



Holbrook Primary School

Headteacher: Mr Roger Whitewick M.A. B.Ed (Hons)

Our mission is to inspire, nurture and challenge every learner to achieve their full potential.

SUPPORTING PUPILS AT SCHOOL WITH MEDICAL CONDITIONS POLICY 2015-2016

The Children and Families Act 2014, Section 100 states that the Governing Body of a mainstream school has a duty to make arrangements for supporting pupils with medical conditions.

Holbrook Primary School aims to provide every possible opportunity to develop the full potential of all children. All children have the right to a broad and balanced curriculum including extra-curricular activities where appropriate. Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education, and in activities compatible with the efficient education of other children and the efficient use of resources.

Most children will at some time have a medical condition that may affect their short term participation in school. Whilst most children will experience self-limiting infections, some children will have more chronic and longer-term medical needs that will require additional support at school to ensure they have full access to the curriculum and to minimise the impact of their medical conditions.

Objectives:

- to be inclusive;
- to support children's social, emotional and mental health;
- to ensure medical provision meets the individual needs of the child by focussing on how their medical condition impacts on their school life;
- to consult with health and social care professionals, pupils and parents / carers to ensure the individual needs of children with medical conditions are effectively supported;
- to ensure that children with medical conditions are not made to feel different;
- to offer equal opportunities;
- all staff are aware of children and their medical conditions and needs;
- all staff understand their own responsibilities in maintaining a healthy and safe environment for those with medical needs;
- training will ensure that the appropriate members of staff have enough knowledge and understanding of medical conditions so that children's access to the curriculum is not affected;
- to provide a safe environment for pupils, teaching and non-teaching staff who have medical needs.

- to ensure that Holbrook's arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school;
-

Admission Arrangements

We follow the Local Authority's policy on admissions. Children are admitted to Holbrook irrespective of any medical conditions they may have, provided that the child's needs can be met.

Roles and Responsibilities

All members of staff work towards the school's aims by following the guidance below as specified by The Children and Families Act 2014, Section 100.

The Governing Body has a responsibility to ensure that arrangements are in place in Holbrook to support pupils at school with medical conditions. In doing so they should ensure that such children can access and enjoy the same opportunities at school as any other child.

The Governing body has a responsibility to ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented.

The school's SENCO and Inclusion Manager is Mrs Nicola Rogers and she is responsible for the day-to-day operation of the school's Medical Conditions Policy.

Teachers and non-teaching staff have a responsibility to ensure that they are aware of pupil's medical needs, to follow advice given and to follow procedures for educational visits.

Health Professionals are responsible for sharing information and skills with staff.

Parents / carers have a responsibility to inform the school of any significant information regarding their child's medical condition.

Procedures to be followed

When the school is notified that a pupil has a medical condition procedures are in place to cover transitional arrangements. For children with known medical conditions prior to starting at the beginning of the academic year arrangements will be made for any necessary training for staff. In other cases such as new diagnosis or children moving school mid-term, we will endeavour to ensure that arrangements are in place within two weeks.

We do not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents.

Individual Healthcare Plans (IHCP)

Individual healthcare plans can help to ensure that we effectively support pupils with medical conditions. They provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases 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 SENCo and Inclusion Manager, healthcare professional and parent/carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided at Appendix A.

A copy of a child's Healthcare Plan is given to and shared with all staff directly involved in the education and provision for that child. A further copy is available on the Inclusion Board in the Staff Room so all members of staff are aware of the needs of the child. These documents are treated with confidentiality.

Each Healthcare plan will consider each child's needs rather than a generic form. This is important because different children with the same health condition may require very different support. However the following information will be recorded in all Healthcare plans:

- the medical condition, its triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments;
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed and requirements for extra time to complete exams;
- the level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- who will provide this support and cover arrangements for when they are unavailable;
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure 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. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan.

Where a child has a Special Educational Need and/or disability but does not have a statement or Education and Healthcare Plan (EHCP), their special educational needs and/or disability will be mentioned in their individual healthcare plan.

Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan.

Individual healthcare plans (and their review) may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school, specialist or children's community nurse,

who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate. Plans are developed using a child-centred approach and will ensure that the school assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption.

The plan will show the steps our school will take to help the child manage their condition and overcome any potential barriers to getting the most from their education.

Responsibility for ensuring the plan is finalised and implemented rests with the school.

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), we will work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Accessibility

Holbrook publishes an Accessibility Policy and Plan. This is drawn up in compliance with current legislation and requirements as specified in Schedule 10, relating to Disability, of the Equality Act 2010. School Governors are accountable for ensuring the implementation, review and reporting on progress of the Accessibility Plan over a prescribed period.

We ensure that children with medical needs are able to access extra-curricular activities by listening to the parent/carer and child voice, risk assessments, additional adult support and other professional advice.

Staff training and support

The SENCO and Inclusion Manager ensures that any member of staff providing support to a pupil with medical needs receives adequate training and that practices are monitored regularly, for example annual diabetes training, Epi-pens and asthma.

