Supporting Pupils with Medical Conditions Policy



Approved by the Directors: October 2023

School Mission Statement

"To create and sustain, with God's help, a learning, caring and serving community where all people are valued for who they are and who they may become in the light of Jesus Christ."

This school is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.

Introduction

Many pupils will at some point have a medical condition that may affect their participation in school activities. For many, this will be short-term; such as finishing a course of medication. Other pupils have medical conditions that, if not appropriately managed, could limit their access to the full curriculum. Such pupils are regarded as having medical needs and access to the school life should be adapted to their medical needs, enabling them to receive the on-going support, medicines or care that they require at school to help them manage their condition and keep them well.

Most children with medical needs are able to attend school regularly and, with reasonable support from the school, can take part in most normal school activities. However, school staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk. We recognise that medical conditions may impact social and emotional development as well as having educational implications. School will build relationships with healthcare professionals and other agencies in order to support effectively students with medical condition. An Individual Health Care Plan can help schools to identify the necessary safety measures to support pupils with medical needs and ensure that they and others are not put at risk.

This policy aims to:

- Enable regular school attendance
- Inform Parents of St Bede's approach to taking medication during school hours
- To make clear individual responsibilities

Additionally, this policy has regard to:

- Statutory Guidance: Supporting pupils at school with medical conditions, DfE (December 2015)
- Section 100 of the Children and Families Act (2014) and associated regulations, which includes
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a duty to support children with medical conditions

- The Equality Act (2010)
- The SEND Code of Practice (updated 2020)

This policy is to be read in conjunction with our:

- SEND Policy
- Safeguarding and Child Protection Policy
- Equality and Diversity Policy
- Behaviour and Discipline Policy
- Anti Bullying Policy
- First Aid Policy
- Equality and Diversity Policy
- Accessibility
- Health and Safety Policy
- Complaints Policy

Roles and Responsibilities

Parents or Guardians

Parents or Guardians have foremost responsibility for their child's health and should provide school with information about their child's medical condition(s). Parents, and the pupil if he/she is mature enough, should give details in conjunction with their child's GP or paediatrician, as appropriate. The school Special Educational Needs and Disabilities Co-ordinator and specialist voluntary bodies may also be able to provide additional background information for school staff.

Parents are responsible for:

- Making sure that their child is well enough to attend school
- Providing information on the treatment and care required.

The Board of Directors

School Directors have a responsibility to:

• Ensure this policy is adopted or adapted to reflect the actual arrangements in school

• Ensure the policy is formally communicated by specific training to all staff and that this is recorded on personal files and in compliance with data protection principles.

• Ensure that formal monitoring is undertaken to provide confidence that the policy is being followed as intended

• Where the board of directors is the employer that suitable and appropriate insurance cover is obtained and in place

• Ensure someone is appointed to take the 'lead' on these issues in the school.

The Head Teacher

The Head Teacher has a responsibility to:

- Ensure the school is inclusive and welcoming and that the medical conditions or needs policy is in line with local and national guidance and policy frameworks
- Ensure the policy is put into action with good communication of the policy to all
- Ensure every aspect of the policy is maintained

• Ensure that information held by the school is accurate and up to date and that there are good information sharing systems in place using Individual Healthcare Plans

• Ensure confidentiality and compliance with data protection principles

• Ensure all temporary and new staff, including trainees and work placements and those on work experience, know the emergency procedures

• Delegate a staff member to check the expiry date of stored medicines kept at the school and maintain the onsite medical conditions or needs register

• Monitor and review the policy at least once a year, in accordance with legislation, local and national guidance and as appropriate with input from children, parents, staff and external stakeholders

• Ensure that sufficient trained numbers of staff are available to implement the policy and deliver individual healthcare plans, accounting for cover absence and staff turnover

• Ensure that school staff are appropriately insured and are aware that they are insured

The Special Educational Needs and Disabilities Co-ordinator

The Named Person responsible for children with medical conditions is the Special Educational Needs and Disabilities Coordinator (the SENDCo), supported by relevant in-school parties.

