

## Leominster Primary School

### **Supporting Pupils with Medical Conditions Policy**

Staff Responsible: Head Teacher

Policy Reviewed: Summer (June) 2020

Date of Next Review: Summer (June) 2021

Ratified by Governors:

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### 1. Introduction

Leominster Primary School has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support allowing them to play a full and active role in school life, remain healthy, have full access to education (including school trips and physical education) and achieve their academic potential.

Leominster Primary School believes it is important that parents/carers of pupils with medical conditions feel confident that the school provides effective support for their child's medical condition, and that pupil's feel safe in the school environment.

There are also social and emotional implications associated with medical conditions. Pupils with medical conditions can develop emotional difficulties, such as self-consciousness, anxiety and depression, and be subject to bullying. This policy aims to minimise the risks of pupils experiencing these difficulties.

Long-term absences as a result of medical conditions can affect educational attainment, impact integration with peers, and affect wellbeing and emotional health. This policy contains procedures to minimise the impact of long-term absence and effectively manage short-term absence.

Some pupils with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have special educational needs and disabilities (SEND) and have an education, health and care plan (EHCP) collating their health, social and SEND provision. For these pupils, compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's **SEND Policy** will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents/carers.

### 2. Legal framework

This policy has due regard to legislation including, but not limited to, the following:

- The Children and Families Act 2014
- The Education Act 2002
- The Education Act 1996
- The Children Act 1989
- The National Health Service Act 2006
- The Equality Act 2010
- The Health and Safety at Work etc. Act 1974
- The Misuse of Drugs Act 1971
- The Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)
- The Human Medicines (Amendment) Regulations 2017

This policy has due regard to the following guidance:

- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on first aid for schools'
- Ofsted (2015) 'The common inspection framework: education, skills and early years'
- Department of Health (2017) 'Guidance on the use of adrenaline autoinjectors in schools'

This policy needs to be read in conjunction with:

- Asthma Policy
- Allergen and Adrenaline auto-injectors Policy
- Behaviour Policy

### 3. Key roles and responsibilities

### 3a. Local Authority

- Commissions school nurses for local schools.
- Promotes co-operation between relevant partners and stakeholders regarding supporting students with medical conditions.
- Provides support, advice and guidance and suitable training for school staff, ensuring that Individual Health Care Plans can be effectively delivered.
- Making alternative arrangements for the education of students who need to be out of school for fifteen days (whether consecutively or across a school year) or more due to a medical condition as the pupil is unlikely to receive a suitable education in a mainstream school.

### 3b. Governing Body:

- Fulfilling its statutory duties under legislation
- Ensures that Supporting Students with Medical Conditions Policy, plans, procedures and systems are properly and effectively implemented.
- Ensuring that the 'Supporting Students with Medical Conditions Policy', as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- Handling complaints regarding this policy as outlined in the school's Complaints Policy.
- Ensures that pupils with medical conditions can access and enjoy the same opportunities as any other pupil at the school.
- Ensuring that relevant training is delivered to staff members who take on responsibility to support children with medical conditions.
- Ensuring that information and teaching support materials regarding supporting students with medical conditions are available to members of staff with responsibilities under this policy.
- Ensures that no prospective pupil is denied admission to the school because arrangements for their medical condition have not been made.
- Ensures that pupils' health is not put at unnecessary risk. As a result, the governors
  hold the right to not accept a pupil into school at times where it would be detrimental
  to the health of that pupil or others to do so, such as where the child has an
  infectious disease.
- Ensures that, following long-term or frequent absence, pupils with medical conditions are reintegrated effectively.
- Ensures that the focus is on the needs of each pupil and what support is required to support their individual needs.
- Instils confidence in parents/carers and pupils in the school's ability to provide effective support.
- Ensures that staff are appropriately insured and aware of the insurance arrangements. Ensuring the level of insurance in place reflects the level of risk.
- Keeping written records of any and all medicines administered to individual students and across the school population.

