

MOUNT PLEASANT PRIMARY SCHOOL

Supporting Pupils at School with Medical Conditions Policy

To be read in conjunction with:

- Equality and Accessibility Plan
- Administrations of Medicine Policy
- Intimate Care Policy
- Attendance Policy
- Special Educational Needs Policy
- Health and Safety Policy
- Safeguarding Policy
- Dudley Asthma Policy
- Offsite Visits Policy

1. Title of policy	Supporting Pupils at School with Medical Conditions
2. Date adopted by Governors	Autumn Term 2015
3. Name of Chair of Governors	Mr S Jarvis
4. Name of Head teacher	Mrs J Hartill
5. Person or team responsible for the document	Mrs J Hartill
6. Planned date for review.	Autumn Term 2018

Introduction

Most pupils at some time have a medical condition, which could affect their participation in school activities or potentially reduce their access to the school curriculum. This may be a short term situation or a long term medical conditions which, if not properly managed, could limit their access to education.

Some medical conditions could render the child, 'disabled', or classified as 'SEN', where this is the case the related policies and duties would also apply.

Though a Teacher can volunteer to administer medication, Teaching staff are not required to administer medication or to support pupils with medical needs as part of their pay and conditions of service. However, to put a child at risk or failure to act in an emergency situation, could result in a teacher being in breach of their duty of care.

Key Points

Pupils at school with medical conditions should be properly supported so that they have full access to the whole curriculum, including school visits offsite and physical education where this is reasonably possible (eg children with epilepsy cannot work at height).

The Governing Body will ensure that arrangements are in place in school to support all children with known medical conditions.

The Governing Body will ensure that school leaders consult with health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

In meeting its duty, the Governing Body will delegate its functions and monitoring of this policy (and related policies) to the Safeguarding Sub-Committee.

In fulfilling their duty, the Governing Body insist that it is not acceptable to:

- Prevent a child from accessing their medication when required.
- Prevent a child from taking part in any area of the curriculum due to the lack of reasonable adjustments.
- Send a child home frequently because the school cannot manage the medical condition.

Notification that a child has a Medical Condition

The school may be notified by a parent, or known professional, that a child has a medical condition. In the majority of cases, there are only a small number or no adjustments to make for the child, beyond staff being made aware of the identity of the child and the condition and its related symptoms. A child may require the administration of medicines which can be organised via the school office (See Administrations of Medicine Policy).

Where a case is more complex, more severe or a less well known condition, the school will seek further advice from other professionals; School Nurse, Consultant or GP, PIMIS, Hospital School Liaison eg BCH, Visual/Hearing impaired unit etc. Where a parent has presented information to the school regarding more complex medical conditions, the school will ask for some form of medical evidence to ensure that the correct and most appropriate support is put in place.

The school also has a duty to safeguard children, particularly with the possibility of 'Fabricated Illness', whilst it is the duty of a parent to keep the school informed of any change to the child's condition, the parent may still be asked to provide on-going evidence, this may be in the form of prescriptions or letters from consultants etc. and the School Nurse may still be asked to verify the accuracy of the information that the school has been given.

Individual Health Care Plans

Where a medical condition fluctuates or where there is a high risk that emergency intervention will be needed, especially where medical conditions are long-term and complex, the Headteacher, health professional and parent, may agree that an Individual Health Care Plan would be appropriate. However, not all children require Health Care Plans, for instance, children who suffer with Asthma would not normally require an Individual Plan. (See Dudley Asthma Policy)

The plan is normally created by the School Nurse, and should not be a burden on school, but should capture the key information and actions that are required to support the child effectively. The level of detail required in the plan will depend on the complexity of the child's condition and the degree of support needed. This is important as children who may have the same condition may require very different support. Where a child has SEN but not an EHC plan, their special educational needs should be mentioned in their Health Care Plan.

There should be a clear timescale for the plan, or a date when the plan will need to be reviewed, this will be at least annually or earlier if evidence is presented that the child's needs have changed. Only the school nurse can make amendments to the Health Care Plan, having been satisfied that the changes are necessary to ensure that the child continues to be supported appropriately.

The Health Care Plan is securely stored, and in accordance with data protection, the staff who need to know about the child will be informed of the Care Plan.

