

## The Southover Partnership

### Supporting Pupils with Medical Conditions Policy

<b>Date adopted</b>	<b>April 2019</b>
<b>Date of Review</b>	<b>April 2021</b>
<b>Date of next Review</b>	<b>April 2023 or in line with DFE updates</b>

*\*To be read in conjunction with COVID-19 safeguarding addendum.*

The Southover Partnership School aims to ensure that pupils with medical conditions receive appropriate care and support at school. This policy has been developed in line with the Department for Education’s guidance released in April 2014 – “Supporting pupils at school with medical conditions”.

#### 1. Key roles and responsibilities

##### 1.1. Trustees are responsible for:

- 1.1.1. The overall implementation of the Supporting Pupils with Medical Conditions Policy and procedures of The Southover Partnership School.
- 1.1.2. Ensuring that the Supporting Pupils with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.
- 1.1.3. Handling complaints regarding this policy as outlined in the school’s Complaints Policy.
- 1.1.4. Ensuring that all pupils with medical conditions are able to participate fully in all aspects of school life.
- 1.1.5. Ensuring that relevant training is delivered to staff members who take on responsibility to support children with medical conditions.
- 1.1.6. Guaranteeing that information and teaching support materials regarding supporting pupils with medical conditions are available to members of staff with responsibilities under this policy.
- 1.1.7. Keeping written records of any and all medicines administered to individual pupils and across the school population.
- 1.1.8. Ensuring the level of insurance in place reflects the level of risk.

**1.2. The Executive Head and the Heads on each site are responsible for:**

- 1.2.1. The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and procedures of The Southover Partnership School
- 1.2.2. Ensuring the policy is developed effectively with partner agencies.
- 1.2.3. Making staff aware of this policy.
- 1.2.4. Liaising with healthcare professionals regarding the training required for staff.
- 1.2.5. Making staff who need to know aware of a child's medical condition.
- 1.2.6. Developing Individual Healthcare Plans (IHCPs).
- 1.2.7. Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- 1.2.8. If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
- 1.2.9. Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- 1.2.10. Contacting the school nursing service in the case of any child who has a medical condition.

**1.3. Staff members are responsible for:**

- 1.3.1. Taking appropriate steps to support children with medical conditions.
- 1.3.2. Where necessary, making reasonable adjustments to include pupils with medical conditions into lessons.
- 1.3.3. Administering medication, if they have agreed to undertake that responsibility.
- 1.3.4. Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, if they have agreed to undertake that responsibility.
- 1.3.5. Familiarising themselves with procedures detailing how to respond when they become aware that a pupil with a medical condition needs help.
- 1.3.6. Ensuring that a named staff member is trained to be responsible for administering injections if required.

**1.4. School nurses are responsible for:**

- 1.4.1. Notifying the school when a child has been identified with requiring support in school due to a medical condition.
- 1.4.2. Liaising locally with lead clinicians on appropriate support.

**1.5. Parents and carers are responsible for:**

- 1.5.1. Keeping the school informed about any changes to their child/children's health.
- 1.5.2. Completing a ***parental agreement for school to administer medicine*** form before bringing medication into school.
- 1.5.3. Providing the school with the medication their child requires and keeping it up to date.
- 1.5.4. Collecting any leftover medicine at the end of the course or year.
- 1.5.5. Discussing medications with their child/children prior to requesting that a staff member administers the medication.
- 1.5.6. Where necessary, developing an ***Individual Healthcare Plan (IHCP)*** for their child in collaboration with the Executive Headteacher or Heads of School, other staff members and healthcare professionals.

**2. Definitions**

- 2.1. "Medication" is defined as any prescribed or over the counter medicine.
- 2.2. "Prescription medication" is defined as any drug or device prescribed by a doctor.
- 2.3. A "staff member" is defined as any member of staff employed at The Southover Partnership School.

### **3. Training of staff**

- 3.1. Teachers and support staff will receive training on the Supporting Pupils with Medical Conditions Policy as part of their new starter induction.
- 3.2. Teachers and support staff will receive regular and ongoing training as part of their development.
- 3.3. Teachers and support staff who undertake responsibilities under this policy will receive training externally as needed for conditions identified.
- 3.4. No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility, including administering
- 3.5. No staff member may administer drugs by injection unless they have received training in this responsibility
- 3.6. The HR Officer will keep a record of training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

### **4. The role of the child**

- 4.1. Children who are competent will be encouraged to take responsibility for managing their own medicines and procedures.
- 4.2. Where possible, pupils will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located in an easily accessible location that is locked.
- 4.3. If pupils refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- 4.4. Where appropriate, pupils will be encouraged to take their own medication under the supervision of a teacher.

