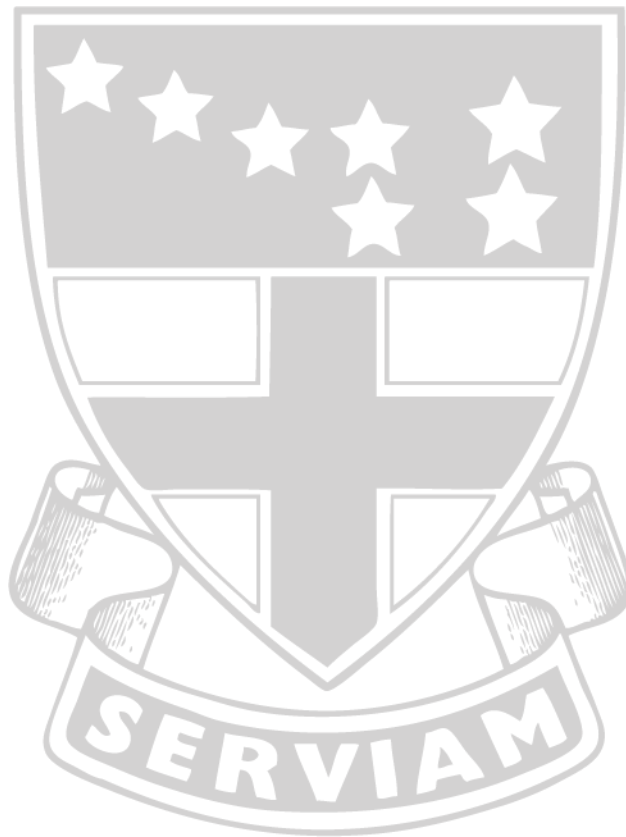




# **SUPPORTING STUDENTS WITH MEDICAL CONDITIONS POLICY**



**Date of Review: July 2022**

**Date of Next Review: July 2024**

# Policy for Supporting Students in School with Medical Conditions

This policy has been developed in response to Section 100 of the **Children and Families Act 2014**, which places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

The aim of this policy is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Children and young people with medical conditions are entitled to a full education and have the same rights of admission to school as other children. This means that no child with a medical condition should be denied admission<sup>1</sup> or prevented from taking up a place in school because arrangements for their medical condition have not been made.

The school and the governing body should ensure that students' health is not put at an unnecessary risk, e.g. from Infectious diseases, in line with our safeguarding duties. Therefore, as a school we do not have to accept a student in school at times where it could be detrimental to the health of that student or others to do so.

This policy includes details of:

- **A named person who is responsible for policy implementation**
- **A named person who is responsible for ensuring that sufficient staff are suitably trained,**
- **A commitment that all relevant staff will be made aware of the child's condition,**
- **Cover arrangements in case of staff absence or staff turnover to ensure someone is always available,**
- **Briefing for supply teachers,**
- **Risk assessments for school visits, holidays and other school activities outside of the normal timetable and**
- **Monitoring of Individual healthcare plans.**

The Head teacher **Mr M Johnson** is responsible for ensuring that sufficient staff are suitably trained. Where a child has a medical need the school medical welfare officer and key members of the Curriculum Support Team will receive appropriate training to enable them to support the student's needs. A record of training will be kept on the staff file (**Appendix 3**).

## DISSEMINATION OF HEALTH INFORMATION

Parents inform the school of their child's health problems through various channels. It is essential that whoever is informed should complete a medical information form, (available from the staff room), and give it to the School Medical Welfare officer, who will ensure that health registers are updated on SIMs, and that the form tutor and Head of Year are informed. The Head of Year will make sure that, where appropriate, information goes in the bulletin or directly to individual teachers on a 'need to know' basis.

At transition phases arrangements are made for the Deputy Head and SENCO, to meet and share pastoral information with the student's previous school to ensure that arrangements are in place for when the student starts at St Angela's Ursuline School.

When a diagnosis occurs mid-term or a student transfers school's mid-term every effort will be put in place to ensure that arrangements are put in place within two weeks.

All staff that work directly with the student will be made aware of the student's condition through information logged on SIMs and disseminated to staff following information received from the student's parents /carers.

A record of all known student health problems that staff should be aware of is kept in 7 health registers - one for each year group ( 7-13) - in the medical room with the School Medical Welfare officer (SMWO). These are updated continually. All staff who teach the student will be given guidance via the student's Special Educational Needs and Disability (SEND )Code of Practice record (if the student is on the CoP register and has a EHC plan). Students that are not on the CoP may have a Care plan (**Appendix 6**) to inform staff and staff will be provided with information bulletins from adults supporting the child where appropriate.

Teachers organising day trips, residential visits and sporting activities will be made aware of how a student's medical condition will impact on their participation and arrangements are made for the inclusion of such students, unless evidence from clinician (i.e GP) states that this is not possible. All risk assessments are completed and passed to **the** Assistant Head, before permission for the trip to take place is granted. Students with medical needs or EHC plans will be supported according to their needs.

The staff handbook states clearly what action should be taken in the case of a medical need. Supply staff are given the Supply Teachers Hand book which has this information within it.

