



**Barnfields Primary School
Policy for Supporting Pupils with
Medical Conditions**



Date Approved: Sept 2019	Print Name: Richard Chadwick
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Introduction

The following policy is to be read in conjunction with the DFE document **'Supporting pupils at school with medical conditions', December 2015.**

The Governing Board of Barnfields Primary School has a duty to ensure arrangements are in place to support pupils with medical conditions. The aim of this policy is to ensure that all pupils with medical conditions, in terms of both physical and mental health, receive appropriate support allowing them to play a full and active role in school life, remain healthy, have full access to education (including educational visits and physical education) and achieve their academic potential.

Barnfields Primary School believes it is important that parents/carers of pupils with medical conditions feel confident that the school provides effective support for their child's medical condition, and that pupils feel safe in the school environment.

There are also social and emotional implications associated with medical conditions. Pupils with medical conditions can develop emotional disorders, such as self-consciousness, anxiety and depression, and be subject to bullying. This policy aims to minimise the risks of pupils experiencing these difficulties.

Long-term absences as a result of medical conditions can affect educational attainment, impact integration with peers, and affect wellbeing and emotional health. This policy contains procedures to minimise the impact of long-term absence and effectively manage short-term absence.

Some pupils with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. The school has a duty to comply with the Act in all such cases.

In addition, some pupils with medical conditions may also have SEND and have an education, health and care (EHC) plan collating their health, social and SEND provision. For these pupils, compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's SEND Policy will ensure compliance with legal duties.

To ensure that the needs of our pupils with medical conditions are fully understood and effectively supported, we consult with health and social care professionals, pupils and their parents/carers.

Legal framework

This policy has due regard to legislation including, but not limited to, the following:

- The Children and Families Act 2014
- The Education Act 2002
- The Education Act 1996 (as amended)
- The Children Act 1989
- The National Health Service Act 2006 (as amended)
- The Equality Act 2010
- The Health and Safety at Work etc. Act 1974

- The Misuse of Drugs Act 1971
- The Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)
- The Human Medicines (Amendment) Regulations 2017

This policy has due regard to the following guidance:

- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2000) 'Guidance on first aid for schools'
- Ofsted (2015) 'The common inspection framework: education, skills and early years'
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

This policy has due regard to the following school policies:

- SEND Policy
- First Aid
- Asthma Policy
- Allergen and Anaphylaxis Policy
- Complaints Procedure Policy

Roles and Responsibilities

The **Governing Board** is responsible for:

- Determining the school's general policy and ensuring that arrangements are in place to support children with medical conditions, in order to ensure that all pupils can access and enjoy the same opportunities at school as any other child.
- Ensuring that any members of school staff are able to access information as needed.

The Named Persons responsible for children with medical conditions are **Headteacher – Mr Graham Ball** and **Deputy Headteacher – Mrs Gayle Darlington with the support of Mrs Karen Bakewell and Mrs Cheryl Duddy**

K Bakewell/ C Duddy is responsible for:

- Informing relevant staff of medical conditions.
- Arranging training for identified staff.
- Ensuring that staff awareness of the need to communicate necessary information about medical conditions to supply staff and where appropriate, taking the lead in communicating this information.
- Assisting with risk assessment for school visits and other activities outside of the normal timetable.
- Developing, monitoring and reviewing Individual Healthcare Plans, including Asthma Care Plans.
- Working together with parents, pupils, healthcare professionals and other agencies.

G Ball is responsible for:

- Overseeing the management and provision of support for children with medical conditions.
- Ensuring that sufficient trained numbers of staff are available to implement the policy and deliver individual healthcare plans, including covering absence and staff turnover.
- Ensuring that school staff are appropriately insured and are aware that they are insured.

Teachers and Support Staff are responsible for:

- The day to day management of medical conditions of children they work with, in line with training received and as set out in Individual Health Plan (IHCP)
- Working with the named person, ensure that risk assessments are carried out for school visits and other activities outside of the normal timetable.

- Providing information about medical conditions to supply staff who will be covering their role where the need for supply staff is known in advance.

Parents or carers are responsible for:

- Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible this should be done before the child starts at our school. This information might be provided by Early Years practitioners in different settings or health visitors.
- Providing the school with up-to-date information about their child's medical needs.

