



## The Warriner School

### Supporting Pupils with Medical Conditions Policy

#### Aims of the policy

This policy has been produced using the statutory guidance '*Supporting Pupils at school with Medical Conditions*', published December 2015

The aim is to ensure that all students 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. The school understands that it has a responsibility to make the school welcoming and supportive to pupils with medical conditions. We will help ensure that pupils with medical conditions are provided with the same opportunities as others at school.

The school aims to ensure that:

- staff understand their duty of care to pupils in the event of an emergency
- staff feel confident in knowing what to do in an emergency
- staff understand that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood
- staff understand the importance of medication being taken as prescribed
- staff understand the common medical conditions that affect children at this school
- staff receive training on common medical conditions and how they may impact pupils, physically, socially and emotionally
- parents and pupils are included in planning and decision making about managing medical conditions

#### Roles and responsibilities

##### The role of the Governing Body

The Governing Body is responsible for the school's medical needs policy. They will take account of the views of the Head Teacher, staff and parents in reviewing the policy on supporting pupils with medical needs to ensure that their needs are met and that they are included in the full life of the school. The governing body has a duty to ensure that their insurance arrangements provide cover for staff to act within the school; that the procedures outlined in this policy are followed, and that any necessary training is made available to staff.

## **The Head of School**

The Head of School is responsible for implementing the policy and developing practice. The Head of School ensures the school is inclusive and welcoming and the medical policy is in line with local and national guidance and policy frameworks. The Head of School should ensure that staff are appropriately trained and employed to fulfil the policy. The Head of School should ensure all staff comply with the policy and that the policy is communicated effectively to all stakeholders including parents and pupils. The Head of School should ensure the policy is reviewed and updated as required.

## **Staff**

All staff should understand the medical needs policy and be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency. Staff should know who the pupils with medical plans are and be familiar with the content of the plan. Staff should allow pupils to have access to emergency medication and enable pupils to take appropriate medication with them during activities. All staff should have an understanding of how medical conditions can impact on pupils and be vigilant in monitoring participation, bullying or support needs. Staff should communicate concerns about pupil's medical conditions to parents directly or via the general office who will contact home.

Teachers have a specific role in ensuring pupils with medical needs are not at a disadvantage academically because of their condition. Teachers should liaise with pastoral and SEN staff if pupils are missing work due to medical needs and provide suitable work for pupils who may be off school or out of lessons. Support staff may be involved in the delivery of a medical plan and will have appropriate training in doing so. All staff should be aware of the impact of medical needs on individual pupils and monitor physical, social and emotional well-being.

## **The role of the Assistant Head Inclusion and the Business Manager**

The Assistant Head Teacher and Business Manager are responsible for communicating the medical policy to staff and for ensuring the medical plans and medical needs data base is updated and available to staff. They should ensure that medical information is accurate and up to date and that information sharing systems are effective.

## **The Business Manager and Administrator (Medical) will:**

- coordinate the first aid and emergency care protocol
- collate the pupil admission information regarding medical needs
- coordinate the system for administering medication in school ( see attached protocols)
- communicate with parents and health professionals about identified or changing medical needs
- review medical plans regularly (annually in September) to ensure they are accurate and communicate review dates to parents and staff involved in the medical plan

**The Assistant Head Inclusion will:**

- ensure staff are updated about common medical needs and are implementing the guidance in their classroom practice
- ensure staff provide work when asked for pupils needing catch up work or work to do at home
- collate and disseminate transfer information about pupils needing medical plans
- oversee the production of medical plans in collaboration with parents, pupils, school nurse and other health professionals and pastoral staff and ensure staff have access to them
- ensure that necessary arrangements are set up for access in activities including exam arrangements
- coordinate provision for pupils with long term medical needs who are medically unfit to attend school

**The Role of the Head of Year**

The Head of Year knows the pastoral needs of the year group and will receive the information about the medical needs from parents or healthcare professionals. Heads of Year will coordinate the meeting to discuss the Medical Plan and invite necessary staff and healthcare professionals along with the parents/carers and pupil. The Heads of Year will monitor the pupil and liaise with other staff about progress of the pupil via pastoral and progress meetings.