### **5. Individual Healthcare Plans (IHCPs)**

- 5.1. Where necessary, an Individual Healthcare Plan (IHCP) will be developed in collaboration with the pupil, parents/carers, Executive Headteacher, heads of School and medical professionals.
- 5.2. IHCPs will be easily accessible whilst preserving confidentiality.
- 5.3. IHCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- 5.4. Where a pupil has an Education, Health and Care plan or special needs statement, the IHCP will be linked to it or become part of it.

- 5.5. Where a child is returning from a period of hospital education or alternative provision or home tuition, we will work with the LA and education provider to ensure that the IHCP identifies the support the child needs to reintegrate.

## 6. Medicines

- 6.1. Where possible, it is preferable for medicines to be prescribed in frequencies that allow the pupil to take them outside of school hours.
- 6.2. If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a **parental agreement for a school to administer medicine** form.
- 6.3. No child will be given any prescription or non-prescription medicines without written parental consent except in exceptional circumstances.
- 6.4. Where a pupil is prescribed medication without their parents'/carers' knowledge, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality.
- 6.5. No child under 16 years of age will be given medication containing aspirin without a doctor's prescription.
- 6.6. Medicines MUST be in date, labelled, and provided in the original container (except in the case of insulin which may come in a pen or pump) with dosage instructions. Medicines which do not meet these criteria will not be administered.
- 6.7. A maximum of four weeks supply of the medication may be provided to the school at one time.
- 6.8. Controlled drugs may only be taken on school premises by the individual to whom they have been prescribed. Passing such drugs to others is an offence which will be dealt with under our Drug and Alcohol Policy.
- 6.9. Medications will be stored in the Medical Room in a locked cabinet.
- 6.10. Any medications left over at the end of the course will be returned to the child's parents.
- 6.11. Written records will be kept of any medication administered to children.
- 6.12. Pupils will never be prevented from accessing their medication.
- 6.13. The Southover Partnership School cannot be held responsible for side effects that occur when medication is taken correctly.

## **7. Emergencies**

- 7.1. Medical emergencies will be dealt with under the school's emergency procedures.
- 7.2. Where an Individual Healthcare Plan (IHCP) is in place, it should detail:
  - What constitutes an emergency.
  - What to do in an emergency.
- 7.3. Pupils will be informed in general terms of what to do in an emergency such as telling a teacher.
- 7.4. If a pupil needs to be taken to hospital, a member of staff will remain with the child until their parents arrive.

## **8. Avoiding unacceptable practice**

- 8.1. The Southover Partnership understands that the following behaviour is unacceptable:
  - Assuming that pupils with the same condition require the same treatment.
  - Ignoring the views of the pupil and/or their parents.
  - Ignoring medical evidence or opinion.
  - Sending pupils home frequently or preventing them from taking part in activities at school
  - Sending the pupil to the medical room or school office alone if they become ill.
  - Penalising pupils with medical conditions for their attendance record where the absences relate to their condition.
  - Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues.
  - Creating barriers to children participating in school life, including school trips.
  - Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

