



## Morley Memorial Primary School

# Supporting Children with Medical Needs and Conditions Policy

Policy Name	Supporting Children with Medical Needs and Conditions Policy
Status	Recommended
Person Responsible	Beth McGreer
Reviewed By	Full Governing Body
Date of Review	December 2021
Frequency of Review	Every 2 years
Next Review Date	December 2023

## **Supporting Children with Medical Needs and Conditions**

Morley Memorial Primary School wishes to ensure that pupils with medical conditions receive appropriate care and support at school. All pupils have an entitlement to a full time curriculum for as much as their medical condition allows. This policy has been developed in line with the Department for Education's statutory guidance "Supporting pupils at school with medical conditions" (released September 2014 and last updated August 2017). Section 100 of the **Children and Families Act 2014** 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 as of 1<sup>st</sup> September 2014.

This policy should be read in conjunction with Morley Memorial's '**Medicines in School Policy**'

### **Key Responsibilities**

**The Local Authority (LA) is responsible for:**

- 1) Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- 2) Providing support, advice /guidance and training to schools and their staff to ensure Health Care Plans (HCP) are effectively delivered.
- 3) Working with schools to ensure pupils attend full-time or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education.

**The Governing Body of Morley Memorial Primary School is responsible for:**

- 1) Ensuring arrangements are in place to support pupils with medical conditions.
- 2) Ensuring the policy is developed collaboratively across services, clearly identifies roles and responsibilities and is implemented effectively.
- 3) Ensuring that the Supporting Pupils with Medical Conditions Policy does not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/nationality/ origin, religion or belief, sex, gender reassignment, pregnancy & maternity, disability or sexual orientation.
- 4) Ensuring the policy covers arrangements for pupils who are competent to manage their own health needs.
- 5) Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participate in school visits / trips/ sporting activities, remain healthy and achieve their academic potential.
- 6) Ensuring that relevant training is delivered to a sufficient number of staff who will have responsibility to support children with medical conditions and that they are signed off as competent to do so. Staff to have access to information, resources and materials.
- 7) Ensuring written records are kept of, any and all, medicines administered to pupils.
- 8) Ensuring the policy sets out procedures in place for emergency situations.

- 9) Ensuring the level of insurance in place reflects the level of risk.
- 10) Handling complaints regarding this policy as outlined in the school's Complaints Policy

**The Headteacher (Nikki Brown) is responsible for:**

- 1) Ensuring the policy is developed effectively with partner agencies and then making staff aware of this policy.
- 2) The day-to-day implementation and management of the Supporting Pupils with Medical Conditions Policy and Procedures of Morley Memorial Primary School.
- 3) Liaising with healthcare professionals regarding the training required for staff.
- 4) Identifying staff who need to be aware of a child's medical condition.
- 5) Developing Health Care Plans (HCP).
- 6) Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver HCPs in normal, contingency and emergency situations.
- 7) If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy. Ensuring more than one staff member is identified, to cover holidays / absences and emergencies.
- 8) Ensuring the correct level of insurance is in place for teachers who support pupils in line with this policy.
- 9) Ensuring confidentiality and data protection
- 10) Assigning appropriate accommodation for medical treatment/ care
- 11) Considering the purchase of a defibrillator.
- 12) Holding 'spare' salbutamol asthma inhalers and adrenalin auto-injectors for emergency use.

**Staff members are responsible for:**

- 1) Taking appropriate steps to support children with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a pupil with a medical condition needs help.
- 2) Knowing where controlled drugs are stored and where the key is held.
- 3) Taking account of the needs of pupils with medical conditions in lessons.
- 4) Participating in training to achieve the necessary competency for supporting pupils with medical conditions, with particular specialist training if they undertake a medication responsibility.
- 5) Allowing inhalers, adrenalin pens and blood glucose testers to be held in an accessible location, following DfE guidance.

**Parents and carers are responsible for:**

- 1) Keeping the school informed about any new medical condition or changes to their child/children's health or circumstances including when a child is undergoing diagnosis.
- 2) Participating in the development and regular reviews of their child's HCP(if required).
- 3) Completing a parental consent form to administer medicine or treatment before bringing medication into school.
- 4) Providing the school with the medication their child requires and keeping it up to date including collecting leftover medicine.
- 5) Carrying out actions assigned to them in the HCP with particular emphasis on, they or a nominated adult, being contactable at all times.

