



ST. ANNE'S C.E.(VC) PRIMARY SCHOOL

SUPPORTING PUPILS WITH MEDICAL NEEDS POLICY 'Together with God, Making Learning a Life Long Friend'

Approved:	12.7.2024
Review Date:	30.4.2025

We are a Church of England School and our policies are written with a commitment to our Christian Character, which is rooted in the Bible.

Start children off on the way they should go and even when they are old they will not turn from it (Proverbs 22:6)

Background:

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools to make arrangements for supporting pupils at their school with medical conditions.

In meeting the duty, the governing body, **must** have regard to guidance issued by the Secretary of State under this section. This guidance came into effect when Section 100 came into force on 1 September 2014.

(DFE-Supporting guidance for governing bodies of maintained schools and proprietors of academies in England- September 2014).

The statutory sections of the guidance apply to:

- governing bodies of maintained schools (excluding maintained nursery schools)
- management committees of PRUs
- proprietors of academies, including alternative provision academies (not including 16-19 academies)

The non-statutory advice is provided to assist and guide:

- schools, academies (including alternative provision academies) and PRUs
- local authorities
- clinical commissioning groups (CCGs), NHS England
- anyone who has an interest in promoting the wellbeing and academic attainment of children with medical conditions, including alternative provision, eg independent schools
- parents/carers and pupils

- health service providers

Aims:

This school is an inclusive community that welcomes and supports pupils with medical conditions.

This school provides all pupils with any medical conditions the same opportunities as other at school.

Our aim: -

- Pupils at school with medical conditions will be properly supported so that they have full access to education, including school trips and physical education.
- Our governing body ensures that arrangements are in place in schools to support pupils at school with medical conditions.
- Our governing body ensures that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

Parents of children with medical conditions are often concerned that their child's health may deteriorate when they attend school. This is because pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that our school will provide effective support for their child's medical condition and that pupils feel safe. In making decisions about the support they provide, school will establish relationships with relevant local health services to help us. It is crucial that school receives and fully considers advice from healthcare professionals and listens to and value the views of parents and pupils. E.g. anaplasia asthma training annually.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into school will be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a pupil's medical condition (which can often be lengthy), will also need to be effectively managed and appropriate support put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case governing body will comply with their duties under that Act. Some may also have special educational needs (SEN) with an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For pupils who have medical conditions that require EHC plans, compliance with the SEND code of practice will ensure compliance with the statutory elements of this guidance with respect to those children.

Roles and Responsibilities:

The **governing body** is legally responsible and accountable for fulfilling their statutory duty.

The **head teacher** is responsible for putting the governing body's policy into practice. They will ensure that the school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The headteacher will ensure that all staff who need to know are aware of the child's condition. They will also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. The headteacher has overall responsibility for the development of individual healthcare plans. They will contact the school nursing service in the case of any child 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.

St Anne's **Appointed Person** for Supporting Pupils in School with Medical Conditions is:-
Mrs Tracey Brown

Duties include: -

- responsibility for ensuring that sufficient staff are suitably trained,
- a commitment that all relevant staff will be made aware of the child's condition,
- keep medical file in each classroom is kept up to date
- assisting in arrangements for school visits, and other school activities outside of the normal timetable (in liaison with the class teacher)
- writing and monitoring of individual healthcare plans (IHCP)
- liaison with other agencies, including school nurse
- liaison with parents

Any member of **school staff** may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff will 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. There will always be two adults present when administering medicine.

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They will, where appropriate, be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan.

Parents should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and will be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Planning and Provision:

The governing body will ensure that arrangements are in place to support pupils with medical conditions. In doing so, they will ensure that such children can access and enjoy the same opportunities at school as any other child. School, local authority, health professionals and other support services should work together to ensure that children with medical conditions receive a full education. In some cases this will require flexibility and involve, for example, programmes of study that rely on part time attendance at school in combination with alternative provision arranged by the local authority. Consideration may also be given to how children will be reintegrated back into school after periods of absence.

In making their arrangements, the governing body will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others. The Governing body will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.

The governing body will try to ensure that their arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school. The arrangements will try and show an understanding of how medical conditions impact on a child's ability to learn, as well as increase their confidence and promote self-care. They will ensure that staff are properly trained to provide the support that pupils need.

However, in line with their safeguarding duties, the governing body will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases.

They, therefore, will not accept a child in school at times where it would be detrimental to the health of that child or others to do so.

Procedures when school is notified that a pupil has a medical condition: -

- Inform Appointed person and Headteacher
- All staff informed
- Contact made school nurse
- Meeting arranged with parents to determine condition (School nurse attend where appropriate).
- Training for staff arranged, where necessary
- Individual Health Care Plans will be drawn up in partnership between school, parents and relevant healthcare professionals (Appointed person/ Class teacher/ SENCO, where appropriate). See Appendix A
- Health care plans will be reviewed at least annually, earlier if needs have changed.