They have a responsibility to:

• Liaise between interested parties including children, parents, appropriate staff, special educational needs coordinators, pastoral support, teaching assistants, school nurses, parents,

directors, the school health service, local health care professionals, the local authority transport service, catering providers and local emergency care services

• Identify the training and development needs of staff and organise for them to be met

• Ensure that staff are aware of the need to communicate necessary information about medical conditions to supply staff and, where appropriate, take the lead in communicating this information

- Assist with risk assessment for school visits and other activities outside of the normal timetable
- Develop, monitor and review Individual Health Care Plans
- Work together with parents, students, healthcare professionals and other agencies

Attendance/Reception Team

The Attendance/Reception Team have a responsibility to:

• Ensure that medicines stored in school are safe, secure and accessible in an emergency

• Check the expiry date of stored medicines kept at the school and maintain the onsite medical conditions or needs register and children's Individual Healthcare Plans

All Staff

All staff at the school have a responsibility to:

• Be aware of the potential triggers, signs and symptoms of common medical conditions/needs and understand what to do in an emergency

• Understand the school's medical conditions/needs policy

• Know which children in their care have a medical condition/need and be familiar with the content of the child's Individual Healthcare Plan

• Allow all children where appropriate to have immediate access to their emergency medication. Maintain effective communication with parents including informing them if their child has been unwell

• Ensure children who carry their medication with them have it with them at all times including offsite visits or where they may be relocated to another part of the school

• Be aware of children with medical conditions or needs who may be experiencing bullying or need extra pastoral support

• Understand common medical conditions/needs and the impact these may have on children e.g. children should not be forced to take part in any activity if they feel unwell

• Ensure all children with medical conditions or needs are not excluded unnecessarily from activities in which they wish to participate

• Ensure children have the appropriate medication or food with them during any exercise and are allowed to take it when needed.

Teachers and teaching/support staff

Teachers and teaching or other support staff at the school have a responsibility to:

• Be aware that medical conditions or needs can affect a pupil's learning and provide extra help when pupils need it

• Liaise with parents, the pupil's healthcare professionals, the SENDCo and welfare officers if a child is falling behind with their work because of their condition

• Use opportunities such as PSHE and other areas of the curriculum to raise pupil awareness about medical conditions or needs

• Embed the day to day management of the medical conditions of children they work with, in line with training received, and as set out in Individual Health Care Plans

• Work with the named person (the SENDCo) to ensure that risk assessments are carried out for school visits and other activities outside of the normal timetable

• Provide information about medical conditions to supply staff who will be covering their role where the need for supply staff is known in advance

N.B. Any teacher or support staff member may be asked to provide support to a child with a

medical condition, including administering medicines. However, no member of staff can be required to provide this support.

First Aiders

First aiders have a responsibility to:

• Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards within the school. In the case of an accident at school, the First Aider/Student Attendance/Health team must complete an accident form and ensure that all witnesses have given full accounts of the circumstances surrounding the incident.

• When necessary, ensure that an ambulance or other professional medical help is called and as prescribed in the healthcare plan.

Catering Providers

The catering provider has responsibilities to:

• Establish communications and training for all school food service staff and related personnel at schools where they operate

• Develop and review policies and procedures regarding the provision of special diets and severe food allergies

• Assist head teachers to determine whether a school meal can be provided to children with food allergies and/or food intolerances

• Maintain contact information with vendors and purveyors to access food content information. Catering staff have:

• Have knowledge of menus, vending machines, recipes, food products and ingredients, food handling practices, cleaning and sanitation practices in relation to life-threatening allergies.

Lunch time support staff have:

• Responsibility in the event of a suspected allergic reaction, to call the nearest trained volunteer in administering medications. In addition the emergency medical services will be called immediately. (999)

Communication

The medical conditions policy is regularly communicated via parental documentation and is accessible via the school's website. Staff receive advice and or training on medical issues, such as epilepsy, anaphylaxis etc., relating to pupils within the school. Individual Health Care Plans are drawn up, regularly reviewed and communicated to staff by the Medical Conditions team under the guidance of the SENDCo. Healthcare plans are also attached electronically to the student's profile on the School Information Management Systems. Should an emergency occur, procedures are in place so that medical staff in attendance can refer to the pupil's Individual Health Care Plan.

Procedure when notification is received that a student has a medical condition

The named person, the SENDCo, will liaise with relevant individuals, including as appropriate parents, the individual student, health professionals and other agencies to decide on the support to be provided to the child

Where appropriate, an Individual Healthcare Plan will be drawn up.

