

LACON

CHILDE

SCHOOL

…more than just a school



**SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY**

**September 2022**

 **Review Date: September 2023**

**Principles:**

Many pupils will, at some time, have a medical condition which may affect their participation in school activities. For many, this will be a short-term condition. Other pupils have medical conditions which, if not properly managed, could limit their access to education (including school trips and PE). Such pupils are regarded as having ‘medical needs’.

Most pupils with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal activities. However, school staff may need to take extra care in supervising some activities, to make sure that these pupils and others are not put at risk. This policy describes how Lacon Childe School supports the needs of pupils with medical conditions. It also safeguards staff by providing clear guidelines and parameters for the support they offer.

**Aims:**

This 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
* The impact of medical conditions on academic progress is reduced, as well as improving pupils’ self-confidence and self-care

The policy will be implemented by:

* Making sure sufficient staff are suitably trained
* Making staff aware of pupils’ medical conditions, where appropriate
* Making sure there are adequate staff and 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)

The named person with responsibility for implementing this policy is:

Mrs Kara Guise (Assistant Headteacher – Ethos and Culture: Safeguarding).

**Legislation and statutory responsibilities**:

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education’s statutory guidance on supporting pupils with medical conditions at school.

Please also refer to the Equality Act 2010, Keeping Children Safe in Education and the SEND Code of Practice.

**Roles and responsibilities**:

The Governing Body

The governing body has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The Assistant Headteacher (Safeguarding)

The Assistant Headteacher (Safeguarding) 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

Staff Supporting pupils with medical conditions during school hours is not the sole 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.

**Parents**:

Parents will:

* Provide the school with sufficient and up-to-date information about their child’s medical needs
* Ensure their child is well enough to attend school
* 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, and ensure they or another nominated adult are contactable at all times
* Share relevant medical reports and provide names of medical professionals involved with their child and consent for a key staff member to liaise with named medical professionals for the purpose of updates, understanding and/or training.

**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:**

The 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 the pupil starts school, wherever possible. They may also support staff to implement a child’s IHP. Healthcare professionals, such as GPs and paediatricians, will liaise with the school and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

**Equal opportunities:**

Lacon Childe School is clear about the need to actively support pupils with medical conditions to participate as fully as possible in school trips/visits or sporting activities. 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.

**Being notified that a child 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. This may delay start dates whilst liaison between parties, training and/or resourcing takes place for a mid-term transfer.

Individual Healthcare Plans:

The Assistant Headteacher (safeguarding) has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to Katherine Howells (Medical Lead). Plans will be written by/in conjunction with medical professionals, 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 Assistant Headteacher (Pastoral) 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 Plan (EHCP). If a pupil has a special educational need and/or disability, but does not have an EHCP, their needs may 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 following will be considered 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.

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 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**:

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

• Where parental written consent has been received by school

 The school will only accept prescribed medicines that are:

• In-date

• Labelled with a pharmacy label

• Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will only 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.
* 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/epi pens will always be readily available to pupils and not locked away, and where possible, will be carried by the student.
* Medicines will be returned to parents to arrange for safe disposal when no longer required.

**Controlled drugs:**

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone. A pupil who has been prescribed a controlled drug may have their daily dose in their possession if they are competent to do so, but they must not pass it to another pupil to use. School should be informed, aware and agree that the pupil can be carrying this medication.

All other controlled drugs are kept in a secure, locked cupboard and only named staff should 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. A list of controlled drugs which are commonly encountered and at risk of misuse can be found here: https://www.gov.uk/government/publications/controlled-drugs-list--2/list-of-most-commonlyencountered-drugs-currently-controlled-under-the-misuse-of-drugs-legislation.

**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.

**Unacceptable practice**:

School staff should use their discretion and judge each case individually with reference to the pupil’s 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 participating in normal school activities, unless this is specified in their IHPs
* 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
* 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

**Emergency procedures**:

* Staff will follow the school’s normal procedures in the case of a medical emergency (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.

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 Assistant Headteacher (Pastoral).

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 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 receive training so that they are 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 be provided for new staff during their induction.

**Record keeping**:

The Medical Lead will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school.

Parents will be informed if their child has been unwell at school. Administration of First Aid intervention is also recorded.

IHPs are kept in a readily accessible place which all staff are aware of in the Staff Resources folder.

**Liability and indemnity**:

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the school’s level of risk. This will include insurance arrangements which cover staff providing support to pupils with medical conditions and provide liability cover relating to the administration of medication.

Individual cover may need to be arranged for some more complex healthcare procedures and this will be done in consultation with relevant professionals.

**Complaints**:

Parents with a complaint about their child’s medical condition should discuss these directly with the Medical Lead in the first instance. If the Medical Lead cannot resolve the matter, they will refer the matter to the Assistant Headteacher (Pastoral) and/or direct parents to the school’s complaints procedure.

**Monitoring arrangements**:

This policy will be reviewed and approved by the Governing Body at least every two years.

**Links to other policies**

This policy links to the following policies:

• Complaints Procedure

• Equality Policy

• Health and Safety Policy

• Safeguarding and Child Protection Policy

• SEND Policy

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