

# SUPPORTING PUPILS WITH MEDICAL NEEDS POLICY



Langstone Infant Academy

## **Introduction**

Section 100 of The Children and Families Act 2014 places a duty on the Governing Body of Langstone Infant School and the University of Chichester Academy Trust to make arrangements for supporting children at Langstone Infant School with medical conditions. The Department of Education have produced statutory guidance 'Supporting Pupils with Medical Conditions' and we will have regard to this guidance when meeting this requirement.

We will endeavour to ensure that children with medical conditions are properly supported so that they have full access to education, including school trips and physical education. The aim is to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in school so that they can play a full and active role in academy life, remain healthy and achieve their academic potential.

It is our policy to ensure that all medical information will be treated confidentially by the Head teacher and staff. All administration of medicines is arranged and managed in accordance with the Supporting Pupils with Medical Needs document. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Where children have a disability, the requirement of the Equality Act 2010 will apply.

Where children have an identified special need, the SEN Code of Practice will also apply.

We recognise that medical conditions may impact social and emotional development as well as having educational implications.

## Key Roles & Responsibilities

**Statutory Requirement: The governing body should ensure that the academy's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support children at the academy with medical conditions.**

The Governing Body is responsible for:

- Ensuring that the academy's policy clearly identifies the roles and responsibilities of all those involved in the arrangements they make to support pupils at Langstone Infant School with medical conditions
- Making sure that arrangements to support pupils with medical conditions are in place and that the policy is fully implemented
- Ensuring that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life, following individual care plans as required
- Ensuring that sufficient staff have received suitable training and are competent before they take on the responsibility to support pupils with medical conditions  
Ensuring that any members of academy staff who provide support to pupils with medical conditions are able to access information and other teaching materials as needed

The Head teacher is responsible for:

- Ensuring that the academy policy is developed and effectively implemented with partners
- Ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation
- Ensuring that all staff who need to know are aware of the child's condition
- Ensuring that sufficient trained members of staff are available to implement the policy and deliver against all individual health care plans, including in contingency and emergency situations
- Ensuring the development of individual health care plans as needed – supported by relevant professionals
- Ensuring that the staff are appropriately insured and are aware that they are insured to support pupils in this way
- Ensuring that the School Nurse Service is contacted in the case of any child who has a medical condition that may require support at the academy, but who has not yet been brought to the attention of the School Nurse
- Ensuring that relevantly trained staff are aware that they may be asked to provide support for pupils with medical conditions, including administering medicines. E.g. diabetes

Teachers and Support Staff are responsible for:

- Knowing what to do and responding accordingly when they become aware that a pupil with medical conditions needs help
- Receiving sufficient and suitable training and achieve the necessary level of competency before they take on the responsibility to support children with medical conditions

School Link Nurse is responsible for:

- Notifying the academy when a child has been identified as having a medical condition which will require support.
- Supporting academy staff in implementing a health care plan  
Providing advice and liaison, including training

## **Local Arrangements**

### **Identifying children with health conditions**

**Statutory Requirement: The Governing body will ensure that the policy sets out the procedures to be followed whenever the academy is notified that a pupil has a medical condition.**

We will aim to identify children with medical needs on entry to the academy by working in partnership with parents/carers. We will use the 'Pupil Registration Form' to obtain the information required for each child's medical needs in order to ensure that we have appropriate arrangements in place prior to the child commencing at the academy to support them accordingly.

Where a formal diagnosis is awaited or is unclear, we will plan to implement arrangements to support the child, based on the current evidence available for their condition. We will ensure that every effort is made to request some formal medical evidence and consultation with the parents.

### **Individual health care plans**

**Statutory Requirement: The Governing body will ensure that the school's policy covers the role of individual healthcare plans, and who is responsible for their development in supporting children at the academy with medical conditions.**

We recognise that Individual Healthcare Plans are recommended in particular where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in the majority of other cases, especially where medical conditions are long term and complex. However, not all children will require one. The academy, healthcare professional and parents/carers will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

Where children require an individual healthcare plan it will be the responsibility of the SENDCo & head teacher to work with parents and relevant healthcare professionals to write the plan.

