

Supporting Pupils with Medical Needs Policy Statement including Administration of Medicines

**LEYBOURNE Ss PETER & PAUL CE PRIMARY
ACADEMY**



Leybourne Ss Peter and Paul C.E. Primary Academy

Supporting Pupils with Medical Needs Policy

This policy is written in line with the requirements of: -

Children and Families Act 2014 - section 100

Supporting pupils at school with medical conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England, DfE Sept 2014

0-25 SEND Code of Practice, DfE 2014

Mental Health and behaviour in schools: departmental advice for school staff, DfE June 2014

Equality Act 2010

Schools Admissions Code, DfE 1 Feb 2010

This policy should be read in conjunction with the school's SEN Information Report, Safeguarding Policy, Complaints Policy and Equality Statement.

This policy was developed using a process that involved parents/carers of pupils with medical conditions, representatives from the governing body and the school nurse. It will be reviewed annually.

Definitions of medical Conditions

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

Short-term affecting their participation at school because they are on a course of medication.

Long-term potentially limiting access to education and requiring on-going support, medicines or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances.

Policy implementation

The statutory duty for making arrangements for supporting pupils at school with medical conditions rests with the Local Governing Board. The Governors have conferred the following functions of the implementation of this policy to the staff below; however, the Local Governing Board remains legally responsible and accountable for fulfilling our statutory duty.

The overall responsibility for the implementation of this policy is given to the Headteacher. She will also be responsible for ensuring that the correct ratio of staff to pupils and adults are suitably trained, including paediatric and school first aiders, and will ensure cover arrangements are in place in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training.

The School Business Manager will be responsible for supporting Educational Visits' group leaders with the preparation of risk assessments for school visits and other school activities outside the normal timetable and for the monitoring of individual healthcare plans.

The SEND Manager will be responsible, in conjunction with parents/carers and outside agencies, for drawing up, implementing and keeping under review the individual healthcare plan for each pupil and making sure relevant staff are aware of these plans.

Procedure to be followed when notification is received that a pupil has a medical condition

For children being admitted to Leybourne Ss Peter and Paul CEP Academy for the first time, with good notification given, and in discussion with parents and relevant health professionals, an individual health care plan will be agreed and the arrangements will be in place for the start of the relevant school term. In other cases, such as a new diagnosis or a child moving to Leybourne Ss Peter and Paul CEP Academy mid-term, we will make every effort to ensure that arrangements are put in place as soon as possible.

We will ensure that staff are properly trained and supervised to support pupils' medical conditions and will be clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. We will make arrangements for the inclusion of pupils in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible. We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that no pupils' health is put at unnecessary risk from, for example, infectious disease. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

Leybourne Ss Peter and Paul CEP Academy does not have to wait for a formal diagnosis before providing support to pupils. In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. These discussions will be led by the Headteacher and following these discussions an individual healthcare plan will be written in conjunction with the parent/carers by the SEND Manager and be put in place.

Individual healthcare plans (IHCPs)

Individual healthcare plans will help to ensure that Leybourne Ss Peter and Paul CEP Academy effectively supports pupils with medical conditions. They will provide clarity about what needs to be done, when and by whom. They should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional e.g. school nurse, who can best advise on the particular needs of the child and will be reviewed regularly. However, not all children will require one. The school, healthcare professional and parent/carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the Headteacher is best placed to take a final view. A flow chart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided at annexe A. Individual healthcare plans are kept in the school office.

Appendix 1 provides a template for an individual healthcare plan, outlining useful information to be gathered. This format may vary to suit the specific needs of each pupil.

Children with health needs who cannot attend school

Local authorities are commissioners of school nurses for maintained schools and academies in Kent. Under Section 10 of the Children Act 2004, they have a duty to promote co-operation between relevant partners such as Governing Bodies of maintained schools, proprietors of Academies, Clinical Commissioning Groups and NHS England, with a view to improving the well-being of children with regard to their physical and mental health, and their education, training and recreation. KCC will work with us to support pupils with medical conditions to attend full time. Where pupils would not receive a suitable education in a mainstream school because of their health needs, the Local Authority has a duty to make other arrangements. Statutory guidance for Local Authorities sets out that they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the year).

