



# **Leighfield Academy**

## Supporting Pupils with Medical Conditions Policy

Adopted by the Governing Body 2<sup>nd</sup> December 2014

## Leighfield Academy

### Supporting Pupils with Medical Conditions Policy

#### Definition

Pupils' medical needs may be broadly summarised as being of two types:

- (a) **Short-term**, affecting their participation in school activities which they are on a course of medication.
- (b) **Long-term**, potentially limiting their access to education and requiring extra care and support

#### Responsibility

Schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils so that they can access their full and equal entitlement to all aspects of the curriculum. In this case, individual procedures may be required. Leighfield Academy is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support that pupils with medical conditions (long or short term) may need.

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. **Pupils with medical conditions have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.** However, teachers and other school staff in charge of pupils have a common law duty to act 'in loco parentis' and must ensure the safety of all pupils in their care. To this end, we reserve the right to refuse admittance to a child with an infectious disease, where there may be a risk posed to others or to the health of the child involved. This duty also extends to teachers leading activities taking place off the school site.

The prime responsibility for a child's health lies with the parent, who is responsible for the child's medication and must supply the school with all relevant information needed in order for proficient care to be given to the child. The school takes advice and guidance from a range of sources, including the School Nurse, Health professionals and the child's GP in addition to the information provided by parents in the first instance. This enables us to ensure we assess and manage risk and minimise disruption to the learning of the child and others who may be affected (for example, class mates).

#### The Aims of the Policy

- To support pupils with medical conditions, so that they have full access to education, including physical education and educational visits
- To ensure that school staff involved in the care of children with medical needs are fully informed and adequately trained by a professional in order to administer support or prescribed medication
- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs.
- To write, in association with healthcare professionals, Individual Healthcare Plans where necessary
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition requires support
- To keep, monitor and review appropriate records

## **Unacceptable Practice**

While school staff will use their professional discretion in supporting individual pupils, it is unacceptable to:

- Prevent children from accessing their medication
- Assume every child with the same condition requires the same treatment
- Ignore the views of the child or their parents / carers; ignore medical advice
- Prevent children with medical conditions accessing the full curriculum, unless specified in their Individual Healthcare Plan
- Penalise children for their attendance record where this is related to a medical condition
- Prevent children from eating, drinking or taking toilet breaks where this is part of effective management of their condition
- Require parents to administer medicine where this interrupts their working day
- Require parents to accompany their child with a medical condition on a school trip as a condition of that child taking part

## **Entitlement**

Leighfield Academy provides full access to the curriculum for every child wherever possible. We believe that pupils with medical needs have equal entitlement and must receive necessary care and support so that they can take advantage of this. However, we also recognise that employees have rights in relation to supporting pupils with medical needs, as follows:

Employees may:

- Choose whether or not they wish to be involved
- Receive appropriate training
- Work to clear guidelines
- Bring to the attention of Senior Leadership any concern or matter relating to the support of pupils with medical conditions

## **Expectations**

It is expected that:

- Parents will inform school of any medical condition which affects their child.
- Parents will supply school with appropriately prescribed medication, where the dosage information and regime is clearly printed by a pharmacy on the container
- Parents will ensure that medicines to be given in school are in date and clearly labelled
- Parents will co-operate in training their children to self-administer medicine if this is appropriate, and that staff members will only be involved if this is not possible
- Medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual
- Leighfield Academy will ensure that, where appropriate, children are involved in discussing the management and administration of their medicines and are able to access and administer their medicine if this is part of their Individual Healthcare Plan (for example, an inhaler)
- School staff will liaise as necessary with healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil
- Transitional arrangements between schools will be completed in such a way that Leighfield Academy will ensure full disclosure of relevant medical information, Healthcare Plans and support needed in good time for the child's receiving school to adequately prepare

- Individual Healthcare Plans will be written, monitored and reviewed regularly and will include the views and wishes of the child and parent in addition to the advice of relevant medical professionals

### **Information**

Children with serious medical conditions will have their photo and brief description of condition, along with any other necessary information, in the staffroom. Children with medical conditions which may require emergency attention, e.g. epilepsy, diabetes, will have their names and an Individual Healthcare Plan clearly accessible in their classroom, and all adults dealing with the child will have their attention drawn to this information. All other medical conditions will be noted from children's SIMs records and this information will be provided to class teachers annually.

### **The Governing body**

- will 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.
- will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life.
- will ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- will 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.

### **The Headteacher**

- will 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.
- will ensure that all staff who need to know are aware of the child's condition.
- will 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. This may involve recruiting a member of staff for this purpose.
- will have overall responsibility for the development of individual healthcare plans. They will also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.
- will 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.

### **Any member of the 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.
- will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.
- should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

### **School nurses**

- 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 should 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.
- can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs

### **Individual Health Care Plans**

When deciding what information should be recorded on individual healthcare plans, the governing body will consider the following:

- 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, travel time between lessons;
- specific support for the pupil'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;
- 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;
- 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;
- 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/child, the designated individuals to be entrusted with information about the child's condition; and

- 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.
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### **Unacceptable Practice**

While school staff will use their professional discretion in supporting individual pupils, it is unacceptable to:

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- Prevent children with medical conditions accessing the full curriculum, unless specified in their Individual Healthcare Plan
- Penalise children for their attendance record where this is related to a medical condition
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## **Administration of Medicines**

### **Medicines**

Non-prescription medicines should not be brought to school.

Exceptions will be taken when a child suffers from conditions which require on-going medication. Where possible, medication should be administered by parents.

