



*A member of
Interserve Academies Trust*

SUPPORTING CHILDREN WITH MEDICAL NEEDS POLICY

***(Incorporating Individual Health Care Plan
Implementation Procedure)***

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Supporting Children with Medical Needs

Policy for Supporting Children with Medical Needs

Roles and responsibilities

Governing Body

- The Governing Body will ensure that pupils in school with medical conditions are supported and can access and enjoy the same opportunities at school as any other child and able to participate fully in all aspects of school life.
- The Governing Body should ensure that focus is on the needs of each individual child and how their medical condition impacts on their school life with as little disruption as possible.
- The Governing Body will ensure that a policy is developed, implemented and monitored including a named person who has overall responsibility for policy implementation. The Policy will be readily available to parents and school staff
- The Governing Body will ensure that staff receive suitable training and that they are competent before they take on the responsibility to support children with medical conditions.
- The Governing Body will handle complaints regarding this policy as outlined in the school's Complaints Policy.

The Principal is responsible for:

- The Principal is responsible for implementing the school Medical Policy and procedures and ensuring that all parents and staff are aware of these.
- Liaising with healthcare professionals to ensure that adequate training, information and instruction is given to sufficient number of staff to enable to implement the policy. This also should apply to staff who volunteer to cover for absence.
- The Principal has overall responsibility to make sure healthcare plans are developed in conjunction with the parent and healthcare professionals. Where there is concern that the needs of the child may not be met, or the parent's expectations appear unreasonable, the Principal should seek further advice from the school nurse, child's GP, Education Leeds or other medical advisers.
- If necessary recruiting a member of staff for the purpose of delivering the promises made in this policy.
- Making staff who need to know aware of a child's medical condition but first seek permission from the child's parent or guardian or the child, if the child is mature enough. Parent's culture and religious views should be respected at all times.
- The Executive Principal is responsible for making sure that medicines are stored safely.

Teachers and other school Staff members

- A teacher who has a pupil with medical needs in his/her class should understand the nature of the child's condition and when and where that pupil requires additional attention.
- Staff should be aware if any emergency is likely to occur and what measure they should take if one does. These measure should be in writing and readily accessible.
- Taking the appropriate steps to support children with medical conditions and where appropriate make reasonable adjustments to include pupils with medical conditions into lessons.
- Undertaking training to achieve the necessary level of competency before they take on the responsibility to support children with medical conditions.
- Information and advice should also be provided to first aiders if the pupil's medical condition has implications for first aid treatment which may be given.
- Other staff such as lunchtime assistants or support staff should be provided with sufficient support ad advice.

School transport escorts

- Escorts who transport children with medical needs to and from school need to be provided with sufficient information in respect of the condition and medications of the children in their care.
- This information should be provided to the school transport office in consultation with the Principal and parent.

The Health Service

- Notifying the school when a child has been identified as having a medical condition which will require support in school.
- Give advice on training for staff willing to administer medication or take responsibility for other aspects of their support.
- Liaising with clinicians on appropriate support for the pupil and associated training needs.
- The GP has a duty of confidentiality to their patients and should only exchange information with the school with the consent of the parent or guardian or the child, if the child is mature enough

Parents and Carers are responsible for:

- Parents are responsible for making sure their child is well enough to attend school and if their child becomes unwell at school they should be collected as soon as possible. Contact details should be up-to-date.
- Parents have the prime responsibility for their child's health and are required to provide the school (via the Principal) 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, or if there are any changes in the child's condition.
- A parental agreement for school to administer medicine should be completed and signed.
- The parent should also provide the school with medication and keep this medication up to date. Any leftover medicine should be collected at the end of the school year.

"Medication" is defined as any prescribed or over the counter medicine.

"Prescription medication" is defined as any drug or device prescribed by a doctor.

