

POLICY TITLE: SUPPORTING STUDENTS WITH MEDICAL CONDITIONS POLICY

STATUS: Statutory
REVIEWED BY: Local Governing Body (CPH)/Principal
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AUTHOR: Principal

1. Rationale and Aim

This policy explains our approach to supporting students with medical conditions. At Etonbury Academy some of our children and young people will have medical conditions that require support and we want to do this so that they can have full access to education.

2. Policy

2.1. Section 100 of the Children and Families Act 2014 places a duty on governing bodies of academies to make arrangements for supporting students at their school with medical conditions.

2.2. Some children with medical conditions may be disabled. Where this is the case we comply with the Equality Act 2010.

2.3. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan. Our SEND policy sets out support for students with SEN.

2.4. This policy is written in conjunction with the DfE document "Supporting students at school with medical conditions", December 2015. It incorporates, and therefore replaces, "Policy on Administration of Medicines to Students with Medical Needs and Conditions".

3. Procedure

3.1. Implementation of the policy by a named person

3.1.1. There is a named person with responsibility for day to day implementation of this policy. This person is responsible for ensuring that staff are suitably trained.

3.1.2. All staff will be made aware of a child's condition through the Health Care Plan, and medical needs list.

3.1.3. There is a number of trained first aid staff in the academy to ensure adequate cover in the case of staff absence. These staff will be aware of students' medical conditions.

3.1.4. Any supply or cover teachers in the academy will be made aware of the medical conditions of students that they will be teaching during their time in the academy.

3.1.5. The named person in the academy will support staff in planning educational visits and school trips involving students with medical conditions, ensuring that appropriate risk assessments are drawn up.

3.2. Notification that a student has a medical condition

3.2.1. Parents should inform the academy of any medical conditions that their child may have.

3.2.2. This information will be recorded on the new starter form and passed on during the transition process. Meetings will take place between the persons responsible in each academy to pass information on.

3.2.3. The information will be recorded on the student file, and added to the medical needs register.

3.3. Health Care Plans (see appendix 2)

3.3.1. When a child has a medical condition that requires support in school a health care plan will be created by the school nurse and it must contain the following (taken directly from government statutory guidance:

3.3.1.1. the medical condition, its triggers, signs, symptoms and treatments;

3.3.1.2. the student'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;

3.3.1.3. specific support for the student'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;
- 3.3.1.4. 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 should be clearly stated with appropriate arrangements for monitoring;
 - 3.3.1.5. who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
 - 3.3.1.6. who in the academy needs to be aware of the child's condition and the support required;
 - 3.3.1.7. arrangements for written permission from parents and the Principal for medication to be administered by a member of staff, or self-administered by the student during school hours;
 - 3.3.1.8. 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, e.g. risk assessments;
 - 3.3.1.9. where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition; and
 - 3.3.1.10. 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 that could be used to inform development of their individual healthcare plan.
 - 3.3.1.11. They will be reviewed annually in consultation with healthcare professionals, parents, the child or young person and academy staff.
- 3.3.2. Where a child has SEN and an EHC plan, the healthcare should be linked to or be part of EHC plan.

3.4. Roles and Responsibilities

- 3.4.1. The Governing Body are responsible for making sure that this policy is developed and implemented. They are to ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- 3.4.2. The Principal is responsible for implementing the policy. They are to ensure that all staff are aware of the policy and that staff are aware of students conditions, recruiting staff as needed and providing training. They should ensure that there is sufficient insurance in place.
- 3.4.3. Academy Staff may be asked to support students with medical needs, although cannot be required to do so. They should be sufficiently trained to undertake the duties. All academy staff should know what to do should a child with a medical condition require help.
- 3.4.4. The school nurse will notify the academy when a child has been identified as having a medical condition which will require support in school and will write the healthcare plans. The school will also notify the school nurse of any changes in medical conditions that are pertinent to the healthcare plan.
- 3.4.5. Students should be fully involved in the process supporting their needs, and should contribute as much as possible to their healthcare plan. Children who are competent in managing their own needs should be encouraged to do so, including managing their own medication and procedures.
- 3.4.6. Parents should provide the academy with up to date information about their child's needs.