6) Ensuring that medicines in school are in date.

**Pupils are responsible for:**

- 1) Providing information on how their medical condition affects them.
- 2) Contributing to their HCP
- 3) Complying with the HCP and self-managing their medication or health needs including carrying medicines or devices, if judged competent to do so by a healthcare professional and agreed by parents.

**2) Training of staff**

- a) Newly appointed teachers, supply or agency staff and support staff will receive training on the 'Supporting Pupils with Medical Conditions' Policy as part of their induction.
- b) The clinical lead for each training area/session will be named on each HCP.
- c) For long term medical needs, no staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the condition and signed off as competent.
- d) School will keep a record of medical conditions supported, training undertaken and a list of teachers qualified to undertake responsibilities under this policy.

**3) Medical conditions register /list**

- a) Schools admissions forms should request information on pre-existing medical conditions. Parents must inform the school at any point in the school year if a condition develops or is diagnosed.
- b) A medical conditions list or register is kept, updated and reviewed regularly by the nominated member of staff. Each class / form tutor should have an overview of the list for the pupils in their care, within easy access.
- c) All relevant medical information (especially life threatening conditions) is displayed in an easily accessible area (coffee room and school kitchen). Key information is shared along with the child's photo to ensure all staff are aware and can administer first aid accordingly.
- d) Supply staff and support staff should similarly have access on a need to know basis.
- e) For pupils on the medical conditions list key stage transition points meetings should take place in advance of transferring to enable parents, school and health professionals to prepare HCP and train staff if appropriate.

**4) Individual Health Care Plans (HCPs)**

- a) Where necessary (Headteachers and health care practitioners will make the final decision) an Individual Health Care Plan (HCP) will be developed in collaboration with the pupil, parents/carers, Headteacher, Special Educational Needs Coordinator (SENCO) and medical professionals.
- b) HCPs will be easily accessible to all relevant staff, including supply/agency staff, whilst preserving confidentiality in line with guidance from the Information Commissioner's Office (ICO).
- c) HCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.

- d) Where a pupil has an Education, Health and Care plan the HCPs will be linked to it or become part of it.
- e) Where a child is returning from a period of hospital education or alternative provision or home tuition, collaboration between the LA /AP provider and school is needed to ensure that the HCPs identifies the support the child needs to reintegrate.
- f) Emergency procedures should be detailed in the HCP. In the event of an emergency (for example, calling 999), the plan will be followed and a copy of the HCP given to the ambulance crew.
- g) A HCP may be needed when children are undergoing a diagnosis; incorporating advice from medical professionals.

**7) Medicines for long term conditions***(to be read in conjunction with the 'Medicines in School Policy September 2021)*

- a) Where possible, unless advised it would be detrimental to health, medicines should be prescribed in frequencies that allow the pupil to take them outside of school hours.
- b) If this is not possible, prior to staff members administering any medication, the parents/carers of the child must complete and sign a parental consent to administration of medicine form. (see Appendix 1: Parental/Carer Consent form for Prescribed Medicines in Schools) Prescribed medicine for pupils with long term medical conditions will only be administered at school when it is detrimental to a child's health or school attendance not to do so.
- c) Parents/carers must provide the school with a copy of the child's specific medical protocols/health care plan as provided by the child's medical professional team. The school will use this as its guidance to respond to the child's listed medical needs.
- d) No child will be given any medicines without written parental consent except in exceptional circumstances as per the 'Medicines in Schools' policy.
- e) All medicines must be prescribed by a medical professional. Medicines will only be accepted in the original container (except in the case of insulin which may come in a pen or pump) as dispensed by a pharmacist and include the prescribers instructions for administration. They must be in date and clearly labelled with the name of the child as well as the name and dose of the medicine. Medicines which do not meet these criteria will not be administered.
- f) A maximum of four weeks' supply of the medication may be provided to the school at one time. Parents/carers are responsible for ensuring that all medication kept in school are in date.
- g) Medicines (other than inhalers or insulin pumps) should not be left in a child's possession. All medicines should be delivered to the school office by the parent/carers. Teachers and teaching assistants should not take receipt of any medicines.
- h) All medicines should be stored in accordance with product instructions (paying particular attention to temperature). Medicines will normally be kept in the fridge (if refrigeration required) or in the school office. Controlled drugs (such as Ritalin) that have been prescribed for a pupil should be securely stored in a locked, non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency.