Where this is not possible the Headteacher or a specified member of staff will be responsible for administering such medicine. A medicine form must be completed by parents and include written directions for administering the medicine.

Asthma Inhalers may be used and kept in the child's classroom. Teachers must ensure inhalers are accessible.

Where a child is known to suffer from a medical condition, a risk assessment will be prepared and agreed with parents and circulated to staff.

### **Allergies**

Where pupils require an EpiPen for allergies this is to be kept in a clearly labelled box in the staffroom cupboard, away from children but not locked. The school nurse gives regular training to staff. In the event that the pen needs administering, one staff member would administer the pen and another phone for an ambulance in the event of a reaction.

## **Epilepsy**

1. If a known sufferer of epilepsy suffers a short seizure and shows rapid signs of recovery, then it is appropriate to sit them quietly and to closely monitor their condition. If the person suffers an injury during the seizure, then immediate first aid should be given.
2. If the fit is violent and /or prolonged, medical help should be sought, or ambulance called as well as contacting parents, or partners in the case of adults.
3. All staff are to be informed of children who have epilepsy and are to be aware of action to be taken.
4. If a child with no past history of epilepsy has a seizure, parents should be contacted immediately and medical advice sought.

## **Asthma**

- Names of pupils with asthma are included in the medical list with each register and in the Supply Teacher File.
- Medical information regarding staff with asthma is kept in the office.
- Children's named inhalers and spacers are normally kept in the classroom. They can take their inhaler to the playground if that is appropriate for them or alternative arrangements may need to be made on an individual basis.
- On trips the inhaler should be kept in the person with asthma's bag and the group leader be notified by the trip leader. For very young children, the group leader may need to carry the inhaler.
- Adult's inhalers are kept in an appropriate place for them to access, which other staff they usually work with should know about.

## **Signs of an Attack**

- Coughing
- Being short of breath
- Low volume repeated clearing of throat/ cough
- Wheezy breathing
- Tight feeling in chest
- Being unusually quiet

## **What to do**

- Keep calm and encourage the person with asthma to breathe calmly and slowly
- Ensure the inhaler is taken immediately. Assist young children if they need it.
- Loosen tight clothing
- Stay with them and try to keep them calm. Keep them upright.
- If no improvement, ensure the inhaler is used every minute for 5 minutes. Do not worry about overdosing. If it is still needed, continue to give it.
- Dial 999 if:
  - no improvement after 5 minutes or
  - if lips start to turn blue or
  - the person with asthma is too exhausted to speak or
  - if you are in any doubt

The patient should continue to use the inhaler until help arrives.

- Phone parents or contact numbers held by school.

## **In An Emergency**

In a medical emergency, several staff have been appropriately trained to administer emergency paediatric first aid if necessary.

If an ambulance needs to be called, staff will:

- Outline the full condition and how it occurred
- Give details regarding the child's date of birth, address, parents' names and any known medical conditions (these are kept in a file in the school office).

Children will be accompanied to hospital by a member of staff if this is deemed appropriate. Staff cars should not be used for this purpose. Parents must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

### **School Trips**

Essential medicines will be administered on Educational Visits, subject to the conditions above. A risk assessment may be needed before the visit takes place. Staff supervising the visit will be responsible for safe storage and administration of the medicine during the visit.

Named staff members will give medicines.). Before administering any medicine, staff must check that the medicine belongs to the child, must check that the dosage they are giving is correct, and that written permission has been given. Any child refusing to take medicine in school will not be made to do so, and parents will be informed about the dose being missed.

All children with an inhaler must take them on educational visits, however short in duration.

**All doses administered will be recorded in the Administration of Medicines book (located in the school reception office). Children self-administering asthma inhalers do not need to be recorded.**

### **Storage**

All medicines will be stored safely. Medicines needing refrigeration will be stored in the office fridge. Some medicines (inhalers, etc) will be kept in the child's classroom and carried with the children, for ease of access during outside activities. Epi-pens are kept in the staffroom cupboard in clearly labelled boxes, including a photograph of the child. All medicines must be clearly labelled. Controlled drugs or prescribed medicines will be kept in the stock cabinet in the Business Manager's office. Access to these medicines is restricted.

Staff will record any doses of medicines given in the Medicine book. Children self-administering asthma inhalers do not need to be recorded.

Inhalers are kept in the child's classroom. Children have access to these inhalers at all times, though must inform a member of staff that they are taking a dose.

### **Complaints**

Should parents be unhappy with any aspect of their child's care at Leighfield Academy, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance, with whom any issues should be managed. If this does not resolve the problem or allay concern, the problem should be brought to a member of the leadership team, who will, where necessary, bring concerns to the attention of the Headteacher. In the unlikely event of this not resolving the issue, the parents must make a formal complaint using the Leighfield Academy Complaints Procedure.



## Appendix A: individual Healthcare Plan

Name of school/setting	Leighfield Academy
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

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

# Appendix B: Parental Agreement for Leighfield Academy to Administer Medicine

Leighfield Academy will not give your child medicine unless you complete and sign this form.

Name of child

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Date of birth

--

Year

--

Medical condition or illness

--

## Medicine

Name/type of medicine  
*(as described on the container)*

--

Expiry date

--

Dosage and method

--

Timing

--

Special precautions/other instructions

--

Are there any side effects that we need to know about?

--

Self-administration - y/n

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Procedures to take in an emergency

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**NB: Medicines must be in the original container as dispensed by the pharmacy**

## Contact Details

Name

--

Daytime telephone no.

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Relationship to child

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

Signature(s)\_\_\_\_\_

Date\_\_\_\_\_ -

