

# **Stroud Valley Community Primary School**

# **Supporting Children with Medical Needs**

## Introduction

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 (DfE)'s statutory guidance on supporting pupils with medical conditions at school.

#### It aims to ensure that:

- children, staff and parents understand how our school will support pupils with medical conditions
- children with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

### **Roles and Responsibilities**

The Governing Body has ultimate responsibility to make arrangements to support pupils with medical conditions. They will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

## The Headteacher/SENCO will work with medical professional

- 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
- ensure that all staff who need to know are aware of a child's condition
- support in the overall responsibility for development of IHP's
- 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

#### 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 will

- 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, and ensure they or another nominated adult are contactable at all times

#### Children

Children with medical conditions will often be best placed to provide information about how their condition affects them. Children 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.

#### Other Healthcare Professionals

Our local; school nursing team will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and pediatricians, will liaise with the school nursing team and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

# **Individual Healthcare Plans (IHPs)**

When the school is notified that a pupil has a medical condition a meeting will be held as soon as possible to define the IHP.

This will be completed before the child starts the school.

Plans will be developed with the pupil's best interests in mind and will set out what needs to be done; when and 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 no consensus, the headteacher 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.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

IHPs will be linked to, or become part of, any education, health and care (EHCP) plan. If a pupil has SEN but does not have an 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.

#### To be considered:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil'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 and environmental issues, e.g. crowded corridors, travel time between lessons
- specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed; use of rest periods or additional support in catching up with lessons; counselling sessions
- the level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to
  provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for
  when they are unavailable
- who in the school needs to be aware of the pupil's condition and the support required
- arrangements for written permission from parents for medication to be administered by a member of staff, or self-administered by the pupil during school hours

what to do in an emergency, including who to contact and contingency arrangements

## **Managing Medicines**

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

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

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:

- clearly named
- in-date
- labelled
- provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

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 are kept in the school office which is always securely shut and out of reach of children

Medicines will be returned to parents to arrange for safe disposal when no longer required.

### **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 other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

### Pupils managing their own needs

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

# **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 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 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 understand 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.

### Record keeping

Written records of medicines administered to children will be kept for as long as these pupils are at the school.

IHPs are kept in a readily accessible place which all staff are aware of.

### **Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the headteacher / SENCO in the first instance.

If the Headteacher/ SENCO cannot resolve the matter, they will direct parents to the school's complaints procedure.

# **Equal Opportunities**

We will actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

#### Monitoring

This policy will be monitored by the Headteacher and SENCO

Date Policy Ratified by Governors	16/10/2023
Date for next review	October 2025