Individual Health Care Plans-

All children with a medical condition will be assessed for the need of an individual healthcare plan (IHCP).

- An IHCP details exactly what care a child needs in school, when they need it and who is going to provide it.
- It should also include information on the impact any health condition may have on a child's learning, behaviour or classroom performance.
- This should be drawn up with input from the child (if appropriate) their parent/carer, relevant school staff and healthcare professionals, ideally a specialist if the child has one eg. Diabetes Nurse, Specialist Epilepsy Nurse.

All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.

- All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency and this is refreshed regularly- often with the School Nurse
- A child's IHCP should, explain what help they need in an emergency. The IHCP will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHCP within emergency care settings.

- All staff, know what action to take in an emergency and receive updates regularly.
- If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car without the permission of the Headteacher.

Administration of medicines

This school understands the importance of medication being taken and care received as detailed in the pupil's IHCP.

- This school will make sure that there is more than one member of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes escort staff for home to school transport if necessary. This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent, which is kept in a medical book.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- School will 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- information given by parents on school form.
- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents will be informed. This school will not give a pupil under 16 aspirin.
- All medicines will be stored safely. Children will know where their medicines are at all times and be able to access them immediately, where necessary. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will be always readily available to children and not locked away. They will be clearly labelled.
- School staff may administer a medicine to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's and parents' instructions. School will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps.
- This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.

- Parents at this school understand that they should let the school know immediately if their child's need change.

Over the Counter (OTC) Medicines (Homely Remedies)

Occasionally parents and carers or children themselves may wish to use "over the counter" remedies to treat minor symptoms for short periods. These can include alternative medicines such as herbal remedies, vitamins, and supplements.

Following guidance from Staffordshire Health and Safety, the Governing Body of St Anne's C.E. Primary School has decided that over the counter medicines will **not** be administered unless there are extreme circumstances.

Non-prescribed medicines will only be administered with prior written permission from parents in extreme circumstances such as residential trips or day trips, e.g. travel sickness medication or for children in extended care. (Kids Club)

Where a child needs non-prescribed medication over a period of time to enable them to attend school, a short term Individual healthcare plan must be completed.

Staff will never administer medicines containing aspirin unless prescribed by a doctor.

Staff will never administer medication containing ibuprofen to children who are asthmatic.

The same procedure must be followed for recording the administration of OTC remedies as is required for prescribed medication and they should be entered on the medication record. (see above) OTC must be stored in the same way as prescribed medication.

Therefore, parents / carers should make arrangements for this type of medication to be administered at home wherever possible. Parents / carers are welcome to administer OTC medication by attending school.

If a GP prescribes an OTC remedy, it becomes a prescribed medicine and must be treated accordingly.

Schools and settings must never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions without confirmation from the original prescriber.

Mal-administration of medicines

St Anne's C.E. Primary School recognise the need for procedures to be in place for the reporting of adverse reactions or errors in administration of medication. Only staff who have been trained to administer medicines should administer medicine and where an adverse reaction or error is made the following procedure needs to be followed:

This procedure must cover: -

- a. Facts of the incident reported to Headteacher or senior member of staff, who will carry out an investigation.,
- b. Persons involved recorded,
- c. Reason for the incident recorded,
- d. Details of any ill health or injuries sustained (if this is the case an accident/incident report form must be completed and forwarded to the Health, Safety and Wellbeing Service),
- e. Witness Statement.
- f. Details of persons informed (Parents/Carers, Pharmacist, GP, NHS Direct, Governing bodies CQC/OFSTED),
- g. Corrective and Remedial action taken.
- h. Outcome of investigation by senior manager.

Sporting activities, visits and residential trips:

School will support pupils with medical conditions to participate in school trips and visits, or in sporting activities. Teachers should be aware of how a child's medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments. School will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

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

Training:

Any member of school staff providing support to a pupil with medical needs will receive suitable training. This will have been identified during the development or review of individual healthcare plans. Some staff may already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required. Staff who provide support to pupils with medical conditions can be included in meetings where this is discussed.

The relevant healthcare professional should normally lead on identifying and agreeing with the school the type and level of training required, and how this can be obtained. School may choose to arrange training themselves and will ensure this remains up-to-date. Training will be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff will not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). In some cases, written instructions from the parent or on the medication container dispensed by the pharmacist may be considered sufficient, but ultimately school will decide, having taken into consideration the training requirements as specified in pupils' individual health care plans. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including the school nurse, can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

After discussion with parents, children who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected within individual healthcare plans.

Equal Opportunities:

The Governing Bodies' duties towards disabled children and adults are included in the **Equality Act 2010**, and the key elements are as follows:

- School **will not** discriminate against, harass or victimise disabled children and young people
- School **will** make reasonable adjustments to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory: adjustments must be planned and put in place in advance, to prevent that disadvantage.

