

Supporting pupils at school with medical conditions

Review date: Jan 2017

Signed: Pupil Support Committee

### 1. Introduction

## 1.1. Rationale

The Children and Families Act 2014 (Section 100) places a duty on the governing body to make arrangements for supporting pupils at school with their medical conditions in line with the statutory guidance issued. The aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported at school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. Pupils with special medical needs have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.

### 1.2. Definition

Pupils' medical conditions may be summarised as being of two types:

- a. Short-term affecting their participation in school activities while they are on a course of medication (requiring a Medical Information Consent Form)
- b. Long-term potentially limiting their access to education and requiring extra care and support (requiring an Individual Healthcare Plan)

### 1.3. Aims

- Welcome and support pupils with medical conditions and make arrangements for them based on good practice
- Adopt and implement the statutory guidance from Department of Education Supporting pupils at school with medical conditions
- Assist parents in providing medical care for their children by developing healthcare plans on notification of their child's medical condition
- Educate staff and children in respect of providing support to children with medical conditions.
- Arrange suitable training for staff as required to support pupils with medical conditions
- Liaise as necessary with parents and medical services in support of the individual pupil(s)
- Provide emergency support to children in line with their individual healthcare plans
- > Ensure that all children with medical conditions participate in all aspects of school life
- Monitor and keep appropriate records
- > Provide information on school policies, plans, procedures and systems

## 2. Leadership and management

2.1. Roles and responsibilities

# **Senior Management**

- > Ensure that everyone in the school is aware of the policy and that they understand their role
- Raise awareness through the school website, newsletters and the school prospectus
- Ensure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need
- > Ensure the school does not create any unnecessary barriers to prevent children participating in any aspect of school life

# <u>Staff</u>

- May be asked to support pupils with medical conditions and develop healthcare plans
- School staff will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately
- > Medications are to be stored appropriately in line with the DfE Guidance
- > Focus on the needs of individuals in ensuring that pupils and parents have confidence in the school's ability to provide effective support



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Ensure children have easy and appropriate access to their medications at all times (including school trips, PE and sporting events, school transport and before and after school clubs)

- Allow pupils themselves to manage their medical condition effectively in line with their individual healthcare plans
- Receive professional training where this is required

#### **Pupils**

Provide information and be part of discussions about their medical support needs

#### <u>Parent</u>

- The prime responsibility for a child's health lies with the parent
- > Provide school with sufficient and up-to-date information about their child's medical needs
- > Encouraged to co-operate in training children to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative
- Parents are responsible for advising or training staff on the administration of prescription medication (in line with the printed advice that accompanies the medication)
- Where parents have asked the school to administer the medication for their child they must complete a school 'Medical Information Consent Form'. This ensures that the school is able to comply with the requirement to keep adequate records. School will only administer essential medication to a child where it would be detrimental to their health not to do so during the school day
- > Medicines must be properly presented by parents through the school office and in accordance with the notes on the Medical Information Consent Form

# Governing body

- Ensure that the school's policy enables provision of effective support for medical conditions
- Comply with other relevant duties, such as for disabled children or for children with a statement of special educational needs (see also Special Educational Needs Code of Practice). The governing body remains legally responsible and accountable for fulfilling their statutory duty

## **School Nurse**

- > Notify school when a child is identified as having a medical condition and support school staff
- > Other healthcare professionals may also provide notification, support and advice

### 2.2. Continuing professional development

The governing body and school management will ensure that relevant training is given and recorded to staff who require it. In addition, whole staff training in use of epi-pens and inhalers is given annually.

## 3. Administration of medicines

- Where possible, parents are asked to administer their child's medicines at home
- If the spacing of doses means that medication needs to be given during the school day and it is not possible to rearrange the timing of this, the child's parent will be asked to come into school to administer the medicine
- If the parent is unable to do this and asks the school to supervise the child self-administering the medication, the following procedure will apply:
  - There must be written, signed authority and full instructions about giving the medicine from the parent including the actual dosage required
  - Medicines must be in their original labelled containers as supplied by the doctor or pharmacist



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- o The medicines will be retained in a safe place, out of reach of all children.
- o The child must administer medication under supervision
- > The School will ensure that records are kept (and regularly updated) on specific long term illnesses of individual children (i.e. asthma, diabetes, allergies) and heed all advice provided by the child's medical practitioner or the school doctor
- ➤ Where inhalers have been prescribed to children at Key Stage 1 & 2 with asthma, Health Authorities recommend that the child keep these to use as and when they think necessary. They must be where the child can access them and teachers know where they are. They must be named. Parents are asked to supply a second inhaler (as a backup if required) which will be kept in the staffroom or the classroom
- > Parents are responsible for checking that inhalers are in date and not empty. The school will check at the start of every year and monitored every term
- > Where medicines cannot be administered by a parent or guardian and the medicine is:
  - o considered dangerous
  - o has to be administered with critical timing or dosage
  - o needs technical or medical knowledge or expertise to administer
- The Headteacher will exercise special caution before accepting responsibility for the medicine's administration. In these situations, the Headteacher may refuse a request
- > Specially trained staff only must administer injections

