**Supporting Pupils with Medical conditions Policy**

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**Pinders Primary School**

**Supporting Pupils with Medical Conditions Policy**

**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 governing board will implement this policy by:

* Making sure sufficient staff are suitably trained
* Making staff aware of pupil’s condition, 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 relevant pupils
* Developing and monitoring individual healthcare plans (IHPs).

**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 boards to make arrangements for supporting pupils at their school with medical conditions. It is also based on the Department for Education’s statutory guidance: Supporting pupils at school with medical conditions.

**Roles and Responsibilities**

The Governing body:

The governing board 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 Head Teacher:

The head teacher 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;
* 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.

School 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:

* 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 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

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:

Healthcare professionals, such as GPs and paediatricians, will liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

**Individual health care plans**

The head teacher 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 not a consensus, the head teacher 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 statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will 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.

**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 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 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.

**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. All controlled drugs are kept in the school office and in secure cupboards in the classroom where appropriate. Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

**Managing Medicine**

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. 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. 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 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.

**Emergency 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.

**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 head teacher. 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 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**

Written records are kept of all medicine administered to pupils via CPOM’s. Parents will be informed if their pupil has been unwell at school.

**Complaints**

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

**Links to other policies**

* Accessibility plan
* First aid
* Health and safety
* Safeguarding
* SEND Policy

# Template A: individual healthcare plan

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| --- | --- | --- | --- | --- |
| 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. |  | | | |

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| --- | --- |
| 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

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

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Daily care requirements

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

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Arrangements for school visits/trips etc

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Other information

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

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

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Plan developed with

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Staff training needed/undertaken – who, what, when

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Form copied to

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