



Witton Middle School Policy for Supporting Children at school with Medical Conditions

This policy is written in line with Section 100 of the Children and Families Act 2014 which place a duty on the Governing Body and Senior Leadership Team to make arrangements for supporting pupils at school with medical conditions so they have full access to education, including trips and physical education.

Definitions of medical conditions:

Short term – affecting their participation in school activities because they are on a course of medication, are physically ill or injured.

Long-term – potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

Our aims

- To ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school activities so they can play a full and active role in school life, remain healthy and achieve their academic potential.
- To ensure parents/carers feel confident that we will provide effective support for their child's medical condition and that their child feels safe.
- To effectively manage short-term and frequent absences, including those for appointments connected with the child's medical condition and to ensure appropriate support is put in place to limit the impact on the child's educational attainment and emotional and general wellbeing.
- To ensure successful reintegration into school for children who have had a long term absence so that they can be supported to fully engage with their learning and do not fall behind when they are unable to attend.
- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs.
- To ensure that children with medical conditions who also have special educational needs are supported in accordance with the SEND Code of Practice.
- To ensure reasonable adjustments are made to enable children with medical conditions to participate fully and safely on visits, sporting activities and other school activities.

Procedures to be followed when notification is received that a pupil has a medical condition

When the school receives notification that a child with a medical condition is to join the school, where possible arrangements will be in place in time for the start of the relevant school term.

In other cases, such as a new diagnosis or a mid-year transfer, we will make every effort to ensure arrangements are put in place within two weeks or as soon as is practicably possible.

No child with a medical condition will be denied admission or prevented from attending school because arrangements to support them have not been made. However, in line with our Safeguarding duties, we will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

Individual Healthcare Plan (IHP)

- An IHP is a written agreement to help ensure we effectively support children with medical conditions and provides clarity about what needs to be done, when and by whom.
- An IHP will be drawn up in conjunction with parents/carers, child healthcare professionals as required, the child where appropriate and key staff within the school to ensure support and/or medication is given in accordance with medical requirements and will be reviewed annually or earlier if evidence is presented to show that the child's needs have changed.
- Where a child has a special educational need identified in a Statement or EHC Plan, the IHP should be linked to or become part of that Statement or EHC Plan.
- IHPs will be held in the school office and will be circulated as appropriate.

Appendix A- Individual Healthcare Plan template

Appendix B- Agreement to administer medicine in school template

Appendix C- Agreement to administer emergency Salbutamol/Ventolin medicine

Management of support for children with medical needs

The overall management responsibility for support for children with medical conditions within the school lies with the Headteacher.

The Headteacher will ensure that:

- all staff are aware of this policy for supporting pupils with medical conditions and understand their role in implementation;
- sufficient numbers of trained staff are available to support/implement the policy and deliver the IHPs, including in contingency and emergency situations;
- staff are appropriately trained and insured to support pupils in this way.

The SEND Coordinator will be responsible for:

- the day to day coordination of support for children with medical conditions;
- ensuring effective liaison with parents/carers, the child and appropriate agencies;
- working with the Headteacher to arrange staff training;
- ensuring risk assessments are completed for school trips and other activities outside the normal timetable;
- making referrals to the School Nurse service when a medical condition is identified;
- monitoring and reviewing IHPs in collaboration with other professionals.

The First Aid Administrator will:

- liaise with parents/carers, healthcare professionals and SENDCo (if appropriate) to draw up IHPs;
- share with all staff details of children with medical conditions and content of IHPs as required;
- review and amend IHPs annually or as necessary.

