

Supporting Pupils with Medical Conditions Policy

Brockenhurst CE Primary School & Pre-School

Approved by:	Board of Governors	
Last reviewed on:	September 2022	
Next review due by:	September 2024	

Supporting Pupils with Medical Needs Policy

2022-2024

Introduction

Section 100 of The Children and Families Act 2014 places a duty on *the governing body of this school,* to make arrangements for supporting children at their premise 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 will 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 school 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

The Governing Body is responsible for:

Ensuring that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. They should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

The Head Teacher is responsible for:

Ensuring that the school's policy is developed and effectively implemented. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Head Teachers should ensure that all staff who need to know are aware of the child's condition. They should 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. This may involve recruiting a member of staff for this purpose. Head teachers have overall responsibility for the development of Individual Healthcare Plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should 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.

Teachers and Support Staff are responsible for:

Providing 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 should 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.

The School Link Nurse/Matron is responsible for:

Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's Individual Healthcare Plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs; for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Local Arrangements

Identifying children with health conditions

We will aim to identify children with medical needs on entry to the school by working in partnership with parents/ carers and following the process outlined in the document 'Process for identifying children with a health condition' produced by the Southern Health School Nursing Team in conjunction with the Children's Services Health and Safety Team. We will use the 'Health Questionnaire for Schools' to obtain the information required for each child's medical needs to ensure that we have appropriate arrangements in place prior to the child commencing at the school to support them accordingly.

Procedures will also be in place to cover any transitional arrangements between schools, the process to be followed upon reintegration or when pupils' needs change, and arrangements for any staff training or support. For children starting at a new school, arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort should be made to ensure that arrangements are put in place within two weeks.

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 involve some formal medical evidence and consultation with the parents.

Individual Healthcare Plans

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 school, healthcare professional and parent will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

At the beginning of each academic year and for all new Year R children, an Admissions - Healthcare Needs Form – see Template D, will be sent out with the Data Collection sheets. Evidence provided on this form may result in an Individual Healthcare Plan being put in place.

Where children require an Individual Healthcare Plan it will be the responsibility of *the Head Teacher* and the SENDCo to work with parents and relevant healthcare professionals to write the plan. Parents will be invited by letter to contribute – see Template E.

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 involved in providing care to the child. The *SENDCo* will work in partnership with the parents/carer, and a relevant healthcare professional eg. school, specialist or children's community nurse, who can best advise on the particular needs of the child to draw up and/or review the plan. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the Individual Healthcare 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' for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

We will use the individual Healthcare Plan template - see Template A

If a child is returning following a period of hospital education or alternative provision (including home tuition), that we will work with Hampshire County Council and education provider to ensure that the Individual Healthcare Plan identifies the support the child will need to reintegrate effectively.

The school will ensure that all plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

Staff training

All new staff will be inducted on the policy when they join the school through *one to one induction training and reading of policies*. Records of this training will be stored *in the individual's Personnel file*.

All nominated staff will be provided awareness training on the school's policy for supporting children with medical conditions which will include what their role is in implementing the policy. This training will be carried out every *year and following a review of the policy*.

The awareness training will be provided to staff by Staff Meetings, *INSET Day training or if the policy is updated then via email.*

We will retain evidence that staff have been provided the relevant awareness training on the policy by minutes of meetings/signature sheets, copies of emails.

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.

A **'Staff training record- Administration of Medicines'** form – see Template B, will be completed to document the type of awareness training undertaken, the date of training and the competent professional providing the training.

The child's role

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 carry their own medicines and relevant devices or have easy access to allow for quick self-medication. We will agree with relevant healthcare professionals/parent the appropriate level of supervision required and document this in their healthcare plan.

Managing medicines on School Premises

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 a child under 16 without their parent's/carers written consent (a 'parental agreement for setting to administer medicines' form will be used to record this), except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, we will make every effort to encourage the child or young person to involve their parents while respecting their right to confidentiality.

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 prescribed medicines that are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Children who are able to use their own inhalers themselves are encouraged to carry it with them. If the child is too young or immature to take personal responsibility for their inhaler, staff should make sure that it is stored in a safe but readily accessible place, and 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 in school. 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. Where an individual child is competent to do so and following a risk assessment, we may allow them to have prescribed controlled drugs on them with monitoring arrangements in place.

