



## Cranbourne

### Supporting Students with Medical Conditions

<b>Name of Responsible Manager:</b>	<b>Mrs J Aplin</b>
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#### Introduction

Section 100 of The Children and Families Act 2014 places a duty on the governing body of the Cranbourne to make arrangements for supporting children at their premises with medical conditions. The Department of Education have produced statutory guidance 'Supporting Pupils with Medical Conditions' which will be referred to when meeting this requirement.

Cranbourne will endeavour to ensure children with medical conditions are properly supported so they have full access to education, including school trips and physical education. The aim of this policy is to ensure all children with medical conditions, in terms of both their physical and mental health, are properly supported in school so they can have a full and active role in school life, remain healthy and achieve their academic potential.

All medical information will be treated confidentially by the Headteacher and staff. All administration of medicines will be arranged and managed in accordance with the Supporting Students with Medical Needs Policy. All staff have a duty of care to follow and co-operate with the requirements of this policy.

Where students have a disability, the requirement of the Equality Act 2010 will apply.

Where students have an identified special need, the SEN Code of Practice will also apply.

We recognise medical conditions may impact on social and emotional development as well as having educational implications.

## Key Roles & Responsibilities

The **Governing Body** will ensure arrangements, reinforced by a robust policy, are in place to support students with medical conditions at Cranbourne

The **Headteacher** will ensure the school's policy is developed and effectively communicated throughout the school. This includes ensuring:

- all staff are aware of the policy and understand their role in the implementation of the policy;
- where appropriate, staff are made aware of a student's medical condition;
- sufficient trained staff are available to implement the policy and deliver against individual healthcare plans, including in contingency and emergency situations;
- the development of individual healthcare plans, and
- the school's nursing service is aware of all students with medical conditions.

The designated senior manager will oversee the day to day administration of the policy.

**Teachers and Support Staff** will ensure they are familiar with this policy and subsequent procedures so they can respond accordingly when a student with a medical condition needs help or support.

The **Link Nurse** will:

- notify the school when a student has been identified as having a medical condition;
- support staff on implementing a student's individual healthcare plan, and
- liaise with clinicians to determine the appropriate support for the student and associated training needs for staff.

The **School Nurse/First Aiders** will:

- work alongside the designated senior manager, the Link Nurse and parents/carers to provide day to day support for students with medical conditions;
- dispense medication in accordance with a student's individual healthcare plan;
- provide specialist medical support when trained to do so.

## Local Arrangements

### Identifying children with health conditions

Cranbourne will aim to identify children with medical needs on entry by working in partnership with parents/carers and following the process outlined in the flow chart: 'Process for identifying children with a health condition' (appendix A). Cranbourne will use the 'Health Questionnaire for Schools' (appendix B) to obtain the information required for each student's medical needs to ensure appropriate support arrangements are in place prior to the student commencing at school.

Where a formal diagnosis is awaited or is unclear, Cranbourne will plan to implement

arrangements to support the student, based on the current evidence available for their condition. Cranbourne will ensure every effort is made to involve formal medical evidence and consultation with the parents/carers.

### **Individual health care plans**

We recognise that Individual Healthcare Plans are recommended in particular 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 school's link nurse and parent will agree based on evidence when a healthcare plan would be inappropriate or disproportionate.

Where a student requires an individual healthcare plan it will be the responsibility of the designated senior manager, the school's Link Nurse, School Nurse and First Aider to work with parents and relevant healthcare professionals to write the plan.

A healthcare plan (and its review) may be initiated in consultation with the parent/carer, by a member of the school's staff or by a healthcare professional involved in providing care to the child. The designated senior manager will work in partnership with the parents/carer, and a relevant healthcare professional e.g. School nurse/first aider, specialist or children's community nurse, who can provide advice on the particular needs of the child to draw up and/or review the plan. Where a child has a special educational need identified in a statement or Educational Health Care (EHC) plan, the individual healthcare plan will be linked to or become part of that statement or EHC plan.