School staff:

- may be asked to support pupils with medical conditions, including administration of medication;
- will receive sufficient and suitable training to achieve an appropriate level of competency before taking on the responsibility of supporting children with medical conditions;
- should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Staff training and support

We recognise that a First-Aid certificate does not constitute appropriate training in supporting children with medical conditions and that arrangements will be made for healthcare profession-

als to visit the school to train staff on various medical conditions as required and the training details be logged accordingly. Current procedures:

- EpiPen training is undertaken annually;
- the Diabetic Paediatric Nurse visits as often as requested to refresh/update training;
- other key professionals are invited in to train staff in response to new conditions/ changes in support required by a child with a medical condition;
- we have eight first aid trained staff;
- key staff allocated to support a specific child are trained and supported on an ongoing basis;
- liaison with parents/carers, medical professionals and the child ensure support provided is relevant and staff are trained in line with this;
- children's medical information is circulated to all staff and they are made aware of the support required for different conditions in line with IHPs.

The child's role in managing their own medical needs

If it is deemed after discussion with parents/carers that a child is competent to manage their own health needs or medication, they should be encouraged to do so in line with their IHP and their medication will be readily available to them.

Supervision and support will be provided by staff, where required, when children are taking medication or undertaking a medical procedure.

If a child refuses to take medication or carry out a procedure, do not force them to do so, but follow the procedure agreed in their IHP, ensuring parents/carers are notified if a dose or procedure is missed.

Managing medication on school premises

- Medication should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- Parents'/carers' written consent must be obtained for administering any medication in school.
- All inhalers, EpiPens and blood glucose testing equipment must be kept in the school office for speedy access with other medication stored in the office or locked medical cabinet appropriately.
- **Epi-pen/Jext-pen – It is a requirement that we have two epi-pens/jext-pens for each affected child in school.**
- Emergency inhalers are held in school in case a child's inhaler should fail or we are unable to access children's inhalers, e.g. in the the event of evacuation. A Parental Agreement to administer emergency Salbutamol/Ventolin medicine MUST be held before the emergency inhaler can be administered.
- Medication for pain relief should never be administered without first checking maximum doses, expiry date and the time of the last dose. Parents/carers should be informed via the child's organiser of any pain relief administered in line with their signed agreement/ IHP.
- Controlled drugs prescribed to a pupil should be stored in a secure container and a record kept of doses administered and the amount of controlled drug held in school.
- At the end of the school year or upon expiry of any medication, it should be returned to parents/carers to arrange safe disposal.
- Sharps boxes should always be used for the disposal of needles and other sharps.

- Medication should not be administered to anyone other than the named recipient and should never be administered if it is out of date.

Record keeping

Written records are kept of all medicines held for and administered to children to provide evidence that agreed procedures have been followed.

Information

Children with serious conditions will have their photo and a brief description of their condition in key confidential areas of the school. Children with medical conditions which may require emergency attention, eg anaphylaxis, diabetes, will have Individual Healthcare Plans which will be brought to the attention of key adults.

Emergency procedures

Where a child has an IHP, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

School trips and residential visits

We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible. Risk assessments will be obtained or carried out, provision made in IHPs and staff will receive suitable training where applicable.

During educational visits children may carry their inhalers, Epipens or diabetes related items with the agreement of the group leader. Controlled drugs will remain with the group leader and administered in line with prescribed instructions.

Sporting activities

Our PE curriculum and provision of sporting activities enables all pupils to take part in ways which are appropriate to their abilities. Any restrictions on a particular pupil's ability to participate in PE will be clearly identified and incorporated into the pupils IHP.

Unacceptable practice

Although staff should use their discretion and judge each case on its merits with reference to the child's IHP, it is not generally acceptable practice to:

- prevent children from easily accessing their medication;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents/carers; ignore medical evidence or opinion (though this may be challenged);
- prevent children with medical conditions accessing the full curriculum, unless specified in their Individual Healthcare Plan;
- penalise children for their attendance record where this is related to their medical condition, e.g. hospital appointments;
- prevent children from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- require parents/carers to attend school to administer medication, unless it is medication that should have been administered at home. If this is the case and the child's well-being and that of other is affected then it is reasonable to contact parents/carers to ask them to come to school to administer it;

- Require parents/carers to provide medical support to their child, including toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs;
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including trips, e.g. by requiring parents to accompany the child.

Liability and Indemnity

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk and covers staff providing support to pupils with medical conditions.

