

Supporting Pupils with Medical Conditions - Policy



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CONTENTS

Page Number

Introduction

Policy Implementation

Individual Health Care Plans

The Pupil's Role in Managing their own Medical Needs

Managing Medicines on Site

Complaints

Engaging, protecting and teaching our pupils must be the starting point for all policies. This policy should be read in conjunction with our Safeguarding policy.

Introduction

The Children and Families Act 2014 (Section 100) places a duty on the governing bodies and Senior Leadership Team to make arrangements for supporting pupils with medical conditions in our settings. Pupils with special medical needs have the same right of admission to schools as other pupils and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in the place of the parent/carers and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site.

This policy will be reviewed regularly and will be readily accessible to parents/carers and staff through our school websites.

Policy Implementation

The overall responsibility for the successful administering and implementation of this policy is given to the Head of School, who will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in case of staff absences or staff turnover to ensure that someone is always available and on site. The senior leadership team will be responsible for risk assessments for school visits and other school activities outside of the normal timetable and for the monitoring of individual healthcare plans.

We will ensure that the correct procedures will be followed whenever we are notified that a pupil has a medical condition. At the admission meeting of a pupil with a medical condition, parents/carers will complete the IHCP and arrangements will be in place in time for when the child/young person starts at one of our provisions. In other cases, such as a new diagnosis or new admission mid-term, we will make every effort to ensure that arrangements are finalised and put in place within two weeks.

Individual Health Care Plans

Where a pupil has an IHCP, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. If a pupil (regardless of whether they have an IHCP or not) needs to be taken to hospital, staff should stay with the pupil until the parent/carers arrives, or accompany a pupil taken to hospital by ambulance.

Individual Health Care Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the pupil effectively. The level of detail within plans will depend on the complexity of the pupil's condition and the degree of support needed. This is important because different pupils with the same health condition may require very different support.

The IHCP should be reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed.

The IHCP form includes:-

- 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 e.g. crowded/noisy conditions
- the level of support needed, (some young people may be able to take responsibility for their own health needs), including in emergencies. If a pupil is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring
- the procedure outlining what should happen if a pupils refuses to take their medication or carry out a necessary procedure
- 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
- who in the school needs to be aware of the pupil's condition and the support required;
- arrangements for written permission from parents/carers and for medication to be administered by a member of staff, or self-administered by the pupil 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, e.g. risk assessments;
- where confidentiality issues are raised by the parents/carers or pupil, the designated individuals to be entrusted with information about the pupil's condition;
- what to do in an emergency, including whom to contact and contingency arrangements.

The pupil's role in managing their own medical needs

If a pupil refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but instead follow the procedure agreed in the IHCP. Parents/carers should be informed when this situation occurs.

Managing Medicines on Site

The following are the procedures to be followed for managing medicines:-

- Medicines should only be administered 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 parents/carers written consent.
- No pupil under 16 will be given medicine that contains aspirin, unless prescribed by a doctor.
- We will not administer non-prescription medicines to a pupil without written consent e.g. paracetamol. If a parent/carer wishes a pupil to have the non-prescription medicine administered during the school day, they will need to come to the school to administer it to their child.

- 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 inside an insulin pen or a pump, rather than in its original container.
- Pupils should only bring in sufficient medicine for each day they attend school. At the end of their school week the empty container should be given back to the pupil to take home.
- All medicines will be stored safely in the Medical Room in a locked cabinet.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to staff; these will be stored in the classroom cupboards where both class teacher and support staff know how to access them. If a pupil requires an asthma inhaler it is crucial that there is an inhaler in the school at all times.
- During school trips, the first aid trained member of staff is responsible for ensuring all medical devices and medicines required are available.
- Staff administering medicines should do so in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual pupils, stating what, how and how much was administered, when and by whom. Any side effects of the medication should be noted on the IHCP and reported to parents/carers. These records offer protection to staff and pupils and provide evidence that agreed procedures have been followed.
- Sharps boxes should always be used for the disposal of needles and other sharps.
- Staff will ensure the pupil's dignity is respected by administering medication out of view of other pupils or visitors.

Complaints

Should parents/carers be dissatisfied with the support provided they should discuss their concerns directly with the Head of School. If for whatever reason this does not resolve the issue, they may make a formal written complaint via the complaints procedure outlined in the school's Complaints Policy.