### 3c. Headteacher:

- The day-to-day implementation and management of the Supporting Students with Medical Conditions Policy and procedures.
- Ensures that all staff are aware of this policy and understand their role in its implementation
- Ensures that this policy is effectively implemented with partner agencies.
- Ensuring that staff who need to know are aware of a child's medical condition, including supply teachers who will be informed by Assistant Headteachers.
- Ensures that a sufficient number of staff are trained and available to implement this policy and deliver against all Individual Health Care Plan, including in emergency situations.
- Liaising with healthcare professionals regarding the training required for staff.
- Considers recruitment needs for the specific purpose of ensuring pupils with medical conditions are properly supported.
- Has overall responsibility for the development of Individual Health Care Plans.
- Contacts the school nursing service where a pupil with a medical condition requires support that has not yet been identified.
- Making alternative arrangements for the education of students who need to be out of school for up to fifteen days due to a medical condition.
- Working with senior managers to ensure cover arrangements are in place if required
- Ensures that staff are appropriately insured and aware of the insurance arrangements

### 3d. Staff Members

- May be asked to provide support to pupils with medical conditions, including the administering of medicines, but are not required to do so.
- Take into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receive sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- Where necessary, making reasonable adjustments to include students with medical conditions into lessons (an appropriate first aider would be given responsibility for administering injections).

### 3e. School Nurse

The designated School Nurse for Leominster Primary School is Janine Watson.

- At the earliest opportunity, notifies the school when a pupil has been identified as having a medical condition which requires support in school.
- Supports staff to implement Individual Health Cares Plans and provides advice and training.
- Liaises with lead clinicians locally on appropriate support for pupils with medical conditions.

### 3f. Other healthcare professionals, including GP's and Paediatricians

- Notify the school nurse when a child has been identified as having a medical condition that will require support at school.
- Provide advice on developing Individual Health Care Plans.
- May provide support in the school for children with particular conditions, e.g. asthma, diabetes and epilepsy.
- If applicable, provide sufficient training and assess level of competency of staff before they take responsibility for supporting pupils with medical conditions.

### **3g. Parents and Carers**

- Notifying the school if their child has a medical condition.
- Providing the school with sufficient and up-to-date information about their child's medical needs.
- Are involved in the development and review of their child's Individual Health Care Plan.
- Carry out any agreed actions contained in the Individual Health Care Plan.
- Ensure that they, or another nominated adult, are contactable at all times.
- Providing the school with the medication and/or the equipment their child requires and keeping it up to date.
- Collecting any leftover medicine at the end of the course or year.
- Discussing medications with their child prior to requesting that a staff member administers the medication.
- Completing a parental agreement for school to administer medicine form before bringing medication into school.

### 3h. Pupils

- Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- Are fully involved in discussions about their medical support needs.
- Contribute to the development of their Individual Health Care Plan.
- Are sensitive to the needs of pupils with medical conditions.

### 4. Admissions

No child is denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made.

A child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.

### 5. Notification procedure

When the school is notified that a pupil has a medical condition that requires support in school, the school begins to arrange a meeting with parents/carers, healthcare professionals and the pupil, with a view to discussing the necessity of an Individual Health Care Plan.

The school does not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement is made by the headteacher based on all available evidence (including medical evidence and consultation with parents/carers).

For a pupil starting at the school in a September uptake, arrangements are in place prior to their introduction and informed by their previous institution.

Where a pupil joins the school mid-term or a new diagnosis is received, arrangements are put in place within two weeks.

