

# **Supporting Students with Medical Conditions Policy**

**Approved by: PDBW**

**Date: 20/11/2020**

**Next review due by: 20/11/2023**

**Aims**

This policy aims to ensure that:

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

The school will implement this policy by:

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

## **Legislation and Statutory Responsibilities**

This policy is written in line with the requirements of:

- Children and Families Act 2014 – section 100
- Supporting pupils at school with medical conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England DfE December 2015
- 0-25 SEND Code of Practice DfE January 2015
- Mental Health and Behaviour in Schools: departmental advice for school staff, DfE November 2018
- Equality Act 2010
- Schools Admissions Code, DfE December 2014

This policy should be read in conjunction with the school's Safeguarding Policy.

## **Policy Implementation**

The statutory duty for making arrangements for supporting students at school with medical conditions rests with the governing body. The governing body have conferred the following functions of the implementation of this policy to staff below, however, the governing body remains legally responsible and accountable for fulfilling the school's statutory duty.

### **Headteacher**

The overall responsibility for the implementation of this policy is given to the Headteacher. They will also be responsible for:

- ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.
- making sure all staff are aware of this policy and understand their role in its implementation
- taking overall responsibility for the development of IHPs
- making sure that school staff are appropriately insured
- ensuring that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

### **Medical Lead**

**Beverley Routley** (Family Support Manager/Medical Lead) will be responsible in conjunction with parents/carers, for drawing up, implementing and keeping under review the individual healthcare plan for each student and making sure relevant staff are aware of these plans.

She will also take operational responsibility for ensuring sufficient training has been implemented for relevant staff as required and keeping a record of this training with the School Business Manager.

### **Staff**

All members of staff are expected to show a commitment and awareness of students' medical conditions and expectations of this policy. All new members of staff will be inducted into the arrangements and guidelines in this policy upon taking up their post.

Any member of staff may be asked to provide support to students 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 students 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 medical needs of any students 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**

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 provide information to assist in its drafting
- Carry out any action they have agreed to as part of the IHP e.g. providing medication and equipment

## **Students**

Students with medical conditions may be best placed to provide information about how their condition affects them. Where appropriate they should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their individual healthcare plan and comply with it. Other students may be sensitive to the needs of those with medical conditions and can, for example, alert staff to the deteriorating condition or emergency need of students with medical conditions.

## **Definitions**

Students with medical needs may be broadly defined as being of two types:

### **Short-Term**

Affecting their participation at school because they are on a course of medication or are recovering from a procedure

### **Long-Term**

Potentially limiting access to education and requiring on-going support, medicines or care to help them manage their condition and keep them well, including monitoring and intervention in emergency circumstances. It is important that parents feel confident that the school will provide effective support for their child's medical condition and that students feel safe.

## **Equal Opportunities**

All students at Parayhouse School have special educational needs (SEN) and have an Educational Health Care Plan (EHCP). The school **must** comply with their duties under the Equality Act 2010 with regards to the students' medical and learning needs.

Our school is clear about the need to actively support students with medical conditions to participate in school trips/visits and sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these students to participate fully and safely. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. In

doing so, students, their parents and any relevant healthcare professionals will be consulted.

## **Being Notified that a Student has a Medical Condition**

This covers notification prior to admission, procedures to cover transitional arrangements between schools and alternative providers, and the process to be followed upon reintegration after a period of absence or when students' needs change.

For students being admitted to Parayhouse School for the first time with good notification given about their medical condition, the arrangements will be in place for the start of the relevant school term. In cases such as a new diagnosis or a student moving to Parayhouse School mid-term, we will make every effort to ensure that arrangements to cater for the student's medical condition are put in place within two weeks.

In making the arrangements, we will take into account that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. We also acknowledge that some may be more obvious than others. We will therefore ensure the focus is on the needs of each individual student and how their medical condition impacts on their life. We aim to ensure that parents/carers and students can have confidence in our ability to provide effective support for medical conditions in school, so the arrangements will show an understanding of how medical conditions impact on the student's ability to learn, as well as increase their confidence and promote self-care.

We will ensure that staff are properly trained and supervised to support students' medical conditions and will be clear and unambiguous about the need to actively support students with medical conditions to participate in school trips, visits or sporting activities. The school will do its utmost to make adjustments so that no student shall be discriminated against. Saying this, the medical needs of individuals take precedence and may mean that further adjustments need to be made. Evidence from a clinician such as a GP may state that participation is not possible. In line with our safeguarding duties, we will ensure that all students' health is not put at unnecessary risk from, for example infectious disease. We will therefore not accept a student in school at times where it would be detrimental to the health of that student or others.

Parayhouse School does not have to wait for a formal diagnosis before providing support to students. In cases where a student's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. These discussions will be led by **Verity Carnevale**.

Following these discussions, an individual healthcare plan will be written in conjunction with the parents/carers by **Beverley Routley** and put in place.

### **Individual Healthcare Plan (IHP)**

Individual Healthcare Plans will help to ensure that Parayhouse School effectively supports students with medical conditions. They will provide clarity about what needs to be done, when and by whom.

They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. They are likely to be more helpful in the majority of other cases too, especially where medical conditions are long-term and complex. However, not all students will require one. The school, a healthcare professional and parent/carer should agree based on evidence, where a healthcare plan would be inappropriate or disproportionate. A flow chart for identifying and agreeing to support a student's needs and developing an IHP is provided in Appendix A.

Individual health plans will be easily accessible to all who need to refer to it, while ensuring confidentiality. Plans will capture the key information and action that are required to support the student effectively. The level of detail with the plan will depend on the complexity of the student's condition and the degree of support needed. This is important because different students with the same health condition may require very different support.

Individual healthcare plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional e.g. specialist or student's community nurse, who can best advise on the particular needs of the child. Students should also be involved whenever appropriate. The aim should be to capture the steps that the school should take to help manage their condition and overcome any potential barriers to getting the most from their education. Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school.

The school will ensure that individual healthcare plans are reviewed at least annually or earlier if evidence is presented that the student's needs have changed. They will be developed and reviewed with the student's best interests in mind and ensure that Parayhouse School assesses and manages risks to the student's education, health and social wellbeing, and minimises disruption. Where a student is returning to school following a period of hospital education or alternative provision, we will work with the local authority and education provider to ensure that the Individual healthcare plan identifies the support the student will need to reintegrate effectively.

Appendix B provides a basic template for the individual healthcare plan, and although this format may be varied to suit the specific needs of each student, the IHPs should **all** include the following information.

- The medical condition, its triggers, signs, symptoms and treatments;
- The students' 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 the condition, dietary requirements and environmental issues e.g. crowded corridors;
- Specific support for the student's educational, social and emotional needs, for example, how absences will be managed, requirements for additional rest times or opportunities to catch up;
- The level of support needed (some students may be able to take responsibility for their own health needs), including in emergencies. In the event of self-managing their medication, this should 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 student's medical condition from the healthcare professional and cover arrangements for when they are unavailable;
- Who in the school needs to be aware of the student's medical condition and the support required;
- Arrangements for written permission from parents/carers and the Headteachers for medication to be administered by a member of staff or self-administered by the student 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 student can participate e.g. risk assessment;
- Where confidentiality issues are raised by the parent/carer, the designated individual to be entrusted with information about the student's condition;
- What to do in an emergency, including whom to contact, and contingency arrangements. Some students may have an emergency healthcare plan prepared by their clinician that could be used to inform development of their Individual healthcare plan.

## **Training and Support**

A list of trained staff will be displayed in the staffroom and at the front of the medication folder (medication cupboard) Qualified staff will consist of:

School First-Aiders (full certificate)

Named First-Aiders

Named People for Administering Medicines

Specialist Specific Training such as Diabetes, Epilepsy Management

Staff training related to administration of medication or medical procedures will be logged on SIMS.

All staff who are required to provide support to students for medical conditions will be trained by healthcare professionals qualified to do so. The training need will be identified by the school during the development or review of a student's individual healthcare plan. The school may choose to arrange training themselves and will ensure that it remains up to date.

Training should be sufficient to ensure that staff are competent and have confidence in their ability to support students with medical conditions, and to fulfil the requirements set out in the individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). A first aid certificate does not constitute appropriate training in supporting students with medical conditions. Healthcare professionals, including the student's GP or specialist nurse, can provide confirmation of proficiency of staff in a medical procedure, or in providing medication.

All staff will receive induction training and regular whole school awareness training so that all staff are aware of the school's policy for supporting students with medical conditions and their role in implementing the policy. The Co-headteachers (Verity Carnevale and Holly Bristow) will seek advice from relevant healthcare professions about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

The family of the student will often be key in providing information to school staff about how their child's needs can be met, and parents will be asked for their views. They should provide specific advice, but should not be the sole trainer.

### **The student's role in managing their own medical needs**

If after discussion with the parent/carer, it is agreed that their child is competent to manage their own medication and procedures, they will be encouraged to do so. This will be reflected in the individual healthcare plan.

Wherever possible, students will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-medication quickly and easily; these will be stored in the family support managers office within a locked cupboard to ensure that the safeguarding of other students is not compromised.

The school does also recognise that students who take their medicines themselves and/or manage procedures may require an appropriate level of supervision. If it is not appropriate for a student to self-manage, the relevant staff will help to administer medicines and manage procedures for them.

If a student refuses to take medicine or carry out a necessary procedure, staff should not force them to do so but follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

### **Managing medicines on school premises and record keeping**

At Parayhouse School the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a student's health or school attendance not to do so;
- No student should be given prescription or non-prescription medicines without their parents written consent – except in exceptional circumstances where the medicine has been prescribed to the student without the knowledge of the parents. In such cases, every effort should be made to encourage the student to involve their parents while respecting their right to confidentiality;
- The school will administer non-prescription medicines only with the consent from parents. This will involve a phone call to parents prior to the medicine being administered followed by a letter stating medicine, dose and time administered;
- Where clinically possible, medicines should be prescribed in dose frequencies, which allows for them to be taken outside school hours;
- The school will only accept prescribed medicines with written permission from parent/carer 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 be in-date but will generally be available to schools inside an insulin pen or pump, rather than its original container;
- All medicines will be stored safely in the Family Support Office unless the medicine needs to be with the student at all times, such as emergency medication for Epilepsy or an Epipen for severe allergies. Students should know where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility;
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should always be in a readily available state and not locked away. Asthma inhalers should be marked with the student's name;
- During school trips the first aid trained member of staff will carry all medical devices and medicines required;
- All controlled drugs that have been prescribed for a student will be securely stored in a non-portable container, and only named staff have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug left in school;
- Staff administering medicines should do so in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted. Written records are kept of all medication administered. These records offer protection to staff and students and provide evidence that agreed procedures have been followed;

- When no longer required, medicines should be returned to the parent/carer to arrange safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.

## **Emergency Procedures**

The Co-Headteachers (Holly Bristow and Verity Carnevale) will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips as part of the general risk management process.

Where a student has an individual healthcare plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Where appropriate, other students in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a student needs to be taken to hospital, staff should stay with them until the parent/carer arrives. Schools need to ensure they understand the local emergency services cover arrangements and that the correct information is provided for navigation systems.

## **Day Trips, Residential Visits and Sporting Activities**

We will actively support students with medical conditions to participate in day trips, residential visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible.

We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that students with medical conditions can be included safely. This will involve consultation with parents/carers and relevant healthcare professions and will be informed by the Health and Safety Executive (HSE) guidance for school trips.

## **Other Issues for Consideration**

Where a student uses home-to-school transport arranged by the LA and they also have a medical condition that is life-threatening, we will share the student's individual healthcare plan with the local authority.

A defibrillator can be located in the school office and all first aiders have been trained to administer this.

The school has a generic asthma inhaler on site for emergency use that is kept in the medication cupboard (Family Support Room).

### **Unacceptable Practice**

Although school staff should use their discretion and judge each case on its merit with reference to the student's individual healthcare plan, it is not generally acceptable practice to:

- Prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary;
- Assume that every student with the same condition requires the same treatment;
- Ignore the views of the student or their parents/carers; or ignore medical evidence or opinion (although it may be challenged);
- Send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- Penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- Prevent students from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively;
- Require parents/carers, or otherwise make 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;
- Prevent students from participating or creating unnecessary barriers to participating in any aspect of school life, including school trips e.g. by requiring parents to accompany their child.