Roles and responsibilities

Please refer to the section on policy implementation for the functions that have been delegated to different, named members of staff at Leybourne Ss Peter and Paul CEP Academy.

Parents/carers should provide the school with sufficient and up-to-date information about their child's medical needs. Parents should be involved in the development and review of their child's individual healthcare plan. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be involved in discussions about their medical support needs, where appropriate.

Staff training and support:

First Aiders in School – Updated 05.01.2022

First Aid Paediatric

Tracey Mitchell	Expires 08.09.2023	Reception Class
Kelly Dale	Expires 08.09.2023	Reception Class
Liz Millar	Expires 08.09.2023	Breakfast Club and MMS

Emergency First Aid at Work – 1 day

TAS

Donna Brooks	Expires 24.11.2024
Anya Gibbs	Expires 02.09.2023
Kathryn Glennon	Expires 24.11.2024

Mags Hales	Expires 24.11.2024
Katie Lepavoux	Expires 24.11.2024
Kerri Miller	Expires 02.09.2023
Sarah Patterson	Expires 24.11.2024
Lucy Robinson	Expires 02.09.2023
Louise Spratt	Expires 02.09.2023
Leah Vennart	Expires 24.11.2024
Ilenia Ward (Also MMS)	Expires 24.11.2024

Teachers

Louise Grinstead	Expires 24.11.2024
Becky Mockler	Expires 24.11.2024
Zoe Ward	Expires 24.11.2024

Breakfast Club Supervisors and Midday Supervisors

Lisa Holmes	Expires 02.09.2023
Marcia Phelan	Expires 02.09.2023
Janice Azzopardi	Expires 02.09.2023
Liz Millar	See Paediatric above
Katherine Lowe	Expires 02.09.2023

Office Staff

Julie Hardy	Expires 19.03.2022
Debbie Potter	Expires 02.09.2023
Lynne Eldred	Expires 02.09.2023

Named people for administering medicines:

Any named first aider, plus Mrs Tina Holditch.

Appendix C can be used to record staff training for administration of medicines and /or medical procedures, if not recorded on the individual healthcare plans.

All staff who are required to provide support to pupils for medical conditions will be trained by healthcare professionals qualified to do so. The training need will be identified by the healthcare professional during the development or review of the individual healthcare plan. We may choose to arrange training ourselves and will ensure that it remains up-to-date.

Staff must not undertake specialised healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). A first aid certificate does not constitute appropriate training in supporting children with medical conditions.

All staff will receive induction training and regular whole school awareness training so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing the policy. The Headteacher will seek advice from relevant healthcare professionals about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

The child's role in managing their own medical needs

If, after discussion with the parent/carer, it is agreed that the child is competent to manage his/her own medication and procedures, s/he will be encouraged to do so. This will be reflected in the individual healthcare plan.

Children will be supervised to access their medication for self-medication quickly and easily; in the case of asthma inhalers, for example, these will be stored in clear, individually named wallets complete with an asthma card giving clear instructions about its usage and a record sheet. All wallets will be kept in a green medical back pack in the teacher's cupboard in the classroom to ensure that the safeguarding of other children is not compromised. In other circumstances, the medication will be stored centrally in the School Office or in the fridge in the staffroom. The school does also recognise that children who take their medicines themselves and/or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them. If a child does self-medicate, a log of this will be kept by staff on the individual record sheet as mentioned above. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.

Managing medicines on school premises and record keeping

At Leybourne Ss Peter and Paul CEP the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so;
- The school will not administer non-prescription medicines. In the case of non – prescription medicines such as Calpol, parents are able to come into school at lunchtime to administer the medication themselves. In *exceptional* cases of medium or long term illness or injury, pain relief medication, such as Calpol, *may* be administered by school staff *with the express consent of the Headteacher*.
- If a child has hay fever, the school may administer non prescription medication, should this be advised by a healthcare professional. This will only happen with the express consent of the Headteacher.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours;
- Leybourne Ss Peter and Paul CEP Academy will only accept prescribed medicines, with written permission from parent/carer (see Appendix B) that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include pharmacy/GP instructions for administration, dosage and storage. The exception to this is insulin which must be in-date, but will generally be available to schools inside an insulin pen or a pump, rather than its original container.
- If a child has a chronic condition requiring intermittent administration of medication, this must be prescribed by the GP in order for the medication to be kept in school and with the written permission of the parent/carer, in its original container, labelled and in- date.
- All medicines to be administered by staff will be stored safely in the lockable Medicine Cabinets located in the office cupboard. Children should know where their medicines are at all times and be able to access them immediately under the supervision of an adult member of staff.

- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available in the child's classroom and not locked away. Asthma inhalers and adrenaline pens should be marked with the child's name and will be kept in an individually named wallet, with either an asthma card or health care plan and record sheet, in the green medical backpack in the classroom cupboard, as already mentioned above. In these cases, medicines such as asthma inhalers and devices should be kept in school for the duration of the school year (or until the medicine expires or is no longer needed), and should not be sent home each day. This ensures that we have all necessary medication in school each day, without the need for staff to check bags, or risk vital medication being left at home.
- During school trips a named member of staff will carry all medical devices and medicines required.
- We will keep all controlled drugs that have been prescribed for a pupil securely stored and only named staff will have access.
- Staff administering medicines should do so in accordance with the prescriber's instructions. A written record is kept (see Appendix B) of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted.
- When no longer required, medicines will be returned to the parent/carer to arrange safe disposal.
- It is the parents' responsibility to supply appropriate medication for school use.

Emergency procedures

The Headteacher will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process.

Where a child has an individual healthcare plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other pupils in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

Day trips, residential visits, and sporting activities

We will actively support pupils with medical conditions to participate in day trips, residential visits and sporting activities by being flexible and making reasonable adjustments, unless there is evidence from a clinician such as a GP that this is not

possible. For all trips, parents will be asked to give written agreement for staff to administer medicines as part of the trip permission form.

We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions can be included safely. This will involve consultation with parents\carers and relevant healthcare professions and will be informed by Health and Safety Executive (HSE) guidance on school trips.

Where appropriate, for any pupil, attending a residential trip, who may need support with personal care an 'Intimate'/Personal Care Plan is drawn up, in discussion with parents. This allows staff to give assistance where necessary. (Appendix D).

Other issues for consideration

Where a pupil uses home-to-school transport arranged by the LA and they also have a life-threatening medical condition, we will share the pupil's individual healthcare plan with the local authority.

The school has a defibrillator and as First Aid certificates are renewed, appropriate training is included.

