

# MEDICAL CONDITIONS POLICY 2014/2015

Ratified by the Governor's Personnel Committee 2 October 2014



# Medical Conditions Policy Supporting Students with Medical Needs

#### Statement

Students' medical needs can be put in to 3 categories:

- 1. Immediate: affects their participation in school for that specific day due to feeling unwell or having an accident.
- 2. Short-term: affects their participation in school activities whilst they are on a course of medication
- 3. Long-term: potentially limits their access to some aspects of their education and requires extra care and support.

#### **Rationale**

Local Authorities and schools have a responsibility for the health and safety of students in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of students with medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all students in the school. This may mean making special arrangements for particular students who may be at more risk than others. Individual procedures may be required. The School is responsible for making sure that relevant staff know about and are, where appropriate, trained to provide any additional support required.

The Children and Families Act 2014 places a duty on schools to make arrangements for students with medical conditions. In the case of an emergency the school is required to administer medical support. This also includes off site activities.

The prime responsibility for a child's health lies with the parent who is responsible for the child's medication and should supply the school with all relevant information and medication as required. The school encourages self-administration of medication where possible. Parents/carers can make contact directly with the School's Medical Needs Assistant for guidance.

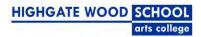
#### **Aims**

The school aims to:

- support parents in providing medical care for their children
- educate staff and students in respect of medical needs
- adopt and implement the Local Authority Policy of Medication in Schools
- arrange training for all relevant staff
- liaise with medical services as required

(2014) Medical Conditions Policy





- ensure access to the full curriculum as far as possible
- monitor and keep appropriate records

#### **Entitlement**

The school accepts that students with medical needs should be supported where necessary and ensure their entitlement is fulfilled.

The school believes that students with medical needs should be enabled to have full attendance and receive support where required.

The school will support all staff when they are working with students who have medical needs by making arrangements for them to receive appropriate training and by setting out clear guidelines on how to work with these students.

# **Expectations**

It is expected that:

- parents/carers will be encouraged to co-operate in training their children to self-administer medication where practicable. Staff will help out if there is no alternative
- where parents/carers have asked the school to administer the medication for their child they must ask the pharmacist to supply the medication in a separate container, containing the quantity required for that day only. The prescription and dosage regime should be printed clearly on the outside of the container. The name of the pharmacist should be visible and any medications not presented properly will not be accepted. Students can bring in their own medicine but they must pass it to the Medical Needs Assistant for storage (see Appendix 1).
- The school will consider carefully their response to each request to assist with the administering of medication or supervision of self-medication
- It is the parent's responsibility to replace medication when it becomes out of date
- The school will liaise with the relevant Health Services where a student requires specific support with their medical needs
- Any medication brought in to school by staff for personal use must be stored in an appropriate place and kept out of reach of students. Staff medication is the responsibility of that member of staff and not the school.

#### **Implementation**

# **Healthcare Plans**

The Medical Needs Assistant will complete individual healthcare plans for all relevant students. Where a student has a special educational need identified in a

(2014) Medical Conditions Policy





statement or EHC plan, the individual healthcare plan should be linked to become part of that statement or EHC plan. (Appendix 2).

# Recordkeeping

Written records will be kept of all medicines administered to children.

## **Emergency Procedures**

All individual healthcare plans will outline what the procedure is when there is an emergency.

If a child needs to go to hospital, the relevant member of staff will stay with the child until the parent/carer arrives. Students will be accompanied to hospital by ambulance whenever necessary.

## **Day Trips, Residential Visits and Sporting Activities**

All students with medical conditions will be encouraged to participate fully in all activities. Relevant risk assessments will be completed and staff will be guided on how to deal with any student who has a medical condition and any adjustments that need to be made. Where there are ongoing concerns, advice will be sought from the relevant healthcare professional.

# **Unacceptable Practice**

All staff must use their discretion and treat each case individually. It is generally unacceptable to:

- Not allow students to have easy access to all their medication including inhalers
- Ignore student, parental and medical views although there are times when these need to be challenged
- Not allow a student to be collected and taken to the medical room when they feel ill
- Penalise students for being absent when they are attending medical appointments
- Prevent students from eating, drinking or taking toilet breaks in order to manage their medical conditions effectively

# **Complaints**

If parents are dissatisfied with the support, they should contact the SLT member with line management responsibility for Inclusion to discuss their concerns. If parents are not satisfied with the response they receive they should then use the school's complaints procedure.





#### **APPENDIX 1**

# **Managing Medicines on School Premises**

- Medicines can only be administered on the school premises when it is detrimental not to do so
- No child under 16 should be given prescription or non-prescription medication without parental written consent – except in exceptional circumstances where medicine has been prescribed without knowledge of the parents
- A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Parents must be informed if pain medication is to be administered
- The school will only accept prescribed medicines which are in-date, labelled, provided in the original container as dispensed by a pharmacist that includes instructions for administration, dosage and storage. The exception is insulin which must still be in date, but may be available inside an insulin pen or a pump, rather than its original container
- Most medicines will be stored in a locked cupboard in the medical room.
   Exceptions are inhalers, blood glucose testing meters, glucose gel and adrenaline pens which need to be readily available on trips
- A record will be kept of all doses given in school and any side-effects noted
- When no longer required, medicines should be returned to parents/carers to arrange for safe disposal. Sharps boxes will be used for the disposal of needles and other sharps.





#### **APPENDIX 2**

#### **Healthcare Plans**

The following information should be included on an individual healthcare plan:

- The medical condition, its triggers, signs, symptoms and treatments
- The resulting needs including medication, (dose, side effects and storage) and other treatments, time, facilities, equipment, 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 student's educational, social and emotional needs eg use of rest periods or additional support in catching up with work
- The level of support needed (if appropriate as most students will be able to manage their own care) including emergencies. If a student is self-managing their medication, this should be stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role to provide support for the student's medical condition from a healthcare professional and arrangements to be made when they are unavailable.
- The key worker should be clear and what arrangements would be in place if they are absent. Training will be available to help them facilitate their role
- Who in school needs to be aware of the student's condition and how this will be communicated to the relevant staff
- Arrangements for written permission from parents for medication to be administered by a member of staff, or self-administered by the student during the school day
- Separate arrangements or procedures required for school trips or other school activities outside of the normal timetable that will ensure the student can participate
- Where confidentiality issues are raised the Designated Teacher is informed as soon as possible
- What to do in an emergency, including whom to contact and contingency arrangements.

