

Supporting Children with Medical Needs Policy

This policy should be read in conjunction with the First Aid Policy and, if applicable, the SEND Policy.

This policy is written in regard to 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. This statutory policy came into force on 1st September 2014.

Although all staff have received paediatric first aid training, our named member of staff responsible for supporting pupils with medical conditions is **Mrs Ledder**. The headteacher is responsible for ensuring this policy is carried out on a day to day basis.

Aims of this Policy

- To ensure pupils at school with long-term and complex medical conditions, in terms of both physical and mental health, are properly supported so 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.

Procedure

The person named above is responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- Sufficient staff are suitably trained
- All relevant staff are made aware of a child's condition
- Cover arrangements in case of staff absence or tunrnover to ensure someone is always available
- Supply teachers are briefed
- Risk assessments for visits and activities out of the normal timetable are carried out
- Individual healthcare plans are monitored (at least annually)
- Transitional arrangements between schools are carried out
- If a child's needs change, the above measures are adjusted accordingly

Where children are joining St Paschal Baylon at the start of a new academic year, these arrangements should be in place for the start of term. Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

Any pupil with a medical condition, requiring medication or support in school, should have an individual healthcare plan (IHP) which details the support that the child needs. If the parents, healthcare professionals and school agree that a healthcare plan is inappropriate or

disproportionate, a record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

Individual Healthcare Plans (IHP)

The following information should be considered when writing an individual healthcare plan:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- Specific support for the pupil's educational, social and emotional needs
- The level of support needed including in emergencies
- Who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- Who in 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 (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level 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 if a child refuses to take medicine or carry out a necessary procedure
- What to do in an emergency, who to contact and contingency arrangements
- Where a child has SEND but does not have an Education Health and Care Plan, their special educational needs should be mentioned in their individual healthcare plan

Managing Medicines on School Premises

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No prescription medicines should be administered without the parent's written consent
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside of school hours
- A child under the age of 16 should never be given medicine containing aspirin unless prescribed by a doctor
- Schools should only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. (The only exception to this is insulin which is generally inside a pen or a pump rather than its original container)

• All medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. (Some medications which require refrigeration will be stored in a lockable fridge in a designated place in the school adjacent to the Medical Room) Medicines such as asthma inhalers and adrenaline pens should be always readily available to children, not locked away.

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

The Governing Body

- Must make arrangements to support pupils with medical conditions and ensure this
 policy is developed and implemented
- Must ensure sufficient staff receive suitable training and are competent to support children with medical conditions
- Must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk
- Ensure that IHPs are reviewed at least annually

The Headteacher

- Should ensure all staff are aware of this policy and understand their role in its implementation
- Should ensure all staff who need to know are informed of a child's condition
- Should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in an emergency and contingency situations, and they are appropriately insured
- Is responsible for the development of IHPs
- Should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse
- Ensure that written records are kept of all medicines administered to children

School Staff

- Any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so
- Should receive sufficient and suitable training and achieve the necessary level of competency before taking the responsibility of supporting children with medical conditions (a first aid certificate does not constitute appropriate training in supporting pupils with medical conditions)

• any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help

School Nurses

- are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school
- may support staff on implementing a child's IHP and provide advice liaison

Other Healthcare Professionals

- should notify the school nurse when a child has been identified as having a medical condition that will require support at school
- may provide advice on developing healthcare plans
- specialist local teams may be able to provide support for particular conditions (eg asthma, diabetes)

Pupils

• should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their HP.

Parents

- must provide the school with sufficient and up-to-date information about their child's medical needs
- are the key partners and should be involved in the development and review of their child's IHP
- should carry out any action they have agreed to as part of the IHP implementation.

The following practice is NOT considered acceptable

- preventing children from easily accessing their medication and administering it when and where necessary
- assuming children with the same condition require the same treatment
- ignoring the views of the child, their parents; ignoring medical advice or opinion
- sending children with medical conditions home frequently or prevent them from staying for normal school activities (unless specified in IHP)
- penalising children for their attendance record if absences are related to their medical condition that is recognised under this policy
- preventing children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively

- to require parents to attend school to administer medication or provide medical support to their child, including toileting issues (no parent should have to give up working because the school is failing to support their child's medical needs)
- preventing children from participating or create unnecessary barriers to children participating in any aspect of school life, including school trips (such as requiring the parents to accompany the child)

Complaints

• Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.