We may also refer to the flowchart contained within the document 'Process for identifying children with a health condition' for identifying and agreeing the support a child needs and then developing the individual healthcare plan.

We will use the individual healthcare plan template produced by the DfE to record the plan.

If a child is returning following a period of hospital education or alternative provision (including home tuition), we will work with Hampshire County Council and the education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

The governing body will ensure that all plans are reviewed at least annually or earlier if evidence is presented that the student's needs have changed. All plans will be developed with the student's best interests in mind and ensure that the school assesses and manages the risks to the student's education, health and social well-being and minimise disruption.

### **Staff training**

All new staff will be inducted on the policy when they join the school as part of their *safeguarding induction*. Records of this training will be stored as part of the safeguarding training records.

All nominated staff will be provided awareness training on the school's policy for supporting children with medical conditions to include what their role is in implementing the policy. This training will be carried out as part of the safeguarding training provided to all staff and

updated biennially or sooner where there is a fundamental change to the policy.

The awareness training will be provided to staff by meeting or inset.

We will retain evidence that staff have been provided the relevant awareness training on the policy by signature sheets.

Where required we will work with the relevant healthcare professionals to identify and agree the type and level of training required and identify where the training can be obtained from. This will include ensuring that the training is sufficient to ensure staff are competent and confident in their ability to support children with medical conditions. The training will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs and therefore allow them to fulfil the requirements set out in the individual healthcare plan.

Any training undertaken will form part of the overall training plan for the school and refresher awareness training will be scheduled at appropriate intervals agreed with the relevant healthcare professional delivering the training.

A 'Staff training record– administration of medicines' form will be completed to document the type of awareness training undertaken, the date of training and the competent professional providing the training.

### **The student's role**

Where possible and in discussion with parents/carers, students that are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be recorded in their individual healthcare plan. The healthcare plan will reference what will happen should a student who self-administers medication refuse to take their medication which will normally be to inform the parent/carer at the earliest opportunity.

Where possible we will endeavour to ensure that students can carry their own medicines and relevant devices or have easy access to allow for quick self-medication. We will agree with relevant healthcare professionals/parent the appropriate level of supervision required and document this in their healthcare plan.

### **Managing medicines on School Premises**

The administration of medicines is the overall responsibility of the parents/carers. Where clinically possible we will encourage parents to ask for medicines to be prescribed in dose frequencies which enable them to be taken outside of school hours. However, the Headteacher is responsible for ensuring students are supported with their medical needs whilst on site, therefore this may include managing medicines where it would be detrimental to a student's health or school attendance not to do so.

We will not give prescription or non-prescription medicines to a child under 16 without their parent's/carers written consent (a 'parental agreement for setting to administer medicines')

form will be used to record this), except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, we will make every effort to encourage the student to involve their parents while respecting their right to confidentiality.

A documented tracking system to record all medicines received in and out of the premises will be put in place.

The name of the student, dose, expiry and shelf life dates will be checked before medicines are administered.

On occasions where a student refuses to take their medication the parents will be informed at the earliest available opportunity.

We will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, their dosage and storage. Insulin is the exception, which must still be in date but will generally be available to schools inside an insulin pen or a pump, rather than its original container.

Students who are able to use their own inhalers themselves are encouraged to carry it with them. If the student is deemed unable to take personal responsibility for their inhaler, staff should make sure that it is stored in a safe but readily accessible place, and clearly marked with the student's name.

Controlled drugs will be securely stored in a non-portable container which only named staff will have access to. We will ensure that the drugs are easily accessible in an emergency situation. A record will be kept of any doses used and the amount of the controlled drug held in school. There may be instances where it is deemed appropriate for a student to administer their own controlled medication. This would normally be at the advice of a medical practitioner. Where an individual student is competent to do so and following a risk assessment, we may allow them to have prescribed controlled drugs on them with monitoring arrangements in place.