3.5. Staff Training and Support

- 3.5.1. The member of staff responsible for students with medical conditions will review the needs of students in the academy and make a judgement on the training that is required for staff, they will then commission the training from relevant healthcare professionals.
- 3.5.2. Any member of staff being asked to support a student with medical needs will be given appropriate training.
- 3.5.3. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training.
- 3.5.4. Whole school awareness training will be provided as required throughout the year.

3.6. Managing medicines on school premises

- 3.6.1. Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- 3.6.2. The designated First Aid Co-ordinator will undertake training in the administration of medicines. In their absence a nominated first aider will take on the role of administering medication.
- 3.6.3. Parent/carers of students with long term conditions requiring medication during the college day must inform the academy in writing by completing a Health Care Plan, Appendix 2, and an Administration of Medicine Consent Form Appendix 3; which are available from the designated First Aid Co-Ordinator and the Academy website.
- 3.6.4. Parent/carers of students requiring prescribed medication over a short period must inform the Academy in writing by completing an Administration of Medicines Consent Form, Appendix 3; which is available from the designated First Aid Co-Ordinator and Academy website.
- 3.6.5. Where a child is on prescribed medication to be taken three times or fewer per day, this should be done by parents out of school time. The schools will only administer prescribed medication that is to be taken four or more times per day
- 3.6.6. In relation to more complex treatment, such as in the management of diabetes for example, the individual academy will ask the parent to administer such medication and treatment.
- 3.6.7. Parents will be informed of the above procedures when the academy are informed of medical conditions by parents or school nursing team.
- 3.6.8. Prescribed medication will only be given if it is in the original container from the pharmacy, clearly stating student name, D.O.B. name of medication and dosage to be administered. It must be in-date.
- 3.6.9. Epi-Pens should be in a plastic container which is clearly labelled with student's name, D.O.B and should contain the NHS Health Care Plan, Appendix 1.
- 3.6.10. Medications for the control of asthma, diabetes and allergies may be carried by students themselves, but must be used in a safe and responsible manner. Emergency supplies will be stored by the designated First aid Co-ordinator's room and be accessible at all times.
- 3.6.11. Parent/Carers are responsible for medications being delivered to the academy and collecting unused medication at the end of treatment.
- 3.6.12. Prescribed medicines in the controlled drugs category will be held by the designated First Aid Co-ordinator in a locked, non-removable cabinet in the designated First Aid Co-ordinators room.
- 3.6.13. When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps
- 3.6.14. The designated First Aid Co-ordinator will keep accurate records of all medications administered, and will inform parent/carers of any reactions to medication.
- 3.6.15. The Academy will ensure that staff accompanying trips and visits are aware of any students needing medication, and will be advised by the designated First Aid Co-ordinator to speak with parent/carers prior to the visit.

3.7. Administration of pain relief

- 3.7.1. Pain relief medication will only be administered following written consent from parent

/carers. This can be using Administration of Medicines Consent Form, Appendix 3, or via e mail.

- 3.7.2. The Academy will not administer pain relief unless it has been prescribed by a doctor.
- 3.7.3. Students will never be offered Aspirin
- 3.7.4. Students will be offered Paracetamol for the relief of headache or stomach cramps due to menstrual cycle.
- 3.7.5. Students will only be offered Paracetamol after consultation with a parent/carer by telephone on the day.
- 3.7.6. The designated First Aid Co-Ordinator will ensure no other medications containing Paracetamol has been taken by student on the day.
- 3.7.7. The designated First Aid Co-ordinator will keep accurate records with student name, D.O.B; Tutor Group, Time and dose taken.

3.8. Students carrying their own pain relief

- 3.8.1. Etonbury Academy also supports students who choose to carry their own medication for use during the day. Therefore, Etonbury Academy ONLY allows students to carry ONE dose of paracetamol for pain relief during the day.

