

St Mary's C of E Primary School

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Medical Needs Policy

VISION Care, Grow and Flourish in God's Loving Hands

MISSION

- With St Mary's Church, Brookside Methodist, and other local churches, we will further develop understanding of Christian values in action through worship and across the curriculum
- Through excellent teaching we will deliver an inspirational curriculum
- We will enable every child to make the very best progress
- We will work in partnership with children and families to further promote confidence and self esteem
- We will prepare children to confidently face the challenges of growing up in the 21st Century
- We will provide children with an understanding of local, national and global communities and faiths.

Safeguarding Statement of Intent

St. Mary's Church of England Primary School is committed to safeguarding and promoting the physical, mental and emotional welfare of every pupil, both inside and outside of the school premises. We implement a whole-school preventative approach to managing safeguarding concerns, ensuring that the wellbeing of pupils is at the forefront of all action taken.

This policy sets out a clear and consistent framework for delivering this promise, in line with safeguarding legislation and statutory guidance. It will be achieved by:

- Ensuring that members of the governing board, the headteacher and staff understand their responsibilities under safeguarding legislation and statutory guidance, are alert to the signs of child abuse, and know to refer concerns to the DSL.
- Teaching pupils how to keep safe and recognise behaviour that is unacceptable.
- Identifying and making provision for any pupil that has been subject to, or is at risk of, abuse, neglect, or exploitation.
- Creating a culture of safer recruitment by adopting procedures that help deter, reject or identify people who might pose a risk to children.
- Ensuring that the headteacher and any new staff and volunteers are only appointed when all the appropriate checks have been satisfactorily completed.

Approved by:	Full Governing Body	Date: May 2024
Last reviewed in:	May 2021	
Next review due by:	May 2027	

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1. Aims

This policy aims to ensure that:

- > Pupils, staff and parents understand how our school will support pupils with medical conditions
- > Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The governing board will implement this policy by:

- > Making sure sufficient staff are suitably trained
- > Making staff aware of pupils' conditions, where appropriate
- > Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- > Providing supply/cover teachers with appropriate information about the policy and relevant pupils
- > Developing and monitoring individual healthcare plans (IHPs)

The headteacher has responsibility for implementing this policy.

2. Legislation and statutory responsibilities

- This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.
- It is also based on the Department for Education (DfE)'s statutory guidance on <u>supporting pupils with medical conditions at school</u>.

3. Roles and responsibilities

3.1 The governing board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

3.2 The headteacher

The headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- > Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- > Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- > Contact the school nursing service in the case of any pupil 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
- > Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

3.3 Staff

- Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. Any
 member of staff may be asked to provide support to pupils with medical conditions, although they will not be
 required to do so. This includes the administration of medicines.
- Those staff who take on the responsibility to support pupils with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.
- Teachers will take into account the needs of pupils with medical conditions that they teach. All relevant staff will
 know what to do and respond accordingly when they become aware that a pupil with a medical condition needs
 help.

3.4 Parents

Parents will:

- > Provide the school with sufficient and up-to-date information about their child's medical needs
- > Be involved in the development and review of their child's IHP and may be involved in its drafting
- > Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition
affects them. Where competent, pupils should be fully involved in discussions about their medical support
needs and contribute to the development of their IHPs. They are also expected to comply with their IHPs where
appropriate.

3.6 School nurses and other healthcare professionals

- Typically, parents will advise the school when their child has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. The school nursing service may also support staff to implement a child's IHP.
- Healthcare professionals, such as GPs and paediatricians, will liaise with the school nursing service and notify them of any pupils identified as having a medical condition. They may also provide advice on developing IHPs.

4. Equal opportunities

- Our school is clear about the need to actively support pupils with medical conditions to participate fully in school trips and visits, or in sporting activities, and not prevent them from doing so.
- The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.
- Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure
 that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare
 professionals will be consulted.

5. Being notified that a child has a medical condition

- When the school is notified that a pupil has a medical condition, the process outlined below will be followed to decide whether the pupil requires an IHP.
- The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for pupils who are new to our school.

See Appendix 1.

6. Individual healthcare plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- > What needs to be done
- **>** When
- > By whom
- Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.
- Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nursing team, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.
- IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP where relevant.
- The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the headteacher, will consider the following when deciding what information to record on IHPs:
- 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.
- > Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete assessments, use of rest periods or additional support in catching up with lessons, emotional support/referrals where needed.
- > The level of support needed, including in emergencies If a pupil is self-managing their medication, this will 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 pupil'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 pupil'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 pupil can participate, e.g. risk assessments
- > Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- > What to do in an emergency, including who to contact, and contingency arrangements

7. Managing medicines

Only prescription medicines will be administered at school:

- > When it would be detrimental to the pupil's health or school attendance not to do so and
- > Where we have parents' written consent

The school recognises that since January 2024 patients in England are able to get treatment for seven common conditions at their high street pharmacy without needing to see a GP. Conditions include:

- sinusitis
- sore throat
- earache
- infected insect bite
- impetigo
- shingles
- uncomplicated urinary tract infections in female patients

Anyone giving a pupil **any** medication will first check maximum dosages and when the previous dosage was taken. Medicines administered in school are always logged.

The school will only accept prescribed medicines that are:

- > In-date
- > Labelled with the child's name
- > Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Pupils will be informed about where their medicines are at all times and be able to access them immediately e.g asthma inhalers. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to pupils and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

When children participate in residential visits, alternative procedures apply with regard to the administration of medication. On these occasions, non-prescribed medications can be given with parental consent e.g. over the counter hay fever treatment.

7.1 Controlled drugs

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs Regulations 2001</u> and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use. All other controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

7.2 Pupils managing their own needs

• Pupils who are competent will be encouraged to take increasing responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

7.3 Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is generally not acceptable to:

- > Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- > Ignore the views of the pupil or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- > Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- > Send them to the school office or medical room unaccompanied or with someone unsuitable if the pupil becomes ill with symptoms associated with their medical needs
- > Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. 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 pupil. No parent should have to give up working because the school is failing to support their child's medical needs
- > Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask pupils to administer, medicine in school toilets

8. Emergency procedures

- Staff will follow the school's normal emergency procedures (for example, calling 999). All pupils' IHPs will clearly set out what constitutes an emergency and will explain what to do.
- If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the pupil to hospital by ambulance.

9. Training

- Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so.
- The training will be identified during the development or review of IHPs. Staff who provide support to pupils with medical conditions will be included in meetings where this is discussed.
- The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the headteacher. Training will be kept up to date.

Training will:

- **>** Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- > Fulfil the requirements in the IHPs
- > Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

10. Record keeping

- The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school.
- IHPs are kept in a readily accessible place in the medical room and in classrooms, which all staff are aware of.

11. Liability and indemnity

• The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The details of the school's insurance policy can be found in this Risk Protection Arrangement document.

Section 15 page 58 refers to statutory guidance stipulating that the insurance policy stands provided that the Member complies with the this Risk Protection Arrangement document.

Section 15 page 58 refers to statutory guidance on supporting pupils at school with medical conditions, December 2015 or similar amending statutory guidance.

12. Complaints

Parents with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the headteacher in the first instance. If the headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

13. Monitoring arrangements

This policy will be reviewed and approved by the governing board every 3 years.

14. Links to other policies

This policy links to the following policies:

- > Accessibility plan
- > Complaints policy
- > Equality information and objectives
- > First aid policy
- > Health and safety policy
- > Intimate care policy
- > Safeguarding and child protection policy
- > Special educational needs information report and policy
- **>** Educational visits policy

Appendix 1: Being notified a child has a medical condition