Individual Healthcare Plans (IHCPs)

• The school uses an Individual Health Care Plan to record important details about individual children's medical needs that are long-term and complex at school or where students are experiencing short term conditions which may present symptoms that require treatment in school. This is completed and/or reviewed at the start of the school year or at enrolment or when a diagnosis is first communicated to the school by the parent. The IHCP will list their triggers, signs, symptoms, medication and other treatments, what constitutes an emergency and action to take

in the case of an emergency. Further documentation can be attached to the Healthcare Plan if required.

• It is a joint responsibility for the parent, healthcare professional, school and where appropriate, the child with a medical condition, to complete the child's IHCP together. The school should then implement and monitor its effectiveness

• Where a child has SEN but does not have a statement or EHC plan, their special educational needs will be mentioned in their IHPC

• IHCPs will be reviewed annually, or earlier if evidence is provided that a child's needs have changed

• For children with more complex medical conditions or needs and/or life threatening conditions or needs, an IHCP must be drawn up together with parents and other representatives (as appropriate). Parents are expected to provide information from the child's GP and/or consultant. It may be appropriate for the school to have a healthcare professional e.g. the school medical care team or other representative e.g. school caterer, if required, to help draw up the IHCP or have a role in managing the child's condition

• Any short-term condition IHCPs are kept in a centralised register of children with medical needs at the school and are recorded on SIMS. The SENDCo oversees the register, with the Student Attendance/Health team taking day-to-day responsibility for its maintenance and accuracy

• Parents and children are provided with a copy of the child's current agreed IHCP

• IHCPs will be reviewed annually, or earlier if evidence is provided that a child's needs have changed

• All members of staff, including supply teachers, who work with groups of children, have access to the IHCPs of children in their care via SIMS

• The school ensures that all staff protect the child's confidentiality, i.e. information is not left where non-school staff can read it or details displayed on notices in public areas or as agreed with the parents.

Administration of Medication

Written consent from parents must be received before administering any medicine to a child at school.

Medicines will only be accepted for administration if they are:

• Prescribed

- In-date
- Labelled

• Provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage.

The exception to this is insulin which must be in date but will generally be available inside an insulin pen or pump, rather than in its original container

Parents must understand that if their child's medication changes or is discontinued, or the dose or administration method changes, they should notify the SENDCo immediately.

Medicines should be stored safely. Children should know where their medicines are at all times. Written records will be kept of all medicines administered to children

Storage of Medication

• All prescribed medicine should be stored at the school's Reception, where it will be locked and documented. Students must go to there to access their own medication, with the exception of those students who carry an EpiPen or inhaler on their person

• Emergency medication is readily available to children for administration at all times during the day or at off-site activities.

• Subject to a risk assessment children who carry their own emergency medication should keep it securely

• Relevant reception staff, along with the parents of children with medical conditions or needs, must ensure that all emergency and non-emergency medication brought in to the school is clearly labelled with the child's name, the name and dose of the medication and the frequency of the

dose.

Medication will be stored in accordance with instructions, paying particular note to temperature
If medication needs to be refrigerated, the medication must be stored in an airtight container and clearly labelled. Refrigerators used for the storage of mediation are in a secure area inaccessible to unsupervised pupils or lockable as appropriate.

Safe-disposal of Medication

• Parents have a responsibility to collect out-of-date medication

Record keeping

The school has clear guidance about record keeping which is in compliance with data protection legislation.

• Parents at the school are asked if their child has any health conditions or needs or health issues on the enrolment form, which is filled out at the start of each school year or session. Parents of children starting at other times during the year are also asked to provide this information on data checking sheets / enrolment forms

• Annually, a letter is sent out asking parents if their child has any short or long term medical conditions that we need to be aware of

• If medical conditions arise at other times in the school year, it is the parent/guardian's responsibility to inform the school.

Training & Emergency Procedures

All staff know what action to take in the event of a medical emergency. This includes:

• How to contact emergency services and what information to give

• Who to contact within the school and where they are based. A list of first aid trained staff is available at key points around the school e.g. Reception, the catering area and with the Deputy Head Pastoral. If a child needs to be taken to hospital in the absence of a parent a member of staff will always accompany them and will stay with them until a parent arrives. Every effort will be made to send a member of staff with whom the child is familiar. Should an ambulance need to be called, Reception will be responsible for making the telephone call and making a record that this has taken place on the student's SIMS record.