Pupils are responsible for:

- Ensuring that they are fully involved in discussions about their medical support needs.
- Contributing to the development of their IHCP.
- Being sensitive to the needs of pupils with medical conditions.

School staff:

- May be asked to provide support to pupils with medical conditions, including the administering of medicines, but are not required to do so.
- Take into account the needs of pupils with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- Receive sufficient training and achieve the required level of competency before taking responsibility for supporting pupils with medical conditions.
- Know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

The school nurse or health visitor is responsible for:

- Providing support for staff on implementing a child's individual healthcare plan and providing advice and liaison including with regard to training.

Clinical Commissioning Groups (CCGs) must:

- Ensure that commissioning is responsive to pupils' needs, and that health services are able to cooperate with schools supporting pupils with medical conditions.
- Make joint commissioning arrangements for education, health and care provision for pupils with SEND.
- Are responsive to LAs and schools looking to improve links between health services and schools.
- Provide clinical support for pupils who have long-term conditions and disabilities.
- Ensure that commissioning arrangements provide the necessary ongoing support essential to ensuring the safety of vulnerable pupils.

Other **healthcare professionals and services, including GPs and paediatricians** must:

- Notify the school nursing team when a child has been identified as having a medical condition that will require support at school.
- Provide advice on developing IHCPs.
- May provide support in the school for children with particular conditions, e.g. asthma, diabetes and epilepsy.

Co-operate with the school, including ensuring communication, liaising with the school nursing team and other healthcare professionals, and participating in local outreach training.

The LA must:

- Commission school nursing teams for local schools.
- Promote co-operation between relevant partners.
- Make joint commissioning arrangements for education, health and care provision for pupils with SEND.
- Provide support, advice and guidance, and suitable training for school staff, ensuring that IHCPs can be effectively delivered.

- Work with the school to ensure that pupils with medical conditions can attend school full-time.

The role of **Ofsted**:

- Ofsted inspectors will consider how well the school meets the needs of the full range of pupils, including those with medical conditions.
- Key judgements are informed by the progress and achievement of pupils with medical conditions, alongside pupils with SEND, and also by pupils' spiritual, moral, social and cultural development.

Staff Training and Support

Any staff member providing support to a pupil with medical conditions receives suitable training. Staff do not undertake healthcare procedures or administer medication without appropriate training.

Training needs are assessed by the school through the development and review of IHCPs, on an annual basis for all school staff, and when a new staff member arrives.

Through training, staff have the requisite competency and confidence to support pupils with medical conditions and fulfil the requirements set out in IHCPs. Staff understand the medical condition(s) they are asked to support, their implications, and any preventative measures that must be taken.

The school nursing team confirms the proficiency of staff in performing medical procedures or providing medication.

A first-aid certificate does not constitute appropriate training for supporting pupils with medical conditions.

Whole-school awareness training is carried out on an annual basis for all staff, and included in the induction of new staff members.

The school identifies suitable training opportunities that ensure all medical conditions affecting pupils in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

Training is commissioned by the **Headteacher** and provided by the following bodies:

- Commercial training provider
- The school nursing team
- Name of GP consultant
- Parents/carers of pupils with medical conditions

Parents/carers of pupils with medical conditions are consulted for specific advice and their views are sought where necessary, but they will not be used as a sole trainer.

The Governing Board will provide details of further CPD opportunities for staff regarding supporting pupils with medical conditions.

Procedure when Notification is Received that a Child has a Medical Condition

When the school is notified that a pupil has a medical condition that requires support in school, the school nursing team informs the Headteacher. Following this, the school begins to arrange a meeting with parents/carers, healthcare professionals and the pupil, with a view to discussing the necessity of an IHCP.

The school does not wait for a formal diagnosis before providing support to pupils. Where a pupil's medical condition is unclear, or where there is a difference of opinion concerning what support is required, a judgement is made by the Headteacher based on all available evidence (including medical evidence and consultation with parents/carers).

For a pupil starting at the school in a September uptake, arrangements are in place prior to their introduction and informed by their previous institution.

Where a pupil joins the school mid-term or a new diagnosis is received, arrangements are put in place within two weeks.