**Medical Plans**

Medical plans are used to ensure that the school effectively supports students with medical conditions. They provide clarity about what needs to be done, when and by whom. Pupils with fluctuating, high risk or long term complex medical needs will need a medical plan.

A flow chart (APPENDIX 1) for identifying and agreeing the support a student needs and developing an individual medical plan is provided.

Medical plans (and their review) may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the pupil. Plans are drawn up in partnership between the school, parents, and a relevant healthcare professional, eg school nurse, who can best advise on the particular needs of the pupil. Pupils are also involved whenever appropriate. The aim is to capture the steps which the school will take to help the student manage their condition and overcome any potential barriers to getting the most from their education. Plans are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed. They are developed with the pupil's best interests in mind. Where the student has a special educational need identified in a statement or Education Health Care (EHC) plan, the medical plan is linked to or becomes part of that plan. It is the role of the Head of Year to ensure the relevant staff are involved in developing a medical plan in consultation with the Assistant Head Teacher Inclusion.

In producing an individual medical plan, the following will be considered:

- The medical condition, its triggers, signs, symptoms and treatments

- The pupil'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
- Specific support for the pupil's educational, social and emotional needs – eg. how absences will be managed, exam arrangements, use of rest periods or additional support in catching up with lessons
- The level of support needed, including in emergencies. If a pupil 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 pupil's medical condition from a healthcare professional; and cover arrangements for when they are unavailable;
  - arrangements for written permission from parents and the head teacher for medication to be administered by a member of staff, or self-administered by the student during school hours;
  - separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, eg risk assessments;
  - confidentiality issues
  - what to do in an emergency, including whom to contact, and contingency arrangements

Some pupils may have an emergency medical protocol drawn up by a health care professional.

The Warriner Template for Individual Medical Plans can be found in APPENDIX 2

### **Staff training and support**

- Any member of school staff providing support to a pupil with medical needs should have received suitable training.
- Information is readily available in the confidential student information booklets by year groups and in department share.
- Staff will be supported in carrying out their role to support pupils with medical conditions. Training needs will be identified annually, in the light of the individual medical plans in place, and any necessary training commissioned.
- Staff must not give prescription medicines or undertake health care procedures without appropriate training. A first-aid certificate does not constitute appropriate training in supporting students with medical conditions. The school nurse can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.
- The support of pupils with medical conditions is included in staff induction. All staff are provided with an annual update on the policy and on their role in its implementation. Briefing of supply staff will included in any induction meetings.

### **The pupils' role in managing their own medical needs**

After discussion with parents, pupils who are competent are encouraged to take responsibility for managing their own medicines and procedures. This is reflected within individual medical plans. Wherever possible, pupils are allowed to carry their own medicines and relevant devices or are able

to access their medicines for self-medication quickly and easily. Pupils who can take their medicines themselves or manage procedures may require an appropriate level of supervision.

### **First Aid**

The school has a number of staff who have volunteered to be First Aid trained. The list of staff currently holding a certificate is held by the Business Manager and Medical Administrator.

All staff follow the DfE's Guidance on First Aid for Schools.

### **Managing medicines on school premises**

The School will conform to the following guidelines:

- Medicines should only be administered at school when it would be detrimental to a pupil's health or school attendance not to do so
- No pupil under 16 should be given prescription or non-prescription medicines without their parent's written consent - except in exceptional circumstances where the medicine has been prescribed to the pupil without the knowledge of the parents. In such cases, every effort should be made to encourage the pupil to involve their parents while respecting their right to confidentiality
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours
- Schools should 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 in its original container
- All medicines should be stored safely. Pupils should know where their medicines are at all times and be able to access them immediately
- A pupil who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another student for use is an offence. Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should have access. A record should be kept of any doses used and the amount of the controlled drug held in school
- School staff may administer a controlled drug to the pupil for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Schools should keep a record of all medicines administered to individual students, 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
- When no longer required, medicines should be returned to the parent to arrange for safe disposal
- Sharps boxes should always be used for the disposal of needles and other sharps
- A written record will be kept of all medicines administered to pupils

