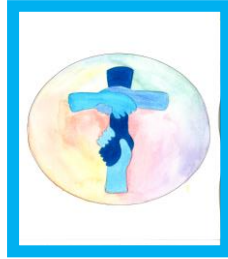


St Mary's Catholic Primary School Trust



'Aspire not to have more, but to be more'

(Oscar Romero)

SUPPORTING CHILDREN WITH MEDICAL NEEDS POLICY

2024

Introduction

This policy has been developed in line with the legislation in Section 100 of the Children and Families Act 2014 which places a duty on Governing Bodies of maintained schools to make arrangements for supporting pupils at their school with medical conditions.

Policy Statement

St Mary's Catholic Primary School Trust is an inclusive community that welcomes and supports children with medical conditions. Our schools provide all children with any medical condition the same opportunities as any other child in the school.

The purpose of the policy is to:

- Ensure that children with medical conditions are well supported in school and have full access to education, including school trips and visits and physical education.
- Ensure that there is clarity around the holding and administration of medication at school.
- Ensure that information about a child's needs is shared appropriately by health professionals, school staff, parents and pupils.
- To develop staff knowledge and training in all areas necessary for the children attending the schools.

Definition of the Medical Condition

A medical condition is one that is a long term with acute episodes, requires ongoing support and involves the need for medication and/or care whilst at school. The condition will need monitoring and could require immediate intervention in emergency circumstances.

Some children with medical conditions may have a disability. Where this is the case the Governing Body must comply with their duties under the Equality Act 2010. Some children may also have special educational needs (SEN) and may have an Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision. For children with SEND this guidance should be read in conjunction with the SEND Code of Practice, the school's SEND Policy and the Local Offer.

Children with medical conditions (e.g. anaphylaxis, epilepsy, diabetes etc) all have Individual Health Care Plans (IHCP) usually written in conjunction with the school nurse and parents.

The Role of the Governing Body

- To ensure that arrangements are in place to support pupils with medical conditions so they can access and enjoy the same opportunities at school as any other child.
- To consider that many of the medical conditions that require support at school will affect quality of life and may be life-threatening so the focus of action taken is on the needs of each individual child and how their medical condition impacts on their school life.
- To make arrangements that give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school, showing an understanding of how medical conditions impact on a child's ability to learn, as well as increasing confidence and promoting self-care and finally ensuring staff are properly trained to provide the support that pupils need.

- To monitor the arrangements put in place to ensure that policies, plans, procedures and systems are properly and effectively implemented in accordance with statutory requirements – in particular, procedures for administration of medicines.
- To ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.
- To ensure that the school's policy is explicit about what practice is not acceptable when administering medicines in school.
- To ensure that when complaints are made they will be handled effectively and with sensitivity.
- To regularly review the policy for supporting children with medical conditions and ensure that it is readily accessible to parents and school staff.
- Ensuring that sufficient staff are appropriately trained.
- Ensuring that all relevant staff members are made aware of a child's condition.
- Ensuring that cover arrangements are in place in case of staff absence and supply teachers are briefed on children's medical conditions.
- Ensure that risk assessments are completed for school visits, holidays and other school activities outside the normal timetable.
- To ensure the policy is implemented effectively by a named person who has overall responsibility for policy implementation. At St Mary's Catholic Primary School Trust the named persons are:

Mrs Julie Charlesworth – SENCO St Mary's Catholic Infant School

Mrs Della O'Donnell – SENCO St Mary's Catholic Junior School

Roles and Responsibilities

The Head of school

- Ensures that the school's policy for supporting children with medical conditions is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy and understand their role in its implementation.
- Ensures that all staff who need to know are aware of the child's condition and 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.

The School Staff

- Any member of the school staff may be asked to provide support to children with medical conditions, including the administering of medicines, although they cannot be required to do so as administering medicines is not part of teachers' professional duties.
- All Teaching Assistants in the Junior School and most Teaching Assistants in the Infant School are First Aid trained and they are expected to administer First Aid when required.
- School staff should feel confident that they have received sufficient and appropriate training and have achieved the necessary level of competency before they take on the responsibility of supporting children with medical conditions.

The School Nurse

- The school nursing services 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, this should be done before the child starts at the school.
- The school nurse 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 Pupils

- Children with medical conditions will often be best placed to provide information about how their condition affects them.

- When appropriate the child should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of and comply with their Individual Healthcare Plan.

Parents / Carers

- Parents/Carers must provide the school with sufficient and up-to-date information about their child's medical needs. In some cases, they may be the first to notify the school that their child has a medical condition.
- Parents/Carers are key partners with the school and should be involved in the development and review of their child's Individual Healthcare Plan.
- Parents/Carers are responsible for informing the school of any changes to their child's medical condition as soon as those changes have occurred.

The Named Person with Responsibility for Medical Conditions

- Ensure that procedures are followed whenever the school is notified that a child has a medical condition and that the procedures outlined in this policy are in place and implemented.
- The named person is responsible for developing Individual Healthcare Plans and ensuring that they are implemented in school to support children with medical conditions.
- Ensuring that the Individual Healthcare Plans are reviewed at least annually or earlier if evidence is presented that the child's medical needs have changed.

Individual Healthcare Plans

Individual Healthcare Plans are developed with the child's best interests in mind and assess and manage risks to the child's education, health and social wellbeing and minimises disruption to their school life. An Individual Healthcare Plan details exactly what care a child needs in school, when they need it and who is going to provide the support.


The Individual Healthcare Plan should be developed with input from the child (if appropriate), their parent/carer, relevant school staff and healthcare professionals, ideally a specialist if the child has one.