The school medical room is based in the Brescia building, the School Medical Welfare officer is on duty from 9 a.m. to 3.30p.m each day to deal with pupils who are unwell or have been hurt. The SMWO's lunch is from 12.20-12.40, if an emergency occurs during this time one of the other first aiders will be referred to.

Students are asked not to bring packets of tablets to school, but medication may be handed in for use during the day. Asthma sufferers are asked to deposit a "spare" inhaler with School Medical Welfare officer in case of emergency. Parents will be asked to complete **Appendix 7 and Appendix I** so that a member of school staff can administer the medicine.

## STUDENT ILLNESS PROCEDURE

Any student complaining of feeling unwell may be sent to the SMWO:

The member of staff must use his or her judgment about how genuine or serious the case is. The student should not be sent unaccompanied if it is not considered safe to do so. **The student sent must have her planner signed by the member of staff sending her.**

The SMWO will keep a record of all pupils attending the medical room - the time of referral, the reason, the referring member of staff, and the time of return or other action taken. **Appendix 2. This information will be recorded centrally on SIMs.**

The SMWO will decide what action is to be taken, sometimes in consultation with the HOY or Deputy Head. Other members of staff should not make the decision to contact parents or send students home.

Any student being sent home will be recorded on SIMS by the SMWO / First aider, and the HOY will be alerted. Students who have received treatment will receive a slip to pass to their parents detailing the treatment / action and any further action that should be taken. The School Medical Welfare officer will keep a copy of this advice in the form of notes on SIMS. **The School Medical Welfare Officer will also call parents/ carers to inform them that their daughter has reported a health problem and suggest further action.**

## MEDICAL EMERGENCIES

**All offices have contact details of the first aid team (see Appendix 8).**

In the event of serious injury, the person must be left where she/he is, but should be protected from the weather and kept warm until the SMWO or the first aider arrives. If the decision is made to call an ambulance, the SMWO or the staff with her will make the 999 call from her mobile, thus being able to give answers to all questions about the person's condition. **See Appendix 4.** She will then inform the Office immediately of the nature and location of the emergency, the fact that an ambulance has been called, and the name of the person. In the case of this being a student, the office will contact the parents/ carers and inform **SLT** and Site supervisor, **Ms Chris Birch**. The Head teacher will also be notified. The parent/ carer will be advised to wait for a second call confirming which hospital the ambulance will be going to so the parents can make their way directly there. The student's full details will be printed out and taken to the School Medical Welfare officer to give to the paramedics.

The decision regarding which entrance the ambulance should be directed to should be made by the School Medical Welfare officer / first aider and the staff with her in light of the precise circumstance – i.e. where the person is, whether a stretcher/chair will be needed, etc.

Whoever meets the ambulance crew (usually a site supervisor) must ensure they are escorted to where the person is.

### **All incidents:**

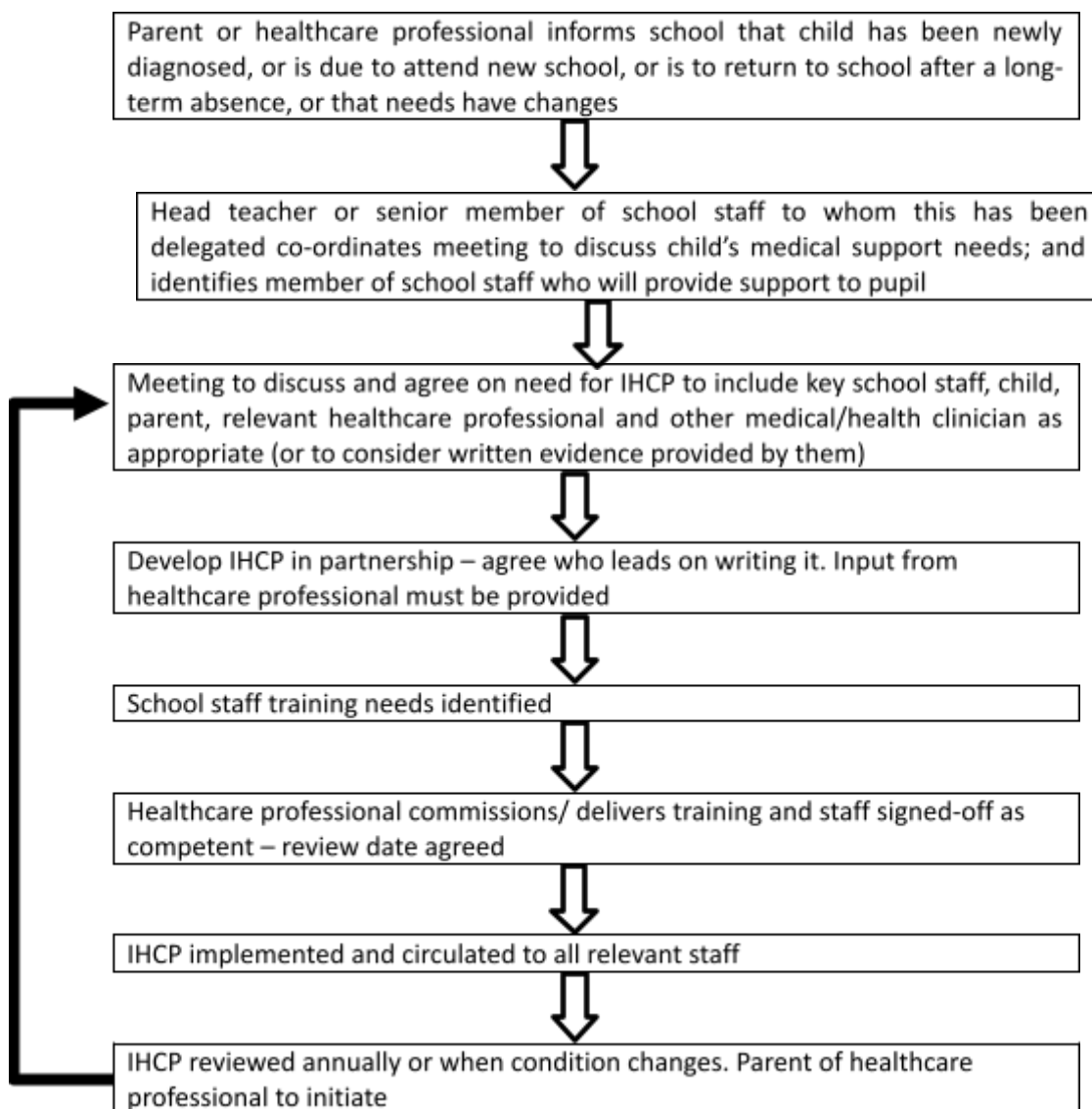
If there is any possibility of injury following any kind of incident, students should be checked by the first aider. If the student needs to go to hospital to be checked, parents/ carers will be notified. Depending on circumstances (e.g. the degree of urgency and the whereabouts of the parent) either a member of staff will accompany the student while parents make their way directly there or parents/ carers will be asked to collect their daughter from school and take her there themselves.

