

# Supporting pupils with medical conditions and children with health needs who cannot attend school

Policy



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# 1. INTRODUCTION

This policy sets out The Keystone Academy's approach to supporting pupils with medical conditions to attend school and the arrangements for children who cannot attend school due to health needs.

# 2. <u>AIMS</u>

The 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
- Suitable education is arranged for pupils who cannot attend school due to health needs
- Pupils, staff and parents/carers understand what the school is responsible for when this education is being provided by the local authority

The Local Support Board (LSB) review matters of health and safety on a regular basis and delegate the responsibility for ensuring policies are put into practice to the Headteacher. The Headteacher 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 supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

# 3. LEGISLATION AND GUIDANCE

This policy reflects the requirements of the Education Act 1996.

This policy complies with our funding agreement and articles of association.

This policy also meets the requirements under <u>Section 100 of the Children and Families Act</u> <u>2014</u>, 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 (DfE)'s statutory guidance on <u>supporting</u> <u>pupils with medical conditions at school</u>.

# 4. <u>ROLES AND RESPONSIBILTIES</u>

4.1 If the school makes the arrangements for a child who is unable to attend school or attends school with a medical condition:

Initially, the school will attempt to make arrangements to deliver suitable education for children with health needs who cannot attend school or need supported provision.

#### The headteacher will:

- 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
- Ensure that all staff who need to know are aware of a child's condition
- 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
- Liaise with parents/carers, pupils, the LA, healthcare professionals and others involved in the pupils care to ensure that arrangements are made in the best interest of the pupil
- Report to the LSB on the effectiveness of the arrangements in place to meet the health needs of pupils
- Ensure that the school complies with any specific health requirements identified in the student's Education, Health Care Plan

#### Teachers and support staff are responsible for:

- Understanding confidentiality in respect of pupils' health needs
- Designing lessons and activities in a way that allows those with health needs to participate fully and ensuring that pupils are not excluded from activities that they wish to take part in without a clear evidence-based reason
- Understanding their role in supporting pupils with health needs and ensuring they attend the required training
- Ensuring they are aware of the needs of their pupils through the appropriate and lawful sharing of the individual pupil's health needs

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.

#### Parents/Carers are expected to:

• 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 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, 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. Where appropriate, 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 IHP.

#### School Nurse 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 a pupil starts school whenever possible. They may also support staff to implement a child's IHP.

#### 4.2 If the Local Authority makes arrangements for a child who cannot attend school

If the school cannot make suitable arrangements, the relevant local authority to the student's home address will become responsible for arranging suitable education for these children.

In cases where the local authority makes arrangements, the School will:

- Work constructively with the local authority, providers, relevant agencies and parents/carers to ensure the best outcomes for the pupil
- Share information with the local authority and relevant health services as required
- Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully

When reintegration is anticipated, we will work with the local authority to:

- Plan for consistent provision during and after the period of education outside the School, allowing the pupil to access the same curriculum and materials that they would have used in School as far as possible
- Enable the pupil to stay in touch with school life
- Create individually tailored reintegration plans for each child returning to School
- Consider whether any reasonable adjustments need to be made

#### 5. 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.

#### 6. BEING NOTIFIED THAT A PUPIL HAS 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.

#### 7. INDIVIDUAL HEALTHCARE PLANS

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

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 headteacher 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.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The headteacher or individual with responsibility for developing IHPs, 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

#### 8. 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' written consent

Pupils under 16 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.

All medicines will be stored safely. Medication needing to be refrigerated will be kept in the medical fridge in the locked medical room. Pupils will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

#### 8.1 Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs</u> <u>Regulations 2001</u> and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure cupboard in the medical room and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

#### 8.2 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.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

#### 8.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's medical condition and 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
- 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

#### 9. EMERGENCY MEDICAL 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.

#### **10. 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 lead on identifying the type and level of training required and will agree this with the headteacher / role of individual. 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 be made 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. This will also be provided for new staff during their induction.

#### **11. RECORD KEEPING**

The Local Support Board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. This is delegated on a day-to-day basis to the Office Manager. Parents will be informed if their pupil has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

#### **12. LIBAILITY AND INDEMNITY**

The Local Support Board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The school is a member of the Department for Education's risk protection arrangement (RPA).