The Health Care Plan should include;

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs; dose of medication and possible recovery/change of symptoms times.
- The level of support needed, particularly if a child is self-managing their medication
- What to do in an emergency, whom to contact and contingency arrangements.

Intimate care

Some children require intimate care proceedings as part of their care and support in school. This may or may not be part of a Health Care Plan, but can 'stand-alone'. (See Intimate Care Policy)

Pupils who are Self-Managing their Medication

The school will support families and Health Care professionals who are working to encourage a child to self-manage or self-administer their own medication eg diabetes. The procedures for administering medication will remain in place, that is, two adults to oversee the administration of the medication. (See Administration of Medicines Policy)

Attendance

Regular and high levels of attendance is extremely important for every child. Where the school has been informed about a child having a medical condition which may limit the amount of time the child can reasonably spend at school, then the Headteacher will use their discretion to authorise absences due to illness, appointments or time in hospital or recuperation time at home. The parent will be asked to provide evidence of appointments or invitations to hospitals for treatments or operations. Where the absence will be prolonged, the Headteacher will make a referral to Home

and Hospital Tuition and will liaise with them in order to continue to give educational support to the child. (See Attendance Policy) Where the Headteacher has agreed prolonged absences with the parent, and the absences have been authorised, there will be no referral to the Education Investigation Service (EIS) as the absences have been deemed to be genuine.

Where a child is returning to school following a period of hospital education or home tuition, the SENDCO will liaise with the teaching professionals concerned and determine the level of support needed to reintegrate the child back into school and help close any attainment gaps that have occurred as quickly as possible.

Staff Training

The Governing Body recognise the need for staff to be appropriately trained in order to give parents and pupils the confidence that school can provide effective support for medical conditions in school.

Currently there are staff trained in:

- Basic First Aid
- First Aid At Work
- Paediatric First Aid
- Safer Handling (Lifting and pushing wheelchairs)
- Diabetes Care

Annually staff have updates on:

- Asthma
- Epi-pens
- Epilepsy

Safe Storage of Medication

Medicines are generally stored out of the reach of children and in a locked cupboard or refrigerated if this is necessary. Inhalers are kept in classrooms or carried by the children if they are in KS2, spare/emergency inhalers are stored in the staff room. Epi-pens are kept in the classroom and taken to areas where the child is in attendance eg outside for PE or to the hall during lunchtimes, spare epi-pens are kept in the staffroom.

School Visits Offsite and Residential Visits

When preparing to take children offsite, staff must consider the needs of any child with a disability or medical condition. They must determine what reasonable adjustments must be made to ensure that the child can safely take part in the visit, including taking a copy of the Care Plan/Emergency procedures with them. Parents must be informed that their child is going off-site and must ensure that staff have up-to-date contact numbers and up-to-date information about their child's condition currently.

Any child with a Health Care Plan must be listed on the Risk Assessment as part of the usual risk assessment procedure.

The child's medication must be taken on the visit and the procedure for the safe administration of any medication must be followed.

No child will be excluded from a visit on the basis of their medical condition.

Other Medical Conditions

Public Health Information sheets give the school information regarding a range of medical conditions. They also state clearly the symptoms, how the condition should be treated, and the time that the child needs to spend away from school.

Emergency Procedures

An emergency could arise for any child, but where an Individual Health Care Plan is in place, the emergency procedures must be followed.

If a child needs to be taken to hospital, a designated member of staff should stay with the child until the parent arrives, or if a parent has not yet arrived by the time the ambulance arrives, the designated member of staff will travel with the child to the hospital and remain with the child until the parent arrives.

Roles and Responsibilities

Mrs Round is the named person for the usual administration of medicines during the school day. If absent, then another trained member of staff will be available (Mrs Webster).

Mrs Woodhall is the SENDCO and is responsible for ensuring that pupils are supported to reach their educational milestones appropriately.

Mrs Hartill, Headteacher is responsible for the creation and review of the Care Plan (in conjunction with the school nurse) and is also responsible for Risk Assessments and ensuring that every child accesses the curriculum.

Complaints

If a parent has a complaint regarding the care or treatment of their child in school, then they are advised to make an official complaint to the Governing Body. The Complaints Procedure can be found on the school website (www.mount.dudley.sch.uk)