Healthcare professionals may identify the type and level of training required, and how this can be obtained.

Staff will be aware of our policy for supporting pupils with medical conditions and their role in implementing the policy. New members of staff will receive training regarding this policy.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). A first-aid certificate does not constitute appropriate training in supporting children with medical conditions.

A record of training is kept on display in the school office and the Inclusion Board in the Staff Room.

Managing medicines

Children managing their own medicines

Some children will be able to manage their own medical needs whilst in school. They may be on long-term regular medication for chronic conditions or they may need to take emergency / as needed medication to treat a change in their condition. If parents request that the school exercise a degree of supervision or to administer the medicine, the Inclusion Manager will consult with the Headteacher to address practical or organisational implications, before responsibility is assumed and will be reflected in their healthcare plan.

The School managing children's medicines

The administration of medicine is the responsibility of parents / carers. There is no legal duty which requires staff to administer medicine. When it is agreed that medicine will be administered records are kept and signed. (Appendix B) A consent form must be completed by the parent or carer before medicine can be administered. (Appendix C)

Medicines in devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away.

Other types of medicines are kept locked in the medicine cabinet in the front office. The key is held in a restricted but accessible place, known to the appropriate members of staff. Children should know at all time where there medication is kept.

It is the responsibility of the Headteacher to ensure the safe storage of medicines.

Medication must show the child's name, the name and strength of the medication, the dosage and times and the expiry date. It is the parent/carers responsibility to provide in-date medication. Where medicines must be refrigerated they will be kept in a cool bag and kept at height on top of the medicine cabinet. The bags are clearly marked as 'Medicines'.

Employee medicine

Staff may need to administer their own medicine in school. They have a clear personal responsibility to ensure that their medication is not accessible to children.

Short-term illness.

Children who are suffering from short term illness and who are unwell should not be in school. The Headteacher is within his right to ask parents / carers to keep them at home. Non-prescription medicine will not be administered by staff.

There are recommended times away from school to limit the spread of infectious disease. (<http://www.wiltshire.gov.uk/hs-control-of-communicable-diseases-in-schools-nurseries.pdf>)

Chronic illness / disability.

If it is necessary for a child with a long term condition to take prescribed medicines we support the practice of children taking control of their medical condition, wherever appropriate.

Responsibility of the medical care of a child rests with parents / carers and health care professionals however it is not always feasible for them to administer medicine. In this case adult support can be agreed once training has taken place and risk assessments completed.

Acute illness

We have a general care of duty towards children in school. Legally this does not require teachers to administer medicine, however teachers and other members of staff are expected to react promptly and reasonably if a child is taken ill. There are clear procedures to follow, in particularly in life-threatening situations. This is displayed in the school office and the Inclusion Board.

Emergency Procedures

Holbrook School uses Personal Emergency Evacuation Plans (PEEP) to provide people with any form of disability who cannot adequately be protected by the standard fire safety provisions within a premises, with a similar level of safety from the effects of fires and other emergencies, as all other occupants. (Appendix D)

A clear procedure is followed in case of need to contact to the emergency service. This is displayed in the school office and the Inclusion Board.

Off-site Visits

A First Aid kit is always taken whenever pupils are off-site. In case of sickness on a journey containers and towels are provided. All staff attending off-site visits are aware of any pupils with medical conditions on the visit. They will information about the type of condition, what to do in an emergency and any other additional medication or equipment necessary.

Parents or carers of pupils' attending residential visits complete forms provided by the residential centre.

Unacceptable Practice

Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, 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, 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 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, e.g. by requiring parents to accompany the child.

Liability and indemnity

Holbrook School uses the Wiltshire Council Insurance Scheme.

Complaint procedure

To make a complaint concerning the support provided to their child with a medical condition, they are encouraged to discuss this directly with the school. The class teacher is often the first person to express the complaint to. This can be escalated to the Inclusion Manager and then to Senior Leadership if the parent / carer or pupil feels dissatisfied with the initial response. If this does not resolve the issue a complaint can be made to the Governing Body and to the Local Authority.

Further details can be found in the Complaints Policy.

Review

This policy will be reviewed annually.