We will only administer non-prescribed medicines on request from the parent if they are in clearly identifiable packaging and only on a short term basis (Where the school have concerns they will seek further guidance from their link School Nurse).

We will never administer aspirin or medicine containing Ibuprofen to any child under 16 years old unless prescribed by a doctor and with written parental consent.

All other pain relief medicine will not be administered without first checking maximum dosages and when previously taken. We will always inform parents.

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.

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 medicines procedures (see storage section).

A clear log will be kept of all medicines administered to any child, including the date, time, dosage and by whom – see Template C.

Storage

All medication other than emergency medication will be stored safely in a secure area, 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 refrigerator in the Admin Office* in a clearly labelled airtight container. There must be restricted access to a refrigerator holding medicines.

Children will be made aware of where their medicines are at all times and be able to access them immediately where appropriate. Where relevant they should know who holds the key to the storage facility.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of Individual Healthcare Plans will be taken off site to ensure appropriate procedures are followed.

Disposal

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to

administer medicines. Medication returned to parent/ carers will be documented on the tracking medication form.

Sharps boxes will be in place for the disposal of needles. Collection and disposal of these will be arranged locally through *the school nursing Team* who will remove them from site *when necessary*.

Medical Accommodation

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

Record keeping

A record of what has been administered including how much, when and by whom, will be recorded on a 'record of prescribed medicines' form. The form will be kept on file. Any possible side effects of the medication will also be noted and reported to the parent/carers.

Emergency Procedures

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. We will ensure other children in the school know what to do in the event of an emergency i.e., informing a teacher immediately if they are concerned about the health of another child.

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).

Advice and on how to contact the emergency services and what information to provide is clearly displayed near all telephones within school – see Template F.

Day trips/off site activities

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

Asthma inhalers – Brockenhurst CE Primary School hold asthma inhalers for emergency use. 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 pupil's prescribed inhaler is not available (for example, because it is broken, or empty).

The Admin team will be responsible for maintaining the emergency inhaler kit. They should ensure that:

- on a monthly basis the inhaler and spacers are present and in working order, and the inhaler has sufficient number of doses available;
- that replacement inhalers are obtained when expiry dates approach;
- replacement spacers are available following use;
- the plastic inhaler housing (which holds the canister) has been cleaned, dried and returned to storage following use, or that replacements are available if necessary.

Schools will wish to ensure that the inhaler and spacers are kept in a safe and suitably central location in the school, such as the school office, or staffroom, which is known to all staff, and to which all staff have access at all times, but in which the inhaler is out of the reach and sight of children. The inhaler and spacer should not be locked away.

The inhaler should be stored at the appropriate temperature (in line with manufacturer's guidelines), usually below 30°C, protected from direct sunlight and extremes of temperature. The inhaler and spacers should be kept separate from any child's inhaler which is stored in a nearby location and the emergency inhaler should be clearly labelled to avoid confusion with a child's inhaler. An inhaler should be primed when first used (e.g. spray two puffs). As it can become blocked again when not used over a period of time, it should be regularly primed by spraying two puffs. To avoid possible risk of cross-infection, the emergency spacer should not be reused. It can be given

To avoid possible risk of cross-infection, the emergency spacer should not be reused. It can be given to the child to take home for future personal use.

Unacceptable practice

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 school activities, including lunch, unless this is specified in their Individual Healthcare Plans;

- if the child becomes ill, send them to the school 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;
- require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent children from participating, or create unnecessary barriers to children participating
 in any aspect of school life, including school trips eg. by requiring parents to accompany the
 child.

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Liability and Indemnity

Staff at the school are indemnified under the County Council self-insurance arrangements.

The County Council's is self-insured and have extended this self-insurance to indemnify school staff who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, we will ensure that staff at the school have parents' permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure.

Complaints

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 compliant via the school's complaints procedure.



Brockenhurst CE Primary School

Individual Healthcare Plan

CONFIDENTIAL

Child's name:	Sessions child attends:				
Date of birth:	Monday				
	Tuesday				
Insert photo	Wednesday				
	Thursday				
	Friday				
	Saturday				
	Sunday				
Date of Plan:	Date of risk assessment:				
Describe medical needs and give details of symptoms: Daily care requirements:					
Medication details (including expiry date/disposal):					
Storage of medication:					
Procedure for administering medication	on:				

Names of staff trained to carry out health plan procedures and administer medication:
Describe what constitutes an emergency, actions to be taken, named responsible person and any
required medication:
Information to give to the ambulance crew:
Follow up care:
Contact details; may be used in an emergency:
Parent/carer's name and home phone (relationship to child):
Parent/carer's name and mobile phone (relationship to child):
Parent/carer's name and workplace phone (relationship to child):
Other contact:
Child's home address:
GP contact details:
Hospital contact details:
Review date:
Parent/carer's signature: Date:

Brockenhurst CE Primary School



Staff Training Record – administration of medicine

TEMPLATE B – Staff Training Record – administration of medicine

Name						
Type of training received						
Date of training complete	∍d					
Training provided by						
Profession and title						
		_	etailed above and is competent is updated [name of member of			
Trainer's signature						
Date						
I confirm that I have received the training detailed above.						
Staff signature						
Date						
Suggested review date						

Name of Child

Please tick appropriate box

Administration of Medicines & Treatment Consent Form – Brockenhurst C of E Primary School

DOB

Address	of Child									
Parents' I	Home Telephon	ne No.								
Parents' I	Mobile Telepho	ne No.								
Name & /	Address of GP									
GP's Tele	phone No.									
My child	My child will be responsible for the self-administration of medicines as directed below									
I agree to members of staff administering medicines/providing treatment to my child as directed below or in the case of emergency, as staff may consider necessary										
I recognis	se that school st	taff are not m	nedicall	y trained						√
	Name of Me	edicine		Required Dose	Frequer	ncy	Course	Finish	Medicine	Expiry
Special In	structions									
Allergies										
Other Prescribed Medicines										
Signature of parent or carer Date										
No.	Date	Time		Medicine Giver	1	Do	se Given		Signatur	e

TEMPLATE D – Admissions – Healthcare Needs Form

Brockenhurst CE Prímary School



Admissions – Healthcare Needs Form

PLEASE COMPLETE THIS FORM CAREFULLY

Name of Child:		С	OB:		
Date and names of any injections/immunisations:					
Details of any allergies, epi-pens:					
Details of any dietary requirements:					
Details of any serious illness before or since birth:					
Has your child being seen at any hospit	tal or by a comm	unity paediatrician o	r is there current involvement:		
Name of consultant/paediatrician:					
Name of hospital and dates of appoint	ments and/or su	irgery:			
Details of any contagious diseases:					
Details of any physical needs requirements:					
Any other additional needs, e.g. Speech and language concerns:					
Does your child suffer from any of the	following (please	e circle yes or no)			
Heart conditions	YES / NO	Tuberculosis	YES / NO		
Epilepsy/fits	YES / NO	Convulsions/fits	YES / NO		
Sight impairment	YES / NO	Hearing impairm	ent YES / NO		
Asthma	YES / NO		YES / NO		
(If your child suffers from asthma or allergies please ensure that they have an up to date prescription labelled inhaler, spacer or adrenalin pen to keep at the childcare setting.)					
Doctor's name and surgery					
Doctor's Telephone number (including area code)					
Health visitor's name and telephone no	umber:				



BROCKENHURST C of E PRIMARY SCHOOL

Sway Road Brockenhurst Hampshire SO42 7RX
Telephone: 01590 623163 Fax: 01590 624395

Email: adminoffice@brockenhurst-primary.hants.sch.uk

Website: www.brockenhurstceprimary.co.uk

Head Teacher: **Mr John Littlewood**Deputy Head Teacher: **Mrs Julie Edwards**

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an Individual Healthcare Plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual Healthcare Plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although Individual Healthcare Plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's Individual Healthcare Plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached Individual Healthcare Plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely



Brockenhurst CE Primary School

Staff Training Record – administration of medicine

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 school number: 01590 623163 or mobile number you are calling from.
- 2. your name
- 3. your location as follows: **Brockenhurst CE Primary School**, **Sway Road**, **Brockenhurst**, **Hampshire**, **SO42 7RX**
- 4. state what the postcode is **SO42 7RX** 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
- 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