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Medical Conditions Policy Supporting Pupils with Special Medical Needs

Rationale

The Children and Families Act 2014, from September 2014, places a duty on governing bodies to make arrangements for children with medical conditions so that they have full access to education, including school trips and physical education. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in loco parentis and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent/carer who is responsible for the child's medication and should supply the school with information. The school takes advice and guidance from the School Nurse Team which encourages self-administration of medication when possible. Contact details for our School Nurse can be obtained from the Office Staff.

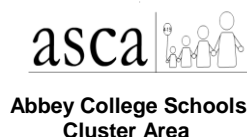
Aims

The school aims to:

- assist parents/carers in providing medical care for their children;
- educate staff and children in respect of special medical needs;
- arrange training for volunteer staff to support individual pupils;
- liaise as necessary with medical services in support of the individual pupil;
- ensure access to a full education if possible.
- monitor and keep appropriate records.

Entitlement

The school accepts that pupils with medical needs should be assisted if at all possible and that they have a right to the full education available to other pupils. We will make



reasonable adjustments to enable children with medical needs to participate fully and safely on visits; their provision will be recorded in the trip risk assessment.

The school believes that pupils with medical needs should be enabled to have full attendance and receive necessary proper care and support.

The school accepts all employees have rights in relation to supporting pupils with medical needs as follows:

- choose whether or not they are prepared to be involved;
- receive appropriate training;
- work to clear guidelines;
- have concerns about legal liability;
- bring to the attention of management any concern or matter relating to supporting pupils with medical needs.

Expectations

It is expected that:

- parents/carers will be encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative;
- where parents/carers have asked the school to administer the medication for their child the prescription and dosage regime must be typed or printed clearly on the outside. Any medications not presented properly will not be accepted by school staff. Pupils should not bring in their own medicine. This should be brought into school by the parent/carer.
- that employees will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately.
- the school will liaise with the School Nurse Team for advice about a pupil's special medical needs, and will seek support from the relevant practitioners where necessary and in the interests of the pupil.
- any medicines brought into school by the staff e.g. headache tablets, inhalers for personal use should be stored in an appropriate place and kept out of the reach of the pupils. Any staff medicine is the responsibility of the individual concerned and not the school.

Policy into Practice

We will work in partnership with healthcare professionals, parents/carers, social care and the local authority to ensure that the needs of pupils with medical conditions are met effectively.

Once notified that a pupil has a medical condition, every effort will be made to ensure that arrangements are put in place as soon as possible, at the latest within two weeks (DfE Statutory Guidance, page 9). Where evidence conflicts regarding the support requested, some degree of challenge may be necessary to ensure that the right support can be put in place.

There is a need for proper documentation at all stages when considering the issue of support for pupils with medical needs in school. Individual healthcare plans will be completed to provide clarity about what needs to be done and by whom. Care plans are essential in cases where conditions fluctuate, where there is a high risk that emergency intervention will be needed and where medical conditions are long-term or complex. As a school, we will discuss a child's medical needs with the parents/carers and healthcare professional to see if a healthcare plan is necessary. If consensus cannot be reached, the head teacher is deemed 'best placed to take a final view' (DfE Statutory Guidance, page 9).

A flow chart for identifying and agreeing the support for a child's needs and developing an individual healthcare plan is included in Appendix 1. The Senior first aider is responsible for writing the plan in consultation with the head teacher and class teacher. Healthcare plans will be reviewed annually. Please see our policy on Administering Medicines for a copy of our healthcare plan.

We will endeavour to record the following information on healthcare plans:

- 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, e.g. how absences will be managed, requirements for extra time when completing tests, use of rest periods or additional support in catching up with lessons, counselling sessions;
- 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 will be clearly stated with appropriate arrangements for monitoring;
- who will provide the support, their training needs, expectations of their role and cover arrangements for when they are unavailable;
- who in the school needs to be aware of the child's condition and the support required;
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate;

- where confidentiality issues are raised by the parent/carer, the designated individuals to be entrusted with information about the child's condition;
- what to do in an emergency, including whom to contact and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician which will be attached to the school plan;
- what to do if a child refuses to take medicine or carry out a necessary procedure.

Where a child has SEND needs but does not have a statement or EHC plan, their special educational needs will be mentioned in their individual healthcare plan. Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan will be linked to or may become part of that statement or EHC plan.

Provision for children with medical conditions will be reviewed by the Health and Safety Committee of the Governing Body to ensure children's needs are met. The committee are responsible for the implementation of this policy. They will ensure:

- that sufficient staff are suitably trained and will facilitate the training required;
- a commitment that all relevant staff will be made aware of the child's condition;
- cover arrangements in case of staff absence or staff turnover to ensure someone is always available;
- supply or agency teachers are briefed;
- risk assessments for school visits and other school activities outside of the normal timetable are rigorous; and
- individual healthcare plans are effective.

Current medical conditions include:

- epilepsy
- cerebral palsy
- cystic fibrosis
- bowel disorder
- hydrocephalus
- asthma

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), we will work with the Local Authority to ensure that the child is reintegrated effectively.

Appendix 1: DfE Statutory Guidance, September 2014.

