

Supporting Children with Medical Conditions Policy

2019-2020

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| **Date Reviewed:** | **October 2019** |
| **Review Frequency:** | **Annually** |
| **Date of next review:** | **October 2020** |
| **Governor Signature:** |  |

**Our Ethos:**

‘Everyone in our school community has a right to learn and grow, be treated with respect and feel safe. Each has a responsibility too to conduct themselves in a way that helps promote these rights helping us to ensure that we continue to develop a culture and ethos in which every person feels valued and knows how to value the contribution of others.’

**CONTEXT**

This policy is to be read in conjunction with Supporting pupils at schools with medical conditions (DfE 2015,) Section 100 of the Children and Families Act (2014,) SEN Code of Practice (2014), School Admissions Code (DfE 2012), Misuse of Drugs Act (1971) Child Protection and Safeguarding policy, Health and Safety policy.

1. **INTRODUCTION**

1.1 Under The Equality Act 2010, the school must ensure that no child with a medical condition is discriminated against or denied access to education and associated services. This includes all aspects of school life such as trips, clubs and activities.

1.2 The aim of this policy and related procedures is to ensure that all children with medical conditions are supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

1.3 The School will seek and consider advice from all health care professionals and listen to and value the views of parents/carers and pupils, in developing appropriate provision for any medical condition.

**2. POLICY IMPLEMENTATION**

2.1 Overall responsibility for the implementation of this policy and related procedures lies with the area management group. This group will approve and review this policy **annually.**

2.2 The child’s pastoral lead will be the first point of contact for any member of staff, parent/carer who wishes to discuss medical condition or health concern regarding a child.

2.3 The Deputy Headteacher will be the named member of staff responsible for ensuring that all School staff are aware of this policy and any related procedures.

2.4 The senior leadership team will ensure that all staff supporting children with medical conditions have appropriate training. A record of this training will be held in the School office.

2.5 Pastoral Leaders will be responsible for the monitoring of all individual health care plans and risk assessing any activities/individual pupils as necessary.

2.6 The School will ensure that suitably trained staff are available whenever pupils with medical conditions are engaged in School activities.

**3. PROCEDURES WHERE NOTIFICATION IS RECEIVED THAT A PUPIL HAS A MEDICAL CONDITION**

3.1 Whenever the School is notified of a child’s medical condition this will be recorded and appropriate action will be taken to ensure that individual needs are met. (See Appendix A- Medical condition flowchart)

3.2 School staff will seek permission from parents/carers to view/source information from medical professionals as necessary.

3.3 The School will make every effort to arrange support relating to the condition within two weeks from notification.

**4. INDIVIDUAL HEALTHCARE PLANS**

4.1 Pastoral Leaders will be responsible for developing individual healthcare plans for children in the School. An individual healthcare plan will always be initiated where a child has a long-term, complex or life threatening condition. (See Appendix B-IHCP Flowchart).

4.2 Any member of School staff, parent/carer or healthcare professional may initiate an individual healthcare plan. Where possible a meeting will be held for these parties to agree the plan and the child will be involved as much as possible. Their views on their condition will be recorded on the plan. Individual healthcare plans will be reviewed at least annually or earlier if there is a change to the child’s condition. (See Appendix C-Individual Healthcare plan IHCP).

4.3 All individual healthcare plans will be stored securely.

**ROLES AND RESPONSIBILITIES**

5.1 The area management group will ensure that all individual healthcare plans are effectively monitored. This includes making sure that children with medical conditions are able to access and participate as much as possible in all aspects of School life.

5.2 The area management group will ensure that the School provides suitable training to sufficient numbers of staff to meet the needs of children with medical conditions.

5.3 The Deputy Headteacher will ensure that all School staff are aware of this policy and understand their role in implementing it. There will be sufficient trained numbers of staff to implement the policy and deliver against all individual healthcare plans.

5.4 The Headteacher will ensure that School staff are appropriately insured to support the children in their care.

5.5 The Pastoral Leaders will ensure the School Nursing Service is informed where any child requires support with a medical condition.

5.6 School Staff maybe asked to provide support for children with medical conditions including the administering of medicines, although they cannot be required to do so. Any support required for a child will be recorded and or detailed in an individual healthcare plan as necessary.

5.7 School Staff will familiarise themselves with this policy. Where any staff member has a concern about a child they should raise this on a Cause for Concern Form.

5.8 Where a child has a new or pre-existing condition, healthcare professionals including the School Nursing Service should inform the School ideally before or on entry. They may provide advice or further support for children with particular conditions. (See Appendix D – Signposting Information for Schools Seeking Support for Complex Childhood Medical Conditions).

5.9 Children will be involved in discussions about their medical support needs and contribute as much as possible to their care.