- Discussing medication with their child/children prior to requesting that a staff member administers the medication.
- Where necessary developing an Individual Healthcare Plan for their child in collaboration with the Principal, other staff members and any healthcare professionals.
- Parents should carry out any action they have agreed to as part of the implementation of the Healthcare Plan such as providing medicine and equipment and ensure that they or another nominated adult are contactable at all times.

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. These professionals should notify the school nurse when a child has been identified as having a medical condition that requires support in school.

For those children who attend hospital appointments on a regular basis, special arrangements may also need to be considered.

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.
- 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. Where this happens it is advised that parents request that the prescription is such that the pupil does not need to take any medication whilst at school e.g. Dose frequency of 3 times per day rather than 4 times per day dose.
- Medicines must be in the original container (as dispensed by the pharmacist) and include the prescriber's instructions for administration. Any medication should be clearly marked with the name of the pupil and the recommended dosage. It must be kept secure unless there are valid reasons for the pupil to keep that medication with them (e.g. asthma inhaler)
- Parents should inform the school 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.

Schools should never accept medicines that have been removed from their original container nor make changes to dosage on parental instructions.

Pupils with Long Term or Complex Medical Needs

- Schools must have sufficient information about the medical condition of any pupil with long term medical needs.
- The parent or guardian should supply such information either prior to a pupil attending school or as soon as the condition becomes known.
- School should allow pupils who can be trusted to manage their own medication although parents must give their consent and the pupil should be supervised when taking it.
- Staff who come into contact with such pupils should be provided with suitable and sufficient information regarding the pupil's condition and the medicine they are taking.

Non-prescription medicines

- The academy should only allow medications onto the premises that have been prescribed by doctor, dentist, nurse prescriber or pharmacist prescriber and should be supplied in the original packaging.
- The academy should not enter into an agreement to administer non-prescribed medicines on a regular basis.
- Staff should never give a non-prescribed medicine to a pupil unless there is a specific written permission from the parents. Such written consent will need to state the medicine and the dose to be taken.
- Where non-prescription medicine has been given, a strict system must be in place to ensure that a record is made of who received the medicine, what dose was given and who gave the medicine and when. A written note should also be sent to the child's parent on the same day the medicine is given. It should inform them at what time it was given and the dose. The pupil must be supervised whilst s/he takes any non-prescription medicine.
- If a pupil suffers regularly from frequent or acute pain the parents should be encouraged to refer the matter to their GP.
- NO pupil under the age of 16 should be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Clinical Decisions

- In the absence of clear guidance from a medical professional, it is not advised that any member of school staff makes a clinical decision with regard to the needs of a pupil unless in extreme circumstances.
- Any instructions given to schools in relation to a pupil's medical requirements should be specific and clear enough to avoid the need of requiring school staff to make judgements about medication to administer.
- If a child's medical needs are such that the dosage, or method of administration of any medication might vary depending on other factors, schools should be provided with printed guidance wherever possible.

If any medical problems arise which are not covered by a pupil's Health Care Plan or details are unclear, the school should contact the pupil's parent or guardian or seek medical advice before taking any further action unless doing so would put the child at risk.

Medicines and administering medicine

- Medicine should only be administered at school when it would be detrimental to a child's health or school attendance not to do so. A signed parental agreement for school to administer medicine should be signed by the parent.
- Wherever clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- Medicines MUST in date and labelled with the pupil's name, expiry date, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. **Medicines that do not meet these criteria will not be administered nor make changes to dosage on parental instructions.**
- No child under 16 years of age should be given prescription or non-prescription medicines without their parent's written consent.
- Where a pupil is prescribed medication without their parents/carers knowledge every effort will be made to encourage the pupil to involve their parents/carers while respecting their right to confidentiality.
- No child under 16 years of age will be given medication containing aspirin or ibuprofen without a doctor's prescription.
- Written records will be kept of any medication administered to children stating what, how much was administered, when and by whom. Any side effect of the medication should be noted. Crawshaw Academy cannot be held responsible for side effects that occur when medication is taken correctly.
- Medicines should be returned to the parent when no longer required.
- Members of staff have no contractual obligation to give medicine, supervise a pupil taking medicine or assist in any treatment of a pupil unless specifically set out in their contract of employment under their job description.
- Staff may volunteer to give medicine and assist with treatment and in this case suitable and sufficient training should be available. 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. The school should maintain a written record of which member of staff has volunteered to administer medication and what training each member of staff has received.
- Members of staff giving medicine should check the pupils name, that there are written instructions provided by the parent or doctor and the prescribed dose and expiry date of the medicine.
- Where invasive or intimate treatments are required then the person carrying out the treatment should be of the same gender as the pupil receiving treatment. One additional adult should be present whilst the treatment is carried out unless intimate care procedures indicate otherwise.

- Staff should not administer medication if they have not received requisite training or authorisation from their Headteacher. If a pupil is at severe risk because their medication cannot be given the Headteacher must ensure that there are suitable emergency arrangements in place.

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.

Self-Management

- School should encourage young people to take control of their medication and illness from a young age and staff may only need to supervise
- Where pupils are prescribed controlled drugs staff need to be aware that these need to be kept in safe custody. Pupils should be able to access these for self-medication if it is agreed that this is appropriate.
- Students are not allowed to carry any medicines in their bag. Whilst in school the medicine must be handed to First Aid at Student Reception and always be locked away in an accessible location.
- Pupils should be involved in discussions about their medical support needs and contribute as much as possible to the development of their healthcare plan.

Refusal to take medicine

- No person can be forced to take medicine should they refuse.
- If a pupil refuses to take medicine and the information provided by parent/guardian/GP suggest that the pupil is at risk if they do not take the medication the parents/guardian should be contacted immediately. If parent/guardians cannot be contacted the emergency services should be called.
- Records of conversation should be kept and may wish to follow up with a letter.

Epi Pens and asthma inhalers

- Epi Pens need to be stored in a dry area with a constant temperature.
- Where possible a minimum of two epi pens should be kept on site in the event that one fails.
- The use by date should be monitored to ensure they are within the effective date of use.
- Parents/guardians should inform school if their child requires an epi pen or inhaler.
- Pupils should keep their own inhaler for use in the event of an asthma attack. Inhalers for pupils unable to administer their own medication should be kept in a safe place and labelled in the same manner as any other medication.
- School must not allow inhalers for one pupil to be used by another and must only allow each inhaler to be used by the pupil it is prescribed for.
- Suitable training should be available to staff for the use of inhaler and epi pens
- The school should have written consent from the parent /guardian for the use of an inhaler or epi pen and included as part of the child's individual healthcare plan.
- The school should have at least two volunteers responsible for ensuring the protocol is followed.

Individual Health Care Plans

- Where necessary an Individual Healthcare Plan (IHCP) will be developed in collaboration with the pupil, parents/carers, Principal, Special Needs Coordinator (SENCO), any medical professionals plus any support staff who are trained in emergency procedures, administer medicines or have any contact with the pupil.
- This IHCP 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. In the

event of an unexpected injury in school and requires hospital treatment the care plan and the medication should be sent with the pupil to the hospital.

- IHCP will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner. Those students with a statement will be done at the statement review meeting. Each child's needs will be judged individually, as children vary in their ability to cope with poor health or a particular medical condition.
- Where a child is returning from a period of hospital education or alternative provision or home tuition, the school will work with the LA and education provider to ensure that IHCP identifies the support the child needs to reintegrate.
- IHCPs will be easily accessible to members of staff whilst preserving confidentiality. The level of information provided to various staff should be carefully monitored to protect confidentiality.

