

"I have come in order that you might have life – life in all its fullness."

John 10:10

Children with Medical Conditions Policy

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Next review:	Spring 2021
Signed (Chair of Governors):	
Statutory policy: Yes/No On school website: Yes/No	

CHILDREN WITH MEDICAL CONDITIONS POLICY

1. Introduction

Most pupils will at some time have a medical condition that may affect their participation in school activities. For many this will be short-term; perhaps finishing a course of medication. Other pupils have medical conditions that, if not properly managed, could limit their access to education. Such pupils are regarded as having **medical needs**. Our aim, at Christ Church, is to ensure that these children are supported by the school so that they can access their full-time education and other activities with their peers. This policy aims to lay out our provision for pupils with long-term medical conditions; short-term needs will be met through our Medicines in School Policy.

2. Roles and responsibilities

The Governing Body

The Governing Body has ultimate responsibility to make arrangements to support pupils with medical conditions. The Governing Body 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 has overall responsibility for the following areas (however, this has been delegated to the school SENCO):

- Make sure all staff are aware of this policy and understand their role in its implementation.
- Ensure that 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.
- Take overall responsibility for the development of IHPs.
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way.
- Contact the school nursing service 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.
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

Staff

Supporting pupils with medical conditions during school hours is not the responsibility of one person. Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so. This includes the administration of medicines.

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 take into account 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. Supply staff will be made aware through the sharing of the relevant plan.

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 IHP,
 e.g. provide medicines and equipment.

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 to comply with their IHPs.

School nurses and other healthcare professionals

Healthcare professionals, such as GPs and paediatricians, will liaise with the school nurse and school, and notify them of any pupils identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible.

Local authority

Local authorities (LAs) should provide support, advice and guidance, including suitable training for school staff, to ensure that the support specified within IHPs can be delivered effectively. In Somerset this is provided through the PIMSS team (Physical Impairment and Medical Support Service). LAs should work with schools to support pupils with medical conditions to attend full-time. Where pupils would not receive a suitable education in a mainstream school because of their health needs, the LA has a duty to make other arrangements. Statutory guidance for LAs sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the school year).

Being notified that a child has a medical condition

When we are notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP ("IHCP" in the flowchart below).

We will make every effort to ensure that arrangements are put into place as soon as possible, or by the beginning of the relevant term for pupils who are new to our school.

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed



Headteacher or senior member of school staff to whom this has been delegated, coordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil



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Meeting to discuss and agree on need for IHP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)



Develop IHP in partnership – agree who leads on writing it. Input from healthcare professional must be provided



School staff training needs identified



Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed



IHP implemented and circulated to all relevant staff



IHP reviewed annually or when condition changes. Parent or healthcare professional to initiate

3. <u>Individual healthcare plans</u>

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the SENCO.

Plans will be reviewed 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; and
- by whom.

Plans will be shared with all relevant staff by the SENCO, and where appropriate displayed. 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 not a consensus, the Headteacher or SENCO will make the final decision.

Plans will be drawn up in partnership with the school, parents, PIMSS 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.

If a child also has SEN, 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 a statement or 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 Governing Body and SENCO, in liaison with medical professionals, 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.

4. 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 or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will advise on the type and level of training required and will agree this with the SENCO. Training will be kept up to date and monitored by the SENCO alongside the SEN administrator.

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 IHP.
- 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, e.g. with preventative and emergency measures, so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

5. The child's role in managing their own medical needs

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

Wherever possible, children will be able to access their medicines for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures may require supervision.

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the IHP. Parents should be informed so that alternative options can be considered.

6. 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.

7. <u>Managing medicines</u> (see, also, the school Medicine Policy)

- Medicines should only be brought to school when essential; that is, where it would be detrimental to a child's health if it were not administered during the school day.
 Therefore, we will normally only administer medication in cases where a child has been instructed to take four doses of the prescribed medicine per day.
- We will only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber.
- Medicines should always be provided in the original container, as dispensed by a pharmacist and include the prescribers instructions for administration.
- We will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.
- It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents will be encouraged to ask the prescriber about this. It is to be noted that medicines that need to be taken three times a day, could be taken in the morning, after school hours and at bedtime.
- No medicines will be given without parent's written consent.

- Any member of staff giving medicines will check:
 - o the child's name;
 - prescribed dosage;
 - expiry date;
 - o written instructions provided by the prescriber on the label or container.
- A written record will be kept each time medicines are given.
- All medicines will be stored in a suitable safe place, which is accessible where appropriate.
- Medicines will be returned to parents to arrange for safe disposal when no longer required.

8. Emergency procedures

Staff will follow the school's normal emergency procedures (e.g. 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. Unacceptable practice

It is generally not acceptable to do the following:

- 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.
- Ignore the views of the pupil or their parents.
- Ignore medical evidence or opinion (although this may be challenged).
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs.
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable.
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. 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 pupil, including with toileting issues.
 No parent should have to give up working because the school is failing to support their child's medical needs.
- 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.
- Administer, or ask pupils to administer, medicine in school toilets.

10. Insurance

This is a maintained school. The Governing Body will ensure that an appropriate level of insurance is in place and appropriately reflects the level of risk. We link to the LA as employers who are responsible for insurance arrangements of LA schools and their employees.

11. Complaints

Parents with a complaint about the provision for their child's medical condition should discuss these directly with the class teacher in the first instance and then the SENCO. If they cannot resolve the matter, they will direct parents to the school's complaints procedure.

12. Reviewing the policy

The Children with Medical Conditions Policy will be reviewed every three years by the SENCO.