

Bernards Heath Infant and Nursery School



Supporting Pupils with Medical Conditions

Updated:	September 2023
Next Review Date:	September 2024 To align with H&S Policy
Committee:	FGB
Reviewed by:	Hannah Rimmer

The named member of school staff responsible for this medical conditions policy and its implementation is:

NAME: Hannah Rimmer

ROLE: Head Teacher

This school is an inclusive community that supports and welcomes pupils with medical conditions.

- This school is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- This school will listen to the views of pupils and parents/carers.
- Pupils and parents/carers should feel confident in the care they receive from this school and the level of that care meets their needs.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- The whole school supports this policy and it is shared, as appropriate, with the local health community.
- This school understands that all children with the same medical condition will not have the same needs; our school will focus on the needs of each individual child.
- For children with SEN, this policy should be read in conjunction with the special educational needs and disability (SEND) code of practice.

This school's medical conditions policy was drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

- Stakeholders include parent/carers, school nurse, school staff, governors, and relevant local health specialist services.
- In drawing up this policy the school has considered what would be classed as unacceptable practice. A list can be found in Appendix 3.

The medical conditions policy is supported by a clear communication plan for staff, parent/carers and other key stakeholders to ensure its full implementation.

- On transition to our school, Parents/carers are required to complete an admissions form. This includes a question about medical diagnosis and needs, including allergies.
- Parent/carers of children with medical conditions are invited to school to meet with Helen Turl to discuss this policy, their child's individual needs and to complete an individual health care plan (as per the process outlined in appendix 1.)
- This policy is shared with school staff at the point of update and new staff as part of their induction (stored on the X-drive and Governor Hub.)
- This policy is shared with other key stakeholders as appropriate.

The appropriate staff understand and are trained in what to do in an emergency for children with medical conditions at this school.

- The school holds a training spreadsheet with expiry dates managed by the School Business Manager. They liaise with the Head teacher to ensure training is booked and kept up to date.
- All school staff, including temporary or supply staff, are aware of the medical conditions at this school (information about each individual child is displayed in the medical room, classroom and staffroom information about adults is displayed in the staff room) and understand their duty of care to pupils in an emergency.
- Specific staff receive training in what to do in an emergency - training for managing anaphylaxis is updated annually, the emergency plan is updated and shared every two years and first aid training is offered to specific staff and this is updated every three years.
- All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required at this school have an individual healthcare plan (IHCP), which explains what help they need in an emergency on or off site. The IHCP will accompany a pupil should they need to attend hospital.
- If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.
- In consultation with the school nurse as appropriate, this school makes sure that all staff providing support to a pupil have received suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHCP. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or parent/carer. The specialist nurse/school nurse/other suitably qualified healthcare professional will

confirm their competence and this school keeps an up to date record of all training undertaken and by whom.

- Herts catering staff working in the school kitchen adhere to the HCL policy and procedures for meeting the needs of children with medical conditions.

This school has clear guidance on providing care and support and administering medication at school.

- At this school, the governors and Head teacher have decided that the school will not hold medicine/medication for children in cases where the medical condition is short term e.g. antibiotics for an infection. Parents are welcome to make arrangements to come into school and give medication at lunchtimes or to ask their GP for a regime that works around the school day.
- However, this school understands the importance of medication being taken and care received as detailed in the pupil's IHCP.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.
- This school will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child including staff trained to cover any absences, staff turnover and other contingencies.
- This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.¹
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances.
- This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit.
- Parents/carers at this school are required to let the school know immediately if their child's needs change.
- If a pupil misuses their medication, or anyone else's, their parent/carer is informed as soon as possible.

This school has clear guidance on the storage of medication and equipment at school.

- This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, e.g. asthma

¹ For school's covered by HCC's insurance where an IHCP is in place; parents have consented for the school to administer medication / meet other support needs as part of that plan; trained staff undertake these support needs and record keeping in relation to administration is robust then liability cover would be in place for common treatments administered by staff. (e.g. in relation to oral medication, inhalers, epi-pens, pre-packaged doses via injection etc.)

inhalers, epi-pens etc are readily available wherever the child is in the school and on off-site activities, and are not locked away.

- This school will store controlled drugs securely in a non-portable container, with only named staff having access. Staff at this school can administer a controlled drug to a pupil once they have had training.
- This school will make sure that all medication is stored safely, and that all staff know where they are at all times. If the medication is an asthma inhaler this is labelled and given to the class teacher to keep in the classroom and ensure that it is readily available to the child. If the medication is for an allergy this is kept in the cupboard in the staff room. The medication is kept with the care plan in either a zip wallet or, for EpiPens/Jext Pens, in a plastic box with a lid. All medication in school is clearly labelled with the child's name and photo.
- This school will only accept medication that is in date, labelled and in its original container including prescribing instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Helen Turl monitors the medication log and alerts parents and carers to medication that is going out of date. Helen Turl holds responsibility to follow this up with parents/carers and parents/carers must ensure that new medication is provided in good time.
- This school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.
- When administering medication it is necessary to check the name of the child, name of the medication, dosage, written instructions from the pharmacist and the expiry date.