- i) Any medications left over at the end of the course will be returned to the child's parents.
- j) Each time medicine is administered it will be recorded, including if the child refused to take it.
- k) Pupils will never be prevented from accessing their medication.
- l) Emergency medicines, such as asthma inhalers and adrenalin auto-injector devices (AAI) devices, should be readily available and kept in an agreed place in the classroom or First Aid cupboard.

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

- a) Arrangements should be made and be flexible enough to ensure pupils with medical conditions can participate in school trips, residential stays, sports activities and not prevent them from doing so unless a clinician states it is not possible.
- b) To comply with best practice risk assessments should be undertaken, in line with H&S executive guidance on school trips, in order to plan for including pupils with medical conditions.
- c) Parents and healthcare professionals will be consulted as appropriate.

### **12) Complaints**

- a) All complaints should be raised with the school in the first instance.
- b) The details of how to make a formal complaint can be found in the School Complaints policy and procedure.

## **OTHER RELATED POLICIES AND PROCEDURES**

This policy links to our:

Attendance policy  
 Complaints procedure  
 Health and Safety policy  
 Intimate Care policy  
 Medicines in School policy  
 Safeguarding Policy  
 Safer Recruitment policy  
 SEN/Inclusion Policy  
 Staff Code of Conduct/Safer Working Practice  
 Whistleblowing policy

Appendix 1 Consent form to administer prescription medicines

*References:*

*CCC Sample Medicines in Schools Policy*  
*DfE 'Supporting Pupils at school with Medical Conditions' 2015*  
*The Key for School Leaders 'Supporting pupils with medical conditions policy: checklist'*

## Appendix 1 Consent form to administer prescription medicines

### Parental/carer consent to administer a prescribed medicine

- All prescribed medicines must be in the original container as dispensed by the pharmacy, with the child's name, the name of the medicine, the dose and the frequency of administration, the expiry date and the date of dispensing included on the pharmacy label.
- **A separate form is required for each medicine.**

<b>Child's name</b>	
<b>Child's date of birth</b>	
<b>Class/ Year</b>	
<b>Name of medicine</b>	
<b>Strength of medicine</b>	
<b>How much (dose) to be given</b> <i>For example: One tablet, One 5ml spoonful</i>	
<b>At what time(s) the medication should be given</b>	
<b>Reason for medication</b>	
<b>Duration of medicine</b> Please specify how long your child needs to take the medication for.	
Are there any possible side effects that the school needs to know about? If yes, please list them	

I give permission for my son/daughter to carry their own salbutamol asthma inhaler/Adrenaline auto injector pen for anaphylaxis [delete as appropriate].	Yes	
	No	
	Not applicable	
I give permission for my son/daughter to carry their own salbutamol asthma inhaler and use it themselves in accordance with and the agreement of the school and medical staff.	Yes	
	No	

	Not applicable	
I give permission for my son/daughter to administer their own medication in accordance with and the agreement of the school and medical staff.	Yes	
	No	
	Not applicable	

<b>Mobile number of parent/carer</b>	
<b>Daytime landline for parent/carer</b>	
<b>Alternative emergency contact name</b>	
<b>Alternative emergency phone no.</b>	
<b>Name of child's GP practice</b>	
<b>Phone no. of child's GP practice</b>	

- I give my permission for the head teacher (or his/her nominee) to administer the prescribed medicine to my son/daughter during the time he/she is at school. **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.**
- I understand that it may be necessary for this medicine to be administered during educational visits and other out of school activities, as well as on the school premises.
- **I agree that I am responsible for collecting any unused or out of date medicines and returning them to the pharmacy for disposal and supplying new stock to the school if necessary.**
- The above information is, to the best of my knowledge, accurate at the time of writing.

<b>Parent/carer name</b>	
<b>Parent/carer signature</b>	
<b>Date</b>	

**FOR STAFF TO COMPLETE**

<b>Date &amp; Time given to child</b>	<b>Dosage given</b>	<b>Name</b>	<b>Signed</b>


