

Neatishead, Salhouse & Fleggburgh Federation Including Fledglings Nursery

Supporting Pupils with Medical Conditions including the administration of medicines Policy

Our schools aim to be happy and safe places where everyone shares a love of learning. Our Christian core values of respect, responsibility, courage, trust, perseverance and compassion underpin all we do.

Formally adopted by the Governing Board	
On	12 th July 2021(via zoom)
Chair of Governors	J Gay
Date for review	Annual
Responsibility	Full GB

Our school is the secure base from which we 'soar on wings' to realise our ambitions.

Through valuing one another and the world in which we live, we flourish.

Through providing rich opportunities, we can imagine fulfilling futures.

Through a shared love of learning, we transform lives.

Guidance for Governing Bodies' (DfE, December 2015).

This policy adheres to the guidance in this document, and also to the guidance in the NCC document 'Medical Needs Service Policy'

This policy is to be read in conjunction with:

- Ensuring a good education for children who cannot attend school because of health needs (Statutory guidance for Local Authorities January 2013)
- Equality Act 2010
- The school's SEN Policy/Information report (to be found on the website)
- Children and Families Act 2014
- SEN Code of Practice

Aims

To ensure pupils across the federation with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, remain healthy and achieve their academic potential.

To ensure the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

Procedure

The Executive Headteacher is responsible for ensuring that whenever the federation is notified that a pupil has a medical condition:

- sufficient staff are suitably trained;
- all relevant staff are made aware of a child's condition;
- cover arrangements in case of staff absence/turnover are always in place;
- supply teachers are briefed:
- risk assessments for visits and activities out of the normal timetable are carried out;
- individual healthcare plans are monitored (at least annually);
- transitional arrangements between schools are carried out;
- If a child's needs change, the above measures are adjusted accordingly.

Where children are joining the federation at the start of a new academic year, these arrangements should be in place for the start of term.

Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

The school nursing team is operated by Cambridgeshire Community NHS Trust and can be contacted by parents and professionals on 0300 300 0123. Fledglings will contact Just One on the same number.

Individual Health Care Plan (IHCPs)

Individual Healthcare plans 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, and are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex. However, not all children will require one. The individual school, healthcare professional and parent should agree, based on evidence, when a healthcare plan

would be inappropriate or disproportionate. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided at Annex A in the DfE document <u>`Supporting Pupils at School with Medical Conditions:</u> Statutory Guidance for Governing Bodies'

The following information should be considered when writing an Individual Healthcare Plan, depending on individual needs:

- the medical condition, its triggers, signs, symptoms and treatments;
- the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues;
- specific support for the pupil's educational, social and emotional needs;
- the level of support needed including in emergencies;
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements;
- who in school needs to be aware of the child's condition and the support required.
- arrangements for written permission from parents and the Executive headteacher for medication to be administered by a member of staff or self-administered (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision);
- 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;
- confidentiality;
- what to do in an emergency, who to contact and contingency arrangements;

Refer to template A in the DfE document_______
'Supporting pupils at school with medical needs; templates'. Template G in the document provides a model letter inviting parents to contribute to an Individual Healthcare Plan development.

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with any relevant person or agency to provide effective support for the child.

The Governing Body

- must make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented;
- must ensure sufficient staff receive suitable training and are competent to support children with medical conditions;
- must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk.

The Executive Headteacher

- should ensure all staff are aware of this policy and understand their role in its implementation;
- should ensure all staff who need to know are informed of a child's condition;
- should ensure sufficient numbers of staff are trained to implement the policy and deliver IHCPs, including in emergency and contingency situations, and they are appropriately insured;
- is responsible for the development of IHCPs;
- should contact the school nursing service in the case of any child with a medical condition where support is needed

School Staff

- any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so;
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions;
- any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

The School Nursing Service / Healthcare Professionals

- should notify the school when a child has been identified as having a medical condition which will require support in school;
- may support staff on implementing a child's IHCP and provide advice and liaison;
- may provide advice on developing healthcare plans;
- specialist local teams may be able to provide support for particular conditions (eg. Asthma, Anaphylaxis, diabetes).

Pupils

• should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHCP.

Parents

- should notify the school when a child has been identified as having a medical condition which will require support in school;
- must provide the school with sufficient and up-to-date information about their child's medical needs;
- are the key partners and should be involved in the development and review of their child's IHCP;
- should carry out any action they have agreed to as part of the IHCP implementation.

Notes

The federation does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.

Medical Needs Referral

A medical needs referral can be made by a school for a child who cannot attend school because of health needs where they will be away from school for 15 days or more, whether consecutive or cumulative. Information on medical needs referrals, including evidence required, can be found in the NCC document' <u>Medical Needs Service Policy</u>' This document also includes a Medical Needs referral form

Administering Medicines

The administering of medicines follows the guidelines and templates outlined in the DfE document <u>Supporting Pupils at School with Medical Conditions: Statutory Guidance for Governing Bodies</u>

- Medicines should only be administered in school when it would be detrimental to a child's health or school attendance not to do so.
- All children must have parental permission before any medication (prescription or non-prescription) is administered
- Where possible, prescribed medicines should be taken outside school hours, but there may be times when they need to be taken within the school day.
- Where prescribed medication does need to be taken during the day the parents must complete and sign the permission form taken from the school document 'Request for school to administer prescribed medication'
- Medication will only be accepted if it is 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 still 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 Office
- The Office staff will take responsibility or medications and will ensure that children have them at the correct times. A member of the Office Staff will come to the child's class at the appropriate time, a record will be kept including the dosage and time administered. A member of staff from the class will be needed to witness the medicine being given.
- When no longer required, the medicine will be returned to the parent to arrange for safe disposal
- If a SHARP box is required for a child, this should be provided by the parent. When the box is full, the parent will be contacted to arrange disposal
- Devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are kept in classrooms in grab bags. The bag should go with the class when they attend lessons elsewhere.
- Fledglings Nursery would not administer pain relief unless it is for dental reasons only. Parents would be asked to come and administer the medication if necessary.
- If a child at Fledglings refuses to have a nappy changed by a member of staff, parents would be called in to change it.

Asthma

Children recorded as having asthma, should have an inhaler in school. Class teachers should be aware of all children with asthma and other health needs. Inhalers should be kept in the grab bag in the classroom and taken to the hall, field for Games and where necessary other lessons which are not in the classroom. If a child needs to take their inhaler, the dosage, time administered and supervising adult is recorded on a sheet contained in the bag.

Unacceptable Practice:

- preventing children from easily accessing their medication and administering it when and where necessary;
- assuming children with the same condition require the same treatment;
- ignoring the views of the child, their parents;
- ignoring medical advice or opinion;
- sending children with medical conditions home frequently or prevent them from staying for normal school activities (unless specified in IHCP);
- penalising children for their attendance record if their absences are related to their medical condition that is recognised under this policy;
- preventing children from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively;
- to require parents to attend school to administer medication or provide medical support to their child, including 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;
- preventing children from participating in any aspect of school life, including school trips (such as requiring parents to accompany the child).