We will only administer non-prescribed medicines on request from the parent/carer if they are in clearly identifiable packaging and only on a short-term basis (Where the school have concerns they will seek further guidance from their link School Nurse).

It is our policy to give age appropriate doses of paracetamol to secondary age children as described on the packet, if written consent from the parents has been received in advance of administration. We will check that they have not previously taken any medication containing paracetamol within the preceding 4 hours and only give one dose.

We will never administer aspirin or medicine containing Ibuprofen unless prescribed by a doctor.

Any homeopathic remedies to be administered will require a letter of consent from the student's doctor and will be administered at the discretion of the Head teacher.

Emergency medicines will be stored in a safe location but not locked away to ensure they are easily accessible in the case of an emergency.

Types of emergency medicines include:

- Injections of adrenaline for acute allergic reactions
- Inhalers for asthmatics
- Injections of Glucagon for diabetic hypoglycaemia

Other emergency medication i.e. Rectal diazepam or Buccal Midazolam for major seizures will be stored in accordance with the normal prescribed medicines procedures (see storage section).

### **Storage**

All medication other than emergency medication will be stored safely in a locked cabinet, where the hinges cannot be easily tampered with and cannot be easily removed from the premise.

Where medicines need to be refrigerated, they will be stored in the fridge located in the medical room in a clearly labelled airtight container.

Students will be made aware of where their medicines are at all times and be able to access them immediately where appropriate. Where relevant they should know who holds the key to the storage facility.

Medicines such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to students and not locked away. We will also ensure that they are readily available when outside of the school premises or on school trips.

Storage of medication whilst off site will be maintained at steady temperature and secure. There will be appropriately trained staff present to administer day to day and emergency medication and copies of individual health care plans will be taken off site to ensure appropriate procedures are followed.

### **Disposal**

It is the responsibility of the parents/carers to dispose of their child's medicines. It is our policy to return any medicines that are no longer required including those where the date has expired to the parents/carers. Parents/carers will be informed of this when the initial agreements are made to administer medicines. Medication returned to parent/ carers will be documented on the tracking medication form.

Sharps boxes will be in place for the disposal of needles. Collection and disposal of these will be arranged by the school.

### **Medical Accommodation**

The medical room will be used for all medical administration/treatment purposes.

### **Record keeping**

A record of what has been administered including how much, when and by whom, will be recorded on a 'record of prescribed medicines' form. The form will be kept on file. Any

possible side effects of the medication will also be noted and reported to the parent/carers.

### **Emergency Procedures**

Where a student has an individual healthcare plan, this will clearly define what constitutes an emergency and provide a process to follow. All relevant staff will be made aware of the emergency symptoms and procedures. We will ensure other students in the school know what to do in the event of an emergency i.e. informing a teacher immediately if they are concerned about the health of another student.

Where a student is required to be taken to hospital, a member of staff will stay with the student until their parents arrive; this includes accompanying them to hospital by ambulance if necessary. All relevant medical information, care plans etc. that the school holds will be taken to the hospital.

### **Day trips/off site activities**

We will ensure that teachers are aware of how a student's medical condition will impact on their participation in any off-site activity or day trip and that there is enough flexibility for all students to participate according to their own abilities by making reasonable adjustments.

We will consider what reasonable adjustments we might make to enable students with medical needs to participate fully and safely on visits. We will carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. We will consult with parents and students and advice from the relevant healthcare professional to ensure that students can participate safely.

### **Unacceptable practice**

Staff are expected to use their discretion and judge each student's individual healthcare plan on its merits, it is not generally acceptable practice to:

- prevent students from easily accessing their inhalers, medication and administering their medication when and where necessary;
- assume that every student with the same condition requires the same treatment;
- ignore the views of the student or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans;
- if the student becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent students 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. No parent should have to give up working because the school is failing to support their child's medical needs; or
- prevent students from participating or create unnecessary barriers to students participating in any aspect of school life, including school trips e.g. by requiring parents to accompany the child.