## **Emergency procedures**

Where a student has a medical plan, this will clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. A small number of pupils will have an Emergency medical protocol drawn up by Health care professionals giving specific actions. Other pupils in the school may know what to do in general terms, such as informing a teacher immediately if they think help is needed.

## **Day trips, residential visits and sporting activities**

Pupils with medical conditions will be actively supported to participate in school trips or visits, or sporting activities. Teachers will be aware of how a student's medical condition will impact on their participation, but there should be enough flexibility for all pupils to participate according to their own abilities and with any reasonable adjustments. The school will make arrangements for the inclusion of students in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

The school will also consider what reasonable adjustments it might make to enable pupils with medical needs to participate fully and safely on visits. Best practice is to carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with parents and pupils and advice from the relevant healthcare professional to ensure that pupil can participate safely. Please also see guidance on planning trips, currently risk assessments are coordinated by The Warriner Learning Centre.

## **Short term restricted mobility**

If a medical practitioner agrees to a pupil's attendance at school when the pupil is relatively immobile, the case must be assessed on an individual basis.

A Personal Emergency Evacuation Plan (PEEP) will be put in place by the Medical Administrator to comply with Health & Safety guidance and circulated to all staff.

The Head of Year will lead the planning, taking into account recommendations from the medical practitioner and the views of the parents and pupil.

Adjustments that may be considered include:

- Relocating first floor lessons to the ground floor
- Allowing the pupil to leave lessons five minutes early, accompanied by another pupil or adult
- Providing a designated area for seated rest at break and lunchtime
- Temporary withdrawal from PE and time allocated in library study zone

## **Medical needs that result in long term absence from school.**

For pupils with more than 15 days consecutive absence due to medical needs there is a process in place to enable access to education via the Outreach Teaching Service. See “Ensuring a good education for children who cannot attend school because of health needs” - Statutory guidance for local authorities 2013

## **Unacceptable practice**

It is not generally acceptable practice to:

- prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every pupil with the same condition requires the same treatment
- ignore the views of the pupil or their parents; or ignore medical evidence or opinion, (although this may be challenged)
- prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively

## **Complaints**

Complaints will be managed by following the school’s complaints procedure.

### **The following guidance and protocols are linked to this document:**

DfE Supporting Pupils with Medical Conditions: December 2015

DfE Guidance on First Aid for Schools: 2014

Department of Health Guidance on the use of Emergency Salbutamol Inhalers in Schools: March 2015

Ensuring a good education for children who cannot attend school because of health needs