Record Keeping

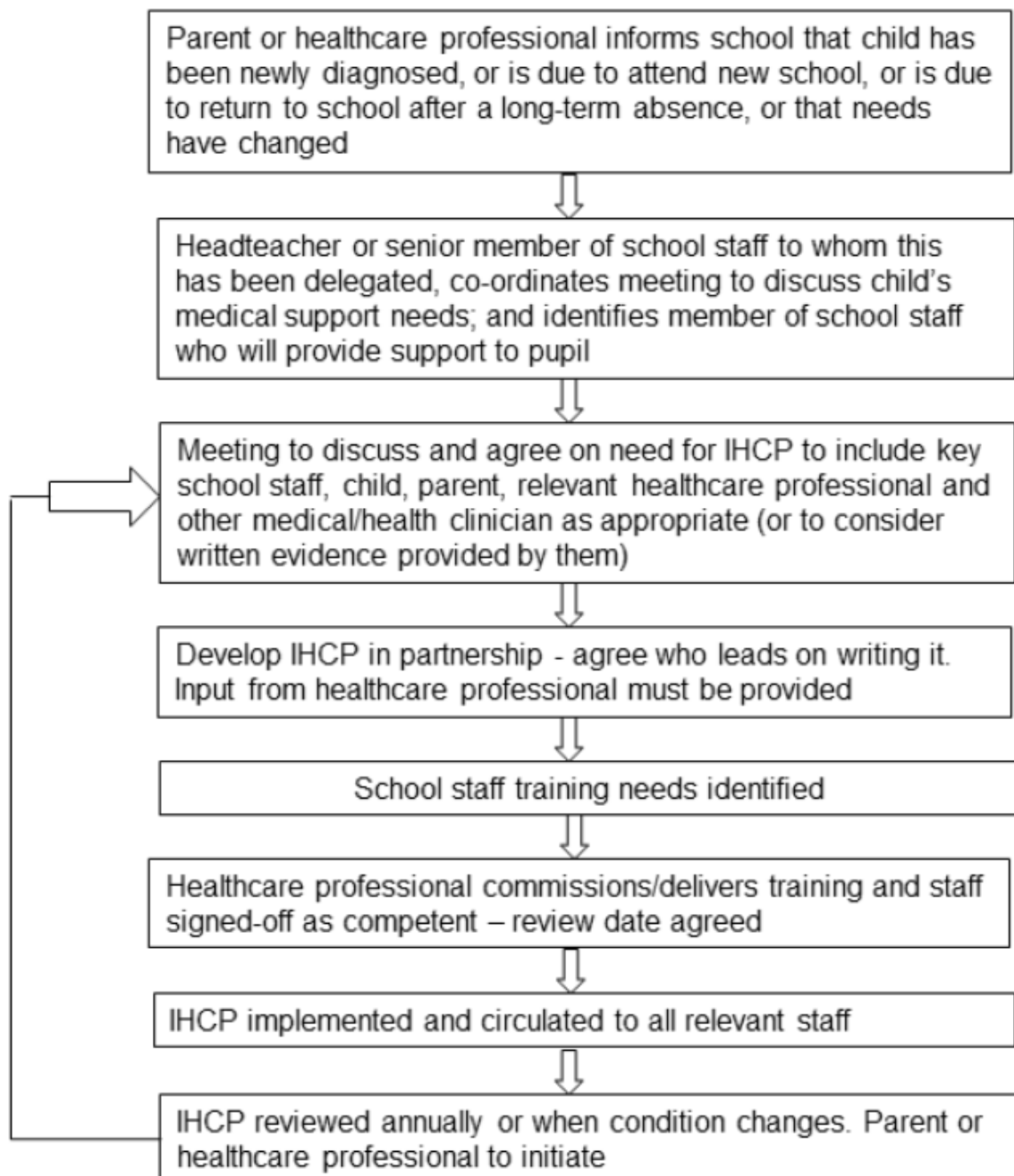
Written records are kept of all medicines administered to children. Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents will be informed if their child has been unwell at school.

Monitoring and evaluation:

This policy will be reviewed annually by the Governors Safeguarding Committee. Implementation of the policy will be monitored and evaluated by the committee.

Developing Individual Health Care Plans

Developing Individual Health Care Plans



◀ **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

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: parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by	
Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____

Date _____

Template C: record of medicine administered to an individual child

Name of school/setting	
Name of child	
Date medicine provided by parent	
Group/class/form	
Quantity received	
Name and strength of medicine	
Expiry date	
Quantity returned	
Dose and frequency of medicine	

Staff signature _____

Signature of parent _____

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

C: Record of medicine administered to an individual child (Continued)

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Template E: staff training record – administration of medicines

Name of school/setting

Name

Type of training received

Date of training completed

Training provided by

Profession and title

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Template F: 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 [insert school/setting address]
4. state what the postcode is – 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