### **Liability and Indemnity**

Staff of the school are indemnified under the County Council self-insurance arrangements.

The County Council is self-insured and have extended this self-insurance to indemnify school staff who have agreed to administer medication or undertake a medical procedure to children. To meet the requirements of the indemnification, we will ensure that staff at the school have parents' permission for administering medicines and members of staff will have had training on the administration of the medication or medical procedure.

### **Complaints**

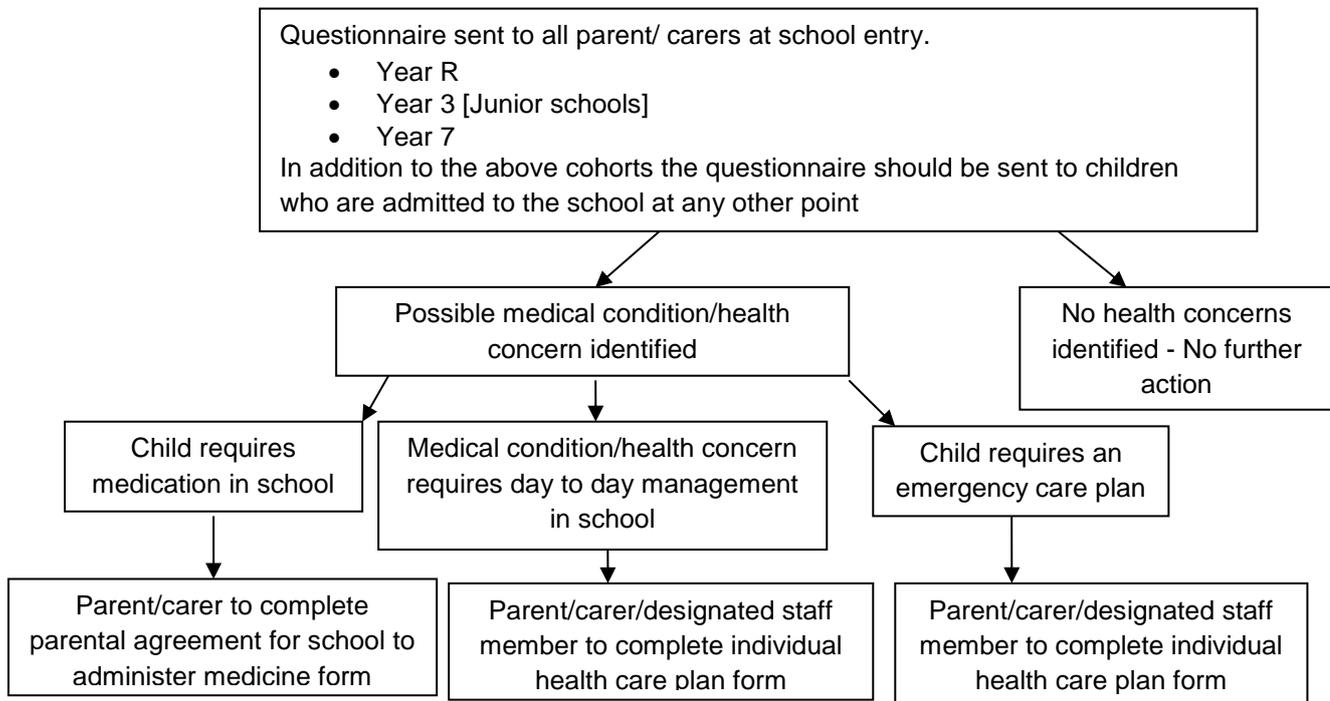
Should parents or children be dissatisfied with the support provided they can discuss their concerns directly with the Headteacher. If for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints' procedure.

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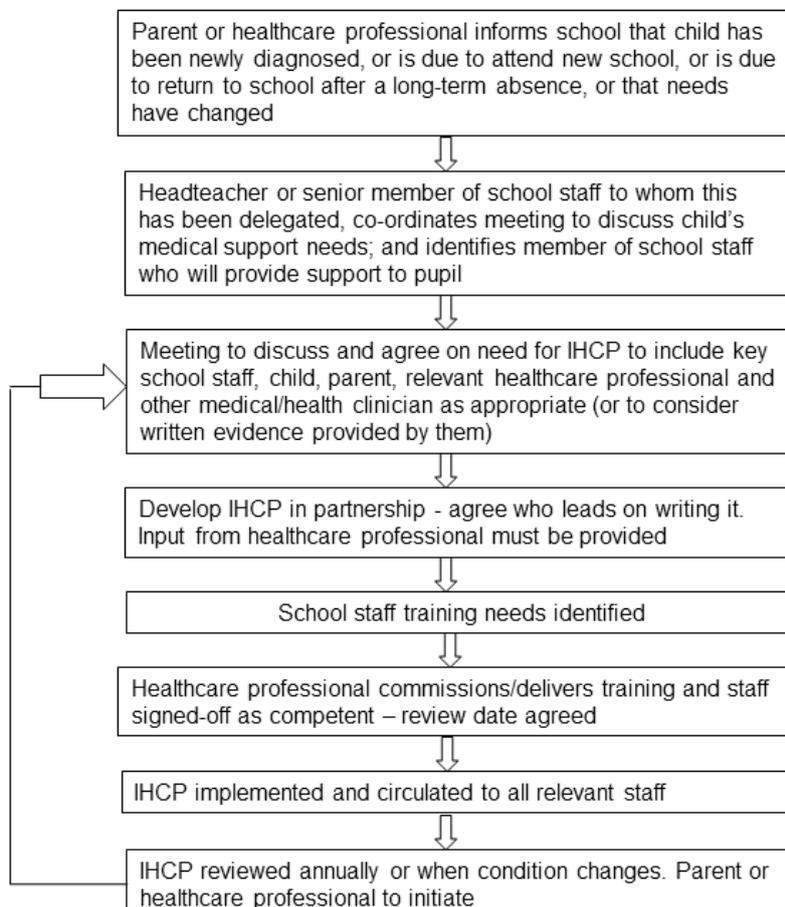
## Appendix A

### Suggested process for identifying children or young people with a medical condition that may require support in school

Not all children with a health condition will require a health care plan in school however the form will help schools to ascertain which children require support. In addition to this schools may be informed at any other point by a parent or health professional if a child is newly diagnosed with a health condition.



Please see sample flowchart below from the Supporting pupils with medical conditions guidance



**Appendix B**

**Please complete the questionnaire below and return it to school**

It is important that all children with medical conditions are supported to make sure that they are able to access their education. Some children with medical conditions may need care or medication to manage their health condition and to keep them well during the school day. Could you please complete the questionnaire below and return it to school as soon as possible so that we are able to assess your child's health needs and make arrangements to support them if necessary. In order to ensure that any medical needs are appropriately met in school we may need to discuss your child's health with the School Nursing service or another health professional who is involved in your child's care.

Name of child ..... Date of Birth .....

Home Address.....

Does your child have a medical condition/ health concern?

YES  NO

**If YES please give details**

Does your child have a medical condition/health concern that needs to be managed during the school day?

YES  NO

**If YES please give details**

Does your child take medication during the school day?

YES  NO

**If YES please give details**

Does your child have a health care plan that should be followed in a medical emergency?

YES  NO

**If YES please give details**

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to the school to discuss this information with the School Nursing service or other health professionals who are involved in my child's care.

Signature(s) \_\_\_\_\_ Print Name \_\_\_\_\_  
**[Parent/ Carer with parental responsibility]**

Date \_\_\_\_\_ Contact number \_\_\_\_\_