## **9. Insurance**

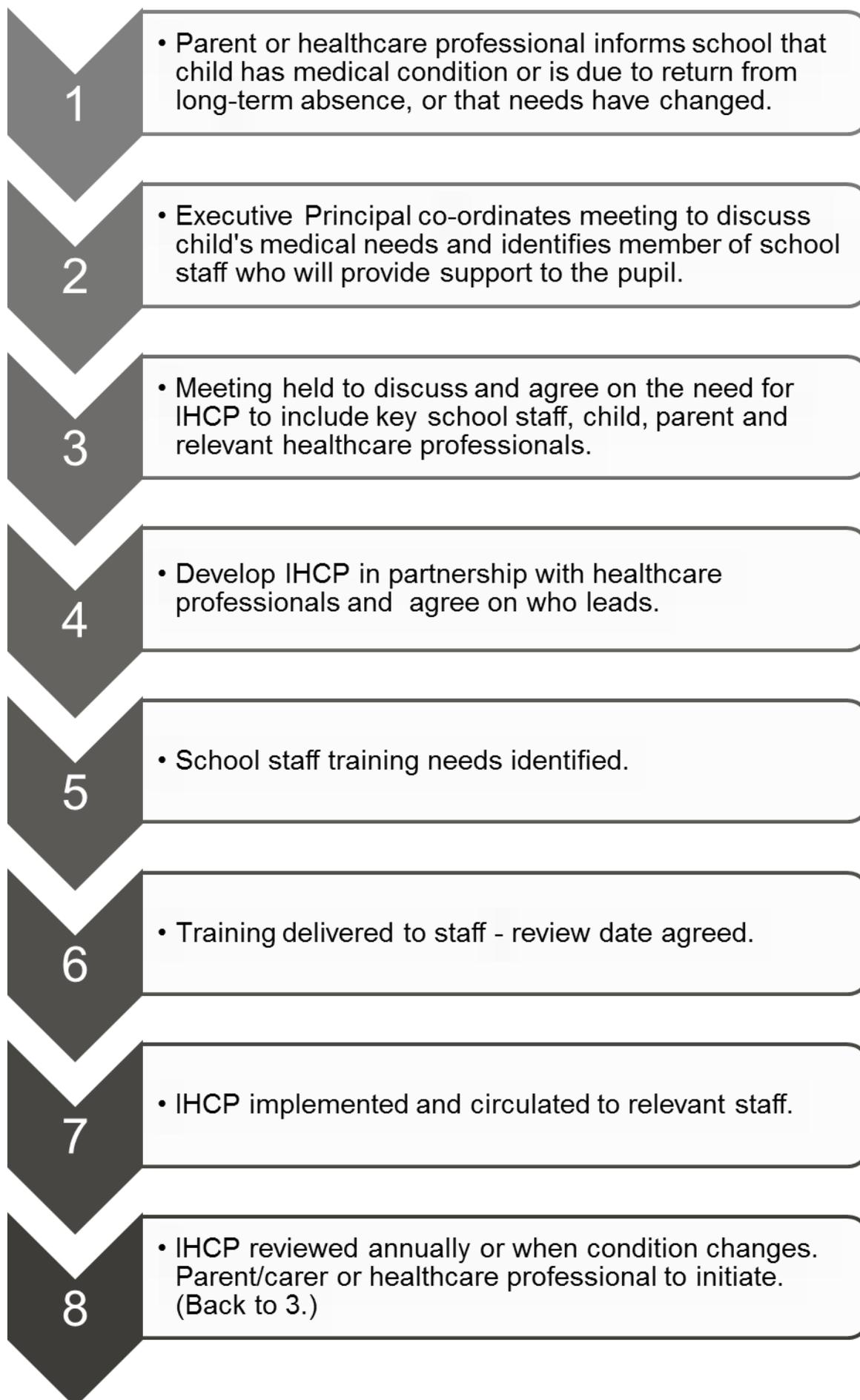
- 9.1. Teachers who undertake responsibilities within this policy are covered by the school's insurance.
- 9.2. Full written insurance policy documents are available to be viewed by members of staff who are providing support to pupils with medical conditions. Those who wish to see the documents should contact the Business Manager.

## **10. Complaints**

- 10.1. The details of how to make a complaint can be found in the Complaints Policy.

## **Appendix 1 - Individual healthcare plan implementation procedure**

- Parent or healthcare professional informs school that child has medical condition or is due to return from long-term absence, or that needs have changed.
- Headteacher co-ordinates meeting to discuss child's medical needs and identifies member of school staff who will provide support to the pupil.
- Meeting held to discuss and agree on the need for IHCP to include key school staff, child, parent and relevant healthcare professionals.
- Develop IHCP in partnership with healthcare professionals and agree on who leads.
- School staff training needs identified.
- Training delivered to staff - review date agreed.
- IHCP implemented and circulated to relevant staff.
- IHCP reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate. (Back to 3.)



## Appendix 2 - Individual healthcare plan template

**Individual healthcare plan**

Name of school site

Child's name

Date of birth

Child's address

Medical diagnosis or condition

Diagnosed by

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

Staff training needed/undertaken – who, what, when

Form copied to

**Parental agreement for school to administer medicine**

The school will not give your child medicine unless you complete and sign this form. We have a policy that the staff can administer medicine on your instruction.

Date for review to be initiated by

Name of child

Date of birth

Medical condition or illness


**Medicine**

Name/type of medicine  
*(as described on the container)*

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school 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 above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school 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 to an individual child**

School Site

Name of child

Date medicine provided by parent

Quantity received

Name and strength of medicine

Expiry date

Quantity returned

Dose and frequency of medicine


Staff signature \_\_\_\_\_

Signature of parent \_\_\_\_\_

Date

Time given

Dose given

Name of member of staff

Staff initials


Date

Time given

Dose given

Name of member of staff

Staff initials


**Record of medicine administered to an individual child (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			

**Record of medicine administered to all children**

Name of school site

Date

Child's name

Time

Name of  
medicine

Dose given

Any reactions

Signature  
of staff

Print name

Date	Child's name	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

## **Contacting emergency services**

**Request an ambulance - dial 999, ask for an ambulance and be ready with the information below.**

**Speak clearly and slowly and be ready to repeat information if asked.**

1. your telephone number
2. your name
3. your location as follows [insert school/setting address]
4. state what the postcode is – please note that postcodes for satellite navigation systems may differ from the postal code
5. provide the exact location of the patient within the school setting
6. provide the name of the child and a brief description of their symptoms
7. inform Ambulance Control of the best entrance to use and state that the crew will be met and taken to the patient
8. put a completed copy of this form by the phone