A copy of the following information advice when calling for emergency help will be displayed in the school office, Head of Year office and at phone points:

Action to take in the event of a medical emergency

1	Call Reception on 201 and ask them to order an ambulance – if there is no reply, do the following:
2	Request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked.
3	Give the school's telephone number: 01223 568816
4	State your name.
5	Identify your location: St Bede's Inter-Church School, Birdwood Road, CB1 3TD

6	Provide the exact location of the patient within the school.
7	Provide the name of the child and a brief description of their symptoms.
8	Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient.
9	Ask Reception on 201 and/or the Site Officer on 247 to open relevant gates for entry.
10	Contact the parents to inform them of the situation.
11	If a child needs to be taken to hospital in the absence of a parent a member of staff must accompany them and stay with them until a parent arrives.

Activities beyond the usual curriculum

Reasonable adjustments will be made to enable students with medical needs to participate fully and safely in day trips, residential visits, sporting activities and other activities beyond the usual curriculum.

When carrying out risk assessments, parents/carers, students and healthcare professionals will be consulted where appropriate.

All staff attending off-site visits must be aware of any child with medical conditions or needs on the visit. They will receive and seek information about the type of condition, what to do in an emergency and any other additional support necessary, including any additional medication or equipment needed

Residential visits

• Parents are sent a medical form prior to any residential trip which is to be completed and returned to the school in good time. This form requests details about the child's condition and their overall health. This provides essential and up-to-date information to relevant staff and support staff to help the child manage their condition while they are away. This includes information about medication not normally administered by the school

• All medical forms are taken by the relevant staff member on visits and for all off-site activities where medication is required. These are accompanied by a copy of the child's Individual Health Care Plan

• All parents of children with a medical condition attending an offsite visit or overnight visit are asked for consent

• It is essential a check is made to ensure children with asthma have their inhalers with them before the party leaves the school

• It is considered good practice to record any medication administered to the child during the residential. This record can then be given to the child's parents on return

• The school will take every reasonable measure to ensure that off-site visits are available and accessible to all, irrespective of medical needs, but that this should not encroach unduly on the overall objectives of the activity or the rest of the group. Under the Equality Act (2010) if, after reasonable adjustments have been planned, the risk assessment indicates there is an unacceptable risk to the health and safety of the individual or the group then this will take precedence over equality legislation

• Risk assessments are carried out by the school prior to any out-of-school visit and medical conditions or needs are considered during this process. A personal or individual risk assessment is carried out where appropriate

• Risk assessments are carried out before pupils start any work experience or off-site educational

placement. These should be shared with the parents. It is the school's responsibility to ensure that the placement is suitable, including travel to and from the venue for the pupil. Permission is sought from the pupil and their parents before any medical information is shared with an employer or other education provider.

Unacceptable Practice

The following items are **not generally acceptable practice** with regard to children with medical conditions, although the school will use discretion to respond to each individual case in the most appropriate manner.

- preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary
- assuming that every child with the same condition requires the same treatment
- ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged)
- sending children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCP
- if the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable
- penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- preventing students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- requiring parents, or otherwise making them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child
- If a child misuses medication, their own or another child's, their parents are informed as soon as possible. These children are subject to the school's usual disciplinary procedures

Complaints

An individual wishing to make a complaint about actions regarding the school's actions in supporting a child with medical conditions should discuss this with the school in the first instance If the issue is not resolved, then a formal complaint may be made, following the complaints procedure.

Equality Statement

We will do all we can to ensure that this policy does not discriminate, directly or indirectly. We shall do this through regular monitoring and evaluation of our policies. On review we shall assess and consult relevant stakeholders on the likely impact of our policies on the promotion of all aspects of equality, as laid down in the Equality Act (2010). This will include, but not necessarily be limited to: race; gender; sexual orientation; disability; ethnicity; religion; cultural beliefs and pregnancy/maternity. We will use an appropriate Equality Impact Assessment to monitor the impact of all our policies and the policy may be amended as a result of this assessment.