



BARKISLAND CE VA PRIMARY SCHOOL

Supporting Children with Medical Conditions Policy

Introduction

Guidance issued from the DFE states that the new Children and Families Act 2014 references the need for Governing bodies to make arrangements for supporting pupils at school with medical conditions. Barkisland CE VA Primary School is an inclusive school and has many children with medical conditions. Parents should feel confident that their child's medical condition will be supported effectively in school and that they will be safe. (Supporting pupils at school with medical conditions – statutory guidance for governing bodies of maintained schools and proprietors of academies in England December 2015)

Aims

- To support each child within the school to enable them to access the appropriately differentiated curriculum. Therefore, being prepared to support children with long term medical needs and having appropriate Healthcare plans and procedures in place.
- To ensure that children who have medical conditions or who are disabled are not at a substantial disadvantaged compare with their peers.

Implementation Strategies

Healthcare Plans

Individual healthcare plans are designed to support pupils in school with medical conditions. When a parent/carer informs school that their child has a significant or complex medical need a health care plan is written. However, all medical information is documented in school, plans out in place and shared with staff.

At each weekly briefing, the medical information for a cohort is shared with all staff as a reminder. This means that staff are reminded of medical conditions of each child every 7 weeks.

Health care plans will be drawn up between school, parents/carers and healthcare professionals if appropriate. Where it is deemed appropriate, pupils may be involved in drawing up the plan. The level of detail included on the plan will depend on the complexity of the child's condition and the degree of support needed. Children who have similar health conditions may require very different support.

Typically, the plan will include information regarding triggers, symptoms, treatments, medication (including specific dosages, times etc), any specialist equipment needed, access arrangements e.g. toilets, testing, food and drink, any support that may be needed for academic, personal, emotional or social needs and further information necessary to each individual pupil.

Healthcare plans are reviewed at least annually with parents or sooner if needed. If a child has a statement of educational need then the plan is reviewed at the Annual Review.

Health Care Plans for individual children are kept in the classroom and all staff involved in caring for the child are given a copy. They include information on what to do in an emergency situation.

Copies are also on display in the staff room and in the medical files located in the main school office and the school kitchen. Each class has an information sheet which briefly outlines any medical issues within the class and where further information can be found. These are on hand for staff and supply staff when necessary.

Where pupils have life threatening conditions, specific transport healthcare plans should be carried on vehicles.

Administering Medicine

The safe administration of medicines in school depends on the support and co-operation of all the parties connected with the child; parents/carers, the school staff and the individual child.

Parents/ Carers must:

- * provide the school with:
 - information about their child's medical condition, labelled supplies of the medication required (in the original labelled medicine bottle)
 - a completed form, authorising the school to administer the medication, available on the website or from the main entrance
 - information about the exact dosage and frequency
- * encourage their children to be self-supporting, under guidance
- * initially discuss their child's needs with a member of school staff
- * dispose of any out of date medication
- * not send non prescribed medication to school, unless agreed by the HT (*these do not need to be taken during school time as there would likely be no detrimental effects for the children concerned*)

The school staff will:

- * on a voluntary basis administer medication to children (NO member of staff will be made to administer medication)
- * ensure the safe storage and transportation of medication e.g. medicines which need to be kept in the fridge should only be collected and returned by an adult.
- * ensure that inhalers or other immediately needed medication will be stored safely and accessibly (for the children they are prescribed for) within each classroom. They will either be kept in the child's drawer or a designated place in the classroom (known to the child). They will not be kept in the class storeroom or teacher's desk as children do not have access to these.
- * record the dose, time medication is given.
- * receive appropriate training from the GP, Schools' Medical Service or other appropriate professional as may be necessary
- * maintain confidentiality about a child's medical condition, treatment and receive information on a "need to know basis."
- * will provide basic first aid (if suitably trained)
- * will contact parents/carers or other contact person in the event of;
 - an emergency
 - missing medication
 - some medical problem
- * administer only those medicines;
 - that have been prescribed by a GP or will support the child to attend school e.g ibuprofen to deal with pain
 - that the parents/carers have authorised should be given and have provided authorisation and information regarding dose and frequency, that the child is prepared to take, staff should not force a child to take medication but should

inform the parents of the situation immediately

- * staff will not administer any other medication including painkillers such as paracetamol, Aspirin etc without this authorisation.
- * supervise children when they take their own medication
- * remove medication from children so that it can be safely stored whilst the child remains on school premises.
- * become familiar with both the symptoms and emergency action necessary for children with individual care plans