Agreed by the governing body meeting on

Date

Signed

Appendices

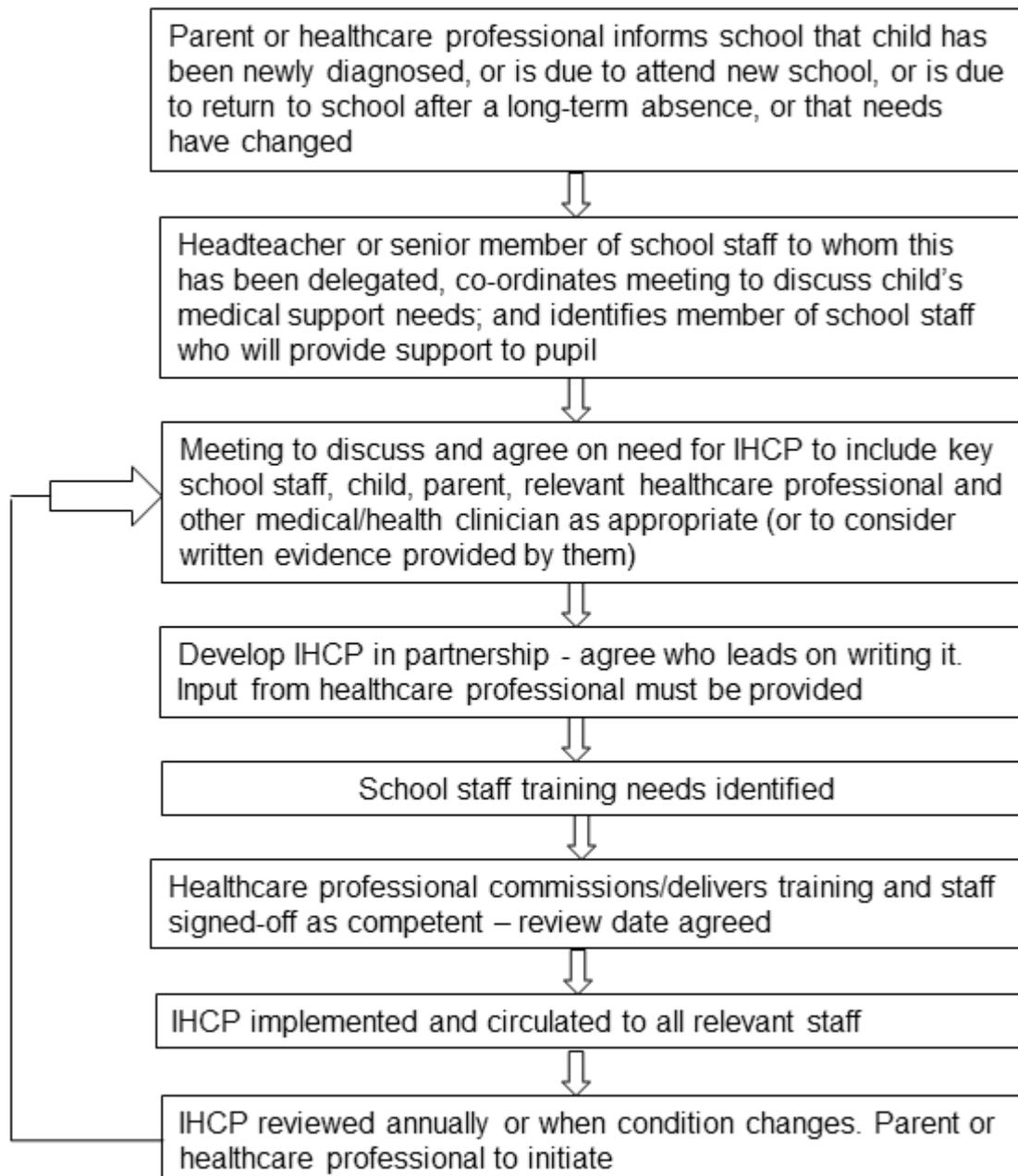
A – Model process for developing individual healthcare plans

B – Record of administration of medicine – individual pupils and all pupils

C – Parental consent for the administration of medicine

D – Personal Emergency Evacuation Plan

Appendix A: Model process for developing individual healthcare plans



C – Parental consent for the administration of medicine

ADMINISTRATION OF MEDICINES / TREATMENT



FORM OF CONSENT (Form 1) - STRICTLY CONFIDENTIAL

Child's Name: _____ Class: _____

Address: _____

Date of Birth: _____ M/F: _____

Home Tel No: _____ Work Tel No: _____

GP's Practice: _____ GP's Tel No: _____

Condition/Illness: _____

I hereby request that members of staff administer the following medicines prescribed for my child by his/her GP/Specialist as directed below. I understand that I must deliver the medicine personally to the school and accept that this is a service which the school is not obliged to undertake.

Signed: _____

Date: _____

Name of Medicine	Dose	Frequency/Times	Date of Completion of Course (if known)
<u>A</u>			
<u>B</u>			
<u>C</u>			
<u>D</u>			
<u>E</u>			
Special Instructions/Precautions/Side Effects:			
Allergies:			
Other prescribed medicines child takes at home:			

D – Personal Emergency Evacuation P

PERSONAL EMERGENCY EVACUATION PLAN

This form should be completed for any pupil, member of staff or other person regularly on site that is unable to evacuate to a place of safety in the event of an emergency.	
Name:	
Location:	
Impairment: MOBILITY / VISUAL / HEARING / COGNITIVE	
Agreed procedure to ensure safe evacuation:	
Other people involved in assisted evacuation: Class teacher Teaching Assistant (for Named Pupil) Supply Teacher	
Have these persons been informed, trained and practiced the evacuation procedure?	Yes/No
Are there contingency plans if these persons are not available?	Yes/No
The contingency plans are:	
Signed:	Date:
Plan Review Date:	