### 6. Staff Training and Support

- Staff will receive training on the 'Supporting Students with Medical Conditions Policy' as part of their new starter induction.
- Staff member providing support to a pupil with medical conditions receives suitable training by an appropriately qualified person and the details recorded. Teachers and associate staff will receive regular and ongoing training as part of their development.
- Through training, staff have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in Individual Health Care Plan. Staff understand the medical condition(s) they are asked to support, their implications, and any preventative measures that must be taken.
- Parents/carers of pupils with medical conditions are consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.
- Staff do not undertake healthcare procedures or administer medication (including injections) without appropriate training.
- A first-aid certificate does not constitute appropriate training for supporting pupils with medical conditions.
- The Safeguarding Manager and SENCO's will provide details of further CPD opportunities for staff regarding supporting pupils with medical conditions.
- The needs of training are assessed by general requirements and specific requirements presenting in the school; training is provided by appropriate providers such as Hoople and Fire and Risk Assessment Services (Ms. Beaumont-Pike maintains a list of providers)
- The Deputy Headteacher, Mrs Lynch, keeps a record of training undertaken and a list of staff qualified to undertake responsibilities under this policy.

### 7. Self-Management

Following discussion with parents/carers, pupils who are competent to manage their own health needs and medicines are encouraged to take responsibility for self-managing their medicines and procedures under the supervision of a designated member of staff. This is reflected in their Individual Health Plan.

Where possible, pupils are allowed to carry their own medicines and relevant devices. Where it is not possible for pupils to carry their own medicines or devices, they are held in suitable locations that can be accessed quickly and easily.

If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the pupil's Individual Health Plan is followed. Following such an event, parents/carers are informed so that alternative options can be considered.

If a child with a controlled drug passes it to another child for use, this is an offence and appropriate disciplinary action will be taken.

### 8. Individual Health Care Plans

Individual Health Care Plans help to ensure that the school effectively supports pupils with medical needs, providing clarity about what needs to be done, when and by whom.

The SENCOS, Mrs Watts, and Mrs Hough, alongside, Safeguarding Manager, Miss Jones, are responsible for the development of Individual Health Plans.

The school, including the Safeguarding Manager, SENCO, Class Teacher and staff responsible for supporting the pupil, healthcare professionals and parent/carer(s) agree, based on evidence, whether an Individual Health Care Plan is required for a pupil, or whether it would be inappropriate or disproportionate to their level of need. If no consensus can be reached, the headteacher makes the final decision.

The school, parent/carer(s) and a relevant healthcare professional work in partnership to create and review Individual Health Care Plans. Where appropriate, the pupil is also involved in the process.

Where a pupil has an emergency healthcare plan prepared by their lead clinician, this is used to inform the Individual Health Plan.

Individual Health Care Plans are easily accessible to those who need to refer to them, but confidentiality is preserved. Individual Health Plans are held by the Class Teacher, in the locked cabinet in the main office and also in the Safeguarding Office.

Individual Health Care Plans are reviewed on at least an annual basis, or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an Education Health Care Plan (EHCP), the Individual Health Plan is linked to it or becomes part of it.

Where a child has SEND but does not have a statement or EHC plan, their SEND should be mentioned in their Individual Health Care Plan.

Where a child is returning from a period of hospital education, alternative provision or home tuition, we work with the Local Authority education provider to ensure that their Individual Health Care Plan identifies the support the child needs to reintegrate.

Individual Health Plans include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments.
- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements and environmental issues.
- The support needed for the pupil's educational, social and emotional needs.
- The level of support needed, including in emergencies.
- Whether a child can self-manage their medication.
- Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively.
- Cover arrangements for when the named supporting staff member is unavailable.

- Who needs to be made aware of the pupil's condition and the support required.
- Arrangements for obtaining written permission from parents/carers and the headteacher for medicine to be administered by school staff or self-administered by the pupil.
- Separate arrangements or procedures required during school trips and activities.
- Where confidentiality issues are raised by the parent/carer(s) or pupil, the designated individual to be entrusted with information about the pupil's medical condition.
- What to do in an emergency, including contact details and contingency arrangements.

### 9. Managing Medicines

Medicines are only administered at school when it would be detrimental to a pupil's health or school attendance not to do so. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the student to take them outside of school hours. If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental agreement for school to administer medicine form.

