

## ACADEMY

# Policy for supporting pupils with medical conditions

Date Created: September 2018

Version: 1

Applicable to:
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Checked by:
Valid from:
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March 2022

Review date: July 2024

#### Policy for Supporting Pupils with Medical Conditions

#### 1. Introduction

The Children and Families Act 2014 places a duty on the Governing Body and Senior Leadership Team to make arrangements for supporting pupils at the academy with medical conditions. Pupils with medical conditions cannot be denied admission or excluded from the academy on medical grounds alone unless accepting a child into the academy would be detrimental to the health of that child or others.

Some children with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) plan. For children with SEN, this guidance should be read in conjunction with the SEN Code of Practice.

At Darlinghurst Academy we believe that

- all pupils at the academy with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- arrangements will be put in place to support pupils with medical conditions.
- consultation with health and social care professionals, pupils and parents should be undertaken to ensure that the needs of children with medical conditions are effectively supported.
- it is important that parents feel confident that their child's medical condition will be supported effectively and that they will be safe.
- in addition to the educational impacts there are associated social and emotional implications which may also need to be addressed.

The aim of this document is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in the academy so that they can play a full and active role and achieve their potential.

This policy will be reviewed regularly and will be readily accessible to parents/carers and staff through the academy website.

#### 2. Policy Implementation

The Principal and Senior Leadership Team have overall responsibility for the successful administering and implementation of this policy, although this may be delegated, and are responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in case of staff absence or staff turnover to ensure that someone is always available. They will also be responsible for ensuring that risk assessments for visits, holidays and other activities outside of the normal timetable are undertaken as well as for the monitoring of Individual Healthcare Plans.

All staff will be expected to show a commitment and awareness of children's medical conditions. New members of staff will be inducted into the arrangements.

#### 3. Pupils with medical conditions

Pupils with long term and complex medical conditions may require on-going support, medicines or care while at the academy to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances.

Children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. Reintegration back into the academy will be properly supported so that pupils with medical conditions will fully engage with learning and not fall behind.

#### 4. Roles and Responsibilities

Supporting a child with a medical condition during academy hours is not the sole responsibility of one person. Collaborative working arrangements and working in partnership will ensure that the needs of pupils with medical conditions are met effectively.

- i. The <u>governors</u> will ensure that the Academy develops and implements a policy for supporting pupils with medical conditions. It will ensure that sufficient staff have received suitable training and are competent before they take on the responsibility to support children with medical conditions. It will ensure that the appropriate level of insurance is in place to cover staff providing support to pupils with medical conditions.
- ii. The <u>Principal</u> will ensure that the Academy's policy is developed and effectively implemented with partners. She will ensure that all staff are aware of the policy and understand their role in its implementation. She will make sure that sufficient numbers of staff are available to implement the policy and deliver against all Individual Healthcare Plans, including in emergency and contingency situations. The Principal has the overall responsibility for the development of Individual Healthcare Plans. She will make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.
- iii. 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. 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.
- iv. <u>School nurses</u> are responsible for notifying the academy when a child has been identified as having a medical condition which will require support at the academy. School nurses may support staff on implementing a child's Individual Healthcare Plan and provide advice and liaison.
- v. Other healthcare professionals, including GPs and paediatricians notify the school nurse when a child has been identified as having a medical condition that will require support. They may provide advice on developing healthcare plans.
- vi. <u>Pupils</u> will be fully involved in discussions about their medical support needs and will contribute as much as possible to the development of their individual healthcare plan

since they know best how their condition affects them. Other pupils in the academy will be sensitive to the needs of those with medical conditions.

- vii. <u>Parents/carers</u> will provide the academy with up-to-date information about their child's medical needs. They will be involved in the development and review of their child's individual healthcare plan. They will carry out any action they have agreed to as part of its implementation and ensure they or another nominated adult are contactable at all times.
- viii. <u>The Local Authority</u> should work with the academy to support pupils with medical conditions to attend full time.
- ix. <u>Health services</u> can provide valuable support, information, advice and guidance to schools and their staff to support children with medical conditions at school.
- x. <u>Clinical commissioning groups (CCGs)</u> should ensure that commissioning is responsive to children's needs and that health services are able to co-operate with schools supporting children with medical conditions.
- xi. Ofsted Inspectors consider the needs of pupils with chronic or long term medical conditions and also those of disabled children and pupils with SEN.