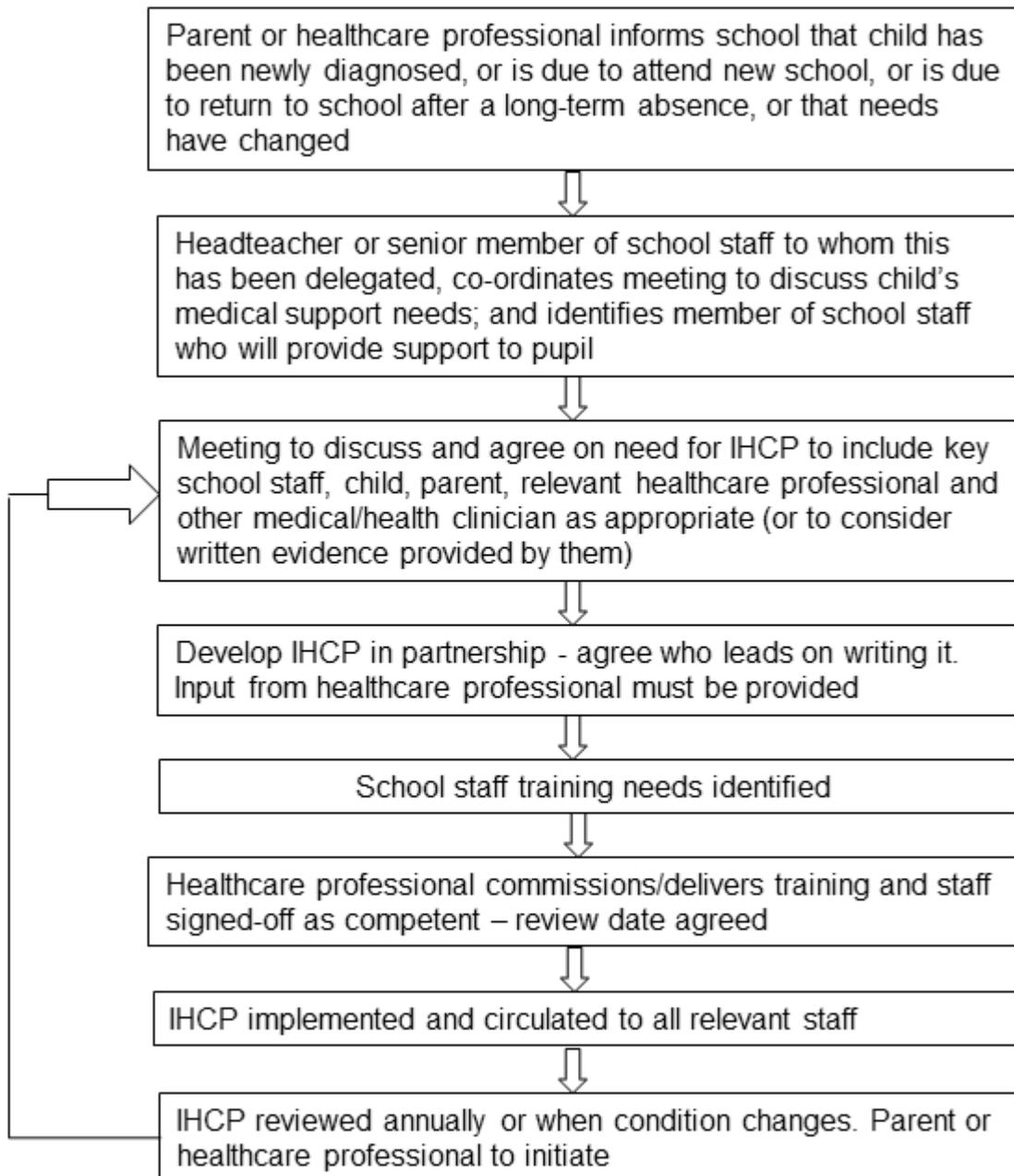
Liability and indemnity

Details of insurance cover and provider are available from the School Office.

Complaints

Should parents/carers be unhappy with any aspect of their child's care at Leybourne Ss Peter and Paul CEP, they must discuss their concerns with the school. This will be with the child's class teacher in the first instance. If this does not resolve the problem or allay the concern, the problem should be brought to a member of 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 parent/carer must make a formal complaint using the Leybourne Ss Peter and Paul CEP Complaints Procedure.

Annexe A: Model process for developing individual healthcare plans



Appendix A: Leybourne Ss Peter and Paul CEP Academy 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.

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 (including signatures)

Staff training needed/undertaken – who, what, when

Form copied to

Appendix B: Parental Agreement for Leybourne Ss Peter and Paul CEP Academy to Administer Medicine and record of Medicine Administered

Name of child	
Date of birth	
Class	
Medical condition or illness	

Medicine

Name/type of medicine <i>(as described on the container)</i>	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

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

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	The School Office

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 _____

Record of Medicine Administered

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

B: Record of Medicine Administered (continued)

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Date			
Time given			
Dose given			
Name of member of staff			
Staff initials			

Appendix C: staff training record – administration of medicines and/or medical procedures at Leybourne Ss Peter and Paul CEP Academy

Name of school	Leybourne Ss Peter and Paul CEP Academy
Name	
Type of training received	
Date of training completed	
Training provided by	
Profession and title	

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 [name of member of staff].

Trainer's signature _____

Date _____

I confirm that I have received the training detailed above.

Staff signature _____

Date _____

Suggested review date _____

Leybourne SS Peter & Paul C of E Primary Academy Intimate/Personal Care Plan

Child's Name:		Date:
Plan written & agreed for trip to:		
Personal care needs: sleep management? waking at night? Calling for help? Use of baby monitor?		
Toileting plan: Toileting during the day? Accompanied? Bedwetting? Pull-ups? How is it managed at home?		
Dressing/undressing plan: What can be done independently? What part of dressing/undressing does she/he have difficulty with? What do staff need to do? Privacy?		
Washing/showering: teeth? washing? showering? What do staff need to do?		
Medical plan: any medicines? Administering of medicines?		
People involved in writing & agreeing this plan:		
Child's views were sought: yes no		
If not, why not?		
People involved in writing & agreeing this plan:		
name	role	Signature & date