Individual Healthcare Plans (IHCPs)

The school, healthcare professionals and parent/carer(s) agree, based on evidence, whether an IHCP is required for a pupil, or whether it would be inappropriate or disproportionate to their level of need. If no consensus can be reached, the Headteacher makes the final decision. The school, parent/carer(s) and a relevant healthcare professional work in partnership to create and review IHCPs. Where appropriate, the pupil is also involved in the process.

IHCPs include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments.
- The pupil's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements and environmental issues.
- The support needed for the pupil's educational, social and emotional needs.
- The level of support needed, including in emergencies.
- Whether a child can self-manage their medication.
- Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively.
- Who needs to be made aware of the pupil's condition and the support required.
- Separate arrangements or procedures required during school trips and activities.
- Where confidentiality issues are raised by the parent/carer(s) or pupil, the designated individual to be entrusted with information about the pupil's medical condition.
- What to do in an emergency, including contact details and contingency arrangements.

Where a pupil has an emergency healthcare plan prepared by their lead clinician, this is used to inform the IHCP.

IHCPs are easily accessible to those who need to refer to them, but confidentiality is preserved. IHCPs are reviewed on at least an annual basis, or when a child's medical circumstances change, whichever is sooner.

Where a pupil has an EHC plan, the IHCP is linked to it or becomes part of it.

Where a child has SEND but does not have a statement or EHC plan, their SEND should be mentioned in their IHCP.

Where a child is returning from a period of hospital education, alternative provision or home tuition, we work with the LA and education provider to ensure that their IHCP identifies the support the child needs to reintegrate.

5. Administering Medicines

Written consent from a person with parental responsibility must be received before administering any medicine to a child at school. Medicines should only be administered at school when it would be detrimental to the child's health or school attendance not to do so. Medicines will only be accepted for administration if they are:

- Prescribed
- 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 inside an insulin pen or pump, rather than in its original container.

Procedure for Administering Prescribed Medicines in School

Please note that the administration of medicine at school is completed at the discretion of the school. It is not mandatory for the school to administer medicine. Where possible, however, a member of staff will be allocated to administer the medicine.

- All medicines and written consent must be stored safely in a locked cupboard in the main office.
- All medicines administered must be prescribed by a doctor.
- The children and applicable staff should know where their medicines are at all times
- Medicines will be administered by C Duddy or K Bakewell at 11.30am each day to ensure that no child is missed
- Each day, when the medicine is brought to the main office, the child will be given a dated sticker to wear. After the administration of the medicine, this will be recorded on the consent form and the sticker will be taken from the child and placed next to the recording.
- All consent forms will be kept in the Medicines File; active forms at the front and non-active forms archived behind.

Self-Management

Following discussion with parents/carers, pupils who are competent to manage their own health needs and medicines are encouraged to take responsibility for self-managing their medicines and procedures. This is reflected in their IHCP.

Where appropriate, pupils are allowed to carry their own medicines and relevant devices.

Where it is not possible for pupils to carry their own medicines or devices, they are held in suitable locations that can be accessed quickly and easily.

If a pupil refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the pupil's IHCP is followed. Following such an event, parents/carers are informed so that alternative options can be considered.

Activities off the School Site

Pupils with medical conditions are supported to participate in Educational Visits, sporting activities and residential visits.

Prior to an activity taking place, the school conducts a risk assessment to identify what reasonable adjustments should be taken to enable pupils with medical conditions to participate. In addition to a risk assessment, advice is sought from pupils, parents/carers and relevant medical professionals.

The school will arrange for adjustments to be made for all pupils to participate, except where evidence from a clinician, such as a GP, indicates that this is not possible.

Adrenaline Auto-injectors (AAIs)

The administration of AAIs and the treatment of anaphylaxis will be carried out in accordance with the school's **Allergen and Anaphylaxis Policy**.

- A medical list will be kept of all the pupils who have been prescribed an AAI to use in the event of anaphylaxis. A copy of this will be held in each classroom for easy access in the event of an allergic reaction and will be checked as part of initiating the emergency response.
- Where a pupil has been prescribed an AAI, this will be written into their IHCP.
- Pupils who have prescribed AAI devices, and are over the age of seven, when leaving the school for educational visits etc, are able to keep their device in their possession. For pupils under seven, AAIs will be kept by the designated member of staff, who will be close at hand at all times.
- For all pupils who have prescribed AAI devices, these are stored in a suitably safe and central location: **the school medical room and the child's classroom**.
- Designated staff members will be trained in how to administer an AAI, and the sequence of events to follow when doing so. AAIs will only be administered by these staff members.

- In the event of anaphylaxis, a designated staff member will be contacted.
- Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI.
- If necessary, other staff members may assist the designated staff members with administering AAI's, such as where the pupil needs restraining.
- Where a pupil appears to be having a severe allergic reaction, the emergency services will be contacted even if an AAI device has already been administered.
- In the event that an AAI is used, the pupil's parents/carers will be notified that an AAI has been administered.
- When AAI's are used, the following information will be recorded:
 - Where and when the reaction took place
 - How much medication was given and by whom
- AAI's will not be reused and will be disposed of according to manufacturer's guidelines following use.

Defibrillators

The school currently does not have an automated external defibrillator (AED).

Action in Emergencies

A copy of this information will be displayed in the school office.

Request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked.

- The school's telephone number: **01785 337320**
- Your name
- Your location: **Barnfields Primary School, Stafford, ST17 4RD**
- Provide the exact location of the patient within the school
- Provide the name of the child and a brief description of their symptoms
- Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient
- Ask office staff to contact premises to open relevant gates for entry.
- Contact the parents to inform them of the situation.

A member of staff should stay with the pupil until the parent/carer arrives. If a parent/carer does not arrive before the pupil is transported to hospital, a member of staff should accompany the child in the ambulance.

Activities Beyond the Usual Curriculum

Reasonable adjustments will be made to enable pupils with medical needs to participate fully and safely in educational visits, residential visits, sporting activities and other activities beyond the usual curriculum.

When carrying out risk assessments, parents/carers, pupils and healthcare professionals will be consulted where appropriate.

Unacceptable Practice

The following items are not generally acceptable practice with regard to children with medical conditions, although the school will use discretion to respond to each individual case in the most appropriate manner.

- Preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assuming that every child with the same condition requires the same treatment.
- Ignoring the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged).

- Sending 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.
- If the child becomes ill, sending them to the school office or medical room unaccompanied or with someone unsuitable.
- Penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments.
- Preventing pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Requiring parents or otherwise making them feel obliged, to attend school to administer medication on a long term basis 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.
- Preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

Complaints

An individual wishing to make a complaint about the school's actions in supporting a child with medical conditions should discuss this with the school in the first instance. If the issue is not resolved, then a formal complaint may be made, following the complaints procedure as set out in the Barnfields Complaints Policy.

School Insurance Policy

The Governing Board ensures that appropriate insurance is in place to cover staff providing support to pupils with medical conditions.

The school holds an insurance policy with **Zurich** covering liability relating to the administration of medication. The policy has the following requirements:

- **All staff must have undertaken appropriate training.**

The school holds an insurance policy with **Zurich** covering healthcare procedures. The policy has the following requirements:

- **All staff must have undertaken appropriate training.**
- In the event of a claim alleging negligence by a member of staff, civil actions are most likely to be brought against the school, not the individual.

Equality Impact Statement

We will do all we can to ensure that this policy does not discriminate, directly or indirectly. We shall do this through regular monitoring and evaluation of our policies. On review we shall assess and consult relevant stakeholders on the likely impact of our policies on the promotion of all aspects of equality, as laid down in the Equality Act (2010). This will include, but not necessarily be limited to: race; gender; sexual orientation; disability; ethnicity; religion; cultural beliefs and pregnancy/maternity. We will use appropriate Equality Impact Assessment to monitor the impact of all our policies and the policy may be amended as a result of this assessment.

This policy should be read in conjunction with the Barnfields Primary School Mental Health and Wellbeing policy in order to ensure the promotion of positive mental health and wellbeing for all staff and pupils.

Appendix: Process for Developing IHCPs

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



K Bakewell/C Duddy to co-ordinate meeting to discuss child's medical support needs. They will also identify member of school staff who will provide support to pupil.



Meeting to discuss and agree on need for IHCP to include key school 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.



School staff training needs identified.



Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed.



IHCP implemented and circulated to all relevant staff.



IHCP reviewed annually or when condition changes. To be initiated by parent or healthcare professional.

