



# **Supporting Pupils with Medical Conditions Policy**

Report for Wayland Junior Academy Watton

2015 -2016

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## **Supporting Pupils with Medical Conditions**

From 1 September 2014 governing bodies have a duty to make arrangements to support pupils at Wayland Junior Academy Watton with medical conditions.

Pupils at the Academy with medical conditions should be properly supported so that they can play an active part in the Academy, remaining healthy and able to achieve their academic potential, with full access to education, including school trips and physical education.

Section 100 of the **Children and Families Act 2014** places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

### **Definition of the Term Medical Condition Used in this Context**

A medical condition that is long term with acute episodes, requires on-going support, and involves the need for medication and/or care whilst at school. The condition will need monitoring and could require immediate intervention in emergency circumstances.

Some children with medical conditions may be disabled. Where this is the case the governing body must comply with their duties under the **Equality Act 2010**. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision.

### **Roles and responsibilities**

The governing body must ensure that the arrangements they put in place are sufficient to meet their statutory responsibilities and should ensure that policies, plans, procedures and systems are properly and effectively implemented. This aligns with their wider safeguarding duties.

The Governing body will ensure that:

- The arrangements they set up include details on how the school's policy will be **implemented** effectively, including **a named person** who has overall responsibility for policy implementation.
- That the Academy's policy covers the role of **individual healthcare plans**, and who is responsible for their development, in supporting children at WJAW with medical conditions.
- That **written records** are kept of all medicines administered to children.
- That their arrangements are clear and unambiguous about the need to actively support pupils with medical conditions to **participate in school trips and visits, or in sporting activities**, and not prevent them from doing so.
- That **staff are properly trained** to provide the support that students need.
- That the Academy's policy sets out what should happen in an **emergency situation**.
- That the appropriate **level of insurance** is in place and appropriately reflects the level of risk, with **risk assessment** being carried, when appropriate.
- **Parents provide** WJAW with sufficient and **up-to-date information** about their child's medical needs. This will be prompted with an annual data check.

### **Principal's Responsibilities**

The Academy's Principal will ensure that the Academy's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. They should ensure that all staff that need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

The Principal has overall responsibility for the development of Individual Healthcare Plans. They should also make sure that staff are appropriately insured and are aware that they are insured to support pupils in this way.

## **School Staff**

Any member of staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. 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.

Staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. 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.

## **Statement of Intent**

All children attending the Academy with a medical condition must have an Individual Healthcare Plan.

The academy, healthcare professionals and parents/carers should agree, based on evidence, when an Individual Healthcare Plan should be put in place (diagram 1 shows the steps to do this). Where there is a discrepancy an appropriate healthcare professional should be asked to arbitrate.

Individual Healthcare Plans must:

- Be clear and concise.
- Be written in partnership with parents, child, healthcare professionals and key staff.
- Be reviewed annually or when there is a change in the condition of the child.
- Be easily accessible whilst preserving confidentiality. Securely stored by First Aid lead/Designated teacher.
- Outline educational provision if the student is unable to attend school.
- Contain details of the medical condition, its triggers, signs, symptoms and treatments.
- Include relevant SEN information.

- Provide details of the student'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, modifications to buildings, furniture or equipment, and environmental issues e.g. crowded corridors, travel time between lessons.
- Outline specific support for the student's educational, social and emotional needs – for example, how absences will be managed, changes to the school day and details of a personalised curriculum, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions etc.
- Outline the level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their
- Medication, this should be clearly stated with appropriate arrangements for monitoring.
- State who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable.

The Academy will:

- Ensure that students with medical conditions are identified as they transfer to their next school and through the on-going annual data check process.
- Arrange for written permission from parents/carers and the Principal for medication to be administered by a member of staff, or self-administered by the student during school hours.
- Have separate arrangements in place for school trips or other school activities outside of the normal school timetable that will ensure the student can participate, e.g. risk assessments.
- Designate individuals to be entrusted with information about a student's condition; where confidentiality issues are raised by the parent/child.
- Have an identified key worker trained to specifically meet the needs of students with a statement of SEN linked to a medical condition.

- Be clear about what to do in an emergency, including who to contact, and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their Individual Healthcare Plan.
- Make all staff working directly with children are aware of the pupils in the school with medical conditions, through the display in staffroom.
- Provide sufficient training for staff to meet the needs of pupils at the school with medical conditions.

### **Good Practice**

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. Students with a medical condition will not be denied admission or be prevented from taking up a place in school because arrangements for their medical condition have not been made.

Prescription medicines and health care procedures will only be given by staff following appropriate training from medical professionals.

- Staff should use their discretion and judge each case on its merits with reference to the student's Individual Healthcare Plan. Staff should make inhalers and medication easily accessible to students and administer their medication when and where necessary.
- Staff should give individual, personalised care to students even those with the same condition.
- Staff should take the views of the student and their parents into account; act on medical evidence and opinion but challenge it when appropriate.
- Staff should encourage students with medical conditions to remain in school for normal school activities, including lunch, unless this is specified in their Individual Healthcare Plans.
- Staff should supervise students with medical conditions if they become ill.
- Pupils must not be penalised for their attendance record if their absences are related to their medical conditions e.g. hospital appointments.

- Staff should encourage students to drink, eat and take toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Staff should support parents in meeting the medical needs of their child in school by accepting responsibility for the student's medical needs at school and encourage pupils with medical conditions to participate, in all aspects of school life, including school trips.

## **Managing Medicines in WJAW**

The following guidelines are in place and followed for the management and administration of medicines at WJAW:

- Medicines should only be administered at WJAW when it would be detrimental to a child's health or school attendance not to do so.
- No child under 16 should be given prescription or non-prescription medicines without their parent's written consent - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents.
- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed.
- The Academy will only accept prescribed medicines that are in-date, labelled, provided in the original container 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 pen or a pump, rather than in its original container.
- All medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately. They should know who holds the key to the storage area. Medicines and devices - asthma inhalers, blood glucose testing meters and adrenaline pens - should be always readily available to children and not locked away.

- A child prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs prescribed for a pupil securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in school.
- Staff may administer a controlled drug to the child for whom it has been prescribed. The academy will keep a record of all medicines administered to individual
- Any side effects of the medication to be administered at school should be noted
- When no longer required, medicines should be returned to the parent to arrange for safe disposal.

## **Emergency Situations**

Where a child has an individual healthcare plan, this should 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. If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

## **Contact Details**

Designated Lead Professional for children with Medical Conditions is Mrs Anne Williams.

## **Supporting Documents**

Equality Act 2010

SEN Code of Practice

SEN Local Offer

Supporting Children at School with Medical Conditions - DfE April 2014

Templates for Supporting Pupils with Medical Needs - DfE April May 2014

Guidance on the Use of Emergency Salbutamol Inhalers in Schools - DfE Health  
September 2014

Diabetes Guidelines for Schools - East of England Paediatric Diabetic Network May 2014

Signed by the Chair of Governors:

A handwritten signature in black ink, consisting of a stylized initial 'K' followed by a long horizontal stroke that tapers to the right.

Date: 12<sup>th</sup> May 2016

Diagram 1 **Model process for developing individual healthcare plans**