We do hold a small supply of liquid paracetamol, liquid ibuprofen and liquid antihistamine. If it ever becomes necessary to administer these medications to children during the school day, although telephone consent is always requested from parents/carers before any medication is administered.

We also hold emergency asthma inhalers in school and request consent annually from parents/carers to use these if needed in an emergency.

A written record is kept of all medicines administered.

Parental consent form for administering medication can be found in appendix 1.

Reasonable Adjustments

For all school activities the needs of pupils with medical conditions will be considered. Risk assessments will be undertaken and any adjustments made will be discussed with parents. Class teachers must seek the advice of the school Inclusion Manager when making adjustments.

Pupils with Short Term Medical Needs

Where a child has a short-term injury e.g. broken bone, recovery after an operation/illness. The school will liaise with parents/carers to create a plan to support the child in school. See Appendix 2

If a child becomes ill/unwell during the course of the school day, staff must send a message to the office (via email, note with a well child) with a request for support e.g. to call parents/carers/ administer medication etc, if they do not have any additional adults supporting in their class.

The unwell/ill child should not be sent to the office to report this or request support.

Pupils with Long Term or Complex Medical Needs

Where a child's needs are particularly complex and could affect their ability to access the full curriculum or participate in other areas of school life, then special arrangements will be considered e.g. alternative starting time in the case of a child who has mobility issues.

In some cases this might take the form of dedicated adult support, at certain times of the school day. Alternatively, the child's needs could be such that modifications to the learning environment and /or the provision of specialist aids will need to be considered.

Education at Home

The medical needs team will be contacted if, for a medical reason, a child needs to be absent from school for longer than 2 weeks. This team will liaise with the school's Inclusion Manager and class teacher to offer appropriate home schooling.

When a child has had a prolonged period of time off school due to a medical condition, the school will work closely with parents and other relevant agencies to design a programme which will support the reintegration back into school e.g. a part time start.

Emergency Procedures

It should be made clear on any healthcare plan what would constitute an emergency situation for a particular child and the procedures that need to be taken.

If any child is needed to be taken to hospital, parents need to be informed as soon as is practically possible. There should be a minimum of two school staff to accompany the child to hospital. School staff must stay with the child until a parent arrives.

Personal Emergency Evacuation Plan

When children have a specific medical condition which may affect their safe evacuation from school in an emergency, a Personal Emergency Evacuation Plan is written. The Personal Emergency Evacuation Plan has a photo of the child, basic details of their condition and information emergency evacuation procedures. A copy of the Personal Emergency Evacuation Plan is placed in the child's classroom and in the medical files.

Staff training

The school is responsible for ensuring that staff have appropriate training to support children with medical needs. A register of staff and specific training they have received is maintained by the Headteacher, which includes any relevant medical training. We have a high number of staff who are appropriately training in first aid relevant to their role.

Arrangements are made with appropriate agencies to maintain the validity of any training as school and individual needs require.

The school have access to a defibrillator which is located in an unlocked cabinet outside of the main school entrance. Training is accessed regularly for a core number of staff members.

Educational visits

Every effort is made to encourage children with medical needs to participate in safely managed visits. Consideration is always given to the adjustments which need to be made to enable children with medical needs to participate fully and safely on visits. Staff supervising excursions should always be aware of any medical needs, and relevant emergency procedures. A copy of individual health care plans should be taken on visits in the event of the information being needed in an emergency. Arrangements for taking any necessary medicines will need to be made and if necessary an additional member of the support staff.

