



Name of Policy	Supporting Pupils with Medical Conditions Policy
Document owner	Carla Walmsley
Document issued/last reviewed	November 2019
Date for review	September 2020
Additional notes	
Number of pages	10

Contents

1. Aims.....	3
2. Legislation and statutory responsibilities.....	3
3. Roles and responsibilities	4
4. Equal opportunities	5
5. Being notified that a child has a medical condition	5
6. Individual healthcare plans	5
7. Managing medicines	6
8. Emergency procedures.....	7
9. Training.....	8
10. Record keeping	8
11. Liability and indemnity.....	8
12. Complaints.....	9
13. Monitoring arrangements.....	9
14. Links to other policies.....	9
15. Appendix 1.....	10

1. Aims

This policy aims to ensure that:

- › Pupils, staff and parents understand how our Service 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 Service trips and sporting activities

The Executive leadership team and Management Committee will implement this policy by:

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

The named person with responsibility for implementing this policy is Mark Goode

2. Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their Service with medical conditions.

It is also based on the Department for Education's statutory guidance: Supporting pupils at Service with medical conditions.

3. Roles and responsibilities

3.1 The Management Committee

The Management Committee has ultimate responsibility to make arrangements to support pupils with medical conditions. The Management Committee 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 Executive 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 (IHCPs), including in contingency and emergency situations
- › Take overall responsibility for the development of IHCPs
- › Make sure that Service staff are appropriately insured and aware that they are insured to support pupils in this way
- › Contact the Service nursing service in the case of any pupil who has a medical condition that may require support at Service, but who has not yet been brought to the attention of the Service 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 Service 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 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/Carers

Parents/Carers will:

- › Provide the Service with sufficient and up-to-date information about their child's medical needs
- › Be involved in the development and review of their child's IHCP and may be involved in its drafting
- › Carry out any action they have agreed to as part of the implementation of the IHCP e.g. provide medicines and equipment

3.5 Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHCPs. They are also expected to comply with their IHCPs.

3.6 Service nurses and other healthcare professionals

We are advised upon referral from the home/referring Service of an individual's medical condition and health need. KHNES require regular medical updates every 3-6 months in order to ensure adequate support is in place.

KHNES will liaise with Healthcare professionals, such as GPs and paediatricians where appropriate.

4. Equal opportunities

Our Service is clear about the need to actively support pupils with medical conditions to participate in Service trips and visits, or in sporting activities, and not prevent them from doing so.

The Service will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on Service 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 Service is notified that a pupil has a medical condition, the process outlined below will be followed to draw up the pupils IHCP. This process will also be followed for any changes or newly diagnosed conditions.

The Service 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 Service.

See Appendix 1.

6. Individual healthcare plans

The Executive Headteacher has overall responsibility for the development of IHCPs for pupils with medical conditions. This has been delegated to Assistant Headteachers and Hub Managers across the provision.

Plans will be reviewed at least every 6 months or earlier if there is evidence that the pupil's needs have changed. IHCP's should be used in conjunction with pupil support plans (PSP's) and risk assessments.

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

- What needs to be done
- When
- By whom

Plans will be drawn up in partnership with the Service, parents and a relevant healthcare professional, such as the Service nurse, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHCPs will be linked to, or become part of, any statement of special educational needs (SEN) or education, health and care (EHC) plan. If a pupil has SEN but does not have a statement or EHC plan, the SEN will be mentioned in the IHCP.

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 Executive Headteacher, Assistant Headteachers and Hub Managers with responsibility for developing IHPs, will consider the following when deciding what information to record on IHCPs:

- 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, e.g. 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, 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 Service 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 Service hours
- › Separate arrangements or procedures required for Service trips or other Service activities outside of the normal Service 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

Prescription and non-prescription medicines will only be administered at the Hubs:

- › When it would be detrimental to the pupil's health or Service attendance not to do so **and**
- › Where we have parents'/carers written consent

The only exception to this is where the medicine has been prescribed to the pupil without the knowledge of the parents/carers.

Pupils under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a pupil any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents/carers will always be informed.

The Service 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, dosage and storage

The Service 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. 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/carers to arrange for safe disposal when no longer required.

7.1 Controlled drugs

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 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 Service 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 responsibility for managing their own medicines and procedures where this is appropriate for example inhalers and glucose testing kits. This will be discussed with parents/carers and it will be reflected in their IHCPs.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHCP and inform parents so that an alternative option can be considered, if necessary.

7.3 Unacceptable practice

Service staff should use their discretion and judge each case individually with reference to the pupil's IHCP, 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/carers
- › 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 Service activities, including lunch, unless this is specified in their IHCPs
- › If the pupil becomes ill, send them to the Hub office or medical room unaccompanied or with someone unsuitable
- › 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/carers, or otherwise make them feel obliged, to attend the hub to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the Service is failing to support their child's medical needs
- › Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of the curriculum, including Service trips, e.g. by requiring parents/carers to accompany their child
- › Administer, or ask pupils to administer, medicine in hub toilets

8. Emergency procedures

Staff will follow the Service's normal emergency procedures (for example, calling 999). All pupils' IHCPs 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 IHCPs. 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 Assistant Headteacher overseeing that young person. 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. Parents/Carers will be informed if their pupil has been unwell at the Hub.

IHCPs are kept in a readily accessible place which all staff are aware of.

11. Liability and indemnity

The Management Committee will ensure that the appropriate level of insurance is in place and appropriately reflects the Service's level of risk.

The Liability and Professional Indemnity policy provider is:

Zurich Municipal: MD/B52, Zurich Municipal, Farnborough

Details of the Service's cover include:

- › Public Liability
- › Products Liability
- › Employer's Liability:
- › Official's Indemnity
- › Libel and Slander
- › Land Charges

12. Complaints

Parents/Carers with a complaint about their child's medical condition should discuss these directly with the Hub Manager/Assistant Headteacher in the first instance. If the Executive Headteacher/Deputy Headteachers cannot resolve the matter, they will direct parents to the Service's complaints procedure.

13. Monitoring arrangements

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

14. Links to other policies

This policy links to the following policies:

- › Accessibility plan
- › Complaints
- › Equality information and objectives
- › First aid
- › Health and safety
- › Safeguarding
- › Special educational needs information report and policy

Appendix 1: Being notified a child has a medical condition