The Academy will demonstrate that the policy dealing with medical needs is implemented effectively.

### 5. Procedures to be followed when Notification is received that a pupil has a medical condition

The academy will follow the correct procedures when it is notified that a pupil has a medical condition. The procedures will also be in place to cover any transitional arrangements between schools, the process to be followed upon reintegration or when pupil's needs change and arrangements for any staff training or support.

For pupils starting at the academy, arrangements will be in place in time for the start of the relevant academic term. In other cases, such as a new diagnosis or children moving to a new school mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.

In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be made about what support to provide based on available evidence which would normally involve some form of medical evidence and consultation with parents.

The academy will ensure that the focus is on the needs of each individual child and how their medical condition impacts on their academic life. The academy will consider what reasonable adjustments it might make to enable pupils with medical needs to participate in trips and visits or in sporting activities.

#### 6. Individual healthcare plans

Not all children will require an Individual Healthcare Plan. The academy, healthcare professional and parent will agree when a healthcare plan would be appropriate, based on

evidence. If consensus cannot be reached, the Principal will take the final decision. A flow chart for identifying and agreeing the support a child needs and developing an Individual Healthcare Plan can be found at Annex A. Individual Healthcare Plans will often be essential in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex.

Individual Healthcare Plans will be accessible to all who need to refer to them, while preserving confidentiality. The plans capture the key information and actions that are required to support the child effectively. Where a child has Special Educational Needs (SEN) but does not have an EHC plan, their special educational needs should be mentioned in their Individual Healthcare plan. Where a child has a SEN identified in an EHC plan, the Individual Healthcare Plan should be linked to or become part of that EHC plan.

Individual Healthcare Plans (and their review) may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the school, parents and a relevant healthcare professional who can best advise on the needs of the child. Pupils will also be involved, whenever appropriate. Partners will agree who will take the lead in writing the plan however it is the responsibility of the academy to ensure it is finalised and implemented.

The academy will regularly review plans and/or make amendments when evidence is presented that the child's needs have changed.

#### 7. Staff training and support

Any member of staff providing support to a pupil with medical needs will receive suitable training. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.

Healthcare professionals, including the school nurse can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

The academy will make arrangements for whole school awareness training so that all staff, including new staff, are aware of the academy's policy for supporting pupils with medical conditions and their role in implementing that policy. This training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs. Parents can also contribute by providing specific advice.

#### 8. The child's role in managing their own medical needs

Some children are competent to manage their own health needs and medicines. The academy, after discussion with parents, will encourage such children to take responsibility for managing their own medicines and procedures. This will also be reflected within Individual Healthcare Plans.

Wherever possible and if appropriate, children will be allowed to carry their own medicines and relevant devices. Children should be able to access their medicines for self-medication quickly and easily. Those children who take their medicines themselves or manage their own procedures may require an appropriate level of supervision.

If a child refuses to take medicine or carry out a necessary procedure then they should not be forced by staff. The procedure agreed in the Individual Healthcare Plan should be followed and parents informed so that alternative options can be considered.

