



## **PUPILS WITH MEDICAL CONDITIONS**

### **Vision Statement**

In a safe and caring Christian setting, through inspirational teaching, challenge, awe and wonder, this school's goal is to enable all children to become confident life-long learners to achieve their full potential.

This policy should be read in conjunction with the Children and Families Act 2014, Equality Act 2010, DFE Statutory guidance 'Supporting pupils at school with medical conditions' updated and published in December 2015, the current SEN code of practice and the school's policy on Administration of medicines.

### **Introduction**

At Rauceby School we believe that pupils with medical conditions should be supported, as best we can, to play an active role in school life, enjoy the same opportunities as any other pupil and have full access to all aspects of education, including school trips and physical education. The governing body has arrangements in place to see that this is achieved. It is important that parents feel confident that the school will provide effective support for their child's medical condition and that pupils themselves feel safe. For these reasons, the school will liaise with health and social care professionals, pupils and their parents to achieve this.

### **Objectives and targets**

The purpose of this policy is to explain how Rauceby School implements its procedures on dealing with pupils who have medical conditions, in line with government requirements, with a view that all pupils will receive the best education possible for them, despite any medical conditions that they may have to contend with.

### **Action plan**

The school's governing body is ultimately responsible for the implementation of this policy. The headteacher is in charge on a day-to-day basis and named individuals are responsible for the provision of support to individual pupils with medical conditions

### **The role of the governing body**

The governing body will ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life. The governing body will also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed. The governing body recognises that many of the medical conditions requiring support at school will affect quality of life and may be life threatening. The governing body will ensure that the focus is always on the needs of the individual child and how their medical condition impacts on their school life. The aim is to promote understanding of how medical conditions may impact on a child's ability to learn, as well as to increase confidence and promote self care. The school recognises that a collaborative approach with other agencies is essential and some flexibility may be required; for example part time attendance at school in combination with alternative provision arranged by the Local Authority.

The governing body fully recognises that no child should be prevented from taking part in a full education because arrangements for their medical condition has not been made. However, in line with its safeguarding duties, the governing body will ensure that pupils' health is not put at unnecessary risk from, for example, infectious diseases. The governing body is not required to accept a child in school at times where it would be detrimental to the health of that child or others to do so.

### **The role of the headteacher**

The headteacher will ensure that:

- Their school's policy is developed and effectively implemented with partners.
- Sufficient staff are suitably trained and available to implement the policy.
- All staff are aware of the policy and their role in implementing it. Relevant staff will be made aware of any child with a medical condition.

- Cover arrangements are in place in case of staff absence, staff turnover and in emergency and contingency situations, to ensure someone is always available.
- Any supply teachers are aware of the medical condition where appropriate.
- Staff are appropriately insured and are aware that they are insured to support pupils with medical conditions.
- Risk assessments for school visits, holidays, and other school activities outside of the normal timetable include consideration for any child with a medical condition.
- Individual healthcare plans (IHPs) are initiated, monitored and reviewed at least annually.
- The focus of support is on the needs of each individual child and how their medical condition impacts on their school life.
- Consideration is given as to how children will be reintegrated back into school after periods of absence due to their medical condition.
- They contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

### **The role of school staff**

Any member of staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Administering medicines is not part of teachers' professional duties but they are expected to take into account the needs of pupils with medical conditions that they teach. All school staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do, and respond accordingly, when they become aware that a pupil with a medical condition needs help. It is recognised that the role of school staff is limited by the information provided on the IHP.

### **The role of other healthcare professionals, including GPs and paediatricians**

Advice may be sought from the GP or other healthcare professional when a child has been identified as having a medical condition that will require support at school. They will be involved in drawing up IHPs. Specialist local health teams are also available to provide support for children with particular conditions (eg asthma, diabetes).

### **The role of the individual pupil**

Pupils with medical conditions will be fully involved in discussions about their medical support needs and contribute as much as possible to the development of and comply with their IHP.

After discussion with parents, children who are competent are encouraged to take responsibility for managing their own medicines and procedures and this will be reflected within their IHP. Wherever possible and appropriate, children will be allowed to carry their own medicines and relevant devices or will be able to access their medicines for self-medication quickly and easily, provided that a "Request for child to carry his/her own medication" has been completed and provided to school. Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision.

If it is not appropriate for a child to self-manage, then relevant staff will help to administer medicines and manage procedures for them. If a child refuses to take medicine or allow a necessary procedure to be carried out, staff will not force them to do so, but will contact parents as soon as possible to identify an appropriate course of action.

### **The role of the parents**

Parents are expected to provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's IHP and may be involved in its drafting. They are expected to carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment, and must ensure they or another nominated adult are contactable at all times.

### **The role of school nurses**

Every school has access to school nursing services. They 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, they should do this before the child starts at the school. They will not normally 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 IHP and provide advice and liaison, for example on training. School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs, for example there are good models of local specialist nursing teams offering training to local school staff, hosted by a local

school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition,

#### The role of other healthcare professionals

Other healthcare professionals, including GPs and paediatricians, should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing IHPs. Specialist local health teams may be able to provide support in school for children with particular conditions (eg asthma, diabetes, epilepsy)

#### **The role of the local authority**

Local authorities (LAs) provide school nurses for maintained schools and academies. LAs have a duty to promote co-operation between relevant partners such as governing bodies, clinical commissioning groups (CCGs) and NHS England, with a view to improving the wellbeing of children with regard to their physical and mental health and their education, training and recreation. LAs and CCGs must make joint commissioning arrangements for education, health and care provision for children with SEN or disabilities. The LA provides support, advice and guidance, including suitable training for school staff, to ensure that the support specified within IHPs can be delivered effectively. Rauceby school is able to contact the LA to obtain support to enable pupils with medical conditions to attend full time but the LA has a duty to make other arrangements where pupils would not receive a suitable education in a mainstream school because of their health needs and they should be ready to make arrangements under this duty when it is clear that a child will be away from school for 15 days or more because of health needs (whether consecutive or cumulative across the school year).