Pupils under 16 years of age are not given prescription or non-prescription medicines without their parent/carer's written consent – except where the medicine has been prescribed to the pupil without the parent/carer's knowledge. In such cases, the school encourages the pupil to involve their parents/carers, while respecting their right to confidentially. This is likely unlikely to occur in primary aged children.

Non-prescription medicines may be administered in the following situations:

- a. When it would be detrimental to the pupil's health not to do so
- b. When instructed by a medical professional

If medication is prescribed, the parent should give authorisation for the course at the start of every day. In order to ensure that dosage at school is at an appropriate interval, parents must, if appropriate, provide the time when dosage at home took place in writing on the parental form every day administration is required. Medication cannot be administered beyond the stated limit.

The school only accepts medicines that are in-date, labelled, in their original container as dispensed by a doctor/ pharmacist, and that contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container. Any side effects of the medication should be noted. Medicines which do not meet these criteria will not be administered.

No pupil under 16 years of age is given medicine containing aspirin unless this has been prescribed by a doctor. Staff should ensure that aspirin for personal use is kept securely so that it is not accessible to children. Medicine containing aspirin should not be stored in the medicine cupboard or first aid kits

A maximum of four weeks supply of the medication may be provided to the school at one time.

All medicines are stored safely in the locked cabinet in the First Aid room which is fixed to the wall. Pupils know where their medicines are at all times and are able to access them immediately, whether in school or attending a school trip/residential visit. Where relevant, pupils are informed of who holds the key to the relevant storage facility.

When medicines are no longer required or left over, they are returned to parents/carers for safe disposal. Parents will be required to sign for them. Sharps boxes are always used for the disposal of needles and other sharps.

Controlled drugs should be securely stored in a non-portable container and only Mr. Mamak, Mrs Rees and Mrs Lynch should have access; a record of any doses used and the amount held should be maintained.

Staff may administer a controlled drug to a pupil for whom it has been prescribed. They must do so in accordance with the prescriber's instructions

Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence, which will be dealt with under our Behaviour Policy.

Records are kept of all medicines administered to individual pupils – stating what, how and how much was administered, when and by whom. A record of side effects presented is also held. Leominster Primary School cannot be held responsible for side effects that occur when medication is taken correctly.

In the event of a school trip or activity which involves leaving the school premises, the lead staff member will conduct a risk assessment and ensure that medicines and devices will be readily available to staff and pupils. Children who require medication will not be able to go on trips if medication is not provided.

### 10. Asthma

The administration of inhalers and the treatment of asthma will be carried out in accordance with Leominster Primary School's Policy.

### 11. Adrenaline auto-injectors (AAIs)

The administration of AAIs and the treatment of anaphylaxis will be carried out in accordance with Leominster Primary School's Allergen and Anaphylaxis Policy.

### 12. Head Injuries

Any bump to the head should be reported to a first aider and then a bump note sent home, signed by a qualified first aider, after the child has been seen by first aid.

Up to and including Year 4, parents/ carers will be informed by the class teacher of the head bump at collection; if a child in a class up to and including Yr. 4 is collected by someone other than the parent/ carer, the parent/ carer must be called after school by the class teacher.

The office will phone parents/carers for Yr. 5 and Yr. 6 parents/ carers. The Head Teacher has the right to ask the parent/carer of a Yr. 5 and Yr.6 child to collect their child from school if they are concerned about them walking home from school unsupervised by an adult due to the head injury.

### 13. Emergencies

Follow protocol as outlined in Critical Incident Plan if appropriate.

A nominated First Aider or member of staff who has received emergency first aid training must be on every trip, visit or sporting event and medical needs considered and responded to on every risk assessment prior to authorisation of a trip, visit or sporting event.

Medical emergencies will be dealt with under the school's emergency procedures.

Where an Individual Healthcare Plan (IHCP) is in place, it should detail:

- a. What constitutes an emergency
- b. What to do in an emergency.

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 parent/carer arrives.