Statutory guidance for local authorities: January 2013

DfE Templates supporting pupils with medical conditions: May 2014

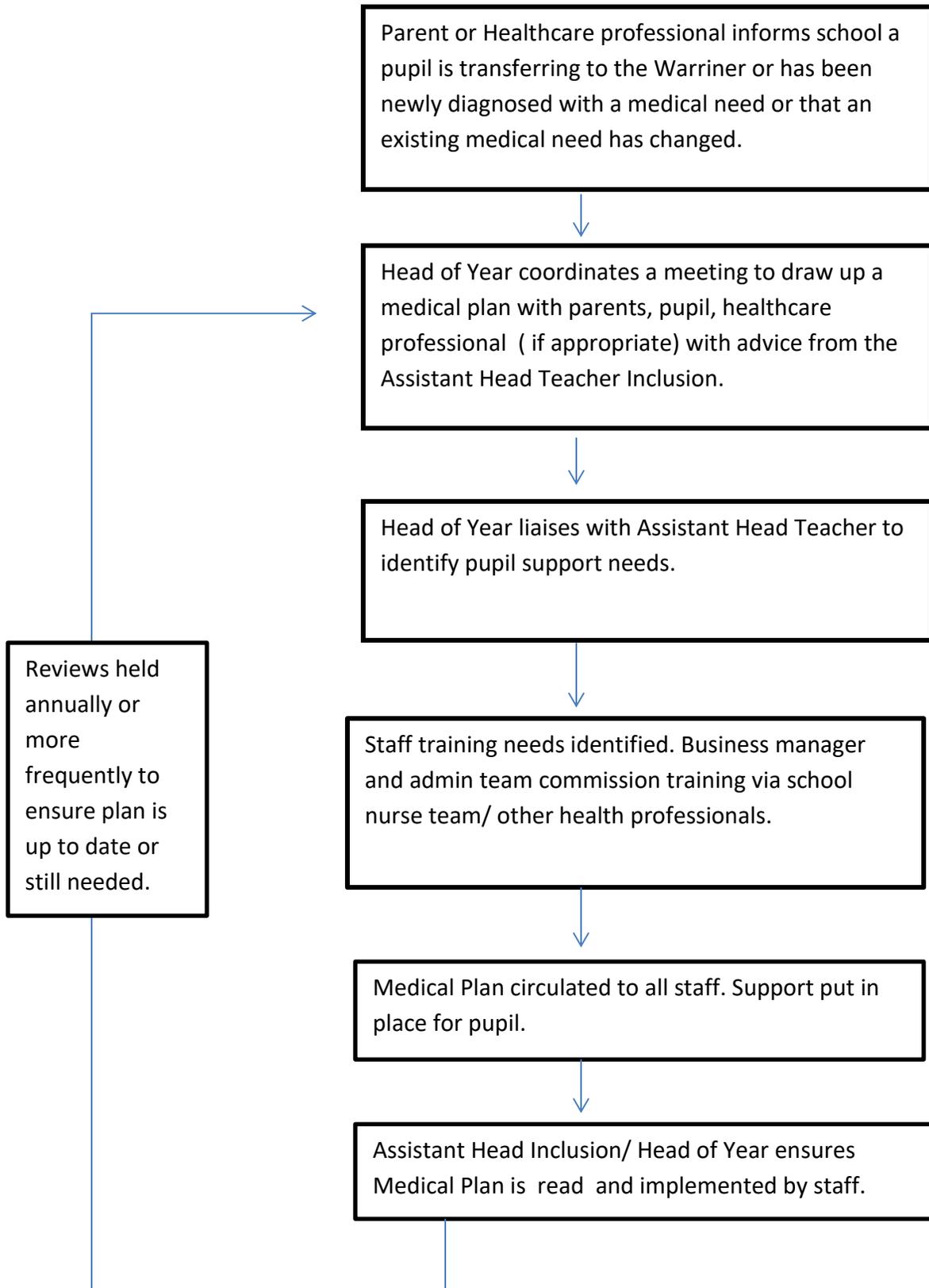
The above documents can be accessed in Departmentshare/Whole School/Medical Needs

***This policy was considered and approved by the Full Governing Body in their meeting on the 28<sup>th</sup> November 2019.***

***Review Due Oct 2021***

APPENDIX 1

The Warriner School - Medical Plans



**APPENDIX 2**



**The Warriner School - Individual Medical Plan**

Date of plan:

Review date:

Pupil	
Tutor group	
Date of Birth	
Address	
Medical diagnosis or condition	
Family contact information	
Clinic/ hospital contact information	
GP contact information	
Key staff in school	
Medical needs description- symptoms, triggers, signs, environmental issues etc	

Treatment- name of medication, dose, method of administration, side effects.	
Medication to be administered by/ with or without supervision.	
Daily care requirements	.
Specific support for social, emotional and educational needs	
Arrangements for school trips	
Emergency procedures and key staff responsible	
Staff training needed/undertaken	

Plan developed with	
Copies held by	
Associated paperwork	