Insurance policies provide liability cover relating to the administration of medication, but individual cover may need to be arranged for any healthcare procedures. Any requirements of the insurance such as the need for staff to be trained should be made clear and complied with.

Complaints

Should parents/carers or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Confidentiality

Whilst medical and health information will be treated confidentially, in some cases in the interests of the pupil's safety, information about their condition and treatment will need to be shared. In these cases, we will ensure that important information about particular health needs will only be communicated to relevant teaching and support staff following consent from parents/carers and pupils. Specific health needs of individual pupils will only be shared with peers after consent from parents/carers and pupils.

Prepared by:	First Aid Administrator	Responsibility of:	Headteacher First Aid Administrator
Agreement date:	Spring Term 2017	Review Date:	Spring Term 2019
<p>This Policy was prepared giving due regard to the disabilities and/or special education needs, age, race, religion or belief, sex/sexual orientation, gender/gender reassignment, marriage and civil partnership, pregnancy and maternity of the children and staff at Witton Middle School and its community.</p> <p>This Policy appears on the school website.</p>			

WITTON MIDDLE SCHOOL

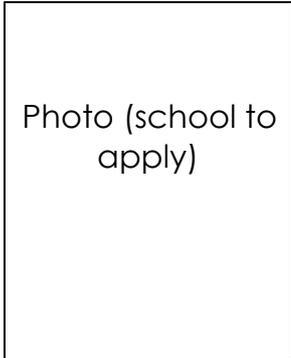


Individual Healthcare Plan

Name: _____

Date of Birth _____ Class: _____

Address: _____



Medical condition(s): _____

Date: _____

Review Date: _____

Family Contact Information

Name: _____

Name: _____

Relationship to child: _____

Relationship to child: _____

Home: _____

Home: _____

Work: _____

Work: _____

Mobile: _____

Mobile: _____

Doctor's Surgery & Tel No: _____

Clinic/Hospital Contact: _____

Triggers/signs/symptoms: _____

Daily care requirements:

a) at home _____

b) in school _____

Medication to be held/administered in school (names/dosage/times/expiry dates):

Medication to be administered by : Child Staff

Is supervision required: Yes No

What constitutes an emergency and what action/treatment is necessary:

Key support staff in school:

Specific support required:

Arrangements for school trips/visits:

Staff training needed/undertaken (who/what when):

Plan developed with:

Signature

Print name

_____ (Parent/Carer)

_____ (Staff)
_____ (Other)



WITTON MIDDLE SCHOOL

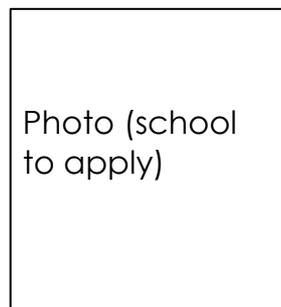
Agreement to administer medicine in school

Name: _____

Date of Birth _____ Class: _____

Start date: _____

End date: _____



Medical condition(s): _____

Symptoms: _____

Medication to be held/administered in school (name/dosage/time/expiry date):

Self-administer Yes No

Contact details:

Name: _____

Relationship to child: _____

Home: _____

Work: _____

Mobile: _____

Name: _____

Relationship to child: _____

Home: _____

Work: _____

Mobile: _____

Medication must be delivered to the school office.

Signed..... Date

Parent/Carer



**Parental Agreement to administer emergency
Salbutamol / Ventolin medicine**

From 1st October 2014 the Human Medicines (Amendment) (No2) Regulations 2014 will allow schools to buy Salbutamol inhalers, without a prescription, for use in emergencies.

The emergency Salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.

The inhaler can be used if the pupil's prescribed inhaler is not available (for example, because it is broken, or empty).

- I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler.
- My child has a working, in date inhaler, clearly labelled with their name, which has been provided to the office.
- In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable. I consent for my child to receive Salbutamol / Ventolin from the Emergency Kit held in school for such emergencies.

Name of Child	
Class	
Name of Parent/Carer	
Signature(s)	
Date	