When transporting pupils with medical conditions to medical facilities, staff members are informed of the correct postcode and address for use in navigation systems.

### 14. Day trips, residential visits and sporting activities

Pupils with medical conditions are supported to participate in school trips, sporting activities and residential visits.

Prior to an activity taking place, the school conducts a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice is sought from pupils, parents/carers and relevant medical professionals if required.

The school will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, such as a GP, indicates that this is not possible.

### 15. Avoiding unacceptable practice

Leominster Primary School understands that the following behaviour is unacceptable:

Assuming that students with the same condition require the same treatment.

- Preventing children from easily accessing their inhalers and medication
- Ignoring the views of the student and/or their parents.
- Ignoring medical evidence or opinion.
- Sending students home frequently or preventing them from taking part in activities at school.
- Sending the student to the First Aid room/area alone if they become ill.
- Penalising students with medical conditions for their attendance record where the absences relate to their condition.
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow students to eat, drink or use the toilet when they need to in order to manage their condition.

### 16. Insurance

The governing board ensures that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.

Teachers who undertake responsibilities within this policy are covered by the school's insurance

Full written insurance policy documents are available to be viewed by members of staff who are providing support to students with medical conditions. Those who wish to see the documents should contact Mrs Beaumont- Pike.

### 17. Complaints

The details of how to make a complaint can be found in the Complaints Policy which is available on the school website.

### 18. Policy Review

Date of review: Summer (June) 2020

Date of next Review: Summer (June) 2021

Ratified by Governors:

### Appendix A: Individual Health Care Plan

### **INDIVIDUAL HEALTHCARE PLAN**

_	
Name of school	
Child's Name	
Class	
Date of Birth	
Child's address	
Medical Diagnosis or Condition	
Date	
Review Date	
FAMILY CONTACT INFORMATION	
Name	
Phone no. (Work)	
(Home)	
(Mobile)	
Relationship to child	
Name	
Phone no. (Work)	
(Home)	
(Mobile)	
Relationship to child	
CLINIC/HOSPITAL CONTACT	
Name	
Phone No	

$\sim$	n
u	

Name	
Phone No	
Vho is responsible for providing sup	oport in school?
Describe medical needs and give det equipment or devices, environments	tails of child's symptoms, triggers, signs, treatments, facilities, al issues etc
	of administration, when to be taken, side effects, contra- ministered with/without supervision
Daily care requirements	
Specific support for the pupil's educ	ational, 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
N/A
Form copied to

### Appendix B: Request for school to administer medication



Signature

Day 1

Relationship to child

Please sign upon collection of medication

Day 2

Day 3

### REQUEST FOR SCHOOL TO ADMINISTER MEDICATION

Forename(s)					
Address				M/F	
OCHORINGUECE				Date of birth	
				Class	
Condition or illness:					
MEDICATION					
Name/Type of Medica container)	tion (as describe	ed on the			
For how long will your	child take this m	edication:			
Date dispensed:					
Has your child had this	medicine before	e?			
Has your child had an medication?	adverse reaction	to this			
FULL DIRECTIONS F	OR USE:				
Dosage and method:		Day 1	Day 2	2	Day 3
Timing: (what time sho medicine be given?)	uld the				
What time was your ch	ild's last dose?				
How many doses of this had in the last 24 hours	s medication ?				
Special Precautions:					
Side effects:					
Self administration:					
Self administration: Procedures to take in a	n emergency:				
	n emergency;				
Procedures to take in a	n emergency.		Daytime Tel	No	
Procedures to take in a	n emergency:		Daytime Tel	No	

# Leominster Primary School

Appendix C: Recording Sheet

IL NAME	CLASS DATE	DATE	TIME	NAME OF	1000			,
				MEDICINE	DOSE GIVEN	DOSE GIVEN ANY REACTIONS	SIGNATURE OF STAFF	PRINT
								1

# U:\Finance and Administration\Master forms\Pupil medication administration form.doc