#### 9. Managing medicines on the Academy premises

- medicines will only be administered at the academy when it would be detrimental to a child's health or academy attendance not to do so
- no child will be given prescription or non-prescription medicines without their parents' written consent
- a child under 16 should never be given medicines containing aspirin unless prescribed by a doctor
- the academy will only accept prescribed medicines that are 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 still be in date, but will generally be available inside an insulin pump, rather than in its original container)
- when medication is brought into the academy a consent form must be completed by the parents. If the parent is not present the form must be sent home for completion in order for consent to be given
- all medicines will be stored safely in the front office with the exception of those to which
  easy access is essential e.g. epi-pens and inhalers. Children should know where their
  medicines are at all times and be able to access them immediately.
- during trips, the member of staff in charge of first aid will carry all medical devices and medicines required
- the academy will keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff will have access. Controlled drugs should be easily accessible in an emergency.
- staff administering a controlled drug must do so in accordance with the prescriber's
  instructions. The academy will keep a record of all medicines administered to individual
  children, stating what, how and how much was administered, when and by whom.
  Any side effects should also be noted.
- sharp boxes should always be used for the disposal of needles and other sharps.
- when no longer required, medicines should be returned to the parent to arrange for safe disposal.
- at the end of the academic year all epi-pens and inhalers should be taken home and returned on the first day of the new term.
- it is the parent's responsibility to ensure that all medication (including epi-pens and inhalers) are within date.

#### 10. Administering Medication

- Staff must always receive consent before administering medication
- If a consent form has not been received, contact will be made with the pupils parents and email authorisation sought before administering any medication
- Prescription only medicines may not be administered in the academy unless they have been prescribed by an appropriate practitioner e.g. doctor, dentist etc
- Medication will only be administered to the named person

- Medicines that can be bought over the counter (non-prescription) do not need an
  appropriate practitioner's prescription in order for the academy to administer them.
  However, they must be clearly labelled with the child's name.
- Medicines (both prescription and non-prescription) will only be administered to a child within the academy where permission for that particular medication has been received from the child's parent/carer

#### 11. Emergency procedures

As part of general risk management processes, the academy has arrangements in place for dealing with emergencies. Pupils should know what to do in general terms, such as informing a teacher immediately if they think help is needed. A pupil taken to hospital by ambulance will be accompanied by a member of staff who will stay with the child until the parent arrives. Staff will not take children to hospital in their own car where their own personal insurance prevents this.

#### 12. Unacceptable practice

Each child's case will be judged on its own merit and with reference to the child's Individual Healthcare Plan, however it is not generally acceptable practice to:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every child with the same condition requires the same treatment
- ignore medical evidence or opinion (although this may be challenged) or ignore the views of the child or their parents
- send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in the Individual Healthcare Plan
- if the child becomes ill send the child to the academy office or medical room unaccompanied or with someone unsuitable
- penalise children 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 make them feel obliged to attend the academy to administer medication or provide medical support to their child, including with toileting issues. (No parent should have to give up working because the academy is failing to support their child's medical needs)
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trip, e.g. by requiring parents to accompany the child.

#### 13. Expired medication

- The office staff are responsible for routinely checking whether any medication held in the office has expired or is about to expire. In the event that the medication is held in the classroom, e.g. inhalers and epi-pens, it is the responsibility of the class teacher.
- Parents must be contacted to inform them of the imminent expiry and inform them
  of the date on which this is to happen

Upon expiry the medication will be returned to the parent for safe disposal

#### 14. Complaints

If a parent or child feels that the medical needs of the pupil are not being fully met they are encouraged to discuss this further with the class teacher, Inclusion Leader or another member of the Senior Leadership Team. Should parents or pupils continue to be dissatisfied with the support provided then a formal complaint via the school's complaint procedure should be made. After all attempts at resolution have been exhausted, a formal complaint can be made to the Department for Education only if it comes under the scope of section 496/497 of the Education Act 1996.

#### **Associated Policies**

Intimate Care Policy Inhaler Policy



## Annex A: Model process for developing Individual Healthcare Plans

Parent or healthcare professional informs the academy that the child has been newly diagnosed, or is due to attend new school, or is due to return to the academy after a long-term absence, or that needs have changed



Principal or member of academy staff to whom this has been delegated, normally the Inclusion Leader, co-ordinates meeting to discuss child's medical support needs; and identifies member of staff who will provide support to pupil



Meeting to discuss and agree on need for IHCP to include key academy staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them)



Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided



Academy staff training needs identified





IHCP implemented, circulated to all relevant staff and recorded in child's electronic file



IHCP reviewed annually or when condition changes. This is the responsibility of the parent or healthcare professional.