5.10 Parents/ Carers should provide the School with sufficient and up to date information about their child’s medical needs. Parents/ Carers will also be involved with the development and review of any support or individual healthcare plan. Parents/Carers should carry out any action they have agreed to as part of a plan, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

**STAFF TRAINING AND SUPPORT**

6.1 Any member of School staff working with a child with a medical condition will receive appropriate training. This may be from NHS staff, PIMS Advisory staff or an external agency. A record of any training will be kept.

6.2 Key staff will be invited to contribute to meetings or reviews where a child’s medical condition will be discussed.

6.3 Healthcare professionals will always be involved in confirming the proficiency of staff in any medical procedure or the administration of prescribed medications. (See Appendix E- Managing Medicines on School Premises Procedures).

6.4 New staff will be informed of this policy and related procedures as part of the School’s induction process.

**THE CHILD’S ROLE**

7.1 After discussion with parents/ carers, children who are competent should be encouraged to take responsibility for managing their own medicines and procedures. Wherever possible children should be allowed to carry their own medicines and relevant devices or to access them quickly and easily.

7.2 Appropriate supervision will be provided for any child with a medical need and this will be described and staff providing support may be named in any plans.

**MANAGING MEDICINES ON SCHOOL PREMISES**

(See Appendix E-managing medicines on School premises procedures)

8.1 The school will administer medicines in school only when it would be detrimental to a child’s health or school attendance not to do so.

8.2 Medicines will only be administered with written parental consent. Some non-prescription medicines will be administered in order to support the needs of individual children.

8.3 School staff will record any administration of medicines including controlled drugs including key information. Parents will always be informed if their child has been unwell or has received any medication during the day.

**EMERGENCY PROCEDURES**

9.1 All school staff will be made aware of what to do in an emergency, and key staff will know what constitutes an emergency for individual children.

9.2 All children will be taught what to do in an emergency as a matter of course during their time at the school.

9.3 Emergency procedures will be clearly displayed for school staff, and any incidents relating to any medical conditions will be recorded. (See Appendix F- What to do in a medical emergency)

**DAY TRIPS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES**

10.1 All children at the school will be actively supported to engage in school trips and visits and sporting activities, and will not be prevented from doing so. The school will make all reasonable adjustments to ensure that all children can participate in line with their own abilities unless any evidence from a clinician states that this is not possible.

10.2 Where there may be a concern about the health and safety of a child participating in an activity, appropriate advice will be sought and a risk assessment will be completed in order to ensure the safety of the child.

**UNNACCEPTABLE PRACTICE**

11.1 No child will be prevented from easily accessing inhalers and medication and administering their own medication when and where necessary under the guidance of staff.

11.2 The school will never assume that two children with the same health condition require the same treatment and care.

11.3 The school will not ignore the views of the child or their parents/carers or ignore medical evidence. However, these views may be challenged in line with our child protection safeguarding policy.

11.4 The school will not send children with medical conditions home frequently or prevent them from staying for normal school activities, unless specified in their individual healthcare plan. Similarly, no child will be penalised for their attendance record if it relates to their medical condition and appropriate evidence is provided.

11.5 The school will not prevent any child with a medical condition from managing their condition effectively by drinking, eating or taking toilet or other breaks.

11.6 The school will not require or make parents/ carers feel obliged to attend the school to administer medicines, or provide medical support. Neither will we require the parent/carer to accompany the child on school trips or to engage in any other aspect of school life.

**LIABILITY AND INDEMNITY**

12.1 The school is appropriately insured to cover staff supporting children with medical conditions. Our insurance policy is available to view at the school office.

12.2 All school activity is covered by our insurance policy except where a member of school staff is proven to have been negligent.

**COMPLAINTS**

13.1 Should parents/ carers, children or any other person concerned with the healthcare of a child have a concern, they should raise this with the child’s key person in the first instance who will seek support and advice from the senior leadership team. The school will respond in line with our complaints procedure (available from the school office).

Date of issue/revision: September 2019, to be reviewed September 2020

Chair of Management Committee:

Headteacher:

Date:

**Appendices**

Appendix A- Medical condition flowchart

Appendix B-IHCP Flowchart

Appendix C-Individual Healthcare plan IHCP

Appendix D–Signposting Information for Schools Seeking Support for Complex Childhood Medical Conditions

Appendix E- Managing Medicines on School Premises (Procedures)

Appendix F- What to do in a medical emergency

Appendix G- Infectious Illness procedures

Appendix H- Staff opt-out of administering medications

Appendix I- Staff Training record

Appendix J- Parent/Carer agreement

Appendix K- Model letter to parents

Appendix L Record of medicines (all)

Appendix M Record of medicines (ind)

Appendix N Emergency Inhalers

Appendix O Temporary injury form

Appendix P AED guide