Staff training

- Teachers and support staff will receive regular and ongoing training as part of their development and should be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions and fulfil the requirements set out in the IHCP. Induction arrangements for new staff should be included.
- No staff member may administer prescription medicines or drugs by injection or undertake any healthcare procedure without undergoing training specific to the responsibility.
- Teaching and Support staff are invited to attend Epi-pen training annually.
- C Pheasey (Assistant Principal) will keep a record of training undertaken and a list of staff qualified to undertake responsibilities under this policy.
- Healthcare professionals, including the school nurse, can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

Educational visits and school trips

- Every effort is made to encourage children with medical needs to participate in safely managed visits as long as the safety of the pupil, other pupils and/or staff is not placed at significant risk. 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 unless evidence from a clinician such as GP states that it is not possible.
- Staff supervising excursions should always be aware of any medical needs, and relevant emergency procedures (unless the parent/guardian does not give their prior consent to do this). 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.
- The location to be visited should be made aware that persons with medical needs are included in the party, if this is practicable and if the parents/guardians consented.

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 healthcare professional to ensure that pupils can participate safely.

- Parents of children participating in Residential trips will need to complete the LEACountyConsent 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 and does not discriminate on any grounds including but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- Members of staff supervising pupils in PE and sporting activities must be aware of the relevant medical conditions and emergency procedures for any pupil with a medical condition who is participating in the lesson either actively or as an observer.
- Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. This will include a reference to any issues of privacy and dignity for children with particular needs.
- For extra curriculum activity or after hour PE lessons, where a pupil with a medical need is participating, the level of supervision should be assessed, and may need to be increased.

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.

Storage of Medicines

- All controlled drugs must be kept in an approved lockable receptacle in the first aid room. This must be locked at all times except when being accessed for the storage of medication or the administration to the named recipient.
- Keys should be kept to a minimum and only held by individuals who have legitimate authority to access the medicine cabinet. Keys should never be given to unauthorised persons, left on hooks or out on display.
- Large volumes of medicines should not be stored. Staff should only store, supervise and administer medicine that has been prescribed for an individual pupil.
- Medicines should be only be stored in accordance with product instructions.
- Pupils should know where their own medicines are stored and who holds the key.
- All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to pupils and should not be locked away.
- Medicines that need to be refrigerated can be kept in a refrigerator with food but must be in an air tight container and clearly labelled. There should be restricted access to a refrigerator holding medication.

Disposal of Medicines

- The academy should NOT dispose of any prescribed medicine or the container from which it came.
- The parent/guardian for whom the medicine was provided should collect all empty containers, surplus medicine and out-of-date medicine. They should also collect medicine held at the end of each term.
- If parents do not collect all medicine, they should be taken to a local pharmacy for safe disposal.
- Sharps boxes should always be used for the disposal of needles. Collection and disposal of the boxes should be arranged with Leeds City Council Environmental Waste Disposal Unit.

Emergencies

- Where an Individual Healthcare Plan is in place it should detail what constitutes an emergency and what to do in emergency.
- Pupils in school should know what to do in general terms such as informing a teacher immediately if they think help is needed.
- If a child needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

Avoiding unacceptable practice

Crawshaw Academy understand that the following behaviour is unacceptable

- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the pupil and/or parents; or ignore medical evidence or opinion.
- Sending pupils home frequently or preventing them from taking part in activities at school.
- Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- If a child becomes ill, sending them to the medical room unaccompanied or with someone unsuitable.
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- Preventing pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support including toilet issues.
- Prevent children from participating, or create unnecessary barriers to children participating in school life including school trips.

INDIVIDUAL HEALTHCARE PLAN IMPLEMENTATION PROCEDURE

Parent or healthcare professional informs school that a child has a medical condition or is due to return from long-term absence, or that needs have changed.



Assistant Head or SENCO co-ordinates meeting to discuss the child's medical needs and identifies member of staff if needed who will provide support to the child.



Meeting held to discuss and agree on the need for IHCP to include key school staff, child, parent and relevant healthcare professionals.



Develop and IHCP in partnership with healthcare professionals and agree on who leads on writing it.



School staff training needs to be identified if necessary.



Training delivered to staff and review date agreed.



IHCP implemented and circulated to all relevant staff.



IHCP reviewed annually or when condition changes (parent's responsibility to inform school).