**In all cases of accident or injury an accident form must be filled in.**

### **Individual health care plans**

These may be transferred to school following transition. The aim of these plans is to help ensure that students are effectively supported with their medical conditions. **Appendix 6.** A care plan will be devised in conjunction with parents and health care professionals to support students where the medical needs are long term and complex. Not all Students will require one. Where a student has SEN but does not have an EHC plan, their special educational needs should be mentioned in their individual health care plan<sup>3</sup>. The plans may be initiated and reviewed in consultation with the parent, by the Deputy head / SENCo /Inclusion manager, or a healthcare professional. It should be drawn up in partnership and students should be involved in devising their Care Plan whenever appropriate. The person who is best able to advise on the needs of the child will take the lead in writing the plan. The responsibility for finalising the plan falls to the school (overseen by Deputy Head / SENCo / Inclusion Manager as appropriate).

Plans will be reviewed annually or earlier if the needs of the student change.



**Appendix I: record of medicine administered to an individual child**

Name of School / Setting

St Angela's Ursuline School

Name of Child

Year / Form

Date medicine provided by parent

Quantity received

Name & strength of medicine

Expiry date

Quantity returned

Dose & frequency of medicine

**Staff signature**

**Parent signature**

St Angela's Ursuline School

Date

Time given

Dose given

Name of member of staff

Staff initials




**Appendix 3 : staff training record – administration of medicines**

Name of school/setting

St Angela's Ursuline School

Name

Type of training received

Date of training completed

Training provided by

Profession and title

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated [name of member of staff].

Trainer's signature

Date

**I confirm that I have received the training detailed above.**

Staff signature

Date

Suggested review date



## **Appendix 4 : 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
9. ensure that the office has been made aware that an ambulance has been called and that the Deputy Head / HOY is notified. The first aider must also contact the students' parents to inform them of arrangements.

## **Appendix 5 : model letter inviting parents to contribute to individual healthcare plan development**

Dear Parent

### **DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD**

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom.

Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgments about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you to contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely,

**Appendix 6 : individual healthcare plan**

Name of School / Setting

St Angela's Ursuline School

Name of Child

Year / Form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

St Angela's Ursuline School

**Family Contact Information**

Name

Phone number (work)

Home

Mobile

Name

Relationship to child

Phone number (work)

Home

Mobile

**Clinic/Hospital Contact**

Name

Phone number

**G.P.**

Name

Phone number

**School Details**

Who is responsible for providing support in school

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

## Appendix 7: parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by

Name of school

Name of child

Date of birth

Year / Form

Medical condition or illness

St Angela's Ursuline School

### 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 number

Relationship to child

Address

I understand that I must deliver the medicine personally to (enter name of staff member)


The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) \_\_\_\_\_

Date \_\_\_\_\_

## **Appendix 8 : First Aid contact details**

### **References**

1. [www.gov.uk/government/publications/school-admissions-code](http://www.gov.uk/government/publications/school-admissions-code)
2. [www.gov.uk/government/publications/send-code-of-practice-0-to-25](http://www.gov.uk/government/publications/send-code-of-practice-0-to-25)
3. [www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions](http://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions)