

HALFWAY JUNIOR SCHOOL



Supporting Children with Medical Conditions

September 2016

Review: September 2017

This policy is in line with DfE statutory guidance on Supporting Pupils with Medical Conditions (2014).

“Supporting Each Other to Achieve Success for All”

Halfway Junior School is an inclusive community that supports and welcomes pupils with medical conditions.

At Halfway Junior School, children with medical conditions, in terms of both physical and mental health, will be properly supported in school so that they can:

- play a full and active role in school life
- remain as healthy as possible
- achieve their academic potential
- access and enjoy the same opportunities at school as any other child.

We recognise that pupils with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them to manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. We recognise that each child's needs are individual and may change over time

At Halfway Junior School

- We provide children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils.
- We listen to the views of pupils and parents/carers/carers.
- We recognise that not all children with the same medical condition will not have the same needs, our school will focus on the needs of each individual child.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence.
- All staff, including temporary or support staff, are aware of the medical conditions at this school and understand their duty of care to children and know what to do in the event of an emergency.
- The medical conditions policy is supported by a clear communication plan for staff, parent/carers/carers and other key stakeholders to ensure its full implementation.
- We recognise our duties as detailed in Section 100 of the Children and Families Act 2014. Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, this school complies with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this policy should be read in conjunction with the Special educational needs and disability (SEND) code of practice.

This school's medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings

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, both with staff within the organisation and with outside agencies, as the circumstances of each child dictate.

The named member of staff responsible for this medical conditions policy and its implementation is:
Anne Carter, Head of School.

Governing bodies – must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Headteacher – should ensure that their school’s policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. Headteachers should ensure that all staff who need to know are aware of the child’s condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

School staff – any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers’ professional duties, they should take into account the needs of pupils with medical conditions that they teach. School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

School nurse – every school has access to school nursing services. They 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, they will do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child’s individual healthcare plan and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans. Anyone dealing with the medical care of a pupil in school should contact the named school nurse for that school to ensure a coordinated approach.

Pupils – with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the school with sufficient and up-to-date information about their child’s medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child’s individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times. It is the parent/carer’s responsibility to monitor when further supplies of medication are needed in the school setting. It is not school responsibility.

Individual Healthcare Plans

The purpose of IHPs is to provide clarity about what needs to be done, when and by whom. They are particularly essential in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed. IHPs are devised with the child’s best interests in mind, ensuring that an assessment of risk to the child’s education, health and social well-being is managed minimising disruption.

See Appendix 1 for the flow chart for agreeing an IHP.

The IHP is a confidential document and the level of detail will depend on the complexity of the child’s condition and the degree of support needed. Where a child has a special educational need, but does not have a Statement or EHCP, their special educational needs will be mentioned in their IHP. If they have an EHCP, the IHP will be linked to it, including at review times. The IHPs are reviewed at least annually, or earlier if evidence is presented that the child’s needs have changed or there are arising difficulties.

However, not all children with a medical condition will require an IHP. The school, healthcare professionals and parents should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the headteacher will take the final view.

The information to be recorded on IHPs

When deciding on the information to be recorded on individual healthcare plans, the following will be considered:

- the medical condition, its triggers, signs, symptoms and treatments;
- the pupil’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 eg. crowded corridors
- specific support for the pupil’s educational, social and emotional needs – for example, exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed, including in emergencies. If a child is selfmanaging their medication, this should be clearly stated with appropriate arrangements for monitoring
- who will provide the 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.
- who in the school needs to be aware of the child’s condition and the support required.
- arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil 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 child can participate, eg. risk assessments
- where confidentiality issues are raised by the parent or child, the designated individuals to be entrusted with information about the child’s condition
- what to do in an emergency, including whom to contact, and contingency arrangements.

See Appendix 2 for Individual Healthcare Plan

Administering medication at school

- This school understands the importance of medication being taken and care received as detailed in the pupil's IHP.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.
- This school will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child.
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the pupil to involve their parent/carer, while respecting their confidentiality.
- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents/carers will be informed.
- This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- Parents/carers should let the school know immediately if their child's needs change.
- If a pupil refuses to take medicine, staff will not force them to do so; record the incident, inform parents/carers and follow agreed procedures. If the refusal results in an emergency, follow the school's normal emergency procedures.
- If a pupil misuses their medication, or anyone else's, their parent/carer is informed as soon as possible and the school's disciplinary procedures are followed.

The storage of medication and equipment at school

- This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, eg asthma inhalers, are readily available wherever the child is in the school and on off-site activities.
- Pupils may carry their own medication/equipment, or they should know exactly where to access it. Those pupils deemed competent to carry their own medication/equipment with them will be identified and recorded through the pupil's IHP in agreement with parents/carers.
- Pupils can carry controlled drugs if they are deemed competent to do so, otherwise this school will store controlled drugs securely in a non-portable container, with only named staff having access. Staff at this school can administer a controlled drug to a pupil once they have had specialist training.
- This school will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes.
- This school will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents/carers are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of each term.
- This school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

Record keeping

- As part of the school's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.
- This school uses an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEN but does not have a statement or EHC plan, their special educational needs are mentioned in their IHCP. Appendix 2 is used to identify and agree the support a child needs and the development of an IHCP.
- This school has a centralised register of IHPs, and an identified member of staff has the responsibility for this register.
- IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- The pupil (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care.
- This school makes sure that the pupil's confidentiality is protected.
- This school seeks permission from parents/carers before sharing any medical information with any other party.
- This school keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.

This school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

- This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.
- This school makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- This school understands the importance of all pupils taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order they are accessible to all pupils. This includes out-of-school clubs and team sports. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.
- This school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks.

This school makes sure that pupils have the appropriate medication/equipment/food with them during physical activity and offsite visits.

This school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.

- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- This school will not penalise pupils for their attendance if their absences relate to their medical condition.
- This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCO/INCO who will liaise with the pupil (where appropriate), parent/carer and the pupil's healthcare professional.
- Pupils at this school learn what to do in an emergency.
- This school makes sure that a risk assessment is carried out before any out-of-school visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

Unacceptable practice

Although school staff should use their discretion and judge each case on its merits with reference to the child's IHP, it is not generally acceptable practice to:

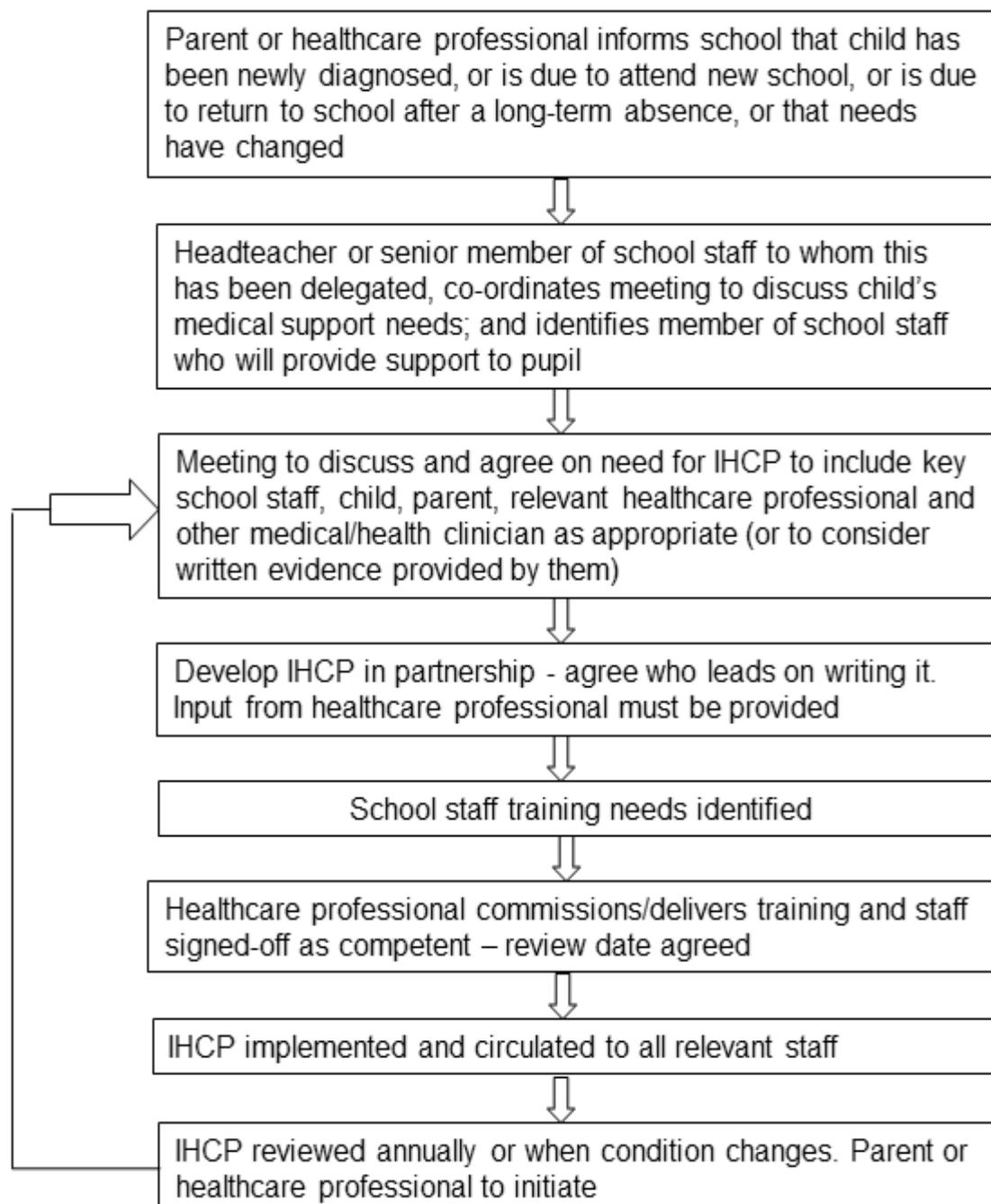
- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged)
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the child becomes ill, send them to the school office or headteacher's office unaccompanied or with someone unsuitable
- Penalise children for their attendance record if their absences are related to their medical condition eg. Hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
- 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.
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including educational visits, e.g. by requiring parents to accompany the child.

The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.

Should parents or pupils be dissatisfied with the support provided they should discuss these concerns to the Headteacher.

Appendix 1

Process for developing individual healthcare plans



Appendix 2: Individual Healthcare Plan

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	

Family Contact Information

Name	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	

Clinic/Hospital Contact

Name	
Phone no.	

G.P.

Name	
Phone no.	

Who is responsible for providing support in school	
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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

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

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Halfway Junior School

Contacting Emergency Services

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number

0114 2482629

2. Give your location as follows:

Halfway Junior School

Halfway Centre

Halfway

Sheffield

3. State that the postcode is:

S20 4TA

4. Give exact location in the school/setting (insert brief description)

School Office/Main Entrance

5. Give your name

6. Give name of pupil and a brief description of child's symptoms:

7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to:

SPEAK CLEARLY AND SLOWLY AND BE READY TO REPEAT INFORMATION IF ASKED.

Put a completed copy of this form by the telephone

Halfway Junior School

Health Care Plan

Date plan produced

Child's Details

Date plan will be reviewed

Name		Date of Birth / /
Class/Reg group		Class Teacher
Address		
Medical diagnosis or condition		

Family Contact Information

Name:	Relationship to child:
Telephone:	
Telephone:	Telephone (mobile):

Name:	Relationship to child:
Telephone:	
Telephone:	Telephone (mobile):

Clinic/Hospital Contact

Name:	Telephone:
Position:	

GP

Name:	Telephone:
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Describe medical needs and give details

Daily care requirements (e.g. before sport/at lunchtime)

Describe what constitutes an emergency for the child, and the action to take if this occurs

Follow up care

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

Form copied to:
.....
.....
.....
.....

**Parental Agreement for Halfway Junior School to Administer Medicine
for Short-term Use**

Commencement date	
End date	
Name of child	
Class/Reg/group and name of class teacher or named person responsible for child's management in school	
Name of medicine	
Full daily dosage specified on medicine	
Doseage required in school	
Expiry Date	
Time of day when medicine must be given	
Any other instructions	
Quantity of medication being handed over to school	
<u>Note: Medicines Must Be In The Original Container As Dispensed By Pharmacy</u>	
Daytime telephone number of parent or agreed contact	
Name and telephone number of Doctor's Surgery (GP)	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent/Carer's signature.....

Print name..... Date/...../.....

If more than one medicine is to be given a separate form should be completed for each one.

For School Use Only:

I have checked all the above information is correct.

Signed: (Designated staff member)

Parental Agreement for Halfway Junior School to Administer Medicine
(for use in long-term medical needs)

Name of Child		Date of Birth	/ /
Class/Group including the name of class teacher or named person responsible for child's medical management in school			
Medical Condition or Illness			
Name and type of Medicine as described on original packaging			
Date dispensed			
Expiry Date			
Agreed Review Date initiated by class Teacher/person responsible			
Dosage and Method			
Timing			
Special Precautions			
Are there any side effects that school should know about?			
Self-administration		Yes or No (delete as appropriate)	
Procedures to take in an emergency			
CONTACT DETAILS			
Name		Day time telephone number	
Relationship to child			
Address			
I understand that I must administer the medicine personally (Staff signature)			

I accept that this is a service that the school/setting is not obliged to undertake. I understand that I must notify the school of any changes in writing.

Date.....

Signature(s)

STAFF AGREEMENT FOR & RECORD OF ADMINISTERING MEDICINE

It is agreed that (name of child) (class) will receive (name of medicine)..... (doseage required in school) every day at (time medicine to be administered eg break or lunchtime)

(Name of child)..... will be given/supervised whilst he/she takes their medicine by 2 designated members of staff.

This arrangement will continue until..... (this date will either be the end date of the course of medicine (ie 7 days) or until the review date

Record of Administered Medication

Date	/ /	/ /	/ /	/ /
Time given				
Dose given				
Name of staff member				
Signature				

Date	/ /	/ /	/ /	/ /
Time given				
Dose given				
Name of staff member				
Signature				

Date	/ /	/ /	/ /	/ /
Time given				
Dose given				
Name of staff member				
Signature				

**REQUEST FOR CHILD TO CARRY HIS/HER OWN MEDICATION
(eg Inhalers etc)**

This form must be completed by parents/carers

If staff have any concerns, this request should be discussed with healthcare professionals

Child's name	
Class/reg group	
Address	
Name of medicine	
Procedures to be taken in an emergency	

CONTACT INFORMATION

Name	
Daytime telephone no.	
Relationship to child	

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed.....

Date.....

If more than one medicine is to be given, a separate form should be completed for each one.

Staff training record - administration of medicines

Name of school	<input type="text"/>
Name	<input type="text"/>
Type of training received	<input type="text"/>
Date of training completed	<input type="text"/>
Training provided by	<input type="text"/>
Profession and title	<input type="text"/>

I confirm that [*name of member of staff*] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [please state how often]

Trainer's signature.....

Date

I confirm that I have received the training detailed above.

Staff signature.....

Date

Suggested review date.....