Sporting Activities

All children with medical conditions will be encouraged to participate as fully as possible in physical activities and extra-curricular sport. For many, physical activity can benefit their overall social, mental and physical health and well-being. Staff will be sensitive to their individual needs and sufficient flexibility will be incorporated into the lesson planning for all children to be included in ways appropriate to their own abilities.

Any restrictions on a child's ability to participate in PE will be recorded in their individual health care plan. This will include a reference to any issues of privacy and dignity for children with particular needs.

Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers. Failure to do so may result in disciplinary action being taken.

Roles and responsibilities

Parents/carers have the prime responsibility for their child's health and are required to provide the school (via the Head teacher) with information about their child's medical condition before they are admitted to the school, or as soon as the child first develops a particular medical need.

In consultation with the family, advice will then be sought from those health professionals involved with the child, in order to determine the level of support needed on a daily basis when their child attends school.

This could include:

- a General Practitioner (GP) or Paediatrician
- the school doctor or nurse
- a health visitor or a specialist voluntary body.

For those children who attend hospital appointments on a regular basis, special arrangements may also need to be considered.

Monitoring and evaluation

This policy will be monitored and evaluated by the Headteacher with appropriate reports given to the Governing Body.

Review

Policy written (incorporating medical needs and administering medicines): December 2014

Last reviewed: May 2016, March 2019

Appendix 1

ADMINISTRATION OF MEDICATION CONSENT FORM			
<p>The school will not give your child medication unless you complete and sign this form. Please note that we will not normally administer a lunchtime dose of medicine if the child only has to take it 3 times a day, unless absolutely unavoidable.</p>			
Name of child		Class	
Parent's mobile number			
Name of medication (as described on container)			
For how long will your child take this medication?			
Dosage			
Method of administration			
Time(s) during school day to be administered (please circle)		Morning Break (10.30) Lunchtime (12.00-1.20) Afternoon Break (2.20)	
Comments			
<p>I understand that :-</p> <ul style="list-style-type: none"> • The medication will be administered/supervised by an adult. • This is a service which the school is not obliged to undertake. • I must inform the school of any change of dose. • The medication must be in the original container as dispensed by the pharmacy stating the child's name on the pharmacy label. 			
Name of parent/carer		Relationship to child above	
Signed (parent/carer)		Date	

Appendix 2

Health Care Plan for a Pupil with a Medical Condition/Injury

Name:

Date of Birth:

Class:

Medical Condition:

Date plan drawn up:

Family Contact 1

Name:

Phone No:

Relationship:

Family Contact 2

Name:

Phone No:

Relationship:

Describe medical condition and give details of pupil's individual symptoms:

(Parent/carer to complete)

Daily care requirements (e.g. before sport/at lunchtime):

Staff to tick as appropriate in agreement with parent/carers

- Stay in playtime with a buddy / stay in outdoor classroom
- Can be outside at playtimes/lunchtimes but no energetic play (pupil to manage this themselves if able)
- Remain in wheel chair with leg elevated
- No PE at this time, if so please state how long
- Sit at a table to be comfortable and to allow leg elevation
- Sit on a chair at side during Collective Worship
- Buddy to carry lunch plates and to sit at the end of a table near to the hall entrance
- Eat lunch in a supervised area (t.b.a.) if unable to use the stairs to the hall
- Leave the classroom first or last with a buddy (to help with doors)
- Enter via main entrance to use ramps
- Use accessible toilet (TA to accompany & wait outside in case of difficulties)
- Other (please specify):

Describe what constitutes an emergency for the pupil, and the action to be taken if this occurs:

Parent/carers to complete

Follow up care/medication:

- Pain relief (analgesia) to be administered if required
- Parent to bring medication to school and this will be stored in the classroom/staffroom/office and administered as per medical form
- Medical form (kept in classroom) to be completed by staff after administering medicine

Copy of Care Plan to:

Class Teacher :

Classroom assistants:

Office

Parents

Parent/Carer signature

Staff member signature.....

The above measures should minimise the risk of further injury to the pupil.
Parents/carers agree and understand that as a school we cannot be held responsible in instances where subsequent injuries have accidentally occurred, despite following the care plan.