a head bump will be given a head bump note that will inform parents of the date, time and nature of the bump. Staff members to continue to monitor them throughout the day. We inform parents when a child bumps their head so that parents can keep an eye on their child once they get home from school. This is because it is possible for a more serious internal injury to occur with no obvious symptoms for several hours.

12. Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so. First Aiders have been trained in the use of Epipens.

The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Headteacher and SENDCO. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

13. Record keeping

The Headteacher will ensure that written records are kept of all medicine administered to pupils. Parents / Carers will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

All injuries requiring First Aid must be recorded; anything more than a simple grazed knee should be recorded in enough detail to enable staff dealing with parental concerns to have as much information as possible. Any child that has received First Aid must be identifiable by the use of dated First Aid slips. A member of staff may also phone the parent to inform them of the incident or speak to a parent at the end of the day. For major accidents, a further electronic form must be completed within 24 hours of the accident. If you are unsure you must always check with a member of the School Leadership Team. It is always best practice to over report rather than under. The office staff will be able to give assistance with the completion of this; however the person who

first (as they are likely to have actually seen how it occurred) or mainly dealt with the injury needs to give the wording.

14. Liability and indemnity

Insurance policy documents are available to view by contacting the school office

Full written insurance policy documents are also available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Headteacher or SENDCO

Staff/ LSA's who undertake responsibilities within this policy will be assured by the Headteacher that they are covered by the LA/school's insurance.

15. Complaints

Parents/Carers with a complaint about their child's medical condition should discuss these directly with the SENDCO in the first instance. If the SENDCO cannot resolve the matter, they will direct Parents / Carers to the school's Headteacher. If the Headteacher cannot resolve the matter, they will direct Parents / Carers to the school's Complaints Policy.

16. Monitoring arrangements

This policy will be reviewed by the Headteacher and SENDCo and approved by the Governing Body **annually**.

17. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints Policy
- Equal Opportunities and Equality Statement
- Health and Safety Policy
- Child Protection and Safeguarding Policy
- Special Educational Needs policy
- Intimate Care Policy