

# Supporting Students in School with Medical Conditions

Produced By:	Mr P Harty Headteacher
Date reviewed by Governor Advisor	March 2022
Date reviewed by Full Governing Body	March 2022
Chair:	Dr J Savin
Next review Date:	March 2023

### **Guidance and Legislation**

DfE Supporting Pupils at School with Medical Conditions Section 100 of Children and Families Act 2014 BCC Model Guidance Misuse of Drugs Regulations 2001

#### Monitoring and Reviewing

This procedure will be reviewed regularly and when there is a change in legislation by the headteacher and governors.

Ongoing monitoring of actions and impacts/outcomes will be as follows:

- Feedback within school to Headteacher
- Report to the governors following management procedures

### Purpose & Scope

To ensure that:

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

The school will implement this procedure by:

- Making sure sufficient staff are suitably trained
- Making staff aware of a pupil's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

#### Roles and responsibilities

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

The headteacher will:

- Make sure all staff are aware of this procedure and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this procedure and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Contact the school nursing service 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 will:

 Provide support to pupils with medical conditions. This includes the administration of medicines.

- Take on the responsibility to support pupils with medical conditions and will receive sufficient and suitable training to achieve the necessary level of competency
- 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

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

School nurses and other healthcare professionals:

The Bucks CC school nursing service 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.

Healthcare professionals, such as GPs and pediatricians, will liaise with the schools nurses and notify them of any pupils identified as having a medical condition.

### Equal opportunities

The school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

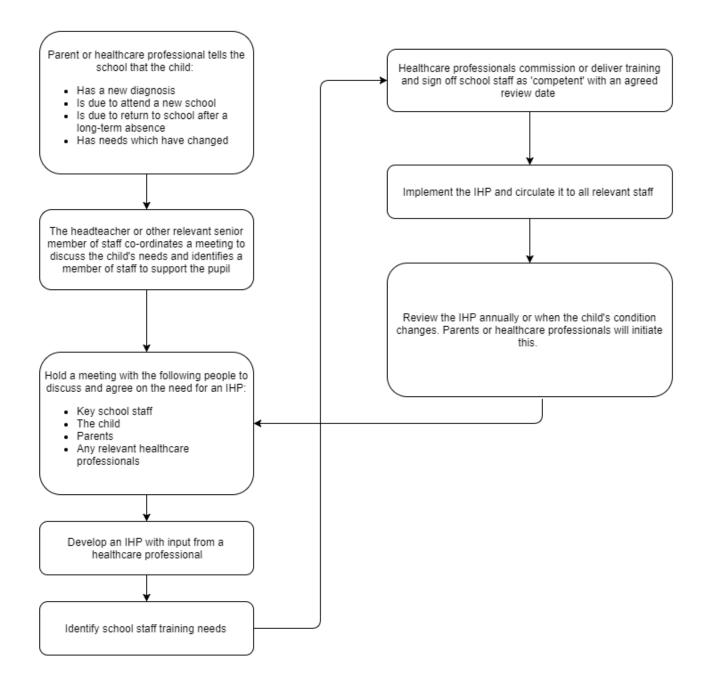
The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

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.

## Being notified that a child has a medical condition

When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP (Individual Healthcare Plan).

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 the school.



#### Individual healthcare plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to the Head of Finance and Business and Matron.

Plans will be reviewed if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- 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 not a 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 pediatrician, who can best advice on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or 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. The governing board and Headteacher will consider the following when deciding what information to record on IHPs:

- 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, requirements for extra time to complete exams, 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 and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency, including who to contact, and contingency arrangements

#### Managing medicines in school

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 parents' written consent has been received by the school

## 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:

- In-date
- Labeled
- 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 will be returned to parents to arrange for safe disposal when no longer required.

## Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs</u> <u>Regulations 2001</u> and subsequent amendments, such as morphine or methadone. A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. 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. Pupils will be allowed to carry their own medicines and relevant devices wherever possible. 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.

### Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise pupils 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 otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues.
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life including school trips.
- Administer, or ask pupils to administer, medicine in school toilets

#### 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 suitable and sufficient 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 agree this with the Head of Finance and Business and Matron. Training 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
- Fulfill the requirements in the IHPs
- Help staff to have an understanding of 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.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

## **Record keeping**

The governing board will ensure that written records are kept of all medicine administered to pupils. Parents will be informed if their pupil has been unwell at school. IHPs are kept in a readily accessible place which all staff are aware of.

## Liability and indemnity

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

## Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the Headteacher in the first instance. If the Headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

## Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- Health and safety
- Safeguarding
- Special educational needs information report and policy

## Appendix A – Illness causing absence from school

Absences need reporting each morning before 08.30 AM by telephoning the school and selecting option 1 to report a student absent or emailing matron on matron@johncolet.co.uk. If a period of absence is predicted with certainty then please advise the school on which date the student will return.

Our school policy works on the belief that if a student is fit to attend school then they are fit to take part in Physical Education lessons (PE). Students are only permitted to miss PE if this is supported by a note from home or the GP.

We recommend that students do not attend school while suffering from a communicable/ infectious disease (e.g. Impetigo, conjunctivitis, hand, foot and mouth, chicken pox, shingles) without first seeking medical advice. They should then remain absent for the minimum periods recommended by their Doctor.

Coughs and colds do not normally require a student to be absent from school although this depends on the severity and symptoms. If a student is diagnosed with flu, then they should remain absent from school until medical advice has been sought and they are advised that they are safe to return.

Although exposure of students to a communicable disease in itself is not sufficient reason to require their absence from school, any student who becomes a home contact of diphtheria, poliomyelitis, typhoid and paratyphoid fevers will be requested to remain absent from school for the recommended time. The school will take advice from the Health Protection Agency.

A student who has sickness or diarrhoea whilst at school should be collected immediately and kept absent from school for 48 hours following the last bout of sickness or diarrhoea.

Advice about when students should be absent from school can be checked on the following website: <u>http://www.nhs.uk/Livewell/Yourchildatschool/Pages/Illness.aspx</u>

## Appendix B – Illness/injury at school

If a student becomes ill or is injured in any way, he/she is (where appropriate) taken to the School Matron in the Medical Room. If the problem cannot be dealt with in school, the parents will be contacted and, if necessary, arrangements will be made for the child to be either taken home or to hospital.

We are unable to offer any care other than initial first aid. A number of staff hold the First Aid at Work Qualification and the Administering Medication at School Qualification. The majority of staff have received Epipen and emergency first aid training. Additional training relating to asthma, epilepsy, allergies and diabetes is organised where appropriate.

Parents/carers of students suffering from chronic or long term illnesses will also need to complete a health care plan which can be obtained from Matron or downloaded from the website. **Parents are responsible for ensuring that the healthcare plan is updated regularly** ensuring that it is in accordance with medical advice.

All visits to the medical room will be recorded in the 'day book'. Noting name, form, lesson missed, reason for visit, time in and out and actions taken.

#### **Head Injuries**

If a student suffers a head injury in the lesson then they are sent to Matron for assessment and appropriate incident form completed.

If a student reports a head injury which has happened during break/lunchtime they are sent to Matron for assessment.

- 1. Matron to assess the injury.
- 2. Matron to contact parents to recommend, where appropriate, that the parent needs to collect the student so that medical treatment can be sought.
- 3. In serious cases, the ambulance is called.
- 4. An accident form is filled in where appropriate. Incident to be recorded in the Day Book.

#### Head Injuries in PE lessons

Students are sometimes struck on the head with a ball and it is usually not appropriate or necessary for them to visit Matron, especially if they volunteer to carry on participating in the lesson. It is usually clear when the student should be prevented from rejoining the lesson and the teacher will then follow the following procedure.

Any students who sustain a head injury and show signs which cause concern are sent to Matron accompanied by another pupil. Matron will make an assessment.

The student usually rejoins the lesson when they feel comfortable and they are then advised to visit Matron at any time during the day if they feel unwell. Matron will contact parents to update them.

If the student loses consciousness, the usual first-aid procedures are followed. Matron would be notified immediately and the student would be taken to hospital.

All members of the PE department have received appropriate first aid training.

Appendix C - Administration of medicines in school

The administration of medicine is the responsibility of parents and carers. The school follows the policies as set out by Bucks County Council and will consider requests made by Parents in respect of the administration of medicines when:

- A student suffers from chronic long-term illnesses/complaints such as allergies, asthma, diabetes or epilepsy
- A student is recovering from a short term illness but requires a course of four times a day antibiotics. (A 3 times a day course does not warrant taking in school hours)
- A student has an injury requiring regular prescribed pain relief

Parents must complete an Administration of Medicines Form available from Matron or downloadable from the website. This form must be used whenever a parent wishes medication to be administered and must be renewed if the medication changes.

Please note that only medicines and treatments prescribed by a doctor and in the original packaging with the dispensing label and instruction leaflet will be accepted and stored in the medical room.

The medicines need to be brought in by the parent or student and handed in to matron where they will be stored in the medical room in a locked cupboard. Asthma inhalers and Epipens are stored in a cupboard in the medical room which is unlocked during the school day to enable quick access. Prescriptions provided should enable there to be sufficient medication (for example Epipens and inhalers) to enable students to have one in their bag, one in the medical room and one at home. On school trips students ought to have the one from their bag and additionally one from the medical room, which must be returned. Please let us know if there are problems obtaining adequate supplies on prescription.

#### Paracetamol

Students sometimes ask for painkillers (analgesics) at school, including paracetamol. School staff will generally not give non prescribed medication to students as they may not know whether the student has taken a previous dose.

Paracetamol will **not** be administered;

- before 12.15 pm
- following a head injury
- where a student is already on some other medication
- without paracetamol form

The school will continue to make available the occasional paracetamol tablet to students faced with significant pain which might otherwise cause them to lose lesson time. Any frequently recurring need for paracetamol will be reported directly to the parents.

Parents **must** have first authorised the school in writing to provide tablets occasionally to students by completing the Paracetamol form. This form will be sent home for students when they join the school. It will also be downloadable from the website to students in other year groups.

Paracetamol tablets will be administered according to the following guidelines.

Over 16/ adults	-	500-1000 mg (1 tablet)
Age 12-16 years	-	500-1000 mg (1 tablet)
Age 11-12 years	-	250-500 mg (1/2 -1 tablet)

Where appropriate a parent may administer ibuprofen prior to school as this may provide 6 hours relief to assist them through the day. If a student suffers regularly from acute pain, such as migraine, severe period pain or pain from an injury, the student's doctor should prescribe appropriate pain killers for the student's use. These may be administered in school if accompanied with the Administration of Medicines Form.

The administration of medicine form, paracetamol administration form and individual healthcare plan are available to download from the school website.

#### Administration of medicines on a school trip

Students are requested to complete a parental consent for a school visit which asks for some basic medical information and emergency contact details. If a student requires the administration of medicine, then a form should be obtained from Matron and completed. The student will be required to ensure they carry the medication in the appropriate packaging.

### Appendix D – Vaccinations

Vaccinations are organised by the School Nursing Service. These take place for girls in year 8 and for all students in year 9. For students who are absent on the days the vaccinations are given, alternative arrangements will be made by the school nursing service. The consent forms are handed out in school and we ask that they are completed and promptly returned to Matron.

## Appendix E – Report of Accidents

Accidents are reported as directed by both the Health and Safety Executive (HSE) and Buckinghamshire County Council Schools' Health and Safety Handbook this is in accordance with RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations).

All accidents are reported to Matron so that she may complete the relevant incident report, in addition to contacting the HSE where appropriate, which is verified by the head teacher.

## Appendix F – Forms

## Administration of Medicines Form

Staff will not administer medicines to your child unless this form is completed and signed.

Student Details

Name of student	

Date of birth	
Tutor group	
Medical condition or illness	

#### Medicine

Name/type of medicine (as described on the container)	
Date dispensed	
Expiry date	
Dosage instructions	
Are there any side effects that the school needs to know about?	
Medicine to be self-administered?	
Procedures to take in an emergency	

#### NB: Medicines must be in the original container as dispensed by the pharmacy

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy.

I understand that I must inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature ......Date.....

Name	
Daytime telephone number	
Relationship to student	

#### Parental agreement for school to administer Paracetamol

The school/setting will not give your child medicine unless you complete and sign this form. Paracetamol tablets will be given according to the following guidelines:

Over 16/ adults	-	500-1000 mg (1 tablet)
Age 12-16 years	-	500-1000 mg (1 tablet)
Age 11-12 years	-	250-500 mg (1/2 -1 tablet)

Paracetamol will not be administered;

- before 12.15 pm
- following a head injury
- where a student is already on some other medication

Student Name:	
Date of Birth:	
Any other instructions	
Daytime/ mobile phone no. of parent /carer	
GP name and surgery	
GP phone number	

If your child requires more than the dose stated above, please complete an 'Administration of Medicines' form and provide the paracetamol to be given.

I confirm that I have administered paracetamol without adverse effect to my child in the past.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy.

I will inform the school immediately, in writing, if there are any changes to the above request.

Parent/Carer Signature: \_\_\_\_\_ Date:

If you wish to withdraw consent, please email Matron on matron@johncolet.co.uk

## Individual Healthcare Plan

Child's name:		
Tutor Group:		
Date of Birth:		
Child's Address: (Please state who child	lives with)	
Medical Diagnosis or Condition:		
Date:		
Review date:		
Contact Information		
Family contact 1	Family contact 2	
Name:	Name:	_
Phone No. (work):	Phone No. (work):	
(home):	(home):	_
(mobile):	(mobile):	_
Clinic/Hospital contact		
Name:	Phone No:	
GP		
Name:	Phone No:	

Describe medical needs and give details of child's symptoms:

Name of medication, dose, method of administration, when to be taken, side effects, contraindications, administered by/self-administered with/without supervision:

Daily care requirements: (e.g. regular medication, before sport/at lunchtime)

Describe what constitutes an emergency for the child, and the action to take if this occurs:

Other information:

Who is responsible in an Emergency: (State if different for off-site activities)

Name of Parent/Carer:	
Signature of Parent/Carer:	Date:
Name of John Colet Signature:	
John Colet Signature:	Date: