Cannon Lane Primary School

Supporting Pupils with Medical Conditions Policy

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Statement of Intent

Cannon Lane Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full time curriculum or as much as their medical condition allows. This policy has been developed in line with the Department of Education's statutory guidance – "**Supporting pupils at school with medical conditions**" – under a **statutory duty** from section 100 of the Children and Families Act 2014. The statutory duty came into force on the 1st September 2014.

1. **Key Roles and Responsibilities**

The Local Authority (LA) is responsible for:

- Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- Providing support, advice/guidance and training to schools and their staff to ensure individual Healthcare Plans (IHP) are effectively delivered.
- Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to the health need and who otherwise would not receive suitable education.

The Governing Board of Cannon Lane Primary School

- Ensure arrangements are in place to support pupils with medical conditions.
- Ensuring the policy is developed collaboratively across the services, clearly identifies roles and responsibilities and is implemented effectively.
- Ensuring that the Supporting Pupils with Medical Conditions does not discriminate on any grounds including, but not limited to protected characteristics; ethnicity/national/origin, religion or belief, sex, gender reassignment, pregnancy and maternity, disability or sexual orientation.
- Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school life, participate in school visits/trips/sporting activities, remain healthy and achieve their academic potential.
- Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- Ensuring written records are kept of all medicines administered to pupils.
- Ensuring the policy sets out procedures in place for emergency situations.
- Ensuring the level of insurance in place reflects the level of risk.
- Handling complaints regarding this policy as outlined in the school's Complaints Policy.

The Headteacher is responsible for:

- Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- The day to day implementation and management of this policy.
- Liaising with healthcare professionals regarding the training required for staff.
- Identifying staff that need to be aware of a child's medical condition.
- Developing Individual Healthcare Plans (IHPs).
- Ensuring a sufficient number of trained members of staff are available.

- Ensure sufficient staff members are identified to cover absences to implement the policy and deliver IHP's in normal, contingency and emergency situations.
- If necessary, facilitating the recruitment of staff for the purpose of delivering the policy. Ensuring more than one staff member is identified to cover absences and emergencies.
- Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- Continuous two way liaison with school nurses and school in the case of any child who has or develops an identified medical condition.
- Ensuring confidentiality and data protection.

Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help.
- Knowing where controlled drugs are stored and where the key is held.
- Taking account of the needs of pupils with medical conditions in lessons.
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they have agreed to undertake a medication responsibility.
- Allowing inhalers, adrenaline pens and blood glucose testers to be held in an accessible location, following DfE guidance.

Parents and carers are responsible for:

- Keeping the school informed about any new medical condition or changes to their child/children's health.
- Participating in the development and regular reviews of their child's IHP.
- Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- Carrying out actions assigned to them in the IHP with particular emphasis on, they or a nominated adult, being contactable at all times.

2. Training of Staff

- Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.
- The clinical lead for each area/session will be named on each IHP.
- No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

3. Medical Conditions Register/List

- Admission forms request information on pre-existing medical conditions. Parents can inform the school at any point in the school year if a condition develops or is diagnosed.
- A medical conditions list or register will be kept, updated and reviewed regularly by the school Welfare Officers. The class teachers, support and lunchtime supervisors will be given an overview of the list for the pupils in their care.
- Parents/carers should be assured data sharing principles are adhered to.

4. Individual Healthcare Plans (IHPs)

- Where necessary the Headteacher OR Deputy Headteacher will make the final decision on an Individual Healthcare Plan (IHP) in collaboration with the pupil, parents/carers, and Special Educational Needs Co-ordinator (SENCO) and medical professionals.
- IHPs will be easily accessible, to all relevant staff, including supply/agency staff, whilst preserving confidentiality. Assistant Head Teachers have the responsibility of informing supply and agency staff of IHPs within their phase.
- If consent is sought from parents, a photo and the instructions may be displayed in staffrooms. However, in the case of conditions with potential of life-threatening implications the information should be available and accessible to everyone.
- IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- Where a pupil has an Education, Health and Care plan or special needs statement, the IHP will be linked to it or become part of it.
- Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between all relevant parties will ensure that the IHP identifies the support the child needs to reintegrate.

5. Education Health Needs Referrals

- All pupils of compulsory school age, who because of illness lasting 15 days or more, would not otherwise receive a suitable full-time education, are provided for under the local authority's duty to arrange educational provision for such pupils.
- In order to provide the most appropriate provision for the condition, referrals will be forwarded where there is a medical diagnosis from a medical Consultant.