# 4. Personal development, behaviour and welfare

The school accepts that pupils with medical conditions:

- > should be assisted if at all possible
- > have a right to the full education available to other pupils
- should be enabled to have full attendance where absence is unavoidable, appropriate support is put in place
- receive necessary proper care and support

The school accepts that all employees have rights in relation to supporting pupils with medical needs as follows:

- > choose whether or not they are prepared to be involved
- receive training as appropriate and work to clear guidelines
- bring to the attention of management any concern or matter relating to supporting pupils with medical conditions

## 5. Communication

This policy has been created in consultation with parents and school staff before being brought to Governors for ratification.

## 6. Links to other policies

- 6.1. SEN/D
- 6.2. Equal opportunities

### 7. Appendices

- 7.1. Supporting pupils at school with medical conditions (statutory guidance for governing bodies of maintained schools and proprietors of academies in England) April 2014 (Department for Education)
- 7.2. Asthma guidance
- 7.3. Guidance on the use of emergency salbutamol inhalers in school March 2015 (Department of Health)



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7.4. Medical consent form

7.5. Consent formfor the use of an emergency inhaler

7.6. Anaphylaxis and the use of epi-pens guidance

7.7. Evidence of training log

7.8. Present list of first aiders



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## Guidance of children with asthma

Great Wilbraham Primary School recognises that asthma is an important condition affecting many school children and staff.

Great Wilbraham Primary School encourages children with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff, the LA and pupils. Supply Teachers and new staff are also made aware of the policy.

#### Medication

Immediate access to reliever inhalers is vital. The reliever inhalers of children are kept in the classroom or the staffroom. If necessary, an inhaler is kept in both rooms. All inhalers must be in the original packaging and clearly labelled with the child's name.

School staff are not required to administer medication to children except in an emergency. School staff who agree to administer medication are insured when acting in accordance with this policy. All school staff let children take their own medication when they need to in accordance with the medical consent form and/or individual healthcare plan. During school trips or PE sessions, the classteacher or first aider will take responsibility for having the medication within the vicinity and it will be secure in a clearly labelled transparent box.

### **Record Keeping**

At the beginning of each school year, or when a child joins the school, parents are asked to update their child's medical information as part of the data collection sheets. All parents of children with asthma are given a National Asthma campaign school card to give to their child's GP or asthma nurse to complete and return to school. From this information the school keeps its asthma register, which is available for all school staff.

During the year, if a child takes their inhaler, parents will be informed when and how often either verbally or in writing. Any child receives medication will be recorded in the Record of Administered Medication book.

At the end of the school year all medication is sent home with a new asthma card to complete for the following academic year. If medication changes in between times, parents are asked to inform the school.

### PE

Taking part in sports is an essential part of school life. All teachers are aware of which children have asthma. Children with asthma participate fully in PE.

Should the parent or the medical consent form state that the child should take the inhaler before exercise then these instructions will be followed. Each child's inhalers will be labelled and kept in an accessible place. If the child needs to use their inhaler during the lesson they will be encouraged to do so in accordance with the medical consent form and/or individual healthcare plan and the parent/carer will be informed.



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### **Emergency inhaler**

The school follows the guidance supplied by the Department for Health on the use of emergency inhalers in schools. It is stored in the staffroom and regularly checked to ensure it is date and stored correctly.

In order for the emergency inhaler to be used the children must comply with the statutes recommended by the Department for Health:

"The emergency salbutamol inhaler should only be used by children:

- Who have been diagnosed with asthma, and prescribed a reliever inhaler;
- OR who have been prescribed a reliever inhaler;

AND for whom written parental consent for use of the emergency inhaler has been given." Guidance on the use of emergency salbutamol inhalers in school March 2015 (Department of Health)

### The School environment

Great Wilbraham Primary School does all it can to ensure the environment is favourable to children with asthma. As far as possible the school does not use chemicals in science and art lessons that are potential triggers for children with asthma.

## Asthma attacks

All staff who come into contact with children will know what to do in the event of an asthma attack.

- Ensure that reliever inhaler is taken immediately
- Stay calm and reassure the child
- · Help the child to breathe by loosening clothing

Minor attacks should not interrupt a child's involvement in school. When they feel better they can resume school activities. The child's parents must be informed and the incident logged in the first aid book.

### **Emergency Procedure**

Call the child's doctor and parents from the school office if:

- The reliever has no effect after 10 minutes
- The child is either distressed or unable to talk
- The child is getting exhausted
- You have doubts about the child's condition

If the doctor is unobtainable call an ambulance