3.9. Emergency Salbutamol

- 3.9.1. In line with the Department for Health “Guidance on the use of emergency inhalers in schools¹” each academy may want to keep an emergency Salbutamol inhaler for those students with a diagnosis of asthma and an existing prescription for salbutamol.
- 3.9.2. The emergency salbutamol inhaler should only be used by children who have been diagnosed with asthma, and prescribed a reliever inhaler OR who have been prescribed a reliever inhaler AND for whom written parental consent for use of the emergency inhaler has been given.
- 3.9.3. This information should be recorded in a child’s healthcare plan

3.10. Emergency Procedures

- 3.10.1. The individual healthcare plan will clearly state what needs to be done in an emergency.
- 3.10.2. If a student needs to be taken to hospital, staff will stay with the student until a parent arrives to take them to hospital or accompany them in the ambulance.

3.11. Trips, Visits and transport

- 3.11.1. We will actively support all students with medical conditions to enable them to take part in the full range of trips, visits, sporting activities and events organised in our academy.
- 3.11.2. Group leaders and supervisors must be made aware of medical needs and how it will impact the activity, with appropriate risk assessment being put in place. Staff should follow Central Bedfordshire Policy on Education visits and Journeys.
- 3.11.3. It may be helpful to notify the school transport providers about a child’s medical needs

3.12. Unacceptable Practice (taken directly from statutory guidance) It is generally not acceptable to:

- 3.12.1. prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;

¹https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/360585/guidance_on_use_of_emergency_inhalers_in_schools_October_2014.pdf

- 3.12.2. assume that every child with the same condition requires the same treatment;
- 3.12.3. ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- 3.12.4. send children 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;
- 3.12.5. if the child becomes ill, send them to the medical room unaccompanied or with someone unsuitable;
- 3.12.6. penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
- 3.12.7. prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- 3.12.8. require parents, 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; or
- 3.12.9. prevent children from participating, or create unnecessary barriers to children participating in any aspect of school.

3.13. Handling Complaints

- 3.13.1. The Academy's Complaints Policy sets out the process that needs to be followed to pursue a complaint.

4. Monitoring and Evaluation

The effectiveness of this policy will be monitored and evaluated through ongoing self-evaluation and analysis of the outcomes of students with medical conditions, including attendance rates, achievement profile and involvement in school life.

5. Implementation and Review

This will be implemented by the members of staff in the academy with responsibility for first aid and pastoral care.

The Principal and SENDCO is responsible for policy implementation.

This policy will be made known to all staff, parent/carers and students via the academy website. This policy will be reviewed by the Local Governing Body every two years.

Appendices

Appendix 1 – Health Care Plan

Appendix 2 – Administration of Medicine Consent Form

Appendix 1 – Health Care Plan

HEALTH CARE PLAN	
Student name	
Date of Birth	Tutor Group
Home address	
Name of Medical Condition	
Date plan started	Review Date
Parent/Care Name	
Relationship to Child	
Home phone No.	Work Phone No.
Mobile Phone No.	Email Address
Other parent/carer and relationship to child (2 nd Contact)	
Home Phone No.	Work Phone No.
Mobile Phone No.	Email Address
Name of Clinic or Hospital	
Phone no. of clinic or Hospital	
GP Name and practice address	
GP Phone No:	

Describe medical needs and child's symptoms

Daily care requirements (eg sport/lunch)

Describe what constitutes an emergency for your child

Follow up care:

Who is responsible in an emergency (state if different for off-site activities)

This form is to be completed with the young person, parents, the school and other health professionals and is kept securely in school, both electronically and as a hard copy. This information may be shared with other professionals in the best interests of the health of the young person.

Signed Parent:

Date:

Print Name:

Signed Young Person:

Date:

Print Name:

Signed on behalf of the school:

Date

Print Name:

Describe what constitutes an emergency.