A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of school staff or by a healthcare professional. The head teacher & SENDCo will work in partnership with the parents/carer, and a relevant healthcare professional. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, this individual plan will be linked to or become part of that statement or EHC plan.

We may also refer to the flowchart contained within the document **'Process for identifying children with a health condition' (Appendix A)** for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

If a child is returning following a period of hospital education or alternative provision (including home tuition), we will work with the Local Authority and the Chichester Academy Trust to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

**Statutory Requirement: The governing body should ensure that all plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. Plans should be developed with the child's best interests in mind and ensure that the school assesses and manages the risks to the child's education, health and social well-being and minimise disruption.**

All health care plans will be reviewed with parents/carers and with health professionals as appropriate, prior to the start of the Autumn term each year, or more frequently if a change in arrangements is required.

**Statutory Requirement: When deciding what information should be recorded on individual healthcare plans, the governing body should consider the following:**

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects, 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
- Specific support for the pupil's educational, social and emotional needs- for example, requirements for extra time to complete exams, use of rest periods or additional support for catching up with lessons or counselling sessions
- The level of support needed, including in emergencies
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a health care professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the child's medical condition and the support required
- Arrangements for written permission from parents for medication to be administered by a member of staff
- Separate arrangements or procedures required for school trips or other activities outside of the normal timetable that will ensure that the child can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent / child, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including whom to contact, and contingency arrangements

## **Staff training**

**Statutory Requirement: The Governing Body should ensure that this policy clearly sets out how staff will be supported in carrying out their role to support children with medical conditions, and how this will be reviewed. It should specify how training needs will be assessed and by whom training will be commissioned and provided.**

**The school policy should be clear that any member of school staff providing support to a child with medical needs should have received suitable training.**

**Staff must not administer prescription medicines or undertake any health care procedures without the appropriate training (updated to reflect any individual healthcare plans)**

All new staff, where relevant, will be inducted on the policy when they join the school through the induction plans and systems.

All nominated staff will be provided with awareness training on the policy for supporting children with medical conditions, this will include what their role is in implementing the policy. This training will be carried out as required.

Relevant awareness training will be provided to staff as part of the induction meetings and agenda

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

## **The child's role**

**Statutory Requirement: The Governing body will ensure that the academy's policy covers arrangements for children who are competent to manage their own health needs and medicines.**

Where possible and in discussion with parents, children that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a child who self-administers refuse to take their medication (this will normally be informing the parent/carer at the earliest opportunity).

Where possible we will endeavour to ensure that children can access their own medicines and relevant devices for quick self-medication. We will agree with relevant healthcare professionals and parents/carers the appropriate level of supervision required and document this in their healthcare plan.

### **Managing medicines on school Premises**

**Statutory Requirement: The Governing Body will ensure that the policy is clear about the procedures to be followed for managing medicines.**

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the head teacher is responsible for ensuring children are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a child's health or school attendance not to do so.

We will not give prescription or non-prescription medicines to any child without their parents/carers written consent, the Medication File, located in the front office, will be used to record this. In exceptional circumstances telephone contact may be used in order to obtain verbal permission, this will be followed up by written consent from the parents/carers at the end of the day.

A documented tracking system to record all medicines received in and out of the premises will be put in place. The tracking system used is the Medication File located in the front office.

The name of the child, dose, expiry and shelf life dates will be checked before medicines are administered.

On occasions where a child refuses to take their medication the parents will be informed at the earliest available opportunity.

We will only accept medicines that are in date, labelled and in their original container. Insulin is the exception, which must still be in date but will generally be available inside an insulin pen or a pump, rather than its original container.

Children have their Inhalers stored within the relevant classroom for direct access if required. All Inhalers will be clearly marked with the child's name.

Controlled drugs will be securely stored in a non-portable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held within the academy.

There may be instances where it is deemed appropriate for a child to administer their own controlled medication. This would normally be at the advice of a medical practitioner and under the guidance of a trained adult.

Emergency medicines will be stored in a safe location but not locked away to ensure they are easily accessible in the case of an emergency.

Types of emergency medicines include:

**Injections of adrenaline for acute allergic reactions**

**Inhalers for asthmatics**

**Injections of Glucagon for diabetic hypoglycaemia**

Other emergency medication ie. Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed storage instructions

**We will never administer aspirin or medicine containing Ibuprofen to any child under 16 years old unless prescribed by a doctor**

Any homeopathic remedies to be administered will require a letter of consent from the child's doctor and will be administered at the discretion of the Head teacher.

## **Storage**

All medication other than emergency medication will be stored safely in a lockable cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premise.

Where medicines need to be refrigerated, they will be stored in the small fridge in the medical room. There must be restricted access to this refrigerator.

Children will be made aware of where their medicines are at all times and be able to access them immediately where appropriate.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children. We will also ensure that they are readily available when outside of the school premises or on trips.

Storage of medication whilst off site will be secure. There will be appropriately trained staff present to administer day to day and emergency medication and if required, copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

## **Disposal**

Any unclaimed medication will be disposed of. This will take place within 4 weeks of the date of expiry. This may be carried out by returning unused medicines to a pharmacy. Parents/carers will be informed of this when the initial agreements are made to administer medicines.

Sharps boxes, if in use, will be in place for the disposal of needles. Collection and disposal of these will be arranged locally through the approved school contractor who will remove them from site as required.

## **Medical Accommodation**

The medical room will be used as required for medical administration/treatment purposes. The location/room will be made available when required.

## **Record keeping**

**Statutory Requirement: The governing body should ensure that written records are kept of all medicines administered to children.**

A record of what has been administered including how much, when and by whom, will be recorded in the Medication File, located in the front office. Any possible side effects of the medication will also be noted and reported to the parent/carers.

## **Emergency Procedures**

**Statutory Requirement: The Governing body will ensure that the policy sets out what should happen in an emergency situation.**

Where a child has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures.

Where a child is required to be taken to hospital, a member of staff will stay with the child until their parents arrives, this includes accompanying them to hospital by ambulance if necessary (taking any relevant medical information, care plans etc that the school holds).

**Appendix B sets out the procedures for contacting the Emergency Services**

## **Day trips/off site activities**

**Statutory Requirement: The Governing body should ensure that arrangements are clear and unambiguous about the need to support pupils with medical conditions to participate in trips and visits, or in sporting activities, and not prevent them from doing so.**

We will ensure that teachers are aware of how a child's medical condition will impact on their participation in any off site activity or day trip, but we will ensure that there is enough flexibility for all children to participate according to their own abilities within reasonable adjustments.

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

## **Other issues**

### Emergency Salbutamol Inhalers

- Emergency Salbutamol Inhalers can be bought by the school for emergency use, and following the guidance sent to schools by the DfE in October 2014.
- The emergency salbutamol inhaler should only be used by children for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication
- The inhaler can be used if the child's prescribed inhaler is not available (for example if it is broken or empty)
- The emergency inhaler is kept in the medical room in an airtight container and kept with the Department of Health Guidance on the use of Emergency salbutamol inhalers in school, September 2014
- Any parent of a child with asthma will be asked if they wish the inhaler to be used in an emergency, and a copy of all written consents will also be kept with the emergency inhaler

## **Unacceptable practice**

**Statutory Requirement: The governing body will ensure that the school's policy is explicit about what practice is not acceptable.**

Staff are expected to use their discretion and judge each child's individual healthcare plan on its merits, it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send children with medical conditions home frequently or prevent them from staying for normal activities, unless this is specified in their individual healthcare plans;
- if the child becomes ill, send them to the office or medical room unaccompanied or with someone unsuitable;
- penalise children for their attendance record if their absences are related to their medical condition, eg. 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;

## **Liability and Indemnity**

**Statutory Requirement: The governing body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.**

Staff at the school are indemnified under Langstone Infant School insurance arrangements in place with our insurers.

The school is self-insured and has extended this self-insurance to indemnify staff who have agreed to administer medication or undertake a medical procedure.

To meet the requirements of the indemnification, we ensure that staff have parents/carers permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure, a record of this training will be held in the administration of medicines file.

## **Complaints**

**Statutory Requirement: The governing body will ensure that the policy sets out how complaints may be made and will be handled concerning the support provided to pupils with medical conditions.**

Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Head teacher. If for whatever reason this does not resolve the issue, they may make a formal complaint via the complaints procedure.

## **Monitoring and Evaluation**

This policy will be reviewed by Governors as part of the continual policy review cycle.

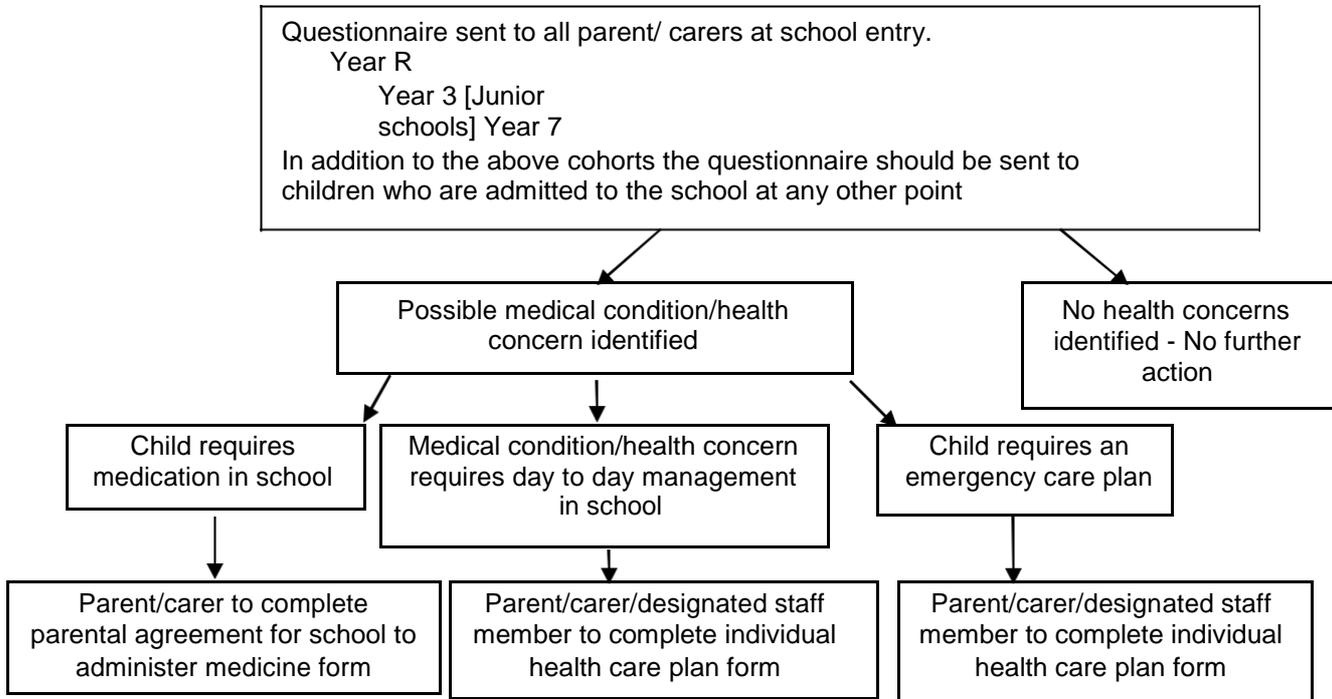
<b>Last Review</b>	<b>December 2020</b>
<b>Reviewed by</b>	<b>LGB</b>
<b>Next Review</b>	<b>December 2022</b>



## Appendix A

### Process for identifying children or young people with a medical condition that may require support in school

Not all children with a health condition will require a health care plan in school however the form will help schools to ascertain which children require support. In addition to this schools may be informed at any other point by a parent or health professional if a child is newly diagnosed with a health condition.



## **Appendix B: 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 **02392 694313**
2. Your name
3. Your location as follows

**Langstone Infant School  
Stride Avenue  
Portsmouth  
Hampshire  
PO3 6HL**

**The main entrance/car park is located from Stride Avenue**

**The Kitchen/Hall is best located from Ascot Road**

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 academy 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