



Medical Conditions Policy

Academic Year 2018 – 20

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

Roles and responsibilities

Parents have the prime responsibility for their child's health and are required to provide the school with information about their child's medical condition before they are admitted to the school, or as soon as the child first develops a particular medical need. In consultation with the family, advice will then be sought from those health professionals involved with the child, in order to determine the level of support needed on a daily basis when their child attends school.

This could include:

- a General Practitioner (GP) or Paediatrician
- the school nurse
- external agencies specialising in medical conditions

For those children who attend hospital appointments on a regular basis, special arrangements may also need to be considered as attendance will obviously be affected. Where medical appointments are required during school time, the school will need to be provided with a copy of the appointment letter so that the absence can be recorded appropriately on our system and therefore not adversely affect the child's overall attendance.

Pupils with Long Term or Complex Medical Needs

Special Arrangements

Where a child's needs are particularly complex and could affect their ability to access the full curriculum or participate in other areas of school life, then special arrangements will need to be made. In some cases this might take the form of dedicated adult support, at certain times of the school day. Alternatively, the child's needs could be such that modifications to the learning environment and /or the provision of specialist aids will need to be considered.

Individual Health Care Plans

A written, individual health care plan will be developed for certain children, to clarify for staff, parents and the child, the support that will be provided. This will include details of the child's medical condition, any medication, daily care requirements and action to be taken in an

emergency, including parents' contact numbers and specialist contact details. Those who may need to contribute to a health care plan include the child's GP or other Health care professionals (depending on the level of support the child needs), the SENCO and HLTA, the parents/carers, class teachers and teaching assistants and any support staff who are trained to administer medicines or trained in emergency procedures. The health care plan will be reviewed at the beginning of each school year, however some plans will be reviewed more frequently. Each child's needs will be judged individually, as children vary in their ability to cope with poor health or a particular medical condition.

Maintaining Confidentiality

A confidential file containing photographs of pupils with medical needs, together with outlines of their medical condition and action to be taken, is available on a 'need to know' basis and will be shared with staff who work with certain children including any long term supply staff. The HLTA is responsible for ensuring that health care plans for individual children are displayed where they are accessible to all staff involved in caring for the child. Medical notes are stored in the child's SEN file and there is a Medical Needs list on the school system, which is regularly updated. When a child transfers to a different school, the SENCo will hold a conversation with the new school advising them of the child's medical needs. Copies of medical letters will only be forwarded having first gained consent from the parents.

Staff training

The school is responsible for ensuring that staff have appropriate training to support children with medical needs. Specific training and staff awareness sessions are held for children with highly individual needs prior to the child joining the school. Arrangements are made with appropriate agencies e.g. School Health to update staff training on a regular basis. Teaching and Support staff are invited to attend Epi-pen, asthma and epilepsy training annually.

Educational visits

Wherever possible children with even the most severe and complex medical needs will be included in educational visits outside of school. Every effort is made to encourage children with medical needs to participate in safely managed visits. Consideration is always given to the adjustments which need to be made to enable children with medical needs to participate fully and safely on visits. Staff supervising excursions should always be aware of any medical needs, and relevant emergency procedures. A copy of individual health care plans should be taken on visits in the event of the information being needed in an emergency. Arrangements for taking any necessary medicines will need to be made and if necessary an additional member of the support staff, a parent or another volunteer might be needed to accompany a particular child. If there is any concern about whether the school is able to provide for a child's safety, or the safety of other children on a visit, then parents will be consulted and medical advice sought from the school nurse or the child's GP

Residential Trips

Parents of children participating in Residential trips will need to complete the a consent form giving details of all medical/dietary needs. All medication which needs to be administered during the course of the visit should be handed directly to the class teacher in accordance with the school's guidelines before leaving the school at the start of the trip.

Sporting Activities

All children with medical conditions will be encouraged to participate as fully as possible in physical activities and extra-curricular sport. For many, physical activity can benefit their overall social, mental and physical health and well-being. Staff will be sensitive to their individual needs and sufficient flexibility will be incorporated into the lesson planning for all children to be included in ways appropriate to their own abilities.

Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

Pupils with Short – Term Medical Needs

If children are unwell and unable to cope with a busy school day, they should not be sent to school. If they become ill during the day, parents/carers will be contacted by the school office in order that the child can be taken home. Many children will need to take medicines during the day at some time during their time in school. This will usually be for a short period only, perhaps to finish a course of prescribed antibiotics. However such medicines should only be brought to school where it would be detrimental to a child's health if it were not administered during the school day. Parents should inform the school (on the agreed form, available from the school office) about the medicines that their child needs to take and provide details of any further support required. Staff should make sure that this information is the same as that provided by the prescriber. If the child has any infectious or contagious condition, they should not come to school.

Prescribed Medicines

Medicines will only be accepted if they have been prescribed by a doctor, dentist, nurse or pharmacist. These medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration as well as the child's name and Date of Birth. Any medicines that have been taken out of the container as originally dispensed will not be accepted.

Non – prescription medicines (eg painkillers)

Staff will **NEVER GIVE A NON PRESCRIBED MEDICINE TO ANY CHILD**. If a child is known to suffer regularly from frequent or acute pain the parents should be encouraged to refer the matter to the child's GP. In certain circumstances (e.g. residential trips) and only at the discretion of the Head Teacher, non-prescribed medicines (for pain relief) may be administered with parental

consent. A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Administration of medicines – Guidance to staff

Any medicine that is administered will be done so with the parent's written consent. Parents should inform the school about any medication that their child needs to take. They should also provide written details of any further support required. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions. In all cases it is necessary to check that written details include:

- name of child
- name of medicine
- dose
- time/frequency and method of administration
- any side effects
- expiry date

Responsibility for administering prescribed medication

Teachers' conditions of employment do not require them to give, or supervise, a pupil taking medicines. The school will ensure that there are sufficient members of support staff who are employed, appropriately trained and willing to manage medicines. *The type of training necessary will depend on the individual case.* They should also be aware of possible side effects of the medicines and what to do should they occur.

If in doubt about any procedure, staff should not administer the medicines but check with the parents or a health professional before taking further action.

Record-keeping

Staff should complete and sign a record each time they give medicine to a child.

Refusal to take medicine

If a child refuses to take medicine, staff should not force them to do so, but should inform parents.

Storage of Medicines

The Head teacher is responsible for making sure that medicines are stored safely. Large volumes of medicines should not be stored. Staff should only store, supervise and administer medicine that has been prescribed for an individual child. Medicines should be stored strictly in accordance with product instructions and in the original container in which dispensed. Staff should never transfer medicines from their original containers. All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children and should not be locked away. Other non-emergency medicines should be kept in a secure place not accessible to children. Some medicines need to be refrigerated. They can be kept in a

refrigerator containing food but should be in an airtight container and clearly labelled. There should be restricted access to a refrigerator holding medicines.