#### **Procedure to be followed when notification is received that a pupil has a medical condition**

Where possible the school will not wait for a formal diagnosis before providing support to a pupil with medical needs. Support will be provided based on the available medical evidence and after consultation with parents and upon completion of the IHP.

For children starting at Rauceby School, arrangements should be in place in time for the start of the relevant school term. In other cases, such as a new diagnosis or changed circumstances or any reintegration to school, every effort will be made to ensure that arrangements are put in place within two weeks. For children moving on to another school, relevant information will be passed to the new school as soon as possible.

#### **Individual healthcare plans (IHPs)**

Many pupils with medical conditions will require an IHP which will help to ensure that each pupil's medical conditions are supported. The school, healthcare professionals and parents will agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the headteacher will take a final view.

- IHPs may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Those involved will agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the school. Pupils will be involved where appropriate.
- IHPs will be developed with the child's best interests in mind
- IHPs will ensure that the school assesses and manages risks to the child's education, health and social well-being and minimise disruption
- IHPs will be drawn up in partnership between the school, parents, and a named relevant healthcare professional who can best advise on the particular needs of the child. Pupils will also be involved whenever appropriate.
- When a child is returning to school following a period of hospital education or alternative provision (including home tuition) the school will work with the LA and education provider to ensure that the IHP identifies the support the child will need to reintegrate effectively
- The IHP will state the steps which the school will take to help the child manage their condition and overcome any potential barriers to getting the most from their education. The format of IHPs will vary to enable the school to choose what is most effective for the specific needs of each pupil, and the level of detail within plans will depend on the complexity of the child's condition and the degree of support needed. However, all will contain the following information:
  - 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( eg crowded corridors), travel time between lessons.

- Specific support for the pupil's educational, social and emotional needs – eg how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions.
  - Level of support needed including in emergencies. If a child is self-managing their medication this will 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 a healthcare professional.
  - Cover arrangements for when the usual support person is 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 headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours. Parents will have a copy of the procedures to be followed when administering medicines.
  - Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate, eg risk assessments.
  - Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition.
  - 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 IHP).
- Where a child has SEN but does not have a statement nor EHC plan, their special educational needs should be mentioned in their IHP. Where a child has a special educational need identified in a statement or EHC plan, the IHP should be linked to or become part of that statement or EHC plan.
  - IHPs will be easily accessible to all who need to refer to them while preserving confidentiality.
  - Plans will be reviewed at least annually or earlier if evidence is presented that the child's needs have changed.

### **Staff training**

Periodical training is undertaken so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy and to keep them up-to-date with procedures to be followed. New staff will receive training through their induction process. All staff receive regular first aid training and further key staff receive regular paediatric first aid training. Appropriate advice will be sought via healthcare professionals in respect of training so that all medical conditions affecting pupils in the school are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

During the development or review of IHPs suitable training requirements for staff who will be involved with the individual pupil will be discussed. Staff who provide support to children with medical conditions will be included in meetings where this is discussed. The relevant healthcare professional will normally lead on identifying, and agreeing with the school, the type and level of training required, and how this can be obtained. Training will be sufficient to ensure that staff are competent and have confidence in their ability to support children with medical conditions and to fulfil the requirements sets out in the IHP. Staff will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. The family of a child will be able to provide relevant information to school staff about how their child's needs can be met, and parents will be asked for their views. However, they will not be the sole trainer.

Staff will not give prescription medicines or undertake healthcare procedures without appropriate training.

### **Managing medicines in the school**

Details of how the school manages medicines in school can be found in the school's policy on administration of medicines. Medicines are carefully labelled and stored. Access is readily available when the need arises. The school ensures that written records are kept of all medicines administered to children.

### **School trips and sports activities**

At Rauceby School pupils with medical conditions are encouraged to participate in school trips and visits, or in sporting activities, and will not be prevented from doing so wherever possible. Teachers will be aware of how a child's medical condition will impact on their participation. A risk assessment will be undertaken so that planning arrangements, with any reasonable adjustments, take account of any steps needed to allow all children to participate according to their own abilities. Parents and pupils will be consulted and advice taken from the relevant healthcare professional to ensure that pupils can participate safely, if at all.

### **Emergency situations**

Pupils in the school will know to inform a teacher immediately if they think help is needed.

Where a child has an IHP, it 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.

If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or, if an ambulance needs to be called, will accompany the child to hospital and stay until a parent arrives there.

### **Unacceptable practice**

School staff will use their discretion but Rauceby School consider that it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their parents, or ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition, or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHP
- If the child becomes ill, to send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise children for their attendance record if their absences are related to their medical condition, eg hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged to attend school to administer medication or provide medical support to their child, including with toileting issues.
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips.

### **Complaints**

If parents or pupils are dissatisfied with the support provided they should discuss their concerns informally with the appropriate member of staff. If, however, this does not resolve the situation then they should make a formal complaint using the school's complaints procedure.

### **Monitoring and evaluation**

The policy will be monitored by the headteacher and governors for its effectiveness in implementation, and evaluated and reviewed at least annually, or sooner in the light of any incidents that may occur or any changes to legislation.

Approved by: Full Governing Body

Next Review: June 2018