At no time should a child carry their own medication at school

This school has clear guidance about record keeping.

- As part of the school's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. Parents are responsible for updating the school if any new/changes to medical conditions are diagnosed.
- Arrangements will usually be in place by the time the child starts at the school. If a child joins mid-term or a new diagnosis is made, arrangements will be made to complete and IHCP before the child starts school or before the child returns to school.
- This school uses an IHCP to record the support an individual pupil needs around their medical condition. The IHCP is developed with the parent/carer, Helen Turl, specialist nurse (where appropriate) and relevant healthcare services.
- Whilst IHCPs will often be essential and / or helpful, especially where medical conditions are long term and complex, not all children will require one. The school, parent/carer and if

appropriate, healthcare professional should agree when an IHCP would be inappropriate or disproportionate. Where relevant, the Head teacher takes the final view.

- This school has a centralised register of IHCPs, and Helen Turl has the responsibility for this register.
- IHCPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- The parents/carers hold a copy of the IHCP. Other school staff are made aware of and have access to the IHCP for the pupils in their care.
- This school makes sure that the pupil's confidentiality is protected.
- This school seeks permission from parents/carers before sharing any medical information with any other party.
- This school keeps an accurate record of all medication administered, including the dose, time, date, supervising staff and if the child refused to take it.
- Medication is only ever administered by a first aid trained member of staff or staff with specialist training (as appropriate).
- A list of first aid trained staff and those with specialist training is kept on the wall in the medical room.

This school ensures that the whole school environment is inclusive to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

- This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils/parents/carers are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.
- This school makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities and extended school activities.
- All staff are aware of the potential social/emotional issues that pupils with medical conditions may experience. They use this knowledge, alongside the school's vision to help promote the ethos of kindness and respect for all. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- This school understands the importance of all pupils taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order they are accessible to all pupils. This includes after school clubs. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- If a child leaves the school premises on a visit then all appropriate medication for that child will be taken offsite by a member of school staff. When possible/appropriate the

parent/carer is asked to accompany the class in the role of a volunteer although this should not be required.

- A parent can request in writing that an anti-sickness tablet is given to the class teacher for a child travelling on a coach as part of an off site visit.
- This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

This school makes sure that pupils have the appropriate medication/equipment/food with them during physical activity and offsite visits.

- This school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- This school will not penalise pupils for their attendance if their absences relate to their medical condition.
- This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCo who will liaise with parents/carers and professionals as appropriate.

This school works with parents to build awareness of common triggers that can make an individual's medical condition worse and what constitutes an emergency.

- The IHCP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on off site visits. Risk assessments are carried out on all out-off site visits, taking into account the needs of pupils with medical needs. These are shared with staff as appropriate.
- This school reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.

Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

- This school works in partnership with all relevant parties including the pupil (where appropriate), parent/carer, school's governing body, all school staff, employers and

healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

- Key roles and responsibilities are outlined in Appendix 2.

The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.

- In evaluating the policy, this school seeks feedback from relevant key stakeholders. Maintaining a child centred approach is central to the evaluation process.
- Should parents/carers and pupils be dissatisfied with the support provided they should discuss these concerns with the Head teacher. If not satisfied with the response they will be referred to the school's complaints procedure, available on the website.

Appendix 1

1. Parent or healthcare professional informs school that Child has been newly diagnosed, or is due to return to school after a long-term absence, or that needs have changed.
2. Head teacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs, and identifies member of school staff who will provide support to pupil.
3. Meeting to discuss and agree on need for IHCP to include key school staff, child, parent/carer, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them).
4. Develop IHCP in partnership – agree who leads on writing it. Input from healthcare professional must be provided.
5. School staff training needs identified.
6. Healthcare professional commissions/delivers training and staff signed-off as competent – review date agreed.
7. IHCP implemented and circulated to all relevant staff.
8. IHCP reviewed annually or when condition changes. Helen Turl to initiate annual review. Steps 3-8 repeated.

Appendix 2

Roles and responsibilities

Governing bodies – must 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. They should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions. They should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and resources as needed.

Head teacher – should 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. Head teachers should ensure that all staff who need to know are aware of the child's condition. They should 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. Head teachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

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

School nurse – every school has access to school nursing services. They 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 will 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. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other healthcare professionals - including GPs, paediatricians, nurse specialists/community paediatric nurses – should notify the school nurse and work jointly when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.

Pupils – This school takes into consideration the age and development of a child with medical conditions and has appropriate conversations about their needs. Emotional and social impact of any condition is considered by all adults working with these children.

Parents/carers – must provide the school with sufficient and up-to-date information about their child's medical needs. They are often the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and will be involved in its drafting. They must carry out any action they have agreed to as part of its implementation, for example, provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Appendix 3

Unacceptable practice

The information below is provided so that all stakeholders are clear on what is not acceptable practice in regard to supporting children with a medical condition:

- prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary;
- assume that every child with the same condition requires the same treatment;
- ignore the views of the child or their parents; or 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 individual healthcare plans;
- if the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable;
- penalise children 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 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 children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child. from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.