6. Medicines

- Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.
- If it is not possible, prior to staff members administering any medication, the parent/carers of the child must complete and sign a parental consent to administration of medicine form.
- No child will be given any prescription or non-prescription medicines without written parental/carer consent other than exceptional circumstances.
- Medicines MUST be in date, labelled and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.

- A maximum of four weeks' supply of the medication may be provided to the school at one time.
- Schools should store prescribed medicines securely in a non-portable container and only named staff should have access. These should be easily accessible in an emergency. A child who has been prescribed relief treatments will be able to have it in their possession if they are competent to do so. This will be monitored by school staff.
- Medications will be stored in the Welfare Room.
- Any medications left over at the end of the course will be returned to the child's parents/carers.
- Written records will be kept of any medication administered to children.
- Pupils will never be prevented from accessing their medication.
- General posters about medical conditions (diabetes, asthma, epilepsy etc.) are recommended to be visible in the staff room.
- Cannon Lane Primary School cannot be held responsible for side effects that occur when medication is taken correctly.
- Staff will not force a pupil to take medication. If the pupil refuses to comply with the agreed health procedure, the resulting actions will be promptly recorded in writing and parents will be informed immediately.

7. Emergencies

- Medical emergencies will be dealt with under the school's emergency procedures which will be communicated to all relevant staff so they are aware of signs and symptoms.
- Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents/carers arrive.

8. Day Trips, Residential Visits and Sporting Activities

- Arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- To comply with best practice, risk assessments should be undertaken in line with Health and Safety executive guidance on school trips, in order to plan for including pupils with medical conditions. Consultation with parents, healthcare professionals etc. on trips and visits will be separate to the normal day to day IHP requirements for the school day.

9. Avoiding Unacceptable Practice

Each case will be judged individually, but in general the following is not considered to be acceptable:

- Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assuming that pupils with the same condition require the same treatment.
- Ignoring the views of the pupil and/or their parents (unless it is deemed to be in the best interests of the child).
- Ignoring medical evidence or opinion
- Sending pupils home frequently or preventing them from taking part in activities at school (although each care will be assessed in accordance with an IHP).

- Sending the pupil to the medical room or school office alone or with an unsuitable escort if they become ill.
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
- Creating barriers to children participating in school life, including school trips.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

10. Insurance

- Teachers who undertake responsibilities within this policy will be assured by the Headteacher that they are covered by the LA/school's insurance.
- Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Headteacher.

11. Complaints

- All complaints should be raised with the school in the first instance.
- The details of how to make a formal complaint can be found in the School Complaints Policy.

12. Definitions

- 'Parent(s)' is a wide reference not only to a pupil's birth parents but to adoptive, step and foster parents, or other persons who have parental responsibility for, or who have care of, a pupil.
- 'Medical condition' for these purposes is either a physical or mental health medical condition as diagnosed by a healthcare professional which results in the child or young person requiring special adjustments for the school day, either ongoing or intermittently. This includes; a chronic or short-term condition, a long-term health need or disability, an illness, injury or recovery from treatment or surgery. *Being 'unwell' and common childhood diseases are not covered.*
- 'Medication' is defined as any prescribed or over the counter treatment.
- 'Prescription medication' is defined as any drug or device prescribed by a doctor, prescribing nurse or dentist and dispensed by a pharmacist with instructions for administration, dose and storage.
- A 'staff member' is defined as any member of staff employed by Cannon Lane Primary School.

Appendix - Supporting Pupils with Medical Conditions Flowchart

Parent or healthcare professional informs school that child has medical condition or is due to return from long-term absence, or that needs have changed.



Headteacher or delegated SLT member co-ordinates meeting to discuss child's medical needs and identifies member of school staff who will provide support to the pupil.



Meeting held to discuss and agree on the need for IHP to include key school staff, child, parent and relevant healthcare professionals and other medical/health clinician as appropriate (or to consider evidence provided by them).



Develop IHP in partnership. Agree who leads on writing it - input from healthcare professionals must be provided.



School staff training needs identified.



Healthcare professional commissions and/or delivers training.



Staff signed off as competent - review date agreed.



IHP implemented and circulated to all relevant staff.



IHP reviewed annually or when condition changes - parent/carer or healthcare professional to initiate.

(From Supporting Children with Medical Conditions (2014) Department of Education).