Holymead Primary School

Supporting Pupils with Medical Conditions Policy March 2023

Background

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. Pupils with medical conditions 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 duty to ensure the safety of all pupils in their care. We therefore reserve the right to refuse admittance to a child with an infectious disease where there may be a risk posed to others or to the health of the child involved. This duty also extends to teachers leading activities taking place off the school site.

Schools have a responsibility for 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 need of all pupils at the school. This may mean making special arrangements for particular pupils so that they can access their full entitlement to all aspects of the curriculum. In this case, individual procedures may be required. Holymead Primary is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support that pupils with medical conditions may need.

The prime responsibility for a child's health lies with the parent, who is responsible for the child's medication and must supply the school with all relevant information needed in order for effective care to be given to the child. The school takes advice and guidance from a range of sources, including the School Nurse, Health professionals and the child's GP in addition to the information provided by parents in the first instance. This enables us to ensure we assess and manage risk and minimise disruption to the learning to the learning of the child and others who may be affected (for example, other pupils)

Pupils' medical needs:

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.

Aims

- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs
- Pupils, staff and parents understand how our school will support pupils with medical conditions
- To support pupils with medical conditions, so that they have full access to education, including
 physical education and educational visits
- To ensure that school staff involved in the care of children with medical needs are fully informed and adequately trained by professional in order to administer support or prescribed medication
- To write, in association with healthcare professionals, Education Healthcare Plans where necessary.
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition requires support
- To keep, monitor and review appropriate records

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 boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

Unacceptable Practice

While school staff use their professional discretion in supporting individual pupils, it is unacceptable to:

- Prevent children from accessing their medication
- Assume every child with the same condition requires the same treatment
- Ignore the views of the child or their parents/carers; ignore medical advice
- Prevent children with medical conditions accessing the full curriculum, unless specified in their Education Healthcare Plan
- Penalise children for their attendance record where this is related to a medical condition
- Prevent children from eating, drinking or taking toilet breaks where this is part of effective management of their condition
- · Require parents to administer medicine where this interrupts their working day
- Require parents to accompany their child with a medical condition on a school trip as a condition of that child taking part

Roles and responsibilities

The governing board

 The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, 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 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
- Ensure that all staff who need to know are aware of a child's condition
- 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

Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of 1 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 who 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.

Parents

Parents 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 and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

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.

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. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, will liaise with the school's nurses and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

Equal Opportunities

The 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 and any relevant healthcare professionals will be consulted.

Liability and Indemnity

The Governing Board ensures that an appropriate level of insurance is in place and reflects the level of risk presented by children with medical conditions. Insurance is with the Department of Education risk protection arrangement (RPA). (Policy held by School business manager Nikki Holland).

Information

When the school is notified that a pupil has a medical condition, the process outlined in Appendix 1 will be followed to decide whether or not a pupil needs an Individual Healthcare Plan (IHP). Children with serious medical conditions will have their photo and brief description of condition, along with any other necessary

information, in the staffroom. Children with medical conditions which may require emergency attention, e.g. epilepsy, diabetes, will have their names and an Individual Healthcare Plan clearly accessible in their classroom, and all adults dealing with the child will have their attention drawn to this information. All other medical conditions will be noted from children's SIMs records and this information will be provided to class teachers annually.

Individual healthcare plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Mrs Anghard Davies and Mrs Joanne Holbrook.

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 when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, 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 an 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 governing board and the headteacher / role of the individual with responsibility for developing IHPs, 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 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

In an emergency

In a medical emergency, teachers have been appropriately trained to administer emergency first aid including paediatric first aid if necessary. Staff will follow normal emergency procedures eg call 999. The school's First Aiders will be asked to attend. All pupils' IEPs will set out what to do in an emergency. If an ambulance needs to be called, staff will:

- Outline the full condition and how it occurred
- Give details regarding the child's date of birth, address, parents' names and any known medical conditions.

Children will be accompanied to hospital by a member of staff if this is deemed appropriate. Staff cars should not be used for this purpose. Parents must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

Administration of medicines

Only essential medicines will be administered during the school day. Parents must submit a written permission slip before any medicine is administered. School will only administer prescribed medicines (by a doctor or dentist etc.), with the exception of paracetamol and antihistamine which may be administered even if not prescribed so long as there is parental permission e.g. for period pains or hay fever in school or on camp.

Medicines to be given during the school day must be in their original container and clearly labelled. Controlled drugs can also be administered, subject to all other conditions as described in the Policy.

Essential medicines will be administered on Educational Visits, subject to the conditions above. A risk assessment may be needed before the visit takes place. Staff supervising the visit will be responsible for safe storage and administration of the medicine during the visit.

Trained staff members will give medicines. Before administering any medicine, staff must check that the medicine belongs to the child, must check that the dosage they are giving is correct and that written permission has been given. Any child refusing to take medicine in school will not be made to do so, and parents will be informed about the dose being missed. All doses administered will be recorded in Medical Tracker. Older children self-administrating asthma inhalers must inform staff and a record made.

All medicines will be stored safely. Medicines needing refrigeration will be stored in the medicine's fridge. Some medicines (inhalers, etc) will be accessible in the office and carried with the children, for ease of access during outside activities. All medicines must be clearly labelled.

Controlled drugs or prescribed medicines will be kept in the locked, non-portable cabinet in the Medical Room. Access to these medicines is restricted to the named persons.

Epi-pens are kept in the child's classroom (or may travel with the child) with spares kept in the main offices. An emergency epi-pen, currently on order, will be kept in the unlocked medicines' cupboard.

Inhalers are kept in the child's classroom or in the central office. Children have access to these inhalers at all times, although they must inform a member of staff that they are taking a dose. Staff supervise the correct use of inhalers. All inhalers are marked with the child's name. All children with an inhaler must take them on educational visits, however short in duration.

Emergency inhalers are kept above the medicine cupboard (in the junior and infant offices).

Office staff will check medicines are in date at the beginning of each term and inform parents if supplies need replenishing.

Epi-pen – Each year epi-pen training is offered to staff working in the same class as children carrying an epi-pen. Administering an epi-pen in an emergency: The pen (Cap off) should be pushed against the child's thigh, through clothing if necessary. The pen should be held for a count of 10 seconds before being withdrawn. If symptoms are severe, the epi-pen should be given immediately. An ambulance must be called immediately. Parents should be contacted when this call has been made.

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
- 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
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- 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, or otherwise make them feel obliged, to attend school to administer
 medication or provide medical support to their pupil, 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 to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

Trained Staff

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.

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 / role of individual. 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 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.

Please see the Health and Safety notice board and online training grid, for a full list of all trained staff.

Record keeping

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents 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.

Complaints

Should parents be unhappy with any aspect of their child's care at Holymead Primary, they should discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be managed. If this does not resolve the problem, the problem should be brought to a member of the leadership team, who will, where necessary, bring concerns to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parents can make a formal complaint using the Holymead Primary Complaints' Procedure on the school website.

Approved by the governors of Holymead Primary on:

Date	Amendment
25.5.18	Updated list of staff
25.5.18	Reference to where to find emergency inhalers
26.9.19	Updated list of staff
19.4.23	Updated with information from The Key, including Appendix 1 flow chart.

Date: April 2023 Review: April 2025



Rights Respecting School Article 24:

Every child has the right to the best possible health.

Appendix 1