#### 13. COMPLAINTS

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

#### **14. MONITORING ARRANGEMENTS**

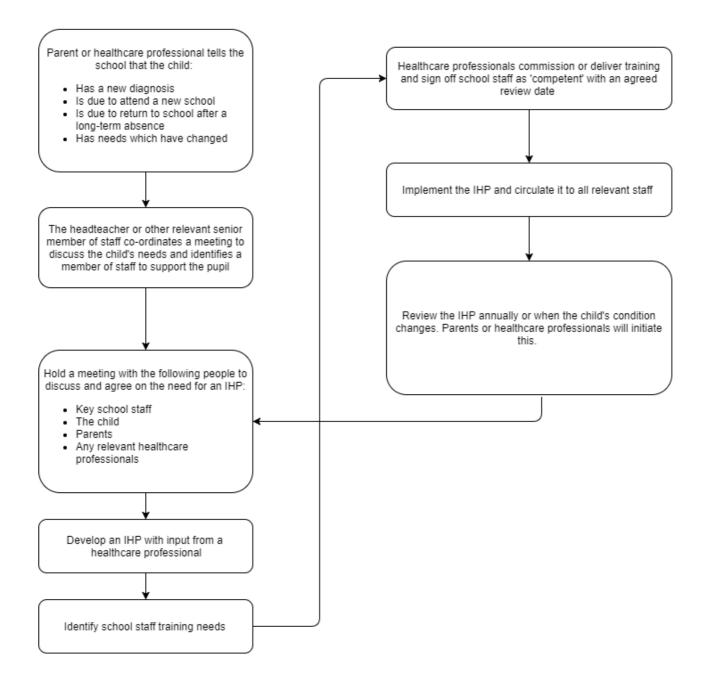
This policy will be reviewed and approved by the Local Support Board every year.

# **15. LINKS TO OTHER POLICIES**

This policy links to the following policies:

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

#### APPENDIX 1 - BEING NOTIFIED THAT A CHILD HAS A MEDICAL CONDITION



# **APPENDIX 2 – INDIVIDUAL HEALTHCARE PLAN TEMPLATE**

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information	
Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact	
Name	
Phone no.	

G.P.	
Name	
Phone no.	

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)

Plan developed with

Staff training needed/undertaken - who, what, when

Form copied to

#### **APPENDIX 3 – PARENT/CARER AGREEMENT FOR SCHOOL TO ADMINISTER MEDICATION**

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#### PARENTAL CONSENT FORM

#### ADMINISTRATION OF MEDICATION

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review (annual or when medical needs change)	
Name of school/setting	The Keystone Academy
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	
Medicine	
Name/type of medicine (as described on the container)	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	
NB: Medicines must be in the original cor	tainer as dispensed by the pharmacy

# **Contact Details**

Name

Daytime telephone no.

Relationship to child

I understand that I must deliver the medicine personally to

Office Manager or Pastoral Lead

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature:\_\_\_\_\_ Date:\_\_\_\_\_

# APPENDIX 4 – RECORD OF MEDICATION ADMINISTERED TO INDIVIDUAL CHILD TEMPLATE

#### **MEDICATION LOG**

Name:

DOB:

Staff member responsible for administering medication:

Dosage	Date	Time	Signature of Administrator and Witness
	Dosage	Dosage   Date     Image: I	Dosage Date Time   Image: Image

#### **APPENDIX 5 – RECORD OF MEDICATION ADMINISTERED TO ALL STUDENTS**

# Record of medicines administered to all students

Date	Student's Name	Time	Name of Medicine	Dose Given	Any Reactions	Signature of Staff	Print Name

#### **APPENDIX 6 – MEDICATION REGISTER**

# Medicine Register and Summary

To be completed when medicine is being handed in and stored securely in the medicine cabinet.

Date Received	Medication Name	Amount and Form Supplied	Student's Name	Paperwork Received	Received By (Print)	Received By (Sign)
				Consent Form or IHCP		

# **APPENDIX 7 – CONTACTING EMERGENCY SERVICES**

Request an ambulance - dial 999, ask for an ambulance and be ready with the information below. Speak clearly and slowly and be ready to repeat information if asked.

- 1. your telephone number 01743 599011
- 2. your name
- 3. your location as follows The Keystone Academy

Squinter Pip Way

Shrewsbury

SY5 8PY

- 4. provide the exact location of the patient within the school setting
- 5. provide the name of the child and a brief description of their symptoms

6. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient

7. put a completed copy of this form by the phone