

# Supporting pupils with medical

# conditions policy

Head Teacher	Mrs N. Harmer
Person Responsible	Ms S. Rawat
Reviewed	October 2023
Next Review Date	October 2024

41-43 Meadow Garth, London, NW10 0SL Tel: 020 8965 5326 Email: <u>admin@brentfield.brent.sck.uk</u> Website: <u>www.brentfield.brent.sch.uk</u>

# 1. Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions.
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.

The school will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing cover staff with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

The named person with responsibility for implementing this policy is Sunita Rawat.

# 2. Legislation and Statutory Responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

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

# 3. Roles and Responsibilities

#### Governors

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

#### The Headteacher

The headteacher will ensure:

- All relevant staff are aware of this policy and understand their role in its implementation.
- There is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations.
- All staff who need to know are aware of a pupil's condition.
- There is a system for the development, implementation and monitoring of IHPs.
- The school nursing service is contacted in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.
- Systems are in place for obtaining information about a pupil's medical needs and that this information is kept up to date.

#### Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions. This includes the administration of medicines. However, in most instances, this will be the responsibility of the school welfare officer.

Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training and will achieve the necessary level of competency before doing so.

Teachers will consider the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

#### Parents

Parents will:

• Provide the school with sufficient and up-to-date information about their child's medical needs

- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the health care plan, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

# Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected comply with their IHPs.

#### School nurses and other healthcare professionals

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

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

#### 4. Equal Opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

# 5. Notification of a Medical Condition

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

See Appendix 1.

#### 6. Individual Healthcare Plans

The responsibility for the development of IHPs for pupils with medical conditions has been delegated to the Attendance and Welfare Officer.

All pupils with a medical condition will require a meeting to discuss the individual healthcare plan. This may be as part of the induction or admissions process. For more severe/complex conditions, an additional meeting between relevant school staff (including those who will be providing support to the pupil) and the parent/carer will normally be required to complete the individual healthcare plan, and may also involve health professionals and the pupil if appropriate. This should ideally take place before the start of the academic year or school term if mid-year.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Inclusion Lead will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Attendance and Welfare Officer will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the pupil's condition and the support required
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

# 7. Managing Medicines

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the pupil's health or school attendance not to do so and
- Where we have parents' consent

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.

Pupils will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school 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, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

The school ensures that all medication is stored safely, and that pupils with medical conditions and staff know where they are at all times. Medications are not locked away and accessible in an emergency. Children are supervised in the Welfare Room and cannot enter without a member of staff.

The school ensures that medication is in date and labelled in its original container where possible (although insulin will generally be supplied in an insulin injector or pump), and in accordance with its instructions including storage temperature.

The school keeps controlled medication and some painkillers stored securely, but accessibly, with only named staff having access.

Parents/carers must collect all medication/equipment annually, and to provide new and in-date medication at the start of the academic year.

The school allows pupils to keep their own inhalers and adrenaline pens, if appropriate (stored securely but accessibly).

The school's emergency asthma inhalers and are available for pupils whom written parental consent and medical authorisation for use has been given. They are stored in a secure location but not locked away.

#### Pupils Managing Their Own Needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

Where pupils refuse to take their medicine or carry out a procedure, parents will be notified so that an alternative option can be considered, if necessary.

#### **Unacceptable Practice**

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child

#### 8. Emergency Procedures

Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives or accompany the pupil to hospital by ambulance.

#### 9. Training

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

The training will be identified during the development/review of IHPs or when there is a change in staff member.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Attendance and Welfare Officer or Family Support Manager. Training will be kept up to date.

#### Training will:

Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils

- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. The school encourages all staff to undertake training opportunities as part of its comprehensive programme of Continuing Professional Development (CPD), including First Aid training, as well as accredited online training modules tailored for schools around managing asthma and anaphylaxis. The school will keep records of all training.

# 10. Record Keeping

The school will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents will be informed if their pupil has been unwell at school.

A copy of the individual healthcare plan is maintained and updated by the school and is easily accessible to staff who need to refer to it, while also preserving confidentiality in line with the General Data Protection Regulation.

# 11. Attendance and Learning

School staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.

The school will refer pupils with medical conditions who are finding it difficult to keep up educationally to a relevant member of staff (e.g. Family Support Manager or Inclusion Lead ) who will liaise with the pupil (where appropriate) parent and the pupils' healthcare professional.

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), this school will work with the local authority, educational provider or health professional to ensure that the child receives the support they need to reintegrate effectively. This may include updating their individual healthcare plan where necessary.

# 12. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the Family Support Manager in the first instance. If the Family Support Manager cannot resolve the matter, they will direct parents to the school's complaints procedure.

# 13. Monitoring Arrangements

This policy will be reviewed and approved by the governing board annually.

# 14. Links to Other Policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

#### 15. Other Key Reference Documents

#### **Department for Education guidance**

Supporting pupils at schools with medical conditions guidance: <u>https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--</u><u>3#history</u>

#### Healthy London Partnership resources Asthma schools guidance:

https://www.healthylondon.org/wp-content/uploads/2017/11/London-schools-guide-for-children-andyoung-people-with-asthma.pdf\_https://www.healthylondon.org/resource/london-asthma-toolkit/schools/

Diabetes schools guidance: <u>https://www.healthylondon.org/resource/london-guide-teachers-parents-</u> <u>children-young-people-diabetes/</u>

Epilepsy schools guidance: https://www.healthylondon.org/resource/london-epilepsy-guide-schools

Appendix 1: Notification of a Medical Need