When deciding what information should be recorded on an Individual Healthcare Plan the named person considers the following:


- The medical condition; its triggers, signs, symptoms and treatments.
- The child'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 such as busy corridors and movement around the school building.
- Specific support for a child's educational, social and emotional needs – for example, how absences will be managed, requirements for additional time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions.
- The level of support needed, (some children will be able to take responsibility for their own health needs), including in emergencies. If a child is self-managing their medication, this should 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 child's medical condition from healthcare professional: and cover arrangements for when they are unavailable.
- Who in the school needs to be aware of the child's condition and the support required.

- Arrangements for written permission from parents and the Head Teacher / Head of School for medication to be administered by a member of staff, or self-administered by the child during school hours under the supervision of a trained First Aider.
- Separate arrangements or procedures required for school trips or other activities outside of the normal school timetable that will ensure the child can participate, e.g. risk assessments.
- Where confidentiality issues are raised by the parent or child, the designated individuals to be entrusted with information about the child's condition: and
- What to do in an emergency, including whom to contact and contingency arrangements. Some children may have an emergency Healthcare Plan prepared by their lead clinician that could be used to inform development of their Individual Healthcare Plan.
- The school has a centralised register of Individual Healthcare Plans which is held by the Inclusion Manager/SENCO, and a copy is also held on the child's school file.


Procedures for Developing Individual Healthcare Plans




Parent or healthcare professional informs school that a child has been newly diagnosed, or is due to attend a new school, or is due to return to school after a long-term absence, or that medical needs have changed.



Head Teacher or named person who has been delegated, co-ordinates a meeting to discuss the child's medical support needs and identifies the member of the school staff who will provide support to the child.




Meeting to discuss and agree on need for IHCP to include key school staff, child (if appropriate), parent, relevant healthcare professional and other medical/health clinicians as appropriate (or to consider written evidence provided by them).



Develop IHCP in partnership – agree who leads on writing it. Input from healthcare professional must be provided.



School staff training needs identified.



Healthcare professional commissions or delivers training and staff are signed-off as competent – review date agreed.



IHCP implemented and circulated to all relevant staff.

IHCP reviewed annually or when the condition changes. Parent or healthcare professional to initiate.

Procedures for Handling and Administering Medicines in School

Rationale

At St Mary's Catholic Primary School Trust we want all our children to be happy, safe, fit and well. In order to achieve this, we believe a clear policy on handling and administration of medicines in school is necessary to safeguard all the children in our care.

Administration, Storage and Handling of Medicines

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours e.g. if three doses a day are required the child should take one before school, one after school and before bedtime. The administration of antibiotics in school will be permitted only if the recommended dosage is four or more times per day.
- No child will be given prescription or non-prescription medicines without their parent's written consent.
- Medicines that are not prescribed such as cough lozenges, paracetamol etc. will not be administered by First Aid staff and are not to be brought to school.
- The school will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date but will generally be available to schools inside an insulin pen or a pump rather than its original container.
- All medication should be placed in a clear container (with a lid) and the name of the child, type of medication and dosage clearly displayed.
- Parents and carers are asked to deliver any medication to school via the school office and to collect them at the end of the day in the same way. At no time should children be given medicine to bring in to or take home from school. The medicines are then given to the child's class teacher who will store it safely in the locked medical cabinet located in the year group corridor.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenalin pens should always be readily available to children and not locked away. Spares are kept in the school office.
- Controlled drugs should be easily accessible in an emergency. A member of staff may administer a controlled drug to the child for whom it has been prescribed providing they have received specialist training /instruction.
- Medication, e.g. for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken.
- The school will keep a record of all medicines administered to children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted.
- Sharps boxes should always be used for the disposal of needles and other sharps.
- Parents should let the school know immediately if their child's needs change.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal.
- All First Aiders in the school hold an up-to-date qualification – Emergency First Aid at Work or Schools First Aid course - which is renewed every three years.
- A portable First Aid kit and individual medicines must be taken on all educational visits. On such visits, medicines are to be transported and administered by a designated, fully qualified member of staff and a full risk assessment completed by a senior member of staff.

An Inclusive Environment

- St Mary's Catholic Primary School Trust is committed to providing a physical environment accessible to children with medical conditions and children are consulted to ensure this accessibility. The school is also committed to an accessible physical environment for out-of-school activities.
- The school ensures that children 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.
- The school makes sure that the needs of children with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff are aware of the potential social problems that children with medical conditions may experience and use this knowledge, alongside the school's anti-bullying policy, to help prevent and deal with any issues. Staff use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help to promote a positive environment.
- The school understands the importance of all children taking part in physical activity and ensure that all relevant staff make appropriate adjustments to physical activity sessions in order that they are accessible to all children. The school will ensure that children have the appropriate medication/equipment/food with them during physical activity sessions.
- The school understands that frequent absences or symptoms such as limited concentration and tiredness may be due to a child's medical condition. The school will not penalise children for their attendance if their absences relate to their medical condition.
- The school will refer children with medical conditions who are finding it difficult to keep up educationally to the Inclusion Manager/SENCO who will liaise with the child (when appropriate), the parents and healthcare professionals.
- The school works in partnership with all relevant parties to ensure that this policy is planned, implemented and successfully maintained.

Complaints Procedure

- Should any parent or carer be unhappy with any aspect of their child's care at St Mary's Catholic Primary School Trust they must discuss their concerns with the school. In the first instance this will be with the child's class teacher.
- If the problem is not resolved then it should be discussed with a member of the Senior Management Team.
- In the unlikely event of this not resolving the issue the parent/carers can make a formal complaint using the school's complaints procedure.

This policy will be monitored yearly and updated when necessary ensuring that new legislation is incorporated. Staff will regularly receive opportunities to discuss and evaluate the management of the procedures and protocols in school.

Date: March 2023

Date of next update: February 2026