### **Liability and Indemnity**

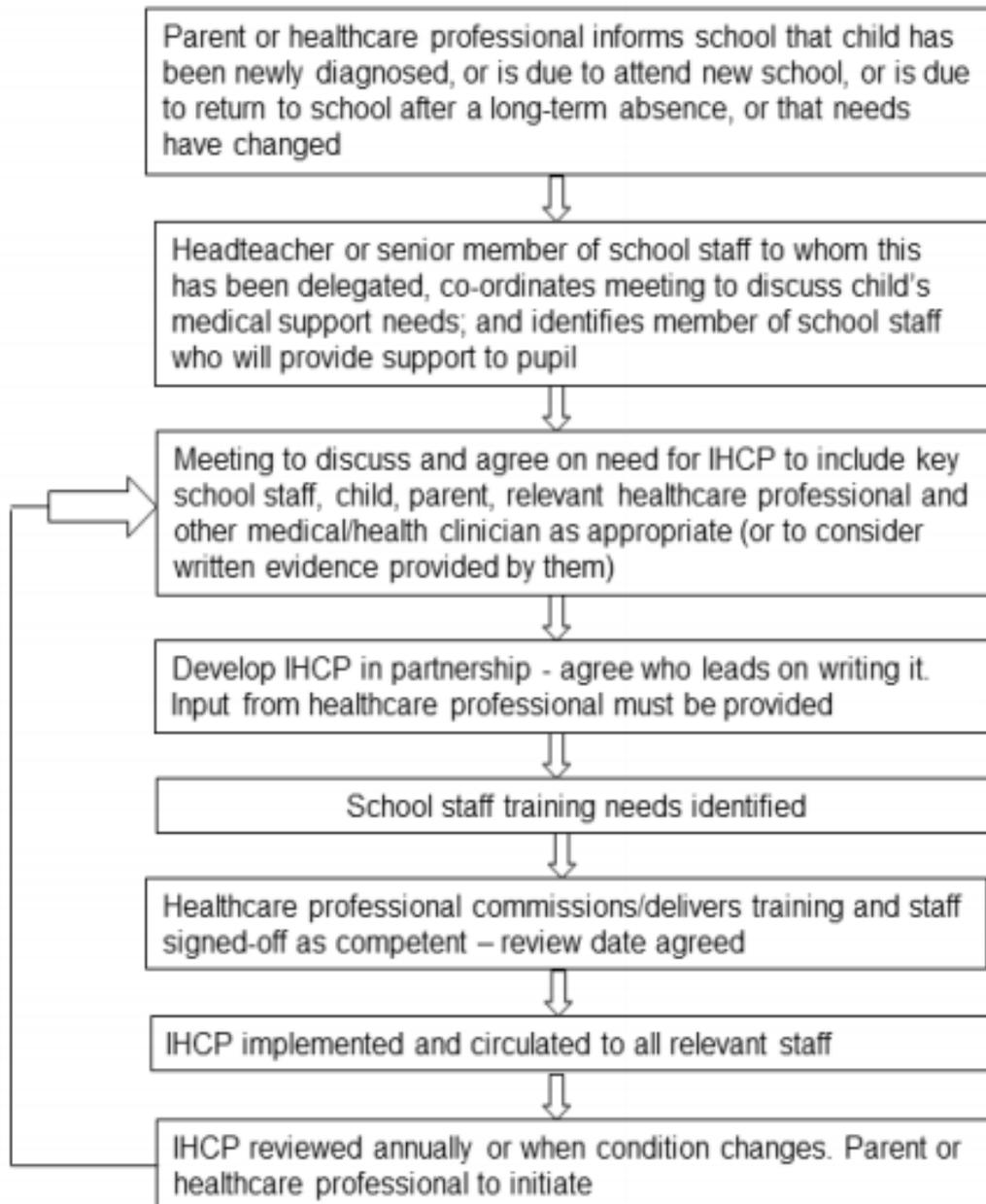
Individual cover may need to be arranged for any healthcare procedures – any requirements of the insurance, such as the need for staff to be trained, should be made clear and complied with. In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer.

### **Complaints**

Should parents/carers be unhappy with any aspect of their child's care at the school, they must discuss their concerns with the school. This will be with the student's teacher or family support manager in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to a member of the senior leadership team, who will, where necessary, bring concerns to the attention of the Co-

Headteachers. In the unlikely event of this not resolving the issue, the parent/carer must make a formal complaint using the Parayhouse School Complaints Procedure.

Appendix A: Model process for developing individual healthcare plans



## Appendix B: Template IHP

Name of Student	Date of Birth
Name and Contact Details of Parent/Carer	
Diagnosed Medical Conditions:	

GP Name:
Surgery Address:

Specialist Nurse/Doctor
Name:
Hospital:

I have discussed this care plan with a health representative from the school and am satisfied that it reflects my/the child's health care needs in school.	
Signature of Parent/Carer	Date

Health Care Needs in School: (including required medical procedures, training required, possible triggers, side effects and any requirement adjustments at school)

Medication:

Name of Prescribed Medication:

Location of Medication:

Dosage Instructions:

Health Care Review Date:

Health Care Plan Completed by:

Designation:

**Any relevant information/guidance related to specific conditions should be attached as appendices**