Policy:	Supporting children with medical conditions

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Key changes/notes:
This is a DfE Model-based policy. There are no changes from the previous version.

Statutory Requirement:	Yes – Department of Education
Proposed Renewal Cycle:	Annually
Proposed annual review authority:	Head Teacher
Policy Section:	Governance

Let the children come to me and do not hinder them, for the kingdom of God belongs to such as these." (Luke 18:16) This policy is based upon our Christian values of thankfulness, respect, honesty, love and resilience.

Purpose of the Procedure

1.1 The Children and Families Act 2014 places a duty on the Governing Body and Senior Leadership Team to make arrangements for supporting pupils at the school with medical conditions. Pupils with medical conditions cannot be denied admission or excluded from school on medical grounds alone unless accepting a child in school would be detrimental to the health of that child or others.

1.2 The aim of this document is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role and achieve their potential.

Scope of the Procedure

2.1 The procedure applies to all employees.

2.2 The procedure should be read in conjunction with the relevant statutory guidance; Supporting Pupils with Medical Conditions (DfE) which provides greater detail regarding notification and individual healthcare plans, and with the school's Intimate Care Policy.

2.3 All staff will be expected to have an awareness of those children with medical conditions, and how to respond in an emergency. If staff are in doubt they will call 999 and ensure the pupil is not left unattended. This policy will form part of the school's induction procedures.

Roles and Responsibilities

3.1 Supporting a child with a medical condition during school hours is not the sole responsibility of one person. Collaborative working arrangements and working in partnership will ensure that the needs of pupils with medical conditions are effectively met.

3.2 The Governing Body will ensure that the school develops and implements a policy for supporting pupils with medical conditions. It will ensure that suitable accommodation for the care of pupils with medical conditions is available. It will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. It will ensure that the appropriate level of insurance is in place to cover staff providing support to pupils with medical conditions.

3.3 The Headteacher will ensure that the school's policy is developed and effectively implemented with partners. She will ensure that all staff are aware of the policy and understand their role in its implementation. She will make sure that sufficient numbers of staff are available to implement the policy and deliver against all Individual Healthcare Plans, including in emergency and contingency situations. The Headteacher has the overall responsibility for the development of Individual Healthcare Plans. She will make sure that school staff are appropriately insured and

are aware that they are insured to support pupils in this way. The Headteacher will contact the school nursing service in the case of any child who has a medical condition that may require support at school.

3.4 School staff may be asked to provide support to pupils with medical conditions, including the administering of medicines and intimate care, although they cannot be required to do so unless it is covered within their Job Description. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. Any member of staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help. Training will be provided to all staff. A pupil taken by ambulance to hospital will be accompanied by a member of staff who will stay with the child until a parent or carer arrives.

Appropriately trained staff (those trained by a member of the medical profession) can use EpiPens and defibrillators, administer injections, dispense prescribed oral medicines and apply splints and topical medicine and other medical support covered for example within a First Aid certificate or where appropriate training has been provided. All medication must be administered as prescribed by a medical professional. School staff may also be asked to provide other support, for example; assisting with feeding, including enteral feeds, or toileting, including changing colostomy bags and catheterisation.

3.5 School nurses are responsible for notifying the school when a child has been identified as having a medical condition which will require support at school. School nurses may support staff on implementing a child's Individual Healthcare Plan and provide training, advice, and liaison.

3.6 Other healthcare professionals, including GPs and paediatricians notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.

3.7 Pupils will be fully involved in discussions about their medical support needs and will contribute as much as possible to the development of their individual healthcare plan since they know best how their condition affects them. Other pupils in the school will be encouraged to be sensitive to the needs of those with medical conditions.

3.8 Parents/carers will provide the school with up-to-date information about their child's medical needs. They will be involved in the development and review of their child's individual healthcare plan. They will carry out any action they have agreed to as part of its implementation and ensure they or another nominated adult are contactable at all times. Where possible parents/carers should be encouraged to request that medication is prescribed in dose frequencies which enable it to be taken outside of school hours. Where possible parents/carers should be encouraged to support their child in learning, for example, to self catheterise, monitor own blood sugar levels, administer their own insulin. This is not an exhaustive list.

3.9 Local Authorities should work with schools to support pupils with medical conditions to attend full time.

3.10 Health services can provide valuable support, information, advice and guidance to schools and their staff to support children with medical conditions at school.

3.11 Clinical commissioning groups (CCGs) should ensure that commissioning is responsive to children's needs and that health services are able to co-operate with schools supporting children with medical conditions.

3.12 Ofsted inspectors will consider the needs of children with long term or chronic medical conditions, and also those of disabled children or children with SEN. The school will demonstrate that the policy dealing with medical needs is implemented effectively.

Staff Training and Support

4.1 Any member of school staff providing support to a pupil with medical needs will receive suitable training. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. Staff must not send a child who becomes ill to the school office unaccompanied or with another child.

4.2 All children will know where their medicine is kept.

4.3 Healthcare professionals, including the school nurse can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

4.4 The school will make arrangements for whole school awareness training so that all staff, including new staff, are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy. This training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs. Parents can also contribute by providing specific advice.

Managing Medicines on the School Premises

5.1 Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.

5.2 No child will be given prescription or non-prescription medicines without their parent's written consent.

5.3 A child under 16 should never be given medicines containing asprin unless prescribed by a doctor.

5.4 The school will only accept prescribed medicines that have been prescribed by an appropriate practitioner. The medication must be in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. (The exception to this is insulin which must still be in date, but will generally be available to schools inside an insulin pump, rather than in its original container). Consent forms for medication are available in the school office.

5.5 All medicines will be stored safely in the locked medicine cabinet in the staffroom. In rare circumstances.

5.6 Staff administering a controlled drug and/or over the counter medication (OTC) must do so in accordance with the prescriber's instructions and/or in accordance with the recommended dosage. The school will record medication given on Medical Tracker, which will email parents to inform them a dose has been given.

5.7 Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be readily available in a secure location. At St Mary's this is the medicine cupboard in the staffroom.

5.8 During school trips, the member of staff in charge of first aid on the trip will carry all medicines and medical devices required.

5.9 If a pupil refuses to take their medication or carry out a necessary procedure they will not be forced by staff. The parent/carer will be informed as soon as possible.

5.10 Sharp boxes will be used for the disposal of needles and other sharps. When no longer required, medicines should be returned to the parent to arrange for safe disposal. Medication no longer required or out of date should not be allowed to accumulate.

Unacceptable Practices

Each child's case will be judged on its own merit, and with reference to the child's Healthcare Plan, however it is not generally acceptable practice to:

* prevent children from accessing their inhalers and medication when necessary.

* Assume that every child with the same condition requires the same treatment.

* Ignore medical evidence or opinion.

* send children with medical conditions home frequently, or prevent them from staying for normal school activities, including lunch, unless this is specified in a Healthcare Plan.

* if a child becomes ill, send them to the school office with someone unsuitable or unaccompanied.

* penalise a child/family for attendance if their absence is related to their medical condition.

* prevent pupils from drinking, eating or taking toilet breaks in order to manage their health condition effectively